

**RENEWAL #:****1**

DCF Program may request a Renewal if they would like to **renew a grant for an additional grant year**. This form must be submitted to your DCF OGC Grant & Contract Specialist for submission through concurrence.

Between **Kansas Department for Children and Families &**

Grantee Agency: Kansas Youth Empowerment Academy

Street Address*	2220 SE 29th Street, Suite B	Grant Number	RS-2022-KSYMLD-01
City, State, Zip*	Topeka, KS 66605	Grant Year (from/to)	
E-Mail	juliat@kyea.org	7/1/2022	6/30/2023
Phone Number	785-215-6655	Fiscal Year	7/1/2022-6/30/2023
Fax Number	785-215-6699	CFDA # (if applicable)	N/A

****A copy of any previously approved Renewal(s) and/or Amendment(s), as well as a NEW FFATA form, NEW Debarment Memorandum and NEW Tax Clearance Certificate must be included with this request****

Line Item	New Budget
Personnel	98,627.20
Fringe Benefits	19,725.44
Travel	500.00
Equipment	0.00
Supplies	4,900.00
Contractual	17,989.60
Building	17,820.00
Training	0.00
Other (Taxes/Fees)	487.76
Other (specify)	0.00
Other (specify)	0.00
Indirect Costs**	0.00
Total Grant Budget:	\$160,050.00

Speed Chart	Fund	Budget Unit	Account	New Budget Amount
26521	1000	5010	555900	160,050.00
Total				\$160,050.00

Additional Information:

*physical address required, including 9-digit zip code

**Indirect Costs may not exceed 10% of the Grant Budget.

This grant shall remain in effect, subject to the terms and conditions stated in the original Notification of Grant

**RENEWAL #:****2**

DCF Program may request a Renewal if they would like to **renew a grant for an additional grant year**. This form must be submitted to your DCF OGC Grant & Contract Specialist for submission through concurrence.

Between **Kansas Department for Children and Families &**

Grantee Agency:	Kansas Youth Empowerment Academy (KYEa)		
Street Address*	2220 SE 29th Street, Suite B	Grant Number	RS-2022-KSYMLD-01
City, State, Zip*	Topeka, KS 66605	Grant Year (from/to)	
E-Mail	juliat@kyea.org	7/1/2023	6/30/2024
Phone Number	785-215-6655	Fiscal Year	SFY2024
Fax Number	785-215-6699	CFDA # (if applicable)	NA

****A copy of any previously approved Renewal(s) and/or Amendment(s), as well as a NEW FFATA form, NEW Debarment Memorandum and NEW Tax Clearance Certificate must be included with this request****

Line Item	New Budget
Personnel	101,073.52
Fringe Benefits	15,161.02
Travel	500.00
Equipment	
Supplies	2,000.00
Contractual	22,915.46
Building	18,000.00
Training	
Other (taxes/fees)	400.00
Other (specify)	
Other (specify)	
Indirect Costs**	
Total Grant Budget:	\$160,050.00

Speed Chart	Fund	Budget Unit	Account	New Budget Amount
26521	1000	5010	555900	160,050.00
Total				\$160,050.00

Additional Information:

*physical address required, including 9-digit zip code

**Indirect Costs may not exceed 10% of the Grant Budget.

This grant shall remain in effect, subject to the terms and conditions stated in the original Notification of Grant