



# State Aided Institutions (SAI) Program: Kick-off for FY 2025

Office of Grants Administration and Compliance

June 13, 2024

PRESENTED BY

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Roslyn Coleman, SAI Program Manager & Nicole  
Obregon, Special Fiscal Programs Administrator

# Agenda

- Overview
- Updates
- Timeline
- Reporting Requirements
  - NOGA
  - Amendments (as needed)
  - Invoices
  - Interim Report
  - Final Reports
  - Monitoring Visit
- Questions

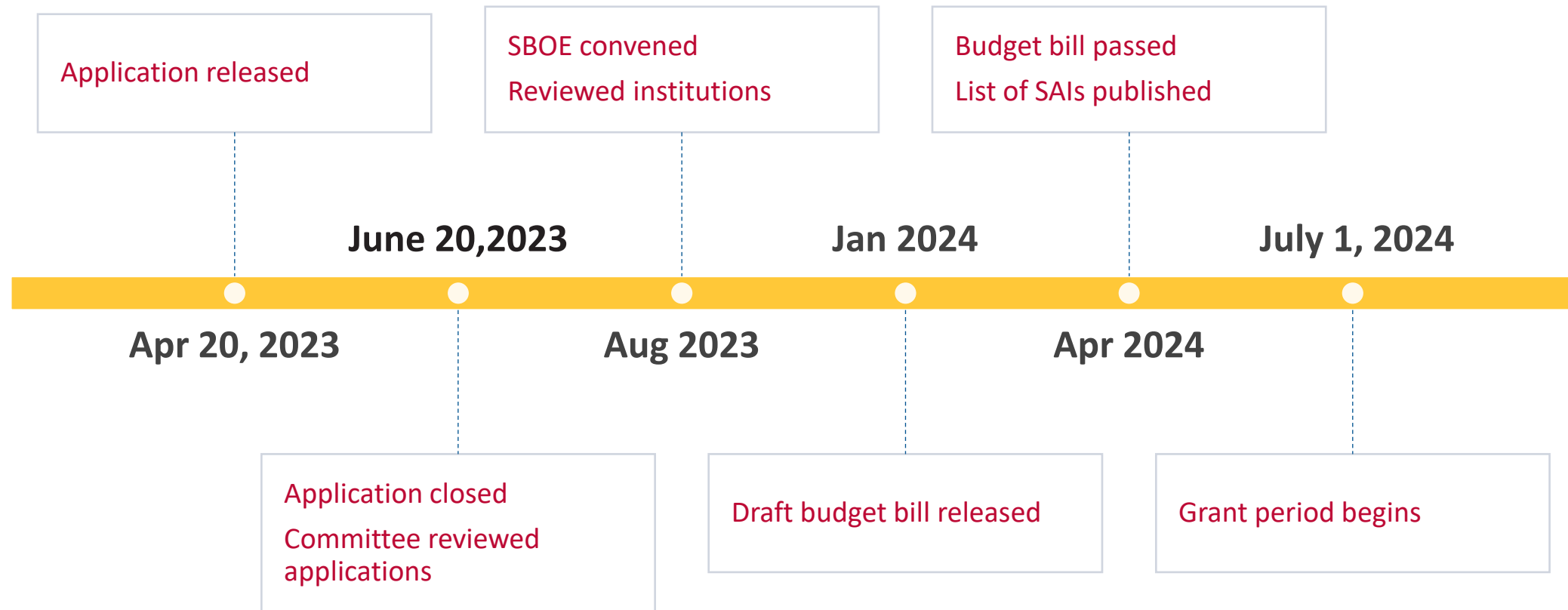
# Overview

- Budget Bill for fiscal year 2025 ([SB0360](#))
- Requirements defined in COMAR [13A.05.13.00](#) through [13A.05.13.06](#)
- Purpose: Provide engaging, hands-on, experiential learning opportunities that support the State's curricular and educational goals and priorities
- Free or reduced admission, full-day and residential field trips, mentoring, activities for educators, professional development for teachers
- Updates and information on [SAI webpage](#)

# Updates

- NOGA
- Invoicing
- Budget and Amendments
- Webpage provides forms, templates, updates

# Application Timeline for FY2025



# NOGA

- Issued July 2025
- Replaces the Grant Agreement
- Signed Assurances

**Maryland State Department of Education**  
**NOTICE OF GRANT AWARD**

Grant Name: State-Aided Institutions (SAI) program Grant #: \_\_\_\_\_

**General Information** New Award or Amendment: \_\_\_\_\_

Federal Employer ID #: \_\_\_\_\_ UEI #: \_\_\_\_\_ Amendment #: \_\_\_\_\_

Mail Code: 000

Organization Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Grant Period: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip+4: \_\_\_\_\_ Start Date: 7/1/2024

Program Manager: \_\_\_\_\_ End Date: 6/30/2025

Phone: \_\_\_\_\_

Amount of Current Action:	\$0.00
Amount Previously Awarded this grant:	_____
Total Grant Award:	_____

**MSDE Division Information:**

Division Name: A0101 - Office of the State Superintendent

Program Manager: Roslyn Coleman

Program Phone: 410-767-3309 Email: roslyn.coleman@maryland.gov

**Additional Information:**

- This grant award consists of and is subject to the Grant Information Guidance and acceptance of the Assurances attached hereto.
  - This grant's purpose is to fund non-profit organizations that provide unique, educational experiences to students and teachers that cannot be replicated in the classrooms. These educational experiences must align to Maryland curricular and educational priorities.
  - Programmatic and budgetary changes or realignments must be pre-approved by MSDE. The grantee shall receive prior written approval from the MSDE for any budgetary realignment of \$1,000 or 15% of total object and/or total category of expenditures, whichever is greater. The grantee must support the request with reasons for the change. Budget amendments must be submitted at least 45 days before the grant period ends.
  - Payments will be made as invoices are received on a quarterly basis and will be based on actual expenditures as reported by the grantee. Invoices must be accompanied by supporting documentation to evidence expenses that align with the approved budget.
  - A 25% advancement of the grant award amount will be issued upon submission of a proper invoice. Supporting documentation will be required before the next payment is issued.
  - The timely submission of Midyear and Final reports is a requirement of this award. Submitting late or incomplete reports and delays in completing activities may impair the project success and could jeopardize continued funding.
  - MSDE's oversight will include an annual programmatic and fiscal onsite monitoring visit to validate alignment of fiscal expenditures with programmatic goals.

# NOGA Information Update

- Review for accuracy and update if needed

Maryland State Department of Education			
NOTICE OF GRANT AWARD			
Grant Name:	State-Aided Institutions (SAI) program	Grant #:	_____
<b>General Information</b>		New Award or Amendment:	_____
Federal Employer ID #:	_____	UEI #:	_____
Amendment #:	_____		
Mail Code:	000		
Organization Name:	_____		
Street Address:	_____		Grant Period:
City & State:	_____	Zip+4:	_____
Program Manager:	_____		Start Date:
Phone:	_____		End Date:
		Amount of Current Action:	\$0.00
		Amount Previously Awarded this grant:	_____
		Total Grant Award:	_____

# Budget and Amendments

- Budget Requests of \$1,000 or 15% of total category of expenditure, whichever is greater
- Approval is not needed if budget realignment is less, however we need notification of the changes.
- Amendments or changes in the grant program goals or budget must be requested at least 45 days before the grant period ends (May 15<sup>th</sup>)
- Written approval will be provided



Maryland  
STATE DEPARTMENT OF EDUCATION

## Program Amendment Request

Enter Grant Name Here

Maryland State Department of Education  
200 West Baltimore Street  
Baltimore, Maryland 21201



# Budget

- To realign budget categories and/or change allocated amounts

## Sample Amended Budget

Please provide an amended budget.

Category	Line Item	Current Approved Budget	Adjustments (+ or -)	Amended Total
Salaries and Wages	Group Visits Coordinator (\$20.96 x 376 hours)	\$7,881	+ \$1,519	\$9,400
Salaries and Wages	Director of K-12 Education Planning (\$25.48 x 400 hours)	\$10,192	- \$1,519	\$8,673
Salaries and Wages	Educators (3 educators x \$18.50 x 20)	\$1,110	\$0	\$1,110
Supplies and Materials	Lesson supplies (worms, waxed paper for recycled papermaking, soil for erosion lesson, rain cloud bottles, towel, water testing supplies, raised beds for salad science)	\$800	- \$200	\$600
Contracted Services	PGCPS Fingerprinting / Background check (1 x \$66)	\$66	+ \$200	\$266
Other	Summer camp fees (\$3,700/student x 2 students)	\$7,400	\$0	\$7,400
<b>Totals:</b>		<b>\$27,449</b>		<b>\$27,449</b>

Provide a justification for the proposed changes above. Be clear in how and why you are requesting to amend each line above.

The hourly rate for the Group Visits Coordinator increased from the time we submitted this application from \$20.96 to \$25.00. The new rate of \$25.00 is the market rate for a highly qualified individual in this role.

We're shifting funds out of the line for the Director of K-12 Education Planning. There isn't an overall change in our salaries budget, just shifting funds between positions.

No change to Educators costs.

The school sites are supplying the soil needed for the salad science unit, resulting in a decrease of requested funds for this. We're going to shift the \$200 to pay for the fingerprinting costs for our new volunteers.

We've added a new volunteer to our program and hope to add more during the year. The additional \$200 in funds are coming from savings from supplies and materials.

No change to summer camp fees.]

# Programmatic

- Change in the program components

## Sample Programmatic Amendment

Provide a brief summary of the changes requested and the reason for requesting these changes.

We are requesting a change in our program due to building renovations which results in the current museum exhibits not being accessible for in-person visits. Based on feedback from educators from the schools we've served, our education team has curated virtual programming to explore Modern Artists of Today. The Modern Artists of Today program will...

## Amended Goals

Provide amended goals, if necessary:

	Initial goal	Amended goal
# of students served	500	800
# of students with disabilities served	25	40
# of educators served	25	75
# of chaperones served	10	0
<b>Total individuals served</b>	<b>560</b>	<b>915</b>
# of Local Education Agencies	4	8
# of Title 1 Schools	8	16

Provide an explanation for why the goals are being amended.

Implementing the virtual art program will allow an opportunity for us to expand our outreach and allow more students to attend the program. Through this program, we ...

# Invoices

**MCDANIEL**  
COLLEGE

123 College Rd. Westminster, MD 21157

Contact: Name  
Email: name@mcdaniel.edu  
Phone: 410-123-456

INVOICE # 001  
DATE: 1/15/2023

**BILL TO:**  
Maryland State Department of Education  
200 West Baltimore Street  
Baltimore, Maryland 21201

NOGA # 123456

DESCRIPTION	CALCULATION	TOTAL
<b>Salaries &amp; Wages</b>		
Program Coordinator salary	270 hours x \$25= \$6,750- charging SAI for 48% of time	\$3,240
Grant Director salary	100 hours x \$45= \$4,500- charging SAI for 53% of time	\$2,385
<b>Contracted Services</b>		
Graphic Designer	Creation of digital flyers \$500 (see receipt)	\$500
<b>Other Charges</b>		
	Fringe (25% of total salaries charged) 25% x \$5,625	\$1406.25
	Total invoiced:	\$7531.25

*Sample Signature*  
\_\_\_\_\_  
Signature of Financial Representative

Institution letterhead

Invoice #

Date

NOGA number

MSDE budget categories

Expenses aligned to your approved budget

Signed by institution

Total being invoiced

# Invoices: Calculations

		NOGA # [REDACTED]
DESCRIPTION	CALCULATION	TOTAL
<b>Salaries &amp; Wages:</b>		
[REDACTED] VP of Education & Engagement	Total wages are \$19,125. We are only invoicing time spent on SAI activities (36% time, \$6,885).	\$6,885
[REDACTED] Public Programs Manager	Total wages are \$10,964.98. We are only invoicing time spent on SAI activities (5% time, \$548.25).	\$548.25
[REDACTED] Director of Learning & Interpretation	Total wages are \$16,065. We are only invoicing time spent on SAI activities (5% time, \$803.25).	\$803.25



\*Excerpt from the payroll report

<u>Regular hours</u>	<u>Total earnings</u>
455.00	\$ 19,125.02
455.00	\$ 10,964.98
455.00	\$ 16,065.01

# Invoices: Supporting Documentation

Description	Total
<b>Salaries and Wages</b>	
[Redacted]	\$7,673.40
[Redacted]	\$0.00
[Redacted]	\$4,499.04
[Redacted]	\$3,750.25
[Redacted]	\$12,838.07
[Redacted]	\$7,911.00
[Redacted]	\$7,500.48
[Redacted]	\$6,178.15
[Redacted]	\$3,564.00
<b>Other Charges</b>	
Payroll taxes & Benefits	\$10,815.43
<b>Total Invoiced:</b>	<b>\$64,729.82</b>

Department: (LCF48DV... GL: (5105)Full Time Fund: (MSDE.SAI)Stat...

Code	Earning	Hours	Amount	Code	Deduction	Amount	Code	T
[Redacted]	403bM 403b Matc		140.00	403b	403b	280.00	FITW	F
Emp Id [Redacted]	CO Carryover	34.40	744.08	DepFS	DepFSA	538.44	MD	N
Salary 1730.77	PTO Paid Time	3.20	69.22	FSA	FSA	21.56	MD-B/	E
	R Regular	186.40	4031.82	Park	Park	-19.67	MED	N
<b>208 hrs coded to SAI</b>							SS	C
<b>Total Earnings</b>		<b>224.00</b>	<b>4845.12</b>	<b>Total Deductions</b>		<b>820.33</b>	<b>Total Emj</b>	
[Redacted]	Birthda Birthday	3.20	57.70	ACCIL	Accident	18.06	FITW	F
Emp Id [Redacted]	CO Carryover	9.60	173.09	CR	Cell Reim	-60.00	MD	N
Salary 1442.40	R Regular	211.20	3807.94	D-PPO	Den PPO	35.56	MD-M	N
<b>208 hrs coded to SAI</b>				HOSPI	Hospital In	21.77	MED	N
<b>Total Earnings</b>		<b>224.00</b>	<b>4038.73</b>	M-OA	OA Under	238.00	SS	C
				V-1	Vis Ind	7.42		
<b>Total Earnings</b>		<b>224.00</b>	<b>4038.73</b>	<b>Total Deductions</b>		<b>260.81</b>	<b>Total Emj</b>	

Kelly Benefits Payroll  
 Fax (410) 891-2768  
 Labor © 1995-2024 MDNY

	208.00	\$ 21.63	\$ 4,499.04
	208.00	\$ 18.03	\$ 3,750.25

# Invoices: Multiple Staff

- Separate lines
- Aligned in order in supporting documents
- Include/Identify only those staff members being charged to SAI

<b>FY2024 SAI -3rd Quarter</b>			
<b>For the time period covering 1/7/2024-3/30/2024</b>			
<b><u>Salaries and Wages</u></b>			
<b>(1/7/2024-3/30/2024)</b>	<b>Hours Worked</b>	<b>Wages</b>	
<b>2 Education Managers:</b>			
██████████	480.00	11,250.00	
██████████	480.00	12,849.12	
<b>Subtotal</b>			<b>24,099.12</b>
<b>Counselors:</b>			
██████████	371.10	6,234.48	
██████████	405.01	7,454.43	
██████████	383.99	6,838.86	
██████████	387.40	6,525.54	
██████████	374.13	6,506.47	
██████████	363.69	5,819.04	
██████████	383.04	6,821.95	
██████████	278.74	4,964.35	
██████████	388.39	7,263.08	
██████████	390.34	7,896.93	
██████████	401.74	7,154.98	
██████████	397.52	7,079.82	
██████████	399.10	7,463.36	
██████████	480.00	10,425.00	
██████████	346.51	6,479.90	
██████████	404.96	8,192.71	
██████████	376.24	6,700.83	
██████████	350.23	5,883.86	
<b>Subtotal</b>			<b>125,705.59</b>
<b><u>Contracted Services</u></b>			



Payroll Register Dated 1/26/2024  
for the time period of 1/7/2024-1/20/2024

Personnel	Hours			Earnings				Gross	Taxes		Voluntary Deductions	Net Pay	Total Charged to Grant
	Reg	O/T	H 3/4	Reg	O/T	E 3/4	E 5		Federal	State/Local			
Paid-In Department - 180180 - Education													100% earnings for all
[REDACTED]	80.00			1,875.00				1,875.00	SS 80.48 Med 18.82 TOTAL 99.30	S1 MD 129.80 S2 MD 0.00	CK1 OPERATING ACCOU 1,845.90	Voucher# eVoucher 0.00	1,875.00
H Dept: 180180 Rate: 1,875.00	Totl Hrs Worked: 80.00												
[REDACTED]	61.63			1,035.38				1,035.38	SS 59.85 Med 13.99 TOTAL 73.84	S1 MD 78.18	MED MEDICAL 66.69 RB ROOM AND BOARD 225.00 V1 V1-VISION 3.36 CK1 OPERATING ACCOU 586.95	Voucher# eVoucher 0.00	1,035.38
H Dept: 180180 Rate: 16.8000	Totl Hrs Worked: 61.63												
[REDACTED]	60.02			1,071.36				1,071.36	SS 66.43 Med 15.54 TOTAL 81.97	S1 MD 82.41	CK1 OPERATING ACCOU 859.75	Voucher# eVoucher 0.00	1,071.36
H Dept: 180180 Rate: 17.8500	Totl Hrs Worked: 60.02												
[REDACTED]	62.57			1,114.37				1,114.37	SS 62.21 Med 14.55 TOTAL 76.76	S1 MD 68.21	CK1 OPERATING ACCOU 820.20	Voucher# eVoucher 0.00	1,114.37
Dept: 180180 Rate: 17.8100	Totl Hrs Worked: 62.57												

# Invoicing Schedule

Date	Item
July 2024	SAIs may request initial disbursement of 25% of appropriation Monitoring visits commence
October 31, 2024	SAIs submit invoices to MSDE for expenses incurred
January 31, 2025	Interim Report due <a href="#">(C-1-25C)</a> SAIs submit invoices to MSDE for expenses incurred
April 30, 2025	SAIs submit invoices to MSDE for expenses incurred
July 15, 2025	SAIs submit Final invoices to MSDE for expenses incurred
August 15, 2025	Final progress report <a href="#">(C-1-25 D)</a> is due Managing for Results (MFR) report is due



# Invoicing Schedule

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# Interim Progress Report

MARYLAND STATE DEPARTMENT OF EDUCATION  
INTERIM PROGRESS REPORT C-1-25 C

Grant Name	<input type="text"/>	Grant Recipient Name	<input type="text"/>
MSDE Grant #	<input type="text"/>	Recipient Grant #	<input type="text"/>
MSDE Grant Manager	<input type="text"/>	Recipient Project Manager	<input type="text"/>
Fund Source Code	<input type="text"/>	Grant Reporting Period	<input type="text"/> From <input type="text"/> To <input type="text"/>


Section I. ATTACH ADDITIONAL SHEETS IF NEEDED OR ADJUST ROW HEIGHT TO ACCOMMODATE DATA AREA

- Explain grant activities that have taken place during the reporting period. What milestones have been met? What milestones have not been achieved? Have staff been hired according to schedule?
- Are the goals and objectives expected to be achieved by the end of the grant period? Yes  No   
If not, explain:
- Are grant timelines being adhered to? If not, explain and discuss the impact on grant outcomes.
- How much of the budget has been expended to date? \$  Percent
- Is spending consistent with budget projections? Yes  No   
If not, what steps are being taken to expend the funds as planned?
- Will 100% of funds be expended by the end of the grant period? Yes  No   
If not, what is the expected balance? .00

- C-1-25 C
- Report template available on the SAI webpage in Resources
- Captures the progress achieved and the grant funds spent at the mid-point of the grant period
- Due January 31, 2025

# Final Reports: Managing for Results (MFR)

- Requirement in [COMAR 13A.05.13.06](#)
- Captures how effective the program was in achievement of the grant goals
- Due August 15, 2025



Carey M. Wright, Ed.D.  
Interim State Superintendent of Schools

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**Managing for Results (MFR) Report**  
State-Aided Institutions (SAIs)  
Fiscal year 2024 (July 1, 2024 – June 30, 2025)

Instructions: Complete this report and email it to [sai.applications@maryland.gov](mailto:sai.applications@maryland.gov) no later than August 15, 2025.

Institution:  
Contact Name:  
Contact Title:  
Contact Phone:  
Contact Email:

1. Complete the chart below by providing the figures from your approved application, and an update on actual numbers served.

	Fiscal Year 2025 (projected, from application)	Fiscal Year 2024 (actual)
Number of LEAs served		
Number of total public schools served		
Number of schools designated as Title I		
Number of nonpublic/homeschools served		
Number of K-12 students served		
Number of students with a disability served		
Number of teachers served		
Number of chaperones/other adults served		

2. Which LEAs were served?

<input type="checkbox"/> Allegany County	<input type="checkbox"/> Charles County	<input type="checkbox"/> Prince George's County
<input type="checkbox"/> Anne Arundel County	<input type="checkbox"/> Dorchester County	<input type="checkbox"/> Queen Anne's County
<input type="checkbox"/> Baltimore City	<input type="checkbox"/> Frederick County	<input type="checkbox"/> St. Mary's County
<input type="checkbox"/> Baltimore County	<input type="checkbox"/> Garrett County	<input type="checkbox"/> Somerset County
<input type="checkbox"/> Calvert County	<input type="checkbox"/> Harford County	<input type="checkbox"/> Talbot County
<input type="checkbox"/> Caroline County	<input type="checkbox"/> Howard County	<input type="checkbox"/> Washington County
<input type="checkbox"/> Carroll County	<input type="checkbox"/> Kent County	<input type="checkbox"/> Wicomico County
<input type="checkbox"/> Cecil County	<input type="checkbox"/> Montgomery County	<input type="checkbox"/> Worcester County

# Final Reports: Final Progress Report C-1-25D

- C-1-25 D
- Report template available on the SAI webpage in Resources
- Captures how the program achieved the grant goals and the spend down status (See MFR)
- Due August 15, 2025

MARYLAND STATE DEPARTMENT OF EDUCATION  
FINAL PROGRESS REPORT C-1-25 D


Grant Name	0	Grant Recipient Name	0
MSDE Grant #	0	Recipient Grant #	0
MSDE Grant Manager		Recipient Project Manager	
Fund Source Code	0	Grant Period	1/0/1900 To 1/0/1900

SECTION I: ATTACH ADDITIONAL SHEETS IF NEEDED OR ADJUST ROW HEIGHT TO ACCOMMODATE DATA AREA

- Describe in detail how the grant has achieved its goals and objectives. If any were not fully achieved, explain why.
- Have all grant funds been spent or obligated at the end of the grant period? Yes  No
- If the answer to Question #2 is no, please explain any balances.
- When will the balance be remitted to MSDE? Date:   
If the balance is not sent to MSDE before the final AFR is filed, the funds must be returned with the AFR.
- When will the Final AFR be completed? Date:   
If the AFR is not submitted electronically, attach it to this report. Remember, it MUST be submitted in accordance with the MSDE Financial Reporting Manual.
- If a grant evaluation is required, when will it be sent to MSDE? Date:

# Monitoring Visits

- Requirement in [COMAR 13A.05.13.06B](#)
- MSDE conducts an annual site monitoring visit for each non-profit funded through the SAI Program



Carey M. Wright, Ed.D.  
State Superintendent of Schools

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## State-Aided Institutions (SAI) Site Visit Form

Organization Name: Click or tap here to enter text.  
 Fiscal Year: Click or tap here to enter text.  
 Date of visit: Click or tap to enter a date.  
 Description of the program observed: Click or tap here to enter text.

1. Select the student groups observed:

Early Childhood (Pre-K-K) (ages 3-5 yrs.)

Elementary School (1st - 5th grades)

Middle School (6th - 8th grades)

High School (9th - 12th grades)

2. Select the school type observed:

Public school

Nonpublic school

Homeschool

Other \_\_\_\_\_

**Programmatic Review**

3. Check off the content area(s) observed:

S.T.E.M.

Reading language arts

Social studies/Citizenship

Fine arts

Health

Other \_\_\_\_\_

4. Learning activities met the following criteria (check all that apply):

Outcomes were understandable to students and teachers.

Student had to apply skills in the following:

Critical thinking

Problem solving

Career readiness

Character development

Instructional facilitator asked students challenging and engaging questions.

Learning activities were hands-on and an extension of the classroom.

There was a clear connection to curricular and educational priorities.

See comments below:

Enter text here.

# Questions

- **Roslyn Coleman**, SAI Program Manager  
(410) 767-3309 [sai.applications@maryland.gov](mailto:sai.applications@maryland.gov)
  
- **Nicole Obregon**, Special Fiscal Programs Administrator  
(410) 767-2939 [nicole.obregon@maryland.gov](mailto:nicole.obregon@maryland.gov)