



Kenton County School District | It's about ALL kids.

# Issue Paper

**DATE:**

May 26, 2023

**AGENDA ITEM (ACTION ITEM):**

Consider/Approve Student Nutrition to pay indirect costs to the general fund at the non-restricted rate, 15.08%, for the 2023-2024 school year.

**APPLICABLE BOARD POLICY:**

04.1 Budget Planning and Adoption

**HISTORY/BACKGROUND:**

The collection of indirect costs is to support administrative overhead function such as accounting, payroll, purchasing, facility management, utilities, etc.

**FISCAL/BUDGETARY IMPACT:**

Student Nutrition will pay the non-restrictive rate, of 15.08%, approved by Kentucky Department of Education. An estimated amount of \$412,052 will be paid by Student Nutrition to general fund.

**RECOMMENDATION:**


Approval Student Nutrition to pay indirect costs to the general fund at the non-restricted rate, 15.08%, for the 2023-2024 school year.

**CONTACT PERSON:**

Elizabeth Hord, Student Nutrition Director.

  
Principal/Administrator

  
District Administrator

  
Superintendent

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda.

Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.

## NSLP Indirect Cost

The Kenton County Board of Education:

(Check which is applicable for your district.)

1. ☒ Will collect indirect cost from food service at the non-restricted rate approved by KDE.
2. ☐ Will collect indirect cost at a rate less than the non-restricted rate approved by KDE.
3. ☐ Will not collect indirect cost from food service.

Adjustments:

1. ☐ Did not make adjustments to the indirect cost pool.
2. ☒ Made adjustments to the indirect cost pool.

Adjustments made include MUNIS codes:

0532 telephone; 0344 financial services

We understand that the non-restricted rate issued by the KY Department of Education for our district will be used to calculate the indirect cost. We also understand that the indirect cost should be transferred **monthly** and **cannot exceed the allowable amount**. We understand that this document is valid for the current school year and will be renewed yearly.

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Superintendent's Signature

Date

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Finance Officer's Signature

Date

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Child Nutrition Director's Signature

Date