Budget Justification Worksheet

Historic Preservation Fund Grants

Budget must be clear and all work elements must be eligible, reasonable, and directly relevant to the project. All items in the budget must be justified in the project description.

1. Personnel. Provide the names and titles of principal project personnel. Please note that grant funds may not be used to pay Federal employee salaries, nor may Federal salaries be used as match/cost share.

Name/Title of Personnel	% of Time	Annual Salary	# of Years	Federal Grant Funds	Match/Cost Share	Total
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
			SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

2. Fringe Benefits. If more than one rate is used, list each rate and salary base. Rates are based on the percent of time spent working on this project.

Name/Title of Personnel	% Rate	Charged Salary	# of Years	Federal Grant Funds	Match/Cost Share	Total
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
			SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

3. Consultant Fees. Include payments for professional and technical consultants participating in the project. For all consultants, please include either a flat rate or the number of days x their daily rate. Maximum hourly wages charged to this grant for personnel and consultants may not exceed 120% of the salary of a Federal Civil Service GS-15, Step 10. Current salary tables can be found on the Office of Personnel Management website: http://www.opm.gov.

Type of Consultant	Flat Rate	No. of Days	Daily Rate	Federal Grant Funds	Match/Cost Share	Total
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
						$ 0.00
			SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

4. Travel and Per Diem. Indicate the number of persons traveling, the total days they will be in travel status, and the total subsistence and transportation costs. Lodging and per diem must be based on government rates which can be found at http://www.gsa.gov/.

From/To	No. of People	No. of Days	Daily Lodging & Per Diem	Transportation Costs Per Person	Federal Grant Funds	Match/Cost Share	Total
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
				SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

5. Supplies and Materials. Include consumable supplies and materials to be used in the project and any items of expendable equipment, i.e., equipment costing less than $5,000 or with an estimated useful life of less than one year. Items costing more than that should be listed in "**Equipment**."

Item	Cost	Federal Grant Funds	Match/Cost Share	Total
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
	SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

6. Equipment. List all equipment items in excess of $5,000. Each item of equipment must be approved by NPS in writing prior to purchase. Items worth less than $5,000 or that have a useful life of less than one year must be listed in "**Supplies and Materials**."

Item	Cost	Federal Grant Funds	Match/Cost Share	Total
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
	SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

7. Construction/Conservation Materials and Labor. Itemize by work elements (for example, "repair roof," "underpin foundation"). "Lump sum" amounts must be broken into specific work components to be funded by the grant.

Item	Cost	Federal Grant Funds	Match/Cost Share	Total
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
	SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

8. Administrative Costs. Allowable, reasonable, and allocable costs related to the overall management of activities directly related to finance (accounting, auditing, budgeting, contracting), general administrative salaries and wages (grant administration, personnel, property management, equal opportunity) and other "overhead" functions (general legal services, general liability insurance, depreciation on buildings and equipment, etc.) not directly attributable to specific program areas identified in the grant agreement. All administrative costs reported must be absolutely necessary for project and/or program implementation, such as the cost items identified in the final grant agreement or items otherwise approved in writing by the NPS Awarding Officer (AO). Administrative costs plus any indirect costs charged to the grant may not exceed 25% of the overall project budget (Federal and matching share).

Item	Cost	Federal Grant Funds	Match/Cost Share	Total
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
Indirect costs (if applicable)				$ 0.00
	SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

9. Other Costs. Include items not previously listed. Please note that "miscellaneous" and "contingency fees" are not eligible budget items.

Item	Cost	Federal Grant Funds	Match/Cost Share	Total
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
				$ 0.00
	SUBTOTAL	$ 0.00	$ 0.00	$ 0.00

What are the sources of the non-federal match? If required, list the secured and non-secured sources and amounts of non-Federal match, which can be cash, donated services, or use of equipment. .

Secured Match	Unsecured Match

Notes:

Non-Federal Applicants Only
Please state the organization's non-Federal operating budget for the most recently completed fiscal year:

Year: _____ Non-Federal Budget: _____

BUDGET SUMMARY	Federal Grant Funds	Match/Cost Share	Total
1. Personnel	$ 0.00	$ 0.00	$ 0.00
2. Fringe Benefits	$ 0.00	$ 0.00	$ 0.00
3. Consultant Fees	$ 0.00	$ 0.00	$ 0.00
4. Travel and Per Diem	$ 0.00	$ 0.00	$ 0.00
5. Supplies and Materials	$ 0.00	$ 0.00	$ 0.00
6. Equipment	$ 0.00	$ 0.00	$ 0.00
7. Construction/Conservation Materials and Labor	$ 0.00	$ 0.00	$ 0.00
8. Administrative Costs	$ 0.00	$ 0.00	$ 0.00
9. Other Costs	$ 0.00	$ 0.00	$ 0.00
Total Project Costs	$ 0.00	$ 0.00	$ 0.00

Please answer the following questions:

☐ Do you have policies and procedures in place that meet the financial management standards in 2 CFR 200.302? If yes, please check the box.

If no, what mitigation measures are you proposing or do you already have in place?

☐ Do you have a single audit and when was it submitted to the Audit Clearinghouse? If yes, please check the box.

If no, do you have another type or audit or annual financial statement?

List any past HPF grants your organization has received in the past 5 years, the name of the project, and the location. If your organization has received grants from the State Historic Preservation Office, or the Tribal Historic Preservation Office, please list these as well.