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. Items must be broken out between administrative costs and program costs. Leave blank any sections for which no costs will be charged. All items in the budget must be justified in the project description. This worksheet does not replace the SF-424A application form. Information provided below must be consistent with the SF-424A and/or SF-424C.

Administrative costs are defined as: 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).

1. Personnel

Provide the titles, and names if applicable, of principal project personnel. Percent of time may be given as hours. Annual salary may be given as the hourly rate. Please note that grant funds may not be used to pay Federal employee salaries, nor may Federal salaries be used as match/cost share. 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 are available at https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/.

Title/Name of Personnel	% of Time	Annual Salary	# of Years	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 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.

Title/Name of Personnel	% Rate	Charged Salary	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 0.00	$ 0.00

3. Travel

Indicate the number of persons travelling, the total days they will be in travel status, and the total subsistence and transportation costs.

Location From/To	No. of People	No. of Days	Lodging and Per Diem	Transportation Costs per Person	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 0.00	$ 0.00

4. Equipment

List all tangible personal property with a per-unit acquisition cost of greater than $5,000 and a useful life of more than one year. Each item of equipment must be approved by NPS in writing prior to purchase. Items worth less than $5,000 or having a useful life of less than one year must be listed in **Supplies and Materials**. See 2 CFR 200.33.

Item	Total Cost	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 0.00	$ 0.00

5. Supplies and Materials

Includes consumable supplies & materials to be used in the project and any items of expendable equipment (i.e. equipment with a useful life of less than one year). Items with a per-unit cost of more than $5,000 and an estimated useful life of more than one year should be listed in **Equipment**.

Item	Total Cost	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 0.00	$ 0.00

6. Contractual/Consultant Fees

Include payments for professional and technical consultants participating in the project. For all consultants, please include either a flat rate **OR** a daily rate with estimated number of days. Maximum hourly wages charged to this grant for consultants may not exceed 120% of the salary of a Federal Civil Service GS-15, Step 10. Current salary tables are available at https://www.opm.govpolicy-data-oversight/pay-leave/salaries-wages/.

Type of Consultant	Flat Rate	Daily Rate	# of Days	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 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	Total Cost	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 0.00	$ 0.00

8. Other

Include items not previously listed.

Item	Total Cost	Federal Grant Funds, Admin	Federal Grant Funds, Program	Match/Cost Share, Admin	Match/Cost Share, Program	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	$ 0.00	$ 0.00

9. Indirect Charges

Indirect charges must be based on a federally-negotiated indirect cost rate or, if the organization has never previously had a federally-negotiated indirect rate, your organization may choose to use the 10% De Minimis indirect cost rate. The federally-negotiated rate or 10% De Minimis certification must be included in the application.

Type of Indirect Cost Rate	Expiration Date	Base	Percent	Federal Grant Funds, Admin	Match/Cost Share, Admin	Total
						$ 0.00

10. Budget Summary

Category	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. Travel	$ 0.00	$ 0.00	$ 0.00
4. Equipment	$ 0.00	$ 0.00	$ 0.00
5. Supplies and Materials	$ 0.00	$ 0.00	$ 0.00
6. Contractual	$ 0.00	$ 0.00	$ 0.00
7. Construction/Conservation	$ 0.00	$ 0.00	$ 0.00
8. Other	$ 0.00	$ 0.00	$ 0.00
9. Indirect Charges	$ 0.00	$ 0.00	$ 0.00
Administrative Costs	$ 0.00	$ 0.00	$ 0.00
Total Costs	$ 0.00	$ 0.00	$ 0.00

11. Questionnaire

Organization's non-Federal operating budget for the most recently completed fiscal year: **Year** _____ **Budget** _____

☐ 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 what measures 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?

☐ Can you certify that there is no overlap in Federal Funding in terms of activities, costs, or time commitment of key personnel, including any application that was submitted for funding consideration to any other potential funding source (Federal or non-Federal)? If yes, check the box

If any overlap or duplication does exist, please describe the overlap including when the overlapping or duplicative proposal(s) were submitted, to whom (entity and program), and when funding decisions are expected to be announced.

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

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

Secured Match	Unsecured Match