ATTACHMENT A: APPLICATION PACKAGE CHECKLIST

Important: Proposals Missing Any of These Required Items Will Not Be Considered

☐ UEI Registration

PROPOSAL - PROJECT NARRATIVE

☐ 1. Standard Form SF-424, "Application for Federal Assistance"

☐ 2. Cover Page (one page maximum listing the following information):

a. The applicant entity name.
b. The project title.
c. The project duration in years.
d. The amount of Federal funding requested.
e. The amount of non-Federal cost-share committed (match).
f. The name, phone number, and email address for the applicant's technical contact (usually the project director), this person is considered the primary contact for the project by NRCS.
g. The name, phone number, and email address for the applicant's administrative contact (usually an individual in a grants office or project manager working under a project director).
h. The geographic location of the project.
i. The state priority that is addressed by the project. List only one priority from Section A. 4 of the NFO. If the proposal addresses more than one priority, **you must select a primary priority** for your application to be considered under.
j. An estimated number of participating producers expected to be involved with the project.
k. Include a declaration if the project is competing for the historically underserved set aside, and if so, note which of the following applies to the applicant:
    i. A historically underserved producer;
    ii. A community-based organization comprised of, representing, or exclusively working with HU producers for the life of the project;
    iii. An entity developing an innovative conservation approach or technology specifically targeting the unique needs and limitations of HU producers for the life of the project; or
    iv. An 1890 or 1994 land-grant institution (7 U.S.C. 3222 et seq.), Hispanic-serving institution (20 U.S.C. 1101a), or other minority-serving institution, such as a historically Black college or university (20 U.S.C.1061), a tribally controlled college or university (25 U.S.C. 1801), or an Asian American and Pacific Islander-serving institution (20 U.S.C. 1059g) at the time of application.
l. A brief description (1–3 sentences) of the innovative conservation approach or approaches that is the focus of the project—please be concise!
m. If relevant, list any NRCS practice standards that this project could potentially inform (if multiple exist, select the top five).

☐ 3. Project Abstract (one page maximum)

☐ 4. Project Narrative (15 pages maximum)
   a. Project goal
   b. Project objectives
   c. Project background
   d. Project evaluation
   e. Project design and methods
   f. Project deliverables/products
   g. Project outcomes and benefits
   h. Geographic location and size of project area (include a map if possible)
   i. EQIP-eligible producer participation
   j. Project action plan and timeline
   k. Project management
   l. Technology transfer plan
   m. Graphics

☐ 5. References/citations (if applicable)

☐ 6. Team Qualifications

☐ 7. Declaration of Previous CIG Awards (if applicable)

☐ 8. Historically Underserved Narrative (if applicable)

☐ 9. Assessment of Environmental Impacts

BUDGET INFORMATION

☐ 10. Completed SF-424A, "Budget Information – Non-Construction Programs"

☐ 11. Detailed Budget Narrative (see template in Attachment C)

☐ 12. Detailed Budget Table (see Attachment C)

☐ 13. Indirect Costs: Submit documentation of a federally approved indirect cost rate (NICRA)

☐ 14. Non-Federal Commitment Letters (see template in Attachment D): required for projects with cost-share funds coming from a third party. Each letter needs to be signed and give a clear amount of commitment.

OTHER

☐ 15. Support Letters: Be sure to include any letters of support that lend credibility to your project idea. (if applicable)

☐ 16. Grants.gov Lobbying Form, Certification and Disclosure of Lobbying Activities

☐ 17. Applicant Contact Information

☐ 18. Statement of Current and Pending Support

☐ 19. Disclosure of Potential Conflict of Interest (if applicable)

ATTACHMENT B: 2024 Connecticut State CIG Competition Cover Page

Applicant entity's name:
Project Title:
Project duration in years:

Federal funding requested:
Non-Federal cost-share committed:

Applicant Technical Contact Name:
Applicant Technical Contact phone number:
Applicant Technical Contact email:

Applicant Administrative Contact Name:
Applicant Administrative Contact phone number:
Applicant Administrative Contact email:
Main Priority from NFO:

Sub-priority (if relevant):

Estimated # of participating producers involved:

Estimated # of historically underserved producers involved:

Is this proposal applying to the historically underserved (HU) set aside?
Only complete next two questions if you are applying for the HU set aside:

HU set Aside Qualification:
HU Producers benefiting from project (*select all that apply*):

- ☐Limited Resource Farmer or Rancher
- ☐Beginning Farmer or Rancher
- ☐Socially Disadvantaged Farmer or Rancher
- ☐Veteran Farmer or Rancher

Description of the innovation (1-3 sentences):
This is not the abstract, so please keep it short. Be very specific as to what the innovation is your team is proposing.

NRCS practice standards the project informs:
Only answer if relevant to your project. List no more than five practice standards, so they should be the most relevant to your project.

ATTACHMENT C: SAMPLE BUDGET NARRATIVE AND TABLE

Name of Applicant
Project Title
Project Total: $772,456
Federal Portion: $384,654
Non-Federal Contribution: $387,802

FEDERAL BUDGET:

1. Personnel

Note, a 3 percent annual salary increase has been included for all personnel.

Tom Smith, Project Director, full time, annual salary $89,000, 70 percent paid by Federal funds, will advise the project team, assist with demonstration plot establishment, data collection and analysis, and participate in project field days.

Year 1: $62,300 Year 2: $64,169 Year 3: $66,094

Mary Johnson, research technician, 20 percent time, $55,000 annual salary, 50 percent paid by Federal funds. Establish the field and demonstration plots, function as the project manager, coordinate sub-award work, draft reports and publications, and participate in all project field days.

Year 1: $5,500 Year 2: $5,665 Year 3: $5,835

Total Personnel Year 1: $67,800 Year 2: $69,834 Year 3: $71,929

2. **Fringe benefits**

Federal funds pay 67 percent fringe benefits. Fringe benefits rates are 35 percent for faculty and 45 percent for permanent staff.

Tom Smith – Faculty rate of 35 percent:

Year 1: $20,871 Year 2: $21,497 Year 3: $22,142

Mary Johnson – Staff rate of 45 percent:

Year 1: $3,317 Year 2: $3,416 Year 3: $3,519

Total Fringe Year 1: $24,188 Year 2: $24,913 Year 3: $25,661

3. **Travel**

   Per diem and transportation rates used are from XXX Universities Travel Policy, which can be found here:

   [Add website or share copy of travel document unless using Federal GSA rates]

   Funds are requested to support travel for plot preparation and data collection trips, as well as travel to four field days within the states of New York and Pennsylvania. Estimated 5,000 miles per year at a rate of $0.60/mi.

   Year 1: $3,000 Year 2: $3,000 Year 3: $3,000

   Funds are requested for overnight hotel stays at demonstration plot locations at the state hotel rate of $90 per night, 4 times per year ($360/year).

   Year 1: $360 Year 2: $360 Year 3: $360

   Funds are requested in the second and third year for three individual trips each year to scientific conferences based on the following estimates: Lodging for 3 nights at $150 per night ($450); Per-diem $50/day for 4 days ($200); Transportation: Airline travel to conference location at $400/flight plus ground transportation at $50 plus airport parking at $30 ($480).

   Unknown Year 2: $3390 Year 3: $3390

   Total Travel: Year 1: $3,360 Year 2: $6,750 Year 3: $6,750

4. **Equipment – none**

5. **Supplies**

   Field and lab supplies: Funds are requested for the purchase of soil temperature and moisture probes and data logging systems ($2,000). Funds are also requested to purchase weed suppression technologies, seeds, and irrigation supplies for field plots ($6,000). Funds are also requested for various lab supplies and sampling equipment ($3,000).

   Total Supplies: *Year 1: $4,000 Year 2: $4,000 Year 3: $3,000*

6. **Contractual**

   Two separate contractors:

   - Contract with Amazing Graphics and Marketing ($12,000)

   Marketing team will use innovative digital marketing tools to reach producers and help gain interest. Team will develop graphics and video production to support program recruitment and teaching tools.

- Contract with Innovative Technology ($18,000)

Contractor will help develop online tools to assist producers with conservation practices.

Total Contractual: Year 1: $10,000 Year 2: $10,000 Year 3: $10,000

7. Construction – None requested

8. Other

Land rental – demonstration plots on farmer land will have a rental cost of $50/acre/year totaling $1,500 annually.

Publication Costs: Funds are requested for the development and publication of various materials including extension publications, costs associated with peer reviewed journals, and costs associated with copies of brochures made in house. ($1,000/year)

Total Other Costs: Year 1: $2,500 Year 2: $2,500 Year 21: $2,500

9. Indirect Costs

Team is applying the 10 percent de minimus rate.

Total Indirect Costs: Year 1: $11,185 Year 2: $11,800 Year 21: $11,984

NON-FEDERAL BUDGET:

1. Personnel

Note, a 3 percent annual salary increase has been included for all personnel.

Tom Smith, Project Director, full time, annual salary $89,000, 30 percent paid by non-Federal funds, will advise the project team, assist with demonstration plot establishment, data collection and analysis, and participate in project field days.

Year 1: $26,700 Year 2: $27,501 Year 3: $28,326

Mary Johnson, research technician, 20 percent time, $55,000 annual salary, 50 percent paid by non-Federal funds. Establish the field and demonstration plots, function as the project manager, coordinate sub-award work, draft reports and publications, and participate in all project field days.

Year 1: $5,500 Year 2: $5,500 Year 3: $5,500

Total Personnel: Year 1: $32,200 Year 2: $33,166 Year 3: $34,161

2. **Fringe Benefits**

Non-Federal funds pay 33 percent fringe benefits. Fringe benefits rates are 35 percent for faculty and 45 percent for permanent staff.

Tom Smith – Faculty rate of 35 percent:

Year 1: $10,280 Year 2: $10,588 Year 3: $10,906

Mary Johnson – Staff rate of 45 percent:

Year 1: $8,168 Year 2: $8,413 Year 3: $8,665

Total Fringe Benefits: Year 1: $18,448 Year 2: $19,001 Year 3: $19,571

3. **Equipment - None**

4. **Supplies – none**

5. **Contractual**

- Contract with Super Non-Profits ($61,000)

Elizabeth Smith will oversee the outreach to farmers. She will devote 20 percent of her time all 3 years of the project. 100 percent of her time will be non-Federal. She will oversee all elements of this part of the project, including contacting and recruiting farmers, organizing outreach events such as field days, and on-farm assistance.

Temporary half-time admin support for program facilitation.

Workshop rental space will be donated by contactor, with an estimated value of $100 per day.

Year 1: $18,000 Year 2: $20,000 Year 3: $23,000.

- Soil Conservation District

The local soil and water conservation district will support the project by helping to build partner relationships with local producers.

Year 1: $10,000 Year 2: $10,000 Year 3: $10,000

Total Contractual: Year 1: $28,000 Year 2: $30,000 Year 3: $33,000

6. **Construction:** None

7. **Other Costs:**

General services (web development, printing, accounting, administrative, and project management) estimated $5,000 annually.

Sample Testing and Analysis: Basic nutrient testing and soil health testing will be done annually for all plots. Roughly 50 samples a year at $500/sample ($25,000/year).

Legal Fees: Community support groups will pay all legal fees regarding the research of any legal implications on the project. $5,000 annually.

Total Other: Year 1: $35,000 Year 2: $35,000 Year 3: $35,000

8. Indirect Costs

Note: If NICRA is negotiated or if it is the 10 percent de minimis rate, the 10 percent de minimis rate is applied.

Total Indirect Costs: Year 1: $11,365 Year 2: $11,717 Year 3: $12,173

FEDERAL BUDGET

	Year 1	Year 2	Year 3	Total
Personnel	$67,800	$69,834	$71,929	$209,563
Tom Smith	$62,300	64,169	66,094	$192,563
Mary Johnson	$5,500	$5,665	$5,835	$17,000
Fringe	$24,188	$24,913	$25,661	$74,762
Faculty	$20,871	$21,497	$22,142	$64,510
Staff	$3,317	$3,416	$3,519	$10,252
Travel	$3,360	$6,750	$6,750	$16,860
Plot prep/data collection	$3,000	$3,000	$3,000	$9,000
Demo plot overnight trips	$360	$360	$360	$1,080
Conference trips	$0	$3,390	$3,390	$6,780
Supplies	$4,000	$4,000	$3,000	$11,000
Field Supplies	$1,000	$1,000		$2,000
Farm Supplies	$2,000	$2,000	$2,000	$6,000
Lab Supplies	$1,000	$1,000	$1,000	$3,000
Contractual	$10,000	$10,000	$10,000	$30,000
Amazing Graphics	$4,000	$4,000	$4,000	$12,000
Innovative Technology	$6,000	$6,000	$6,000	$18,000
Other	$2,500	$2,500	$2,500	$7,500
Publication and copying	$1,000	$1,000	$1,000	$3,000
Land rental	$1,500	$1,500	$1,500	$4,500
Indirect	$11,185	$11,800	$11,984	$34,969
De Minimis (10 percent)	$11,185	$11,800	$11,984	$34,969

NON-FEDERAL BUDGET

	Year 1	Year 2	Year 3	Total
Personnel	$32,200	$33,166	$34,161	$99,527
Tom Smith	$26,700	$27,501	$28,326	$82,527
Mary Johnson	$5,500	$5,665	$5,835	$17,000

NON-FEDERAL BUDGET					
Fringe	$18,448	$19,001	$19,571		$57,020
Faculty	$10,280	$10,588	$10,906		$31,774
Staff	$8,168	$8,413	$8,665		$25,246
Contractual	$28,000	$30,000	$33,000		$91,000
Super Non-Profits	$18,000	$20,000	$23,000		$61,000
Soil Conservation District	$10,000	$10,000	$10,000		$30,000
Other	$35,000	$35,000	$35,000		$105,000
General services	$5,000	$5,000	$5,000		$15,000
Testing and analysis	$25,000	$25,000	$25,000		$75,000
Legal Fees	$5,000	$5,000	$5,000		$15,000
Indirect	$11,365	$11,717	$12,173		$35,255
De Minimis (10 percent)	$11,365	$11,717	$12,173		$35,255
TOTAL	$125,013	$128,884	$133,905		**$387,802**

ATTACHMENT D: SAMPLE COMMITMENT LETTER

Applicant Cash/In-kind Contribution Commitment

Donor Organization:	Name Address City, State, Zip code
Applicant Organization:	Name of applicant
Project Title:	Name of project title
Attn:	CIG Program Staff

Description of cash contribution: [Add clear statement of what the organization is committing, such as the following example.]

The X Trust is committing $182,000 in cash and in-kind support to this project from general fundraising support (corporate giving, foundations, fundraising events, etc.). Funds will be used to support five farmers, attend state meetings, and support contractor work on website and app development." The funding breaks down into the following budget line items:

- Travel: $2,000 in-kind
- Contractual: $180,000 cash

Pledge Statement: The [add name of organization] pledges to make this contribution over the USDA NRCS 2024 Conservation Innovation Grants Connecticut State Program funding period as cash/in-kind match to USDA NRCS Conservation Innovation Grants funds awarded to [name of applicant] for Innovative Conservation project [*project title*].

Signature[1] of Donor Organization Authorized Representative

Letter should be on organization letterhead.

[1] Signatures can be manual, scanned manual signatures, or electronic (verified as described in U.S.C. 3504 §1710). Names merely typed in script fonts or other unverified electronic signatures will not be accepted and the communications will not count towards the match total.

Contents

1. SF-424 PREPARATION 1
2. SF-424A PREPARATION 9

ATTACHMENT F: SF424A Sample

If applying to an opportunity on Grants.gov, complete the forms in the opportunity package. For all other applications, use the forms available on Grants.gov: https://www.grants.gov/web/grants/forms/sf-424-family.html

FBAC-BC GRANTS AND AGREEEMENTS WEBSITE
https://www.fpacbc.usda.gov/about/grants-and-agreements/apply-to-a-funding-opportunity/index.html

1. SF-424 PREPARATION

Instructions for new agreement applications only. Separate instructions apply to amendments.

Applicants must review these instructions to ensure that the form is completed correctly. This will reduce the likelihood that the form will need to be returned for correction and potentially delay execution of any resultant agreement.

Columns one and two below correlate to the blocks on the Form SF-425. Column 3 includes the Office of Management and Budget (OMB) Standard Form instructions, and the final column includes FPAC Agency specific guidance to be used to complete the form.

Block	Field Name	SF-424 Instructions (V4.0)	FPAC Agency Guidance
1	Type of Submission	Select one type of submission in accordance with agency instructions. • Pre-application • Application • Changed/Corrected Application - Check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this form to submit changes after the closing date. Required.	Select "Application" if this is the first application submitted. If updating an application recently submitted, choose Changed/Corrected Application.
2	Type of Application	Select one type of application in accordance with agency instructions.	Applicants should generally select "New". If, however, the applicable Notice of Funding Opportunity (NFO) allows the

		• New - An application that is being submitted to an agency for the first time. • Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals. • Revision - Any change in the federal government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected. A: Increase Award B: Decrease Award C: Increase Duration D: Decrease Duration E: Other (specify) AC: Increase Award, Increase Duration AD: Increase Award, Decrease Duration BC: Decrease Award, Increase Duration BD: Decrease Award, Decrease Duration Required.	submission of renewals or supplements (see section B of the NFO) and the application meets the NFO description of one of these categories, then choose "Continuation or Revision" and the appropriate letter(s).
3	Date Received	Enter date if form is submitted through other means as instructed by the Federal agency. The date received is completed electronically if submitted via Grants.gov. Required.	Not completed by applicant. This is a required field and will be populated automatically by Grants.gov.
4	Applicant Identifier	Enter the entity identifier assigned by the Federal agency, if any, or the applicant's control number if applicable. Optional.	Optional/not required.
5a	Federal Entity Identifier	Enter the number assigned to your organization by the federal agency, if any. Optional.	Leave blank.
5b	Federal Award Identifier	For new applications, leave blank. For a continuation or revision to an existing award, enter the previously assigned federal award identifier number. If a changed/corrected application, enter the federal identifier in accordance with agency instructions.	Leave blank if you are submitting a new application (item 2). If submitting another type (e.g., renewal or supplement), enter the assigned Award Identifying Number (block 1 on the Notice of Grant and Agreement Award). If submitting a changed/corrected application in Grants.gov, include the Grants.gov tracking number for previously submitted

		Optional.	application.
6	Date Received by State	Leave this field blank. This date will be assigned by the state, if applicable. Optional.	Leave blank.
7	State Application Identifier	Leave this field blank. This identifier will be assigned by the state, if applicable. Optional.	Leave blank.
8a	Applicant Legal Name	Enter the legal name of the applicant that will undertake the assistance activity. This is the organization that has registered with the System for Award Management (SAM). Information on registering with SAM may be obtained by visiting SAM.gov. Required.	This name must be consistent with the name as registered in the System for Award Management (SAM). If the name in SAM is not correct, update it accordingly. If you are applying as an individual, use your legal name as in the Social Security system.
8b	Applicant Employer/Taxpayer Identification Number (EIN/TIN)	Enter the employer or taxpayer identification number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444. Required.	This number must be consistent with the number in the applicant's SAM registration. If you are applying as an individual, use your Social Security number.
8c	Unique Entity Identifier (UEI)	Enter the organization's UEI received from SAM. The UEI is a unique 12-character organization identifier. Information on registering with System for Award Management (SAM.gov) may be obtained by visiting the Grants.gov website. Required.	As of April 2022, the SAM-assigned UEI replaces the DUNS. If you are applying as an individual, this field must be 00000000INDV.
8d	Applicant Address	Enter address: Street 1 (required); City (required); County/Parish, State (required if country is US); Province; Country (required); 9-digit ZIP/Postal Code (required if country is US). If +4 does not exist for the address, enter "0000". Required.	This address must be consistent with the address in the applicant's SAM registration.
8e	Applicant Organizational Unit	Enter the name of the primary organizational unit, department, or division that will undertake the assistance activity. Optional.	Not required.
8f	Applicant Contact Information	Enter the first and last name (required), prefix, middle name, suffix, and title. Enter organizational affiliation if affiliated with an organization other than that in 7.a. Telephone	This does not necessarily need to be the person with authority to sign the application. It is a point of contact for agency staff to contact regarding the application.

		number and email (required); fax number. Required.	
9	Type of Applicant 1	Select a minimum of one applicant type or select up to three applicant types in accordance with agency instructions. If "Other" is selected, then specify Other Type of Applicant in text box. A. State Government B. County Government C. City or Township Government D. Special District Government E. Regional Organization F. U.S. Territory or Possession G. Independent School District H. Public/State Controlled Institution of Higher Education I. Indian/Native American Tribal Government (Federally Recognized) J. Indian/Native American Tribal Government (Other than Federally Recognized) K. Indian/Native American Tribally Designated Organization L. Public/Indian Housing M. Nonprofit N. Private Institution of Higher Education O. Individual P. For-Profit Organization (Other than Small Business) Q. Small Business R. Hispanic-serving Institution S. Historically Black Colleges and Universities (HBCUs) T. Tribally Controlled Colleges and Universities (TCCUs) U. Alaska Native and Native Hawaiian Serving Institutions V. Non-US Entity W. Other (specify) Required.	The selection must be consistent with the entity type listed in the applicant's SAM registration.

10	Name of Federal Agency	Enter the name of the federal agency from which assistance is being requested with this application. This information is pre-populated if submitting through Grants.gov. Required.	Enter the applicable agency if not automatically populated: • FSA-Farm Service Agency • RMA-Risk Management Agency • NRCS-Natural Resource Conservation Service • FBC-Farm Production and Conservation Business Center
11	Catalog of Federal Domestic Assistance Number/Federal Assistance Listing and Title a.k.a. Federal Assistance Listing	Enter the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested, as found in the program announcement, if applicable. This information is pre-populated if using Grants.gov. Required.	If not automatically populated, leave blank.
12	Funding Opportunity Number and Title	Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested as found in the program announcement. This information is pre-populated if using Grants.gov. Required.	If not automatically populated, enter the opportunity number and title. If unknown leave blank.
13	Competition Identification Number and Title	Enter the competition identification number and title of the competition under which assistance is requested, if applicable. These fields are pre-populated by Grants.gov if provided by the federal agency. Optional.	Leave blank.
14	Areas Affected by Project (Cities, Counties, States, etc.)	This data element is intended for use only by programs for which the area(s) affected are likely to be different from the place(s) of performance reported on the SF-424 Project/Performance Site Location(s) Form. Add attachment to enter additional areas, if needed. Optional.	Leave blank.
15	Descriptive Title of Applicant's Project	Enter a brief descriptive title of the project. Supporting documents may be attached if specified in agency instructions. Optional.	Enter a concise but informative title for the project (maximum of 200 characters).
16a	Congressional District of Applicant	16a. Enter the applicant's congressional district. Required.	Enter the Congressional district based on the physical address of the applicant as listed in the applicant's SAM registration. District numbers can be found at

			http://www.house.gov/representatives/find/.
16b	Congressional District(s) of Program/Project	16b. Enter the primary district affected by the program or project. Enter in the following format: 2-character state abbreviation – 3 characters district number, e.g., CA-005 for California 5th district, CA-012 for California 12th district, NC-103 for North Carolina's 103rd district. If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. If nationwide, i.e., all districts within all states are affected, enter US-all. If the program/project is outside the US, enter 00.000. This optional data element is intended for use only by programs for which the area(s) affected are likely to be different than place(s) of performance reported on the SF-424 Project/Performance Site Location(s) form. Attach an additional list of program/project congressional districts, if needed. Required.	District numbers can be found at http://www.house.gov/representatives/find/. If an additional list of program/project congressional districts is to be attached to a Grants.gov opportunity, upload it under Other Attachments (listed as an Optional Form) in the Grants.gov Opportunity Package.
17a	Proposed Project Start Date	Enter the proposed start date of the project. Required.	If applying in response to a Grants.gov opportunity, refer to section B of the NFO.
17b	Proposed Project End Date	Enter the proposed end date of the project. Required.	If applying in response to a Grants.gov opportunity, refer to section B of the NFO.
18a-g	Estimated Funding	Enter the amount requested, or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. For zero funding, enter 0. Required.	Enter the project's total amount of funding for each category below. These values must be consistent with the values on the SF-424A and the Budget Narrative. Only include amounts for items b. through f. to meet the required cost-share/match, if any, identified in the NFO. a. Federal: enter the amount of Federal funds being requested. b. Applicant: enter cost share/match being provided by the applicant itself. Do not include cost share/match being provided by commitments from other sources; those amounts are to be included in items c., d., and e, as applicable. c. State: enter the amount of any cost share/match

			being provided by a State government entity. d. Local: enter the amount of any cost share/match being provided by a Local government entity. e. Other: enter the amount of any cost share/match being provided by a source other than those listed above. f. Program Income: enter the amount of program income (if any) used for meeting cost share/match requirements (see 2 CFR 200.80 and 200.307). g. Total: This field is automatically calculated. It is the sum of all amounts in the categories (items a. through f.) above.
19	Executive Order 12372	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. Select the appropriate box. If "A." is selected, enter the date the application was submitted to the State. Required.	Select the applicable response as to whether or not the application is subject to State review under state laws or procedures. Executive Order 12372 can be found athttps://www.archives.gov/federal-register/codification/executive-order/12372.html. The Intergovernmental Review Single Point of Contact list can be found at https://www.whitehouse.gov/wp-content/uploads/2020/04/SPOC-4-13-20.pdf.
20	Federal Debt Delinquency	Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of federal debt include but may not be limited to delinquent audit disallowances, loans, and taxes. If yes, include an explanation in an attachment. Required.	No additional instructions
21	Certification and Signature	To be signed and dated by the authorized representative of the applicant organization. Enter the first and last name (required), prefix, middle name, and suffix. Enter title, telephone number, fax number, and email. Fax number is not required. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain federal agencies may require that this authorization be submitted as part of the application.) If the application is submitted via Grants.gov, the	If not submitted through Grants.gov, the authorized representative must click the box. and provide either an ink signature or digital signature/digital certificate (cannot be a script font).

		signature of the authorized representative and the date signed are completed upon submission. Required.	

2. SF-424A PREPARATION

Applicants must review these instructions to ensure the form is completed correctly. This will reduce the likelihood that the form will need to be returned for correction and potentially delay execution of any resultant agreement.

SECTION A – BUDGET SUMMARY			
Column	**Field Name**	**Form SF-424A Instructions (V1.0)**	**FPAC Agency Guidance**
1(a)	Grant Program Function or Activity	Enter the name of the activity or function. At least one is required.	FPAC agencies do not require the project budget be broken down into separate programs, functions, or activities on this form. That level of detail, if desired, is reserved for the Budget Narrative which is a related, but separate document. Enter "Federal" in 1(a) and, if cost-share/match is required, enter "Non-Federal" in 2(a). Leave the remaining rows blank.
1(b)	Catalog of Federal Domestic Assistance Number	Enter the Catalog of Federal Domestic Assistance Number. At least one is required.	If not automatically populated, leave blank. Leave the remaining rows blank.
1(c-d)	Estimated Unobligated Funds: Federal and Non-Federal	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total	Leave all rows of columns (c) and (d) blank.

		budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f). Conditionally required.	
1(e)	New or Revised Budget: Federal	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of the amounts in Columns (e) and (f). Conditionally required.	Enter the total amount of the Federal funds requested in Row 1, column (e). Leave the remaining rows column (e) blank. This amount must be consistent with the amount in Block 18a of the SF-424.
1(f)	New or Revised Budget: Non-Federal	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency.	Enter the total amount of the required Non-Federal cost share/match, if applicable, in Row 2, column (f) and leave the remaining rows of column (f) blank. This amount must be consistent with the total amount of Blocks 18b through 18f of the SF-424.

		Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f). Conditionally required.	
1(g)	Total	Total for Row 1(a) – 1(f). If using electronic form, these numbers are auto calculated. Required.	This auto-calculates and must be consistent with the total amount in Block 18(a) of the SF424.
5	Totals	Total for each column. IF using electronic form, these numbers are auto calculated. Required.	This auto-calculates. Block 5(g) is the total proposed application budget.
SECTION B – BUDGET CATEGORIES			
6(1-2)	Grant Program Function or Activity 1 - 2	In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each Grant Program, Function or Activity, fill in the total requirements for funds (both federal and non-federal) by object class categories. If using the Budget Information form through Grants.gov, the Grant Program, Function, or Activity is pre-populated by the Grant Program Function or Activity from column (A) in Section A – Budget Summary.	The form will auto-populate “Federal” in the heading of Column 1. See the Budget Narrative Guidance https://www.fpacbc.usda.gov/about/grants-and-agreements/apply-to-a-funding-opportunity/index.html for guidance on what types of costs to include in each category. The form will auto-populate “Non-Federal” in the heading of Column 2. See the Budget Narrative Guidance https://www.fpacbc.usda.gov/about/grants-and-agreements/apply-to-a-funding-opportunity/index.html for guidance on what types of costs to include in each category.

		Required.	
6(3-4)	Grant Program Function or Activity 3 - 4	In the column headings (3) through (4), enter the titles of the same programs, functions, and activities shown on Lines 3-4, column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each Grant Program, Function or Activity, fill in the total requirements for funds (both federal and non-federal) by object class categories. If using the Budget Information form through Grants.gov, the Grant Program, Function, or Activity is pre-populated by the Grant Program Function or Activity from column (A) in Section A – Budget Summary. Required.	Leave all rows of this entire column blank.
6(a)	Personnel	Enter funds required for purpose/column heading from the selected program. If not applicable, leave blank. Optional.	Refer to Budget Narrative Guidance. This is an attachment to the NFO or is available at https://www.fpacbc.usda.gov/about/grants-and-agreements/apply-to-a-funding-opportunity/index.html.
6(b)	Fringe Benefits		
6(c)	Travel		
6(d)	Equipment		
6(e)	Supplies		
6(f)	Contractual		
6(g)	Construction		
6(h)	Other		
6(i)	Total Direct Charges (sum of 6(a) thru 6(h))	Sum of 6(a) thru 6(h). If using electronic form, these numbers are auto calculated. Required.	This auto-calculates.
6(j)	Indirect Charges	Enter the amount of indirect costs. If not applicable, leave blank. Optional.	Refer to Budget Narrative Guidance, which is included as an attachment to the NFO or is available at https://www.fpacbc.usda.gov/about/grants-and-agreements/apply-to-a-funding-opportunity/index.html .
6(k)	TOTALS (sum of 6(i) thru 6(j))	Enter the total of amounts on Lines 6i and 6j. (This amount is auto calculated if using Grants.gov.) For all applications for new grants	Row 6(k) of Columns (1) and (2) will auto-populate; all other columns should be blank.

		and continuation grants, the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5. If using electronic form, these numbers are auto calculated. Required.	The total must be consistent with the Federal total in Section A (row 5 columns (e) and (f). All costs must comply with the cost principles of 2 CFR Part 200, Subpart E – Cost Principles. All costs must be allowable (2 CFR 200.403), allocable to the agreement (2 CFR 200.405), and reasonable in amount (2 CFR 200.404).
7	Program Income	Enter the estimated amount of total income, if any, expected to be generated from this project. If not applicable, leave blank. Optional.	If your project does not expect program income to be generated, leave this blank. Program income (see 2 CFR 200.1) means gross income earned by the non-Federal entity that is directly generated by a supported activity or earned as a result of the Federal award during the period of performance except as provided in § 200.307(f). Program income includes but is not limited to income from fees for services performed, the use or rental or real or personal property acquired under Federal awards, the sale of commodities or items fabricated under a Federal award, license fees and royalties on patents and copyrights, and principal and interest on loans made with Federal award funds. This is the amount expected but may not necessarily be what is achievable under a resultant agreement.
SECTION C – NON-FEDERAL RESOURCES			
8(a)	Grant Program Function or Activity 1	Name of the grant program from which funds will be derived. Defaults to the corresponding program name in section A; but may be overwritten if called for by the instructions for this funding opportunity. Required.	This will auto-populate.
8(b-d)	Grant Program Function or Activity 2 - 4	Enter resources provided by the applicant for the selected program. If not applicable, leave blank. Optional.	Leave blank.
8(e)	(e) Total of Non-Federal Resources for Grant Program sum of line (a) through (d)	Total Sum of 8(b) thru 8(d). Required.	Leave blank.

12(b) thru 12(e)	Total (sum of lines 8-11)	Total for each column. If using electronic form, these numbers are auto calculated. Required.	
SECTION D – FORECASTED CASH NEEDS			
13	Federal Total for 1st Year	Sum of Federal 1st Quarter – 4th Quarter Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Required.	Per agency guidance leave blank.
	Federal Forecasted Cash Needs for 1st Quarter – 4th Quarter	Enter the forecasted cash needs from federal sources for each quarter of the first program year. If not applicable, leave blank. Optional.	Leave blank.
14	Non-Federal for 1st Year	Sum of Non-Federal 1st Quarter – 4th Quarter Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Required.	Per agency guidance leave blank.
	Non-Federal Forecasted Cash Needs for 1st Quarter – 4th Quarter	Enter the forecasted cash needs from non-federal sources for each quarter of the first program year. If not applicable, leave blank. Optional.	Leave blank.
15	TOTAL (sum of lines 13 and 14)	Total for each column. If using electronic form, these numbers are auto calculated. Required.	Per agency guidance leave blank.
	Total Forecasted 1st Year	Total Sum of 1st Year Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Required.	
	Total Forecasted 1st Quarter – 4th Quarter	Total each Quarter Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto calculated. Optional.	Leave blank.
SECTION E – BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT			
16(a)	Grant Program	Name of the grant program from which funds will be derived. Defaults to the corresponding program name in section A; but may be overwritten if called for by the instructions for this funding opportunity. Required.	This will auto-populate.

16(b-d)	First Future Funding Period (year) – Third Future Funding Period (year)	Enter the estimated federal funds that will be required in each of the additional funding years for the selected program. Optional.	Leave blank.
16(e)	Fourth Future Funding Period (year)	Enter the estimated federal funds that will be required in the fourth funding year for the selected program. Optional.	Leave blank.
20	Total (sum of lines 16-19)	Total Sum of Estimated Federal Funds needed for balance of project per year. Auto calculated. Required.	Leave blank.
SECTION F – OTHER BUDGET INFORMATION			
21	Direct Charges	Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.	Leave blank.
22	Indirect Charges	Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.	
23	Remarks	Provide any other explanations or comments deemed necessary.	

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006
Expiration Date: 02/28/2022

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Federal		$	$	$ 113,850.00	$	$ 113,850.00
2. Non-Federal					38,500.00	38,500.00
3.						
4.						
5. Totals		$	$	$ 113,850.00	$ 38,500.00	$ 152,350.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total
	(1) Federal	(2) Non-Federal	(3)	(4)	(5)
a. Personnel	$ 80,000.00	$ 28,000.00	$	$	$ 108,000.00
b. Fringe Benefits	20,000.00	7,000.00			27,000.00
c. Travel	3,000.00				3,000.00
d. Equipment					
e. Supplies	500.00				500.00
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)	103,500.00	35,000.00			$ 138,500.00
j. Indirect Charges	10,350.00	3,500.00			$ 13,850.00
k. TOTALS (sum of 6i and 6j)	$ 113,850.00	$ 38,500.00	$	$	$ 152,350.00
7. Program Income	$	$	$	$	$

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	Federal	$	$	$	$
9.	Non-Federal				
10.					
11.					
12. TOTAL (sum of lines 8-11)		$	$	$	$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$	$	$	$	$
14. Non-Federal	$				
15. TOTAL (sum of lines 13 and 14)	$	$	$	$	$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b)First	(c) Second	(d) Third	(e) Fourth
16.	Federal	$	$	$	$
17.	Non-Federal				
18.					
19.					
20. TOTAL (sum of lines 16 - 19)		$	$	$	$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:

22. Indirect Charges:

23. Remarks:

ATTACHMENT G: BUDGET NARRATIVE GUIDANCE

All costs must comply with the cost principles of 2 CFR Part 200, Subpart E – Cost Principles. All costs (both Federal and any required non-Federal cost-sharing/match) that are part of an award must be:

- allowable (2 CFR 200.403),
- allocable to the agreement (2 CFR 200.405), and
- reasonable in amount (2 CFR 200.404).

A thorough budget narrative will aid the administrative review and processing of a recommended award. Amounts included in a budget and budget narrative are estimates; in the event of an award, payments will be based on actual expenditures. The following is guidance for your use in preparing a thorough budget narrative. The guidance follows the order of the budget items.

COST-SHARING/MATCHING: You must provide the information below for the Federal portion of costs and *separately* provide the information below with the same level of detail for the cost-sharing/matching portion, as applicable, as part of the budget narrative.

PERSONNEL – Only include employees of applicant organization

This category includes salaries and wages of personnel of the applicant organization (i.e., employees) that will be working directly on the project. For each individual, identify their role and describe their contributions to the project. Also include their annual salary, percent of effort, and the period of time they will contribute to the project along with the associated funds requested for support. The following format is an appropriate way to provide the information.

Mr. Jones – Project Director. Accountable for assuring that all project activities are carried out in a timely, cost-efficient and responsible manner. He will provide oversight of daily activities and lead and direct the project toward accomplishment of the objectives of the project. He is responsible for the submission of the required reports.

Salary	% effort	Project Duration	Funds Requested
$50,000	25%	12 months	$12,500

FRINGE BENEFITS – Only related to salaries identified under Personnel

Fringe benefits include, but are not limited to, the costs of leave (e.g., vacation, family-related, sick or military), employee insurance, pensions, and unemployment benefit plans. Also, see 2 CFR 200.431, Compensation-Fringe Benefits. Provide information about how fringe benefits are determined along with the amount requested.

For instance:	Amt. Requested
Fringe benefits - 25% of salaries and wages ($12,500 @ 25%).	$3,125

TRAVEL

Refer to your organization's travel policy for guidance on how to arrange travel. If your organization lacks a policy, it is expected that you follow the U.S. federal government policy, see http://www.gsa.gov/federaltravelregulation.

For the budget narrative, identify the total funds requested for travel. Provide as much detail as possible including purpose, destination, dates of travel, and number of individuals for each trip. If the dates of travel are not known, specify estimated length of trip. Identify what will be followed (e.g., organizational travel policies or government per diem rates). The following are a few examples of how to provide the information.

- 2 people - travel to Washington D.C. once per year for a two-day meeting [identify purpose of meeting].

  Airfare $800 x 2 for airfare = $1,600
  Airport parking = $64
  Hotel for 3 nights x 2 @ $200 = $1,200
  Meals for 2 days x 2 = $24;
  Rental car for 3 days @ $110/day = $330
  Total for trip: $3,439

- Local travel for project manager is calculated at .50 per mile throughout primary service area x 326 miles/month x 12 months = $1,956.

EQUIPMENT

Equipment is defined as an item of property that has an acquisition cost of $5,000 or more (unless the organization has established lower levels) and an expected service life of more than one year. List each item of equipment along with the applicable cost. Include justification of its need in accomplishing the goals of the project.

Example: To complete objectives #1 and #2, Refrigerated Trailer is required. XYZ Refrigerated Trailer, Model #123, at $5,555

These costs should only include the costs to purchase new equipment. The cost of renting or leasing equipment is not to be included in this category but instead, include under the Contractual category. If equipment is costly, include a lease vs purchase comparison in the budget narrative in support of route chosen.

SUPPLIES

Supplies is defined in 2 CFR 200.1 as all tangible personal property other than those described in 2 CFR 200.1 Equipment. A computing device is a supply if the acquisition cost is less than the lesser of the capitalization level established by the non-Federal entity for financial statement purposes or $5,000, regardless of the length of its useful life. Suggest also viewing 2 CFR 200.453, Materials and Supplies Costs, Including Costs of Computing Devices, regarding the allowability of costs.

Indicate general categories of expendable supplies including an amount for each category. Caution: If a category is viewed as too general or the associated amount is too high, further itemization may be requested. Therefore, use good judgement in determining the level of detail to provide.

Example:	General office supplies $50/mo. x 12 mo. =	$600
	Postage $37/mo. x 8 mo. =	$296
	Laptop Computer 1 x $900 =	$900
	Printer 1 x $300 =	$300
	Projector 1 x $900 =	$900
	Copies 8000 copies x .10/copy =	$800

CONTRACTUAL

This category includes consultants, subcontracts, etc.

Consultants -- List the total costs for all consultant services. Identify each consultant, the services he/she will perform, total number of days, rate of pay, travel costs, per diem, and total estimated costs.

Contract -- A contract is defined in 2 CFR 200.1 as a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward (see §200.1 Subaward).

Explain the need for each agreement and how their use will support the purpose and goals of the project. For each contract, describe the associated activities, scope of work or services to be provided and how the costs were estimated. If budgeting for a procurement action, document if a solicitation process has occurred or if the contract will be a sole source.

Example:

- ABC Company: Training $250/individual x 3 staff 5 days = $ 750
- Amy White to provide Technical Assistant Services

1FTE @ $25,000 + 20% Fringe Benefits of $5,000 =	$30,000
Travel at 2,000 miles @ .50 per mile =	$ 1,000
Training course	$ 175

Supplies @ $42.50 x 12 months =	$ 510
Telephone @ $40 x 12 months =	$ 480
	$32,165

- John Doe, Consultant $40 per hour x 220 hours for 12 month period = $ 8,800
- To Be Announced Outreach Coordinator Annual salary $30,000 x 10% level of effort/12 months = $ 3,000

CONSTRUCTION

Construction efforts are to be included under this category with the same level of detail as described under the "Other" category below.

OTHER

Costs not fitting under one of the other categories are to be included under this category. The level of detail is to be commensurate with other categories. Subawards should be included in this category. Per 2 CFR 200.1, a subaward is an award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal award received by the pass-through entity. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.

Example: Outreach Workshop

Rental of facilities ($750/2 days)	$1,500
Information technology services	$ 400
Training packets (approx. 125/$40 each)	$5,000
Total	$6,900

Note: Percentage for contingencies is not an allowable cost.

INDIRECT

2 CFR 200.1 defines *Indirect (F&A) costs* as those costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved. To facilitate equitable distribution of indirect expenses to the cost objectives served, it may be necessary to establish a number of pools of indirect (F&A) costs. Indirect (F&A) cost pools must be distributed to benefitted cost objectives on bases that will produce an equitable result in consideration of relative benefits derived.

This cost category guidance includes several components:

- Calculation (This is to be included as part of the budget narrative)
- Indirect Cost Rates
  - Negotiated Rate
  - 10% De Minimis Rate
- Limitation (i.e., indirect cost cap)

- Unrecovered Indirect Costs for Cost-sharing/Match
- Voluntarily Reduce/Waive

Calculation.

If indirect costs are requested as part of the proposed budget, you must provide details used in determining the indirect costs requested. For instance, provide the calculation specifying the amounts used in applying the base (the base specified in the applicable rate agreement) by the applicable rate (see indirect cost rate info below as well as Limitation section). The calculation can be displayed in different formats but must capture the components (i.e., amounts used in applying the base and the applicable rate).

EXAMPLE 1: For purposes of this example, the recipient uses the 10% de minimis indirect cost rate (10% of Modified Total Direct Cost (MTDC)). MTDC means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first $25,000 of each subaward. MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of $25,000.

	Budget	Indirect Eligible Amounts
Salaries and wages	$50,000	$50,000
Materials and supplies	3,000	3,000
Equipment	5,500	-0-
Subaward	30,000	25,000
		$78,000 x 10% = $7,800 Indirect Costs

EXAMPLE 2: For purposes of this example, the recipient has a Negotiated Indirect Cost Rate Agreement (NICRA) of 20% with a base of salaries and fringe benefits.

	Budget	Indirect Eligible Amounts
Salaries and wages	$50,000	$50,000
Fringe Benefits	10,000	10,000
Materials and supplies	3,000	-0-
Equipment	5,500	-0-
Subaward	30,000	-0-
		$60,000 x 20% = $12,000 Indirect Costs

Indirect costs may only be recovered if the non-Federal entity has one of the following indirect cost rates.

1. **Negotiated Rate:** If the organization has a *current* NICRA established with the cognizant Federal agency (the agency that provides the most funds to the organization), then

provide a copy of the NICRA; expired rates are not acceptable. If unable to obtain a current negotiated rate from the cognizant agency, you are permitted to opt to use the 10% de minimis cost rate (you may only be reimbursed for allowable direct cost). Violation of cost accounting principles is not permitted when re-budgeting or charging costs to awards. Rather, costs must be consistently charged as either indirect or direct costs. Along with a copy of the NICRA, include the rate and base as part of the budget narrative.

Example: Rate 24.87% of MTDC - 24.87% applied to the following items: $97,300 of Personnel, $23,352 of Fringe, $110,000 of other, and the first $25,000 of three (3) subawards = $76,015.65 indirect costs

2. **10% De Minimis Cost Rate:** In accordance with 2 CFR 200.414(f), any non-Federal entities, unless excepted, may elect to forgo calculation of an indirect cost rate and request a 10% de minimis indirect cost rate. The 10% de minimis rate is applied to modified total direct costs (MTDC). For this purpose, MTDC means total direct costs related to the award, such as direct labor, fringe benefits, materials and supplies, publications, consultant services and travel costs. MTDC excludes the following costs: equipment, capital expenditures, participant support costs and the portion of each subaward and subcontract in excess of $25,000. Violation of cost accounting principles is not permitted when charging costs to awards. Rather, costs must be consistently charged as either indirect or direct costs.

   If the 10% de minimis option is chosen, it must be used consistently for all Federal awards until such time you choose to negotiate for a rate, which you may apply to do at any time. If the organization previously opted for the de minimis rate, a copy of the rate agreement must be provided. If the organization is currently electing the de minimis rate, use an indirect cost rate of no more than 10% of MTDC when preparing the budget. If selected for award, a de minimis rate agreement will be executed along with the award, as appropriate.

   Example: Rate 10% of MTDC – 10% applied to the following items: $45,000 of Personnel, $10,800 of Fringe, and $59,000 of Other = $11,480 indirect costs

Limitation: Some programs may not allow the recovery of indirect costs. In such instances, the limitation flows down to subcontractors. Refer to the applicable notice of funding opportunity to determine if indirect costs are unallowable.
USDA appropriation acts limit indirect costs to 10 percent for cooperative and contribution agreements with nonprofit entities; for purposes of this limitation "nonprofit entities" includes institutions of higher education. For agreements subject to this limitation first apply the 10 percent indirect cost rate to the agreement's total direct costs; this is shown on line 6.i of the SF424A. Then calculate indirect costs using the rate and the direct cost application base specified in the recipient's NICRA. Use whichever rate results in the lower amount.

If the organization has a NICRA, both the NICRA calculation and the 10% TDC must be completed in order to determine the lesser (i.e., maximum allowed indirect costs) for the applicable project.

Calculation instructions: First, multiply the NICRA rate by the base stated in the NICRA to arrive at Amount A. Next, multiply the statutory limit of 10% by TDC to arrive at Amount B. The lower of Amount A and B is the maximum amount of allowable indirect cost, therefore include this amount on the budget.

Unrecovered Indirect Costs for Cost-sharing/Match: 2 CFR 200.306(c) provides, "Unrecovered indirect costs, including indirect costs on cost sharing or matching may be included as part of cost sharing or matching only with the prior approval of the Federal awarding agency. Unrecovered indirect cost means the difference between the amount charged to the Federal award and the amount which could have been charged to the Federal award under the non-Federal entity's approved negotiated indirect cost rate."

Voluntarily Reduce/Waive: A recipient may voluntarily reduce or waive recovery of indirect costs at its sole discretion and must not be encouraged or coerced in any way to do so by the agency. If organizations waive indirect cost recovery and request only direct costs, the organization is required to include in the award budget only those types of costs consistently treated as direct costs by the organization.