



2025-26 Serve Alaska AmeriCorps Program RFP Budget Instructions

2025-26 AmeriCorps Formula Grant Application Budget Instructions

This document includes detailed budget instructions for cost reimbursement and fixed amount grants, and a budget checklist.

Budget Instructions

A. Match Requirements

Program requirements, including requirements on match, are in the AmeriCorps Regulations and summarized below.

| Grant Type | Match Requirement |
|---|---|
| Cost Reimbursement including States and Territories without Commissions, Native Nations | Minimum grantee share is 24% of program costs for the first three years. Overall grantee share of total program costs increases gradually beginning in Year 4 to 30% by the tenth year of funding and any year thereafter. |
| Stipended Fixed Amount Grants | There are no specific match requirements for full-cost fixed amount grants. Grantees pay all program costs over the maximum cost in the RFP provided by Serve Alaska. |

Match Requirements in the AmeriCorps Regulations

- Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimums in years thereafter, are maintained. See <u>45 CFR §§ 2521.35–2521.90</u> for the specific regulations.
- If you are applying for the first time, you must match with cash or in-kind contributions at least 24% of the project's <u>total</u> Operating Costs (Section I) plus Member Costs (Section II) plus Administrative Costs (Section III).
- The acceptable sources of matching funds are federal, state, local, and/or private sector funds in accordance with applicable AmeriCorps requirements.
- In the "Source of Funds" field that appears at the end of Budget Section III, enter a brief description of the match. Identify each match source separately. Identify if the match is secured or proposed. Include dollar amount, the match classification (cash or in-kind), and the source type (Private, State/Local, or Federal) for your **entire match**. The total amount in the Source of Funds field should match the total amount in the budget narrative exactly. Define all acronyms the first time they are used. See the RFP for instructions for applying for the Alternative Match Schedule and/or a match waiver.

Note: AmeriCorps legislation permits the use of non-AmeriCorps federal funds as match for the grantee share of the budget. Please discuss your intention of using federal funds to match an AmeriCorps grant with the other agency prior to submitting your application. Section 121(e)(5) of the National Community Service Act requires that grantees who use other federal funds as match for an AmeriCorps grant report the amount and source of these funds to AmeriCorps. If you use other federal funds as match, you must ensure you can meet the requirements and

purpose of both grants. Grantees who use federal funds as match will be required to report the sources and amounts on the form provided by Serve Alaska.

B. Preparing Your Budget

Your proposed budget should be sufficient to allow you to perform the tasks described in your narrative. Reviewers will consider the information you provide in this section in their assessment of the Cost Effectiveness and Budget Adequacy selection criterion.

Follow the detailed budget instructions to prepare your budget. We recommend that you prepare your budget in the same order as indicated in the Budget Worksheets.

As you enter your detailed budget information, eGrants will automatically populate a budget summary and budget narrative report. Prior to submission be sure to review the budget checklist below to ensure your budget is compliant. In addition, eGrants will perform a limited compliance check to validate the budget. If eGrants finds any compliance issues you will receive a warning and/or error message. You must resolve all errors before you can submit your budget.

As you prepare your budget:

- All the amounts you request must be defined for a particular purpose. Do not include miscellaneous, contingency, or other undefined budget amounts.
- Itemize each cost and present the basis for all calculations in the form of an equation.
- Do not include unallowable expenses, e.g., entertainment costs (which include food and beverage costs) unless they are justified as an essential component of an activity.
- Do not include fractional amounts (cents).
- Please add the cost of the NSOPW, state check, and/or FBI check for criminal history checks for each covered position in the budget. A staff member is covered if any of their time is paid from either AmeriCorps federal funds or match. If funds are not budgeted, you must note in the budget an explanation for how you will cover the costs.

Budget Tips

- General: While there are numerous budget categories available, you are not required to use all available categories. It is, however, considered wise to put a small amount of funds in each budget category to ensure that any future budget modifications are possible (generally it is much more difficult and time consuming -- requiring AmeriCorps the Agency approval -- to obtain a budget modification that moves funds into a budget category that previously had \$0 budgeted).
- **Member Travel:** If the grantee opts to provide bus passes or other local travel options for members, it must be offered to all members to ensure fairness and consistent benefits.
- **Equipment:** It is rare for a grantee to budget funds in the Equipment budget category because grantees are generally required to demonstrate the depreciation of the items in this budget category in expenditure reports. This can be a cumbersome budget exercise and thus many grantees opt not to budget in this category.
- **Staff Training:** Allowable expenses may include the space costs, A/V equipment rental, consultant time, and supplies (such as training materials).
- **Member Training:** Allowable expenses may include the space costs, A/V equipment rental, consultant time, and supplies (such as training materials).

Programs must comply with all applicable federal laws, regulations, and the requirements of the Uniform Guidance. Please refer to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200) for allowable, allocable, and reasonable cost information, as well as audit requirements, including the need to provide audits to the Clearinghouse if expending over \$750,000 in federal funds. The Uniform Guidance is online at 2 CFR Part 200 -- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

DETAILED BUDGET INSTRUCTIONS FOR COST REIMBURSEMENT GRANTS

Section I. Program Operating Costs

Complete Section I, Program Operating Costs, of the Budget Worksheet by entering the "Total Amount column in the budget," "CNCS Share column in the budget," and "Grantee Share column in the budget" for Parts A–I, for year one of the grant, as follows below. (Note: CNCS = AmeriCorps)

A. Personnel Expenses

Under "Position/Title Description," list each staff position separately and provide salary and percentage of effort as percentage of FTE devoted to this award. Each staff person's role listed in the budget must be described in the application narrative and each staff person mentioned in the narrative must be listed in the budget as either CNCS or Grantee share. Because the purpose of this grant is to enable and stimulate volunteer community service, do not include the value of direct community service performed by volunteers. However, you may include the value of volunteer services contributed to the organization for organizational functions such as accounting, audit work, or training of staff and AmeriCorps members.

B. Personnel Fringe Benefits

Under "Purpose/Description," identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, State Unemployment Tax Act (SUTA), Health and Life Insurance, Individual Retirement Account (IRA), and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If the total fringe benefit amount is over 30%, please list covered items separately and justify the high cost. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates, but are absorbed into the personnel expenses (salary) budget line item.

C. 1. Staff Travel*

Describe the purpose for which program staff will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information. Reimbursement should not exceed the federal mileage rate unless a result of applicant policy and justified in the budget narrative. Only domestic travel is allowable.

State Commission subrecipients should also include travel funds in this section for staff and site staff to attend other technical assistance meetings as required.

Please itemize all costs.

For Example: Per diem - \$79/day x 4 days (@ 75% on first and last days); lodging - \$258 x 3 nights; round trip airfare - \$303.50; local transportation - \$50 (estimated)] x 2 staff.

*Serve Alaska will pay for one staff person, with a small travel grant, to attend an annual National Service Training.

C. 2. Member Travel

Describe the purpose for which members will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other related expenses for members to travel outside their service location or between sites. Costs associated with local travel, such as bus passes to local sites, mileage reimbursement for use of car for work purposes, etc., should be included in this budget category. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information.

D. Equipment

Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of **\$10,000 or more <u>per unit</u>** (including accessories, attachments, and modifications). You should enter any items that do not meet this definition in E. Supplies below. Purchases of equipment are limited to 10% of the total CNCS funds requested. If applicable, show the unit cost and number of units you are requesting. Provide a brief justification for the purchase of the equipment under Item/Purpose.

E. Supplies

AmeriCorps members must wear an AmeriCorps logo daily – preferably clothing with the AmeriCorps logo. The item with the AmeriCorps logo is a required budget expense. Please include the cost of the item with the AmeriCorps logo in your budget or explain how your program will be providing the item to AmeriCorps members without using grant funds. Grantees may add the AmeriCorps logo to their own local program uniform items using federal funds. Please note your program will be using the AmeriCorps logo in the budget description.

Include the amount of funds to purchase consumable supplies and materials, including member service gear and equipment that does not fit the definition above. You must individually list any single item costing \$1,000 or more. Except for safety equipment, grantees may only charge the cost of member service gear to the federal share if it includes the AmeriCorps logo. All safety gear may be charged to the federal share, regardless of whether it includes the AmeriCorps logo. All other service gear must be purchased with non-CNCS funds.

F. Contractual and Consultant Services

Include costs for consultants related to the project's operations, except training or evaluation consultants, who will be listed in Sections G. and H., below. Itemize each contract or consultant and provide a brief justification of the need for each. The cost calculation should provide a basis for determining the cost, such as a daily or hourly rate. Note that there is no maximum daily rate.

G. 1. Staff Training

Include the costs associated with training staff on project requirements and training to enhance the skills staff need for effective project implementation, e.g., project or financial management and team building. If using a consultant(s) for training, indicate the estimated daily rate. There is not a maximum daily rate. Travel costs should be included in the travel section.

G. 2. Member Training

Include the costs associated with member training to support them in carrying out their service activities. You may also use this section to request funds to support training in Life after AmeriCorps. If using a consultant(s) for training, indicate the estimated daily rate. There is not a maximum daily rate. Travel costs should be included in the travel section.

H. Evaluation

Formula funded subrecipients are not required to do evaluation studies or plans.

I. Other Program Operating Costs

Allowable costs in this budget category should include, when applicable:

- Criminal history background checks for all members and for all employees or other individuals who receive a salary, education award, living allowance, or stipend or similar payment from the grant (federal or non-federal share). Please include the cost of the NSOPW, state check, and/or FBI check for criminal history checks for all covered positions. If funds are not budgeted, an explanation for how the costs will be covered must be noted in the budget.
- Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. If space is budgeted and it is shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
- Utilities, telephone, internet, postage, copying, and similar expenses that are specifically used for AmeriCorps members and AmeriCorps project staff, and are not part of the organization's indirect cost allocation pool. If such expenses are budgeted and shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
- Recognition costs for members. List each item and provide a justification in the budget narrative. Gifts and/or food in an entertainment/event setting are not allowable costs.
- Retention incentives/performance awards are allowable to the extent they are 1) reasonable, necessary, and allowable for program outcomes; 2) tied to the program narrative; 3) fair; 4) consistently applied; and 5) part of the organization's written policies and procedures.

Section II. Member Costs

Member Costs are identified as "Living Allowance" and "Member Support Costs."

A. Living Allowance

The narrative should clearly identify the number of members you are supporting by category (i.e., full-time, three-quarter-time, half-time, reduced-half-time, quarter-time, minimum-time, and abbreviated-time) and the amount of living allowance they will receive, allocating appropriate portions between the CNCS Share column in the budget and grantee share column in the budget (match). Please do not select the 2-Year Half Time (1st Year) and 2-Year Half Time (2nd Year) slot types.

The minimum and maximum living allowance amounts are provided in the RFP and the table below.

In eGrants, enter the total number of members you are requesting in each category. Enter the average amount of the living allowance for each type of member. In addition, enter the

number of members for whom you are not requesting funds for a living allowance but for whom you are requesting education awards.

| Service Term (MSY Value) | Minimum # of Hours | Minimum Living Allowance | Maximum Total Living Allowance |
|---------------------------------|-----------------------|-----------------------------|-----------------------------------|
| Full-time (1.0 MSY) | 1,700 | \$20,400 | \$40,800 |
| Three Quarter-time (0.7000 MSY) | 1,200 | n/a | \$28,560 |
| Half-time (0.5000 MSY) | 900 | n/a | \$20,400 |
| Reduced Half-time (0.3809524) | 675 | n/a | \$15,504 |
| Quarter-time (0.26455027) | 450 | n/a | \$10,608 |
| Minimum-time (0.21164022) | 300 | n/a | \$8,568 |
| Abbreviated-time (0.07054674) | 100 | n/a | \$2,448 |

B. Member Support Costs

Consistent with the laws of the State of Alaska, you must provide members with the benefits described below.

- FICA: Unless exempted by the IRS, all programs must pay FICA for any member receiving a living allowance, even when AmeriCorps does not supply the living allowance. If exempted, please note in the narrative. In the first column next to FICA, indicate the number of members who will receive FICA. Calculate the FICA at 7.65% of the total amount of the living allowance.
- Health Care: You must offer or make available health care benefits to full-time members in accordance with AmeriCorps requirements. Except as stated below, you may not pay health care benefits to less-than-full-time members with AmeriCorps funds. You may choose to provide health care benefits to less-than-full-time members from other sources (e.g., non-AmeriCorps sources) but you cannot include the cost in the budget. Less-than-full-time members who are serving in a full-time capacity for a sustained period of time (such as a full-time summer project) are eligible for health care benefits. If you budget health insurance for less-than-full-time members serving in a full-time capacity, indicate this in the budget narrative, indicate the number of members who will receive health care benefits. AmeriCorps will not pay for dependent coverage. If health care is not budgeted for all full-time members, please confirm all full-time members will have access to coverage.
- Worker's Compensation: The State of Alaska requires worker's compensation for AmeriCorps members. You must check with the State of Alaska Department of Labor and Workforce Development to determine the level/amount.

Section III. Administrative/Indirect Costs

Definitions

Administrative costs are general or centralized expenses of the overall administration of an organization that receives AmeriCorps funds and do not include particular project costs. These costs may include administrative staff positions. For organizations that have an established indirect cost rate for federal awards, administrative costs mean those costs that are included in the organization's indirect cost rate agreement. Such costs are generally identified with the

organization's overall operation and are further described in Office of Management and Budget Uniform Guidance.

Administrative Costs Include

- Costs for financial, accounting, auditing, contracting or general legal services, except in unusual cases whether they are specifically approved in writing by AmeriCorps the Agency as project costs.
- Costs for internal evaluation, including overall organization's management improvement costs (except for independent and internal evaluations of the project evaluations that are specifically related to creative methods of quality improvement).
- Costs for general liability insurance that protects the organization(s) responsible for operating a project, other than insurance costs solely attributable to the project.
- Costs of space, base utilities, and communication (telephone, fax, and Internet) that support administrative personnel.
- Administrative costs may also include that portion of salaries and benefits of the project's director and other administrative staff not attributable to the time spent in support of a specific project. The principles that pertain to the allocation and documentation of personnel costs are stated in the OMB circulars that are incorporated in AmeriCorps the Agency's regulations [45 CFR 2541.220(b)].
- Administrative costs **do not** include allowable expenses directly related to a project (including their operations and objectives).

Options for Calculating Administrative/Indirect Costs (choose either A, B, OR C)

Applicants choose one of three methods to calculate allowable administrative costs – a CNCSfixed percentage rate method, a federally approved indirect cost rate method, or a *de minimis* method. Regardless of the option chosen, the CNCS share of administrative costs is limited to 5% of the total CNCS funds **actually expended** under this grant. Do not create additional lines in this category.

While these Budget Instructions present three options for budgeting indirect costs, there are only two places to enter those details in eGrants. Applicants who choose to use the Corporation Fixed Percentage will enter the line item details in Section III.A. Applicants who have a Federally Approved Indirect Cost Rate or are using a De Minimis Rate will enter the line item details in Section III.B. Additionally, applicants using a Federally Approved Indirect Cost Rate or a De Minimis Rate must enter the details of their indirect cost rate in eGrants, following these Instructions.

A. CNCS-Fixed Percentage Method

Five/Ten Percent Fixed Administrative Costs Option

The CNCS-fixed percentage rate method allows you to charge administrative costs up to a cap without a federally approved indirect cost rate and without documentation supporting the allocation. If you choose the CNCS-fixed percentage rate method (Section III.A. in eGrants), you may charge, for administrative costs, a fixed 5% of the total of the CNCS funds expended. In order to charge this fixed 5%, the grantee match for administrative costs may not exceed 10% of all direct cost expenditures.

1. To determine the maximum CNCS share for Section III, multiply the sum of the CNCS funding shares of Sections I and II by 0.0526. This is the maximum amount you can request as Corporation share. The factor 0.0526 is used to calculate the 5% maximum amount of federal funds that may

be budgeted for administrative (indirect) costs, rather than 0.0500, as a way to mathematically compensate for determining Section III costs when the total budget (Sections I + II + III) is not yet established. Enter this amount as the CNCS share for Section III A.

2. To determine the Grantee share for Section III, multiply the total (both CNCS and grantee share) of Sections I and II by 10% (0.10) and enter this amount as the grantee share for Section III A.

3. Enter the sum of the CNCS and grantee shares under Total Amount.

B. Federally Approved Indirect Cost Rate or De Minimis Rate of 15% of Modified Total Direct Costs

Option B.1. Federally Approved Indirect Cost Rate

If you have a federally approved indirect cost rate, this method must be used, and the rate will constitute documentation of your administrative costs, not to exceed the 5% maximum federal share payable by AmeriCorps. Specify the Cost Type for which your organization has current documentation on file, i.e., Provisional, Predetermined, Fixed, or Final indirect cost (IDC) rate. Supply your approved IDC rate (percentage) and the base upon which this rate is calculated (direct salaries, salaries and fringe benefits, etc.). AmeriCorps does not restrict the overall indirect cost rate claimed. It is at your discretion whether or not to claim your entire IDC rate to calculate administrative costs. If you choose to claim a lower rate, please include this rate in the Rate Claimed field.

1. Determine the base amount of direct costs to which you will apply the IDC rate, including both the CNCS and Grantee shares, as prescribed by your established rate agreement (i.e., based on salaries and benefits, total direct costs, or other). Then multiply the appropriate direct costs by the rate being claimed. This will determine the total amount of indirect costs allowable under the grant.

2. To determine the CNCS share, multiply the sum of the CNCS funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the CNCS share of indirect costs.

3. To determine the Grantee share, subtract the amount calculated in step 2 (the CNCS share) from the amount calculated in step 1 (the indirect cost total). This is the amount the applicant can claim as grantee share for administrative costs.

Option B.2. De Minimis Rate of 15% of Modified Total Direct Costs

Organizations who do not currently have a federally negotiated indirect cost rate (except for those non-Federal entities described in Appendix VII to Part 200—States and Local Government and Indian Tribe Indirect Cost Proposals, paragraph (d)(1)(B)), and who receive less than \$35 million in annual direct federal funding, may indefinitely use a *de minimus* rate of 15% of modified total direct costs (MTDC). Additional information regarding what is included in MTDC, and use of this option can be found in the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200) under Indirect (F&A) costs and Definitions. If you elect to use this option, you must use it consistently across all federal awards. Contact Serve Alaska if you need assistance.

Source of Funds

In the "Source of Funds" field that appears at the end of Budget Section III, enter a brief description of the match. Identify each match source separately. Identify if the match is secured or proposed. Include dollar amount, the match classification (cash or in-kind), and the source type (Private, State/Local, or Federal) for your **entire match**. The total amount in the Source of

Funds field should match the total amount in the budget narrative **exactly**. Define all acronyms the first time they are used.

Note: The value of the Segal Education Award that members earn for their service is not identified in the budget. Also, the childcare reimbursement provided to eligible members is not included in the budget.

COST REIMBURSEMENT BUDGET WORKSHEET (EGRANTS BUDGET SECTIONS)

Section I. Program Operating Costs

A. Personnel Expenses

| Position/Title/Description | Qty | Annual Salary | % Time | Total Amount | CNCS Share | Grantee Share |
|----------------------------|-----|------------------|--------|--------------|------------|---------------|
| | | | | | | |
| Totals | | | | | | |

B. Personnel Fringe Benefits

| Purpose/Description | Calculation | Total Amount | CNCS Share | Grantee Share |
|---------------------|-------------|--------------|------------|---------------|
| | | | | |
| | Totals | | | |

C.1. Staff Travel

| Purpose | Calculation | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|--------------|------------|---------------|
| | | | | |
| | Totals | | | |

C. 2. Member Travel

| Purpose | Calculation | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|--------------|------------|---------------|
| | | | | |
| | | | | |

E. Supplies

| Purpose | Calculation | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|--------------|------------|---------------|
| | | | | |
| | Totals | | | |

F. Contractual and Consultant Services

| Purpose | Calculation | Daily Rate | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|------------|--------------|------------|---------------|
|---------|-------------|------------|--------------|------------|---------------|

| Totals | | | | |
|--------|--|--|--|--|

G.1. Staff Training

| Purpose | Calculation | Daily Rate | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|------------|--------------|------------|---------------|
| | | | | | |
| Totals | | | | | |

G.2. Member Training

| Purpose | Calculation | Daily Rate | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|------------|--------------|------------|---------------|
| | | | | | |
| Totals | | | | | |

I. Other Program Operating Costs

| Purpose | Calculation | Daily Rate | Total Amount | CNCS Share | Grantee Share |
|---------------------|-------------|------------|--------------|------------|---------------|
| | | | | | |
| Totals | | | | | |
| | | | Total Amount | CNCS Share | Grantee Share |
| Subtotal Section I: | | | | | |

Section II. Member Costs

A. Living Allowance

| Item | # Mbrs | Allowance Rate | # w/o Allowance | Total Amount | CNCS Share | Grantee Share |
|---------------------------------|--------|-------------------|--------------------|--------------|------------|---------------|
| Full-time (1700 hrs.) | | | | | | |
| Three quarter-time (1200 hrs.) | | | | | | |
| Half-time (900 hrs.) | | | | | | |
| Reduced Half-time (675 hrs.) | | | | | | |
| Quarter-time (450 hrs.) | | | | | | |
| Minimum-time (300 hrs.) | | | | | | |
| Abbreviated-time (100 hrs.) | | | | | | |
| | | | Totals | | | |

B. Member Support Costs

| Purpose | Calculation | Daily Rate | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|------------|--------------|------------|---------------|
| | | | | | |
| Totals | | | | | |

| Subtotal Section II: | Total Amount | CNCS Share | Grantee Share |
|---------------------------|--------------|------------|---------------|
| Subtotal Section II. | | | |
| Subtotal Sections I + II: | | | |

Section III. Administrative/Indirect Costs

A. Corporation Fixed Percentage

| Purpose | Calculation | Total Amount | CNCS Share | Grantee Share |
|---------|-------------|--------------|------------|---------------|
| | | | | |
| Totals | | | | |

B. Federally Approved Indirect Cost Rate or De Minimis Rate of 15% of Modified Total Direct Costs

| Cost Type | Cost Basis | Calculation | Rate | Rate Claimed | Total Amount | CNCS Share | Grantee Share |
|-----------|------------|-------------|------|--------------|--------------|------------|---------------|
| | | | | | | | |

| Total Sections I + II + III: | Total Amount | CNCS Share | Grantee Share |
|------------------------------|--------------|------------|---------------|
| | | | |

DETAILED BUDGET INSTRUCTIONS FOR FIXED AMOUNT GRANTS (EGRANTS BUDGET SECTION)

These instructions apply only to applicants for Fixed Amount grants, including education award programs (EAPs).

EAP and Fixed Amount grant applicants may only request a fixed amount of funding per MSY. Therefore, Fixed Amount applicants are not required to complete a detailed budget or complete the grantee share column. However, you must complete the source of match chart to identify the sources of the additional revenue you need to operate the program. If you are applying for a full-cost fixed amount grant, you must pay at least the minimum living allowance listed in the chart *above* for each type of position you are proposing.

Budget Section II. AmeriCorps Member Positions

Member Positions

Identify the number of members you are requesting by category (i.e., full-time, three quartertime, half-time, reduced half-time, quarter-time, minimum-time, and abbreviated-time) and list under the column labeled **#Mbrs w/o Allow** (without AmeriCorps-funded living allowance.) In the **Allowance Rate** field, enter the average amount of the living allowance for each type of member. Enter zero in the column labeled **#Mbrs w/ Allow**. <u>Leave all other columns blank</u>. See example below (applies to a Full-Cost Fixed Amount grant):

| Member Positions | | | | | | |
|------------------------------------|---|-------------------|---|-----------------|-----|-----|
| Item | | Allowance Rate | | Total Amount | | |
| Full Time (1700 hrs) | 0 | \$16,502 | 5 | \$0 | \$0 | \$0 |
| Three Quarter Time (1200 hours) | 0 | \$14,000 | 7 | \$0 | \$0 | \$0 |

The total number of member service years (MSY) will **automatically calculate** at the bottom of the Member Positions chart. The MSY are calculated as follows:

| Member Positions | Calculation | MSY |
|---------------------------------|-------------------------|-----|
| Full-time (1700 hours) | (members x 1.000) | = |
| Three quarter-time (1200 hours) | (members x 0.7000000) | = |
| Half-time (900 hours) | (members x 0.500) | = |
| Reduced half-time (675 hours) | (members x 0.3809524) | = |
| Quarter-time (450 hours) | (members x 0.26455027) | = |
| Minimum-time (300 hours) | (members x 0.21164022) | = |
| Abbreviated-time (100 hours) | (members x 0.05627705) | = |
| | | |

Total MSY

Fixed Award

Display your calculation in the following format:

Total # of MSYs _____ x MSY amount _____ = Total Grant Request \$_____

BUDGET WORKSHEET FOR FIXED AMOUNT GRANTS (EGRANTS BUDGET SECTION)

Complete the fields for the # w/o Allowance and Allowance Rate only.

Member Positions

| Item | # Mbrs | Allowance Rate | # w/o Allow | Total Amount | CNCS Share | Grantee Share | | |
|-------------------------------|-----------|-------------------|----------------|-----------------|---------------|------------------|-----|----------|
| Full-time (1700 hrs) | | | | | | | | |
| Three quarter-time (1200 hrs) | | | | | | | | |
| Half-time (900 hrs) | | | | | | | | |
| Reduced Half-time (675 hrs) | | | | | | | | |
| Quarter-time (450 hrs) | | | | | | | | |
| Minimum-time (300 hrs) | | | | | | | | |
| Abbreviated-time (100 hrs) | | | | | | | | |
| Subtotal | | | | | | | MSY | Cost/MSY |

| Purpose | Calculation | Total Amount | CNCS Share | Grantee Share |
|-----------------------|-------------|--------------|------------|---------------|
| Program Grant Request | | | | |
| Subtotal | | | | |

Source of Funds

| Match | Description |
|-------|-------------|
| | |

BUDGET CHECKLIST

Below is a checklist to help you make certain that you submit an accurate budget narrative that meets AmeriCorps requirements. **Note:** This checklist does <u>not</u> apply to fixed amount grants.

| In Compliance? | Section I. Program Operating Costs |
|-------------------|---|
| Yes _ No _ | Costs charged under the Personnel line item directly relate to the operation of the AmeriCorps project? Examples include costs for staff who recruit, train, place, or supervise members as well as manage the project. |
| Yes _ No _ | Staff indirectly involved in the management or operation of the applicant organization are funded through the administrative cost section (Section III) of the budget? Examples of administrative costs include central management and support functions. |
| Yes _ No _ | Staff fundraising expenses are not charged to the grant? You may not charge AmeriCorps staff members' time and related expenses for fundraising to the federal or grantee share of the grant. Expenses incurred to raise funds must be paid out of the funds raised. Development officers and fundraising staff are not allowable expenses. |
| Yes _ No _ | The types of fringe benefits to be covered and the costs of benefit(s) for each staff position are described? Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If the fringe amount is over 30%, the benefits are listed separately? |
| Yes _ No _ | Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item? |
| Yes No | The purpose for all staff and member travel is clearly identified? |
| Yes _ No _ | You have budgeted funds for Program staff travel, as required, to attend other technical assistance meetings under Staff Travel? |
| Yes _ No _ | Funds for the purchase of equipment (does not include general use office equipment) are limited to 10% of the total grant amount? |
| Yes _ No _ | All single equipment items over \$10,000 per unit are specifically listed? |
| Yes No | Justification/explanation of equipment items is included in the budget narrative? |
| Yes _ No _ | All single supply items over \$1,000 per unit are specifically listed and explained in the budget narrative? |
| Yes _ No _ | Cost of items with the AmeriCorps logo that will be worn daily is included for all AmeriCorps members? Or if not, there is an explanation of how the program will be providing the AmeriCorps logo item to AmeriCorps members using funds other than AmeriCorps grant funds? |
| Yes No | You only charged to the federal share of the budget member service gear that includes the AmeriCorps logo and noted that the gear will have the AmeriCorps logo, with the exception of safety equipment? |
| Yes _ No _ | Does the budget reflect adequate budgeted costs for project evaluation? |
| Yes _ No _ | Have you budgeted the cost of the NSOPW, FBI, and state check in the CNCS share for criminal history checks of each member and grant-funded staff that are in |

| In Compliance? | Section I. Program Operating Costs |
|-------------------|---|
| | covered positions per 45 CFR 2522.205? If not, have you provided an explanation of how the costs will be covered? |
| Yes _ No _ | Are all items in the budget narrative itemized and the purpose of the funds justified? |

| In Compliance? | Section II. Member Costs |
|-------------------|---|
| Yes No | Are the living allowance amounts correct? Full-time AmeriCorps members must receive at least the minimum living allowance. |
| Yes No | Living allowances are not paid on an hourly basis? They may be calculated using service hours and program length to derive a weekly or biweekly distribution amount. Divide the distribution in equal increments that are not based on the specified number of hours served. |
| Yes No | Is FICA calculated correctly? You must pay FICA for any member receiving a living allowance. Unless exempted by the IRS, calculate FICA at 7.65% of the total amount of the living allowance. If exempted from paying FICA, is the exemption noted in the budget narrative? |
| Yes _ No _ | Is the Worker's Compensation calculation correct? |
| Yes No | Health care is provided for full-time AmeriCorps members only (unless part-time serving in a full-time capacity)? If your project chooses to provide health care to other part-time members, you may not use federal funds to help pay for any portion of the cost. Projects must provide health care coverage to all full-time members who do not have adequate health care coverage at the time of enrollment or who lose coverage due to participation in the project. In addition, projects must provide coverage if a full-time member loses coverage during the term of service through no deliberate act of his/her own. |

| In Compliance? | Section III. Administrative/Indirect Costs |
|-------------------|---|
| Yes _ No _ | Applicant does not have a current federally approved indirect cost rate and has chosen to use the CNCS-fixed percentage method and the maximum federal share of administrative costs does not exceed 5% of the total federal funds budgeted? To determine the federal administrative share, multiply all other budgeted federal funds by .0526. |
| Yes _ No _ | Applicant has chosen to use CNCS fixed percentage method and the maximum grantee share is at 10% or less of total budgeted funds? |
| Yes _ No _ | Applicant has a current approved indirect cost rate – the maximum grantee share does not exceed the federally approved rate, less the 5% CNCS share? |
| Yes _ No _ | Applicant has a current approved indirect cost rate – the type of rate, the IDC rate percentage, the rate claimed, and the base to which the rate is applied has been specified? |
| Yes No | Applicant does not have a current federally approved indirect cost rate and is choosing to use a de minimis rate of 15% of modified total direct costs |

| In Compliance? Source of Funds (Match) |
|---|
|---|

| Yes No | Is the overall match being met at the required level, based on the year of funding? |
|------------|--|
| Yes _ No _ | For all matching funds, proposed vs secured, the source(s) [private, state, local, and/or federal], the type of contribution (cash or in-kind), and the amount of match, are clearly identified in the narrative and in the Source of Funds field in eGrants? |
| Yes _ No _ | The amount of match is for the entire amount in the budget narrative? (The total amount of match equals the amount in the budget exactly?) |