

# **SAMPLE BUDGET FOR FORMULA NOFO COMPETITION**

Based on \$27,000 Maximum Cost Per MSY

Funding Period: **September 1, 2024 - August 31, 2025**

Applicant: **ABC COMMUNITY ACTION**

Project Name: **AMERICORPS COMMUNITY IMPACT**

Categories and Line Items	AmeriCorps Share	Grantee Share	Total Cost of Program	Budget Narrative
<b>Section I. Program Operating Costs</b>				
<b>A. Personnel Expenses (list each employee)</b>				
1. Program Director	\$ 10,000.00	\$ 40,000.00	\$ 50,000.00	1 FTE @ \$50,000 annually
2. Program Assistant	\$ 8,000.00	\$ 30,000.00	\$ 38,000.00	1 FTE @ \$38,000 annually
3	\$ -	\$ -	\$ -	
4	\$ -	\$ -	\$ -	
<b>Line A. Subtotal Salaries and Wages</b>	<b>\$ 18,000.00</b>	<b>\$ 70,000.00</b>	<b>\$ 88,000.00</b>	
<b>B. Personnel Fringe Benefits (enter fringe benefits' calculations in budget narrative)</b>				
1. FICA	\$ 1,732.00	\$ 5,000.00	\$ 6,732.00	7.65% of total salaries (round up if .50 and above, round down if .49 and lower)
2. Health Insurance	\$ 2,000.00	\$ 5,920.00	\$ 7,920.00	\$330/month x 12 months x 2 FTE
3. Other (please itemize/specify each cost in narrative)	\$ 2,640.00	\$ -	\$ 2,640.00	3% of salaries, includes WC; Dental; Life Insurance
4	\$ -	\$ -	\$ -	
<b>Line B. Subtotal Personnel Fringe Benefits</b>	<b>\$ 6,372.00</b>	<b>\$ 10,920.00</b>	<b>\$ 17,292.00</b>	
1. Staff Travel	\$ 500.00	\$ 34.00	\$ 534.00	Staff Local Travel: \$0.445 x 50 miles per month x 12 months x 2 staff; travel to Commission meetings/trainings & local travel between sites
2. Travel to CNCS Sponsored Meetings	\$ 1,000.00	\$ 952.00	\$ 1,952.00	Lodging (\$160 night x 2 nights x 2 staff x 2 trainings); Per Diem (\$36 per day x 3 days x 2 staff x 2 trainings); Rental (\$30 per day x 4 days x 2 trainings)
3. Member Travel	\$ 510.00	\$ 158.00	\$ 668.00	100 miles/member x 15 members x \$0.445 per mile; member travel is only for travel between service sites or for Commission trainings, not commuting.
<b>Line C. Subtotal Travel</b>	<b>\$ 2,010.00</b>	<b>\$ 1,144.00</b>	<b>\$ 3,154.00</b>	
<b>D. Equipment</b>				
	\$ -	\$ -	\$ -	
<b>Line D. Subtotal Equipment</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	
<b>E. Supplies (itemize each category of supplies)</b>				
1. Office Supplies	\$ 2,040.00	\$ -	\$ 2,040.00	Consumable Office Supplies (pens, paper, toner, etc. ) at \$10 per month for 12 months for 15 members and 2 staff
2. Member Gear/Uniform	\$ 275.00	\$ 400.00	\$ 675.00	Member Service Gear/Uniform - 15 x \$45 each (# members x \$45 each)
3. Laptops for Program Manager and Program Assistant	\$ 1,600.00	\$ -	\$ 1,600.00	2 laptops @ \$800 ea.
4. Printers	\$ 1,200.00	\$ -	\$ 1,200.00	2 printers @ \$600 ea.
5	\$ -	\$ -	\$ -	
<b>Line E. Subtotal Supplies</b>	<b>\$ 5,115.00</b>	<b>\$ 400.00</b>	<b>\$ 5,515.00</b>	
<b>F. Contractual and Consultant Services</b>				
	\$ -	\$ -	\$ -	
<b>Line F. Subtotal Contractual and Consultants</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	
<b>G. Training</b>				
1. Staff Training	\$ 420.00	\$ -	\$ 420.00	Starting Strong (1 staff overnight est. \$180 x 2 nights; dinner x 2 nights @ \$30) = \$360 + \$60 = \$420;
2. Member Training	\$ 900.00	\$ -	\$ 900.00	Lunch for 4 full days of orientation & content training (specify topics) to be held during first half of program year. 15 members x \$15.00 x 4
<b>Line G. Subtotal Training</b>	<b>\$ 1,320.00</b>	<b>\$ -</b>	<b>\$ 1,320.00</b>	
<b>H. Evaluation</b>				
	\$ -	\$ -	\$ -	Refer to CNCS Requirements
<b>Line H. Subtotal Evaluation</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	
<b>I. Other Program Operating Costs</b>				
1. Background Checks	\$ 561.00	\$ -	\$ 561.00	17 background checks @ \$33 each (15 members + 2 staff)(budget more for out of state checks).
2. Telephone (Office) & Internet	\$ -	\$ 900.00	\$ 900.00	\$75 per month for 12 months (indicate if this is only for the program based on an agencywide allocation plan)
3. Telephone (Cellular)	\$ 300.00	\$ 300.00	\$ 600.00	One cell phone at \$50 per month
4. Operational Space	\$ -	\$ 3,600.00	\$ 3,600.00	\$300 per month x 12 months; includes dedicated office space for staff and meeting/planning space for members based on allocation plan
5	\$ -	\$ -	\$ -	
6	\$ -	\$ -	\$ -	
7	\$ -	\$ -	\$ -	
8	\$ -	\$ -	\$ -	
<b>Line I. Subtotal Other Program Operating Costs</b>	<b>\$ 861.00</b>	<b>\$ 4,800.00</b>	<b>\$ 5,661.00</b>	
<b>Section I. Subtotal</b>	<b>\$ 33,678.00</b>	<b>\$ 87,264.00</b>	<b>\$ 120,942.00</b>	
<b>Section I. Percentage</b>	<b>27.85%</b>	<b>72.15%</b>		
<b>Section II. Member Costs</b>				

<b>A. Living Allowance</b>				
1. Full Time (1700 hrs)	\$ 100,000.00		\$ 100,000.00	5 Full-Time Members @ \$20,000 each
2. 1-Year Half Time (900 hrs)	\$ 105,880.00	\$ -	\$ 105,880.00	10 Half-time members @ \$10,588
3. Reduced Half Time (675 hrs)	\$ -	\$ -	\$ -	
4. Quarter Time (450 hrs)	\$ -	\$ -	\$ -	
5. Minimum Time (300 hrs)	\$ -	\$ -	\$ -	
<b>Line A. Subtotal Total Living Allowance</b>	<b>\$ 205,880.00</b>	<b>\$ -</b>	<b>\$ 205,880.00</b>	
<b>B. Member Support Costs</b>				
1. FICA for Members	\$ 15,750.00	\$ -	\$ 15,750.00	FICA at 7.65% of total living allowance cost
2. Worker's Compensation	\$ 1,200.00	\$ -	\$ 1,200.00	\$100 per month x 12 months
3. Health Care		\$ 12,000.00	\$ 12,000.00	\$200 x 5 FT members x 12 months (based on f/t members only)
<b>Line B. Subtotal for Member Support Costs</b>	<b>\$ 16,950.00</b>	<b>\$ 12,000.00</b>	<b>\$ 28,950.00</b>	
<b>Section II. Subtotal</b>	<b>\$ 222,830.00</b>	<b>\$ 12,000.00</b>	<b>\$ 234,830.00</b>	
<b>Section II. Percentages</b>	<b>94.89%</b>	<b>5.11%</b>		
<b>Section III. Administrative Costs</b>				
<b>A. AmeriCorps Fixed Percentage</b>				
1. AmeriCorps Fixed Amount (retained by agency)	\$13,492	\$ -	\$13,492	CNCS Share = (CNCS Section I + II) x .0526
2. Commission Fixed Amount*		\$ -	\$0	CNCS Share = (CNCS Section I + II) x .0526 x .10
<b>B. Federally Approved Indirect Cost Rate</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	
<b>Section III. Subtotal</b>	<b>\$ 13,492.32</b>	<b>\$ -</b>	<b>\$ 13,492.32</b>	
<b>Section III. Percentage</b>				
<b>Budget Totals</b>	<b>\$270,000</b>	<b>\$99,264</b>	<b>\$369,264</b>	
<b>Budget Total Percentages</b>	<b>73.12%</b>	<b>26.88%</b>		
<b>Required Match</b>	<b>24%</b>			<b>Grantee share is over the required 24% by 2.88%</b>
<b># of Years Receiving CNCS Funds</b>	<b>0.00</b>			
<b># of MSY (eGrants will populate once budget entered)</b>	<b>10.00</b>			
<b>Cost per MSY (eGrants will calculate once budget entered)</b>	<b>\$27,000</b>			<b>Please note the maximum cost per MSY does not exceed \$27,000</b>
<b>Source of Funds (top of budget section III in eGrants)</b>				
<i>(List Revenue Sources)</i>				
1. United Way			\$ 36,488.00	Assist with Personnel Salaries and Benefits
2. School Board of _____ County			\$ 22,431.00	In-kind for program operating
3. Victoria Foundation			\$ 12,000.00	Assist with member support costs and operating costs
4. Host organization discretionary funds			\$ 28,345.00	Assist with member support costs
<b>Total Anticipated Revenue (Must equal Grand Total of Grantee Share above)</b>			<b>\$ 99,264.00</b>	

You will need to list all revenue sources and classify each amount as either Cash Contributions, In-kind Contributions, or Other Funding.

Once all of the revenue sources and their related amounts have been entered, the Source of Funds Total and the Grantee Share Budget Totals should match.

You will also need to classify each revenue source as State, Local, Federal, or Other. Please note you may use other Federal funds with approval from that agency, but it can not be from another CNCS funded grant.

\* Section III.2. Commission Fixed Amount. Programs will allocate a portion of their administrative funds to the NJ Commission based on the following program size:

8 - 12 MSY's no Commission portion deduction

13-17 MSY's .05% with a calculation of Sect. I & Sect. II x 0.0526 x 0.10 for the Commission and for the agency Sect. I & Sect. II x 0.0526 x 0.90

18 or more MSY's 1% with a calculation of Sect. I & Sect. II x 0.0526 x 0.20 for the Commission and for the agency Sect. I & Sect. II x 0.0526 x 0.80