

# **2022-2023 Ohio AmeriCorps**

## **Application Budget Instructions**

### **Cost Reimbursement**

#### **Attachment B**

# The budget consists of:

- Budget Form
- Budget Narrative
- Source of Funds

## Cost Effectiveness & Budget Adequacy Based on the budget that's submitted

The budget is clear, reasonable, cost-effective, and in alignment with the program narrative.

- The requested funds do not exceed the cost per MSY (Member Service Year).
- See Instructions for FT members minimum living allowance amount and suggested amounts for less than FT members
- Submitted without errors.
- Compliant with budget instructions and NOFO information on preparing the budget.

## When completing the budget:

**Round** all figures to the nearest dollar. **Do Not Include Cents.**

### Cost Reimbursement Applicants

- Do not inflate the budget
- All costs in Sections I & II must be documented.

Tip: draft budget in Excel Spreadsheet then transfer to eGrants

## How Much Can You Request?

- Based on the number of Member Service Years (MSY) requested and Cost per member (CPM).
- All Ohio applicants – must request no less than 5 member service years (MSY).
- Total request cannot exceed maximum Cost per MSY (CPM)
  - Cost Reimbursement - \$28,800

## Cost Per Member Service Year (MSY)

The AmeriCorps cost per MSY is determined by dividing the AmeriCorps share of budgeted grant costs by the number of MSYs requested.

It does not include childcare or the value of the education award a member may earn.

The maximum amount an applicant may request from AmeriCorps per MSY is determined on an annual basis.

## How Much Can You Request?

Based on the number of MSYs and the cost per MSY (CPM). The CPM is a calculation AmeriCorps uses to determine the overall cost of your program based on slot types converted to MSYs. **Example** if an applicant requested 10 members for every slot type, it would look like the following example:

Slot Type	Number requested	Conversion factor		Proposed number of MSY	
FT (Full-time)	10	*	1.00000000	=	10.00000000
TQT (Three-quarter-time)	10	*	0.70000000	=	7.00000000
HT (1-year half-time)	10	*	0.50000000	=	5.00000000
RHT (Reduced half-time)	10	*	0.38095240	=	3.80952400
QT (Quarter-time)	10	*	0.26455027	=	2.64550270
MT (Minimum-time)	10	*	0.21164022	=	2.11640220
Sum no rounding:		30.57142890			
Total MSYs awarded if approved:		30.57			

## How Much Can You Request?

Using the **conversion** table above, calculate the total request using the following formula: Total MSYs \* Maximum Cost per MSY

Cost Reimbursement applicants

Total amount: 30.57 MSYs \* \$28,800 = \$880,416

\$880,416 grant share at 76%  
+ \$278,026 match share at 24%  
= \$1,158,442 Total Grant Amount

*(hint: divide grant share amount by .76 to get the total grant amount and determine the minimum match share)*



TIP: The amount requested and Cost per MSY are competitive factors during the application review and selection process. Meaning all else being equal, an applicant proposing a lower cost per MSY may have a competitive advantage.

## Summary of Statutory Budget Requirements: Grantee Match

### Overall Minimum Match Requirement

Grantees must meet an overall increasing match requirement, up to 50% of the **total project costs** by year ten, according to the following table:

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
24%	24%	24%	26%	30%	34%	38%	42%	46%	50%

- The grantee match requirements are based on the 12-month budget period, and are further detailed in [45 CFR 2521.60\(a\)](#)
- **Total Project Costs = CNCS Share + Match Share**

### **Can other Federal funds be used as match? YES**

AmeriCorps programs can use other Federal funding as sources for match. Discuss your intention of using other Federal funds to match an AmeriCorps grant with the other Federal agency prior to submitting your application, not after the grant has been approved. Document your conversations and, if possible, obtain and retain written permission from the other Federal agency whose Federal funds you intend to use as match with the CNCS grant. Your organization should also disclose your intent to use other Federal funds as match when submitting your budget application.

### **Can In-kind be used as match? YES**

Your match can consist of cash and in-kind BUT it cannot be solely in-kind.

## Budget Notes

- Budgets are submitted with one year of program costs.
- Provide calculations, individual costs and equations for ALL costs.
- For example: Two staff members will attend the annual National Service Regional Training.
  - 2 staff X \$750 airfare + \$50 ground transportation + (1 day) X \$400 lodging + \$35 per diem = \$2,470 for Regional Training

# Personnel

Under “Position/Title Description,” list each staff position separately and provide a brief (five or six words) position description, salary and percentage of effort as percentage of FTE devoted to this project.

ServeOhio expects at least .5 FTE staff person allocated to the grant to oversee and manage the program. If less than the expected FTE is included in the budget, a rationale to support this decision is needed in the Organizational Capability narrative section.

If any position is 100% on the grant (match and/or share), confirm the position does not conduct fundraising activities or writing grants which includes the AmeriCorps grant.

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

# Personnel Fringe

If a fringe benefit amount is over 30%, you must list covered items separately. 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.

# Equipment

- Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of \$5,000 or more per unit (including accessories, attachments, and modifications). Any items that do not meet this definition should be entered in E. Supplies.
- 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.

**All Cost Reimbursement application budgets  
must include the following meetings/trainings\***

- Staff Travel– Ohio Conference, Regional Service Conference and ServeOhio program meetings
- Member Travel – Ohio Conference and LeaderCorps
- Supplies – AmeriCorps member gear with logo
- Staff Training – Registration costs for travel events
- Member Training – Registration cost for travel events



## **All Cost Reimbursement applicants must budget these Other Operating costs:**

- OnCorps Reports (\$18 per slot, not MSY)
- National Service Criminal History Background Checks (BCI and FBI)
  - \$75-\$100 per member

## Member Support Costs

- Healthcare is required for all full-time slots
- FICA must be included
- Worker's Compensation is required
  
- Should NOT include Unemployment

## Requirement to Record Your Indirect Cost Rate in eGrants

- ALL applicants are required to record whether or not they are using an Indirect Cost Rate in eGrants, under My Account, Edit Organization Info, Add& View Indirect Cost Rate.

**Managing My Account**

Click on the links below to access common account functions.

- My Account** →
- Commission Input on National Applicants** →
- Commission Competitive Subapplication Ranking** →

**Edit My Organization Info...**

You can change the following information by clicking on the links below:

- Update Organization's Contact Information
- Update Organization's Attributes
- Add and View Indirect Cost Rate
- Edit User Role/Permissions
- View All
- Change My Primary User Role

# Requirement to Record Your Indirect Cost Rate in eGrants

(Cost Reimbursement applicants)

See the application instructions Attachment I for step-by-step guidance on how to enter the indirect cost rate information in your eGrants account, see:

NOTE: Recompeting and Continuing programs do not need to reenter this information, unless it has changed.

# Administrative/Indirect Costs

(Cost Reimbursement Applicants)

- **Section III. A. CNCS Fixed Percentage Method.** Applicants completing this section may charge 5% to the grant and 10% total administration, in lieu of any documentation.

OR

- **Section III. B. Federally Approved Indirect Cost Rate.** Applicants completing this section charge up to 5% to the CNCS share and use their federally approved Indirect Cost Rate and charge more than 10% to total administration. If so, they complete this section and submit a copy of their IDC rate plan.

OR

- **Section III.C. De Minimis Rate of 10% of Modified Total Direct Costs (MTDC).** Organizations who have never had a federally negotiated ICR and receive less than \$35 million in direct federal funding. For information on what is included in MTDC and use of this option see 2 CFR 200.414(f) and 200.68. If chosen, this option must be used consistently across all federal awards. (Note: up to 5% may be charged to the CNCS share.)

## **Administration**

**All applicants will be assessed 2% for OCSV's  
administration**

Administrative/Indirect Costs  
Commission Administration  
**Cost Reimbursement CNCS Share Only**

- Of the 5% allowable, **all budgets must include 2% for OCSV use**, leaving 3% for applicants to use, if they wish.
- ServeOhio, Ohio Commission on Service and Volunteerism, uses these funds for expenses related to grants administration.
- Include the 2% within the CNCS Share of Administrative Costs only on the Commission Fixed Amount line.

***TIP: use the formula in the Instructions to calculate admin***

Administrative/Indirect Costs  
Commission Administration  
**Cost Reimbursement CNCS Share Only**

- ServeOhio will retain a share of the 5% of federal funds available to programs for administrative costs. Within Section III of the budget, **two-fifths (40%) of the federal dollars budgeted for administrative costs is allocated to the commission's share and three-fifths (60%) of the federal dollars budgeted for administrative costs are allocated to the program's share. The allocation between commission and program shares would be calculated as follows:**
  - **$([\text{Section I}] + [\text{Section II}] \times 0.0526) \times (0.40) = \text{Commission Share}$**
  - **$([\text{Section I}] + [\text{Section II}] \times 0.0526) \times (0.60) = \text{Subgrantee Share}$**



- **2022 Budget Narrative Sample**  
**Cost Reimbursement Operational Grant**

Application Instructions:

Attachment C: Budget Worksheet

(also see Attachment B: Detailed Budget Instructions)

**ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE**  
**Section I. Program Operating Costs**

**A. Personnel Expenses**

<b>Position/Title/Description</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
Project Coordinator ( <b>Include a 5-6 word description of responsibilities</b> ) 1 person @ \$35,000 x 100% usage. <b>No fundraising activities</b>	35,000	17,765	17,235
A. Category Totals	35,000	17,765	17,235

ServeOhio recommends **at least a .5 FTE** for one designated project coordinator.

**B. Personnel Fringe Benefits**

<b>Purpose/Calculation - Total</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
Medical insurance, FICA, Workers Comp, Unemployment x <b>26%</b> of salary	9,100	0	9,100
B. Category Totals	9,100	0	9,100

ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE

**Section I. Program Operating Costs**

**C.1. Staff Travel**

Purpose/Calculation	Total	CNCS	Grantee
AmeriCorps TA meeting (1 staff) –hotel 2 night @ \$350 per night, per diem 1 day \$25, ground transportation \$50, airfare \$750	1,525		1,525
ServeOhio Conference – 1 staff (mileage-180 mi. @0.30/ mi.; per diem-\$25 x 1 day; hotel-1 night x \$106)	185	0	185
Regional Training Conference – 1 staff (mileage-410 mi. @ .30/ mi., per diem-1 staff x \$25/day x 2 days, hotel-1 night x \$107)	280	0	280
Project Director Meetings/Trainings – 3 x 180 mi. x .30 = \$162 + per diem: 3 x\$25 = \$75; (Include hotel detail, 1-2 nights, if needed)	237	0	237
<b>C.1. Category Totals</b>	<b>\$2,227</b>	<b>0</b>	<b>\$2,227</b>

**ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE**  
**Section I. Program Operating Costs**

**C.2. Member Travel**

<b>Purpose/Calculation</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
Justice Talking Leader Training 1 member - 180 miles @ .30/mi.	54	0	54
ServeOhio Conf. - 1 member; 180 mi.*.30/mi.; per diem – \$25/ day x 1 day	79	0	79
Member travel to service sites (130.5/mo*10 mo.*.30/mi.)	392	0	392
LeaderCorps Initiative-2 mbr @ \$250/member for statewide travel	500		500
<b>C.2. Category Totals</b>	<b>\$1,025</b>	<b>0</b>	<b>\$1,025</b>

ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE  
**Section I. Program Operating Costs**

**D. Equipment**

Item/Purpose/Quantity/Unit Cost	Total	CNCS	Grantee
D. Category Totals			

**ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE**

**Section I. Program Operating Costs**

**E. Supplies**

<b>Item/Calculation</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
Copy member handbooks – 50 copies x \$14	700	0	700
Member Service Gear <b>w/logo</b> – 20 members x \$35 (\$10-T-shirt, \$20-hoodie, \$5-lapel pin), plus \$30 shipping	730		730
Postage – \$50/month x 12 months	600	0	600
Print program brochures - \$1/copy x 1000	1,000	0	1,000
Program Supplies for Tutoring - \$25/mo. x 9 mo.	225	0	225
Office Supplies - \$20/mo. x 12 months	240	0	240
<b>E. Category Totals</b>	<b>\$3,495</b>	<b>0</b>	<b>\$3,495</b>

**F. Contractual and Consultant Services**

<b>Purpose/Calculation/Daily Rate</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
<b>F. Category Totals</b>			

**ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE**  
**Section I. Program Operating Costs**

**G.1. Staff Training**

<b>Purpose/Calculation/Daily Rate</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
ServeOhio Conference Registration – 1 staff @ \$150	150		150
Regional Training Event Registration – 1 staff @ \$300	300		300
G.1. Category Totals	\$450		\$450

**G.2. Member Training**

<b>Purpose/Calc./Daily Rate</b>	<b>Total</b>	<b>CNCS</b>	<b>Grantee</b>
CPR training-20 members x \$50 ea	1,000		1,000
ServeOhio Conference Registration – 1 member @ \$150	150		150
Monthly member meeting training material copies - 200 sheets*0.05/sheet x 9 meetings	90		90
G.2. Category Totals	\$1,240		\$1,240

**ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE**  
**Section I. Program Operating Costs**

**H. Evaluation**

Purpose/Calc./Daily Rate	Total	CNCS	Grantee
H. Category Totals			

**I. Other Program Operating Costs**

Purpose/Calculation/Daily Rate	Total	CNCS	Grantee
Background Checks (BCI & FBI): members-20 x \$50; staff -1 x \$50	1,050	1,050	0
Member Payroll Service: \$25/mo. x 12 months	300	0	300
OnCorps Reports: 20 slots x \$18/slot	360	0	360
Member Recognition \$30/member*20 members	600	0	600
I. Category Totals	\$2,310	1,050	\$1,260
<b>Subtotal Section I</b>	<b>\$54,847</b>	<b>\$18,815</b>	<b>\$36,032</b>



**ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE**

**Section II. A. Member Living Allowance**

Item/# Mbrs. w/wo Allowance	Total	CNCS	Grantee
Full Time (1700 hrs.): 20 members at a rate of \$16,502 each; Members w/o Allowance 0	\$330,040	\$275,285	\$54,755
Three Quarter Time (1200 hrs.)	0	0	0
1 YR HT (900 hrs.)	0	0	0
Reduced HT (675 hrs.)	0	0	0
QT Time (450 hrs.)	0	0	0
Min Time (300 hrs.)	0	0	0
II. A. Category Totals	\$330,040	\$275,285	\$54,755

**Section II. B. Member Support Costs**

Purpose/Calculation	Total	CNCS	Grantee
FICA: 7.65% x \$330,040	\$25,248	\$2145	\$23,103
Workers Comp: 0.0054 x \$330,040	\$1,782	\$151	\$1,631
Health Care: \$1,500/yr. x 20 FT members	\$30,000	\$0	\$30,000
Subtotal Section II.B.	\$57,030	\$2,296	\$54,734
<b>Subtotal Member Sections II.A + II.B</b>	\$387,070	\$279,877	\$109,489



ATTACHMENT F - BUDGET WORKSHEET - Cost Reimbursement – SAMPLE

**Total Project Costs - Sections I, II, III**

	Total Project	CNCS Share	Match Share
<b>TOTAL PROJECT COSTS</b>	\$460,924	\$314,403	\$146,521
<b>Overall Match %</b>	100%	68%	32%
<b>Cost Per Member</b>		\$314,403/20 = \$15,720	

Cost Per MSY is well below the allowed amount of \$28,800

Match is well above required minimum of 24%

Applicant could put more funds in the CNCS/Grant Share.

- Increase living allowance
- Increase member training cost
- Include more staff
- Include evaluation costs
- Leaves room for match replacement request

# Source of Funds

Match Description (State if Secured or Proposed)	Amount		Match Source (Federal State/Local, Private)

## **REQUIRED section at TOP of Section III**

In the Source of Funds Box, enter the Amount, Type (cash or in-kind), Source (Federal, State and/or Local, or Private), and the Intended Purpose of the Match

**Total match here should equal the amount in the Budget.**

In example, **\$146,521** is total match amount and should be total listed in Source of Funds

**If requesting match replacement dollars, must have cash match included here.**

# Fixed Amount Grants

Detailed Budget Instructions In Attachment D starting on page 30 of the Application Instructions

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 Notice for each type of position you are proposing.

# Fixed Amount Grants

## **Budget Section II. AmeriCorps Member Positions**

Identify the number of members you are requesting by category (i.e. full-time, three quarter-time, half-time, reduced half-time, quarter-time, minimum-time) and list under the column labeled #Mbrs w/o Allow (without AmeriCorpsfunded 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.

Leave all other columns blank.

## **Complete Source of Funds Section - top of Section III in eGrants**

# Fixed Amount Grants

Member Positions <span>?</span>						
Item	# Mbrs w/ Allow	Allowance Rate	# Mbrs w/o Allow	Total Amount	CNCS Share	Grantee Share
Full Time (1700 hrs)	0	\$16,502	5	\$0	\$0	\$0
Three Quarter Time (1200 hours)	0	\$14,000	7	\$0	\$0	\$0

## For More Information on Federal Requirements:

### **OMB Uniform Guidance**

Award recipients must comply with all applicable federal laws, regulations and the requirements of the “OmniCircular” (see the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards). Uniform Guidance, now consolidated in 2CFR Parts [200](#) and [2205](#) apply to Corporation for National and Community Service (CNCS) AmeriCorps grants awarded since FY2015 (see page 10 of Application Instructions).

**AmeriCorps Regulations** [45 CFR §§ 2520-2550](#)



**BREAK UNTIL 11AM**