

# **2021-2022 AmeriCorps Application Budget Instructions – Cost Reimbursement Grants**

## **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; you will be required to meet the budgeted match amount.
- 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 - \$16,300
  - programs operating in rural communities or recruit opportunity youth (up to 26 disengaged from school and/or work) as AmeriCorps members may request up to \$16,800 cost per MSY

## 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 \* CPM

Fixed Amount Stipend or Cost Reimbursement applicants

Total amount: 30.57 MSYs \* \$16,300 = \$498,291

\$498,291 grant share at 76%

+ \$157,355 match share at 24%

= \$655,646 Total Grant Amount (*hint: divide grant share amount by .76*)

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

See National Knowledge Network [http://www.nationalservice.gov/sites/default/files/olc/moodle/fm\\_key\\_concepts\\_of\\_cash\\_and\\_in\\_kind\\_match/view9468.html?id=3213&chapterid=2268](http://www.nationalservice.gov/sites/default/files/olc/moodle/fm_key_concepts_of_cash_and_in_kind_match/view9468.html?id=3213&chapterid=2268)

## 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. It cannot be solely in-kind.

# Equipment

- Equipment costs for Cost Reimbursement applicants may not exceed 10% of the total federal/CNCS share of costs. See Application Guidelines for definition of equipment vs. supplies.

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

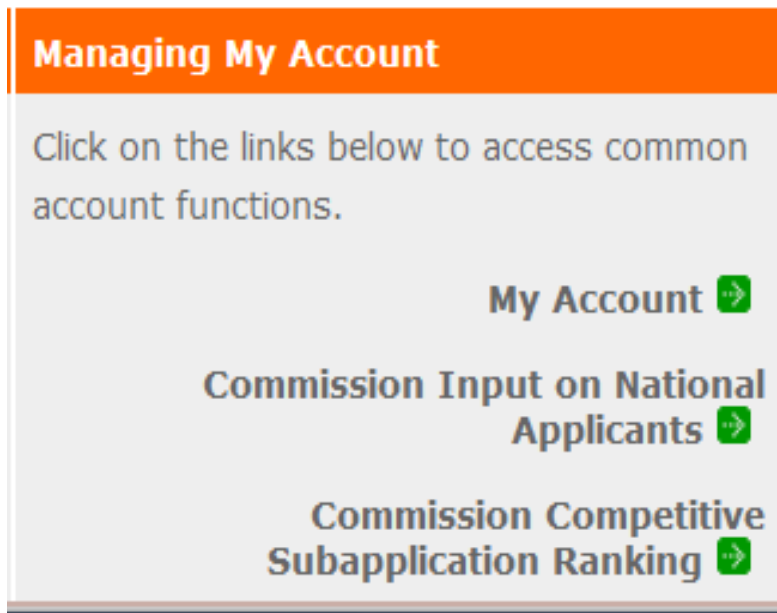
- Ohio Conference on Volunteering and Service - registration (\$150), mileage, non-conference per diem, lodging (for staff & at least 1 member)
- National Service Regional Training Event (2-3 days, staff only) – registration (\$300), transportation, per diem, hotel
- 3 Director's Meetings or Staff Development Trainings (mileage, per diem, overnight accommodations, where applicable)
- Justice Talking Leader Training (one day) – per diem, transportation, for one member (and staff not previously attending)
- CNCS required meeting (\$1,000), staff
- LeaderCorps Initiative \$500/member

## **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)

## 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)

- For step by step instructions on how to enter the indirect cost rate information in your eGrants account, see:  
[http://www.nationalservice.gov/sites/default/files/resource/eGrants Indirect Cost Rate Instructions Final.pdf](http://www.nationalservice.gov/sites/default/files/resource/eGrants%20Indirect%20Cost%20Rate%20Instructions%20Final.pdf)

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).** Non-Federal Applicants may complete this section if they 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 – Cost Reimbursement grants 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***

- **2021 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	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 26% 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
CNCS-affiliated TA meeting (1 staff) – registration \$300, hotel 1 night \$400, 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-1 mbr @ \$500	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 w/logo – 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 \$15,100 each; Members w/o Allowance 0	302,000	275,285	26,715
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	\$302,000	\$275,285	\$26,715

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

Purpose/Calculation	Total	CNCS	Grantee
FICA: 7.65% x \$302,000	23,103	0	23,103
Workers Comp: 0.0054 x \$302,000	1,631	0	1,631
Health Care: \$1,500/yr. x 20 FT members	\$30,000	0	\$30,000
Subtotal Section II.B.	\$54,734	\$0	\$54,734
<b>Subtotal Member Sections II.A + II.B</b>	\$356,734	\$275,285	\$81,449



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>	\$427,551	\$309,570	\$117,981
<b>Overall Match %</b>	100%	72%	28%
<b>Cost Per Member</b>		\$309,570/20 = \$15,479	

Source of Match

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**

Match Description (State if Secured or Proposed)	Amount	Match Classification (Cash or In-Kind)	Match Source (Federal State/Local, Private)

## 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 3PM**