

ATTACHMENT G

SF-424A

ETA's Regions 2 and 6 developed a helpful budget tool that consisted of an interactive SF-242A with tabs and instructions, "How to Develop a Budget." We have included with this planning TEGl the interactive form. The instructions are available upon request to grants.scsep2012@dol.gov. Grantees are encouraged to use this tool in developing their budget narratives. NOTE: The narrative tabs in this budget tool will hold a maximum of 251 characters without spaces. When the user exceeds 251 characters, the form will display "#####." Please use additional electronic pages if you exceed the 251 character maximum.

BUDGET INFORMATION - Non-Construction Programs

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. SCSEP	17.235	\$ -	\$ -	\$ -	\$ -	\$ -
2.		-	-	-	-	-
3.		-	-	-	-	-
4.		-	-	-	-	-
5. Totals		\$ -	\$ -	\$ -	\$ -	\$ -
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY					
	(1)	(2)	(3)	(4)	(5)	
a. Personnel	\$ -	\$ -	\$ -	\$ -	\$ -	
b. Fringe Benefits	-	-	-	-	-	
c. Travel	-	-	-	-	-	
d. Equipment	-	-	-	-	-	
e. Supplies	-	-	-	-	-	
f. Contractual	-	-	-	-	-	
g. Construction	-	-	-	-	-	
h. Other	-	-	-	-	-	
i. Total Direct Charges (sum of 6a - 6h)	\$ -	\$ -	\$ -	\$ -	\$ -	
j. Indirect Charges	-	-	-	-	-	
k TOTALS (sum of 6i and 6 j)	\$ -	\$ -	\$ -	\$ -	\$ -	
7. Program Income		\$ -	\$ -	\$ -	\$ -	\$ -

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Standard Form 424A (Rev.7-97)
Prescribed by OMB Circular A-102

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.		\$	\$	\$
9.				
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. NonFederal		-	-	-	-
15. TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$

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

(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16. SCSEP	\$ -	\$ -	\$ -	\$ -
17. Amount of Grant Funds Remaining after first year estimates are entered:	\$ -			
18. Amount of Grant Funds Remaining after future funding periods are estimated:	\$ -			
19.				
20. TOTAL (sum of lines 16 - 19)	\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges See Budget Narrative	22. Indirect Charges See Budget Narrative
23. Remarks See Budget Narrative	

Name of Grantee Organization
Amount Awarded

Funding Period		
	to	
# of Months:		

Object Class Category (a.): PERSONNEL				
A Position	B % of Time	C Monthly Salary/Wage	D # of Months	E Cost
1.		\$		\$
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
TOTAL PERSONNEL				\$

Budget Narrative - PERSONNEL <i>(Responses exceeding 250 characters should use separate sheet)</i>

Object Class Category (b.): FRINGE BENEFITS

A Position/s	B Benefit/s	C Rate	D Base Amount	E Cost
1.			\$	\$
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
14.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				
27.				
28.				
29.				
30.				
31.				
32.				
33.				
34.				
35.				
36.				
37.				
38.				
39.				
40.				
TOTAL FRINGE BENEFITS				\$

Budget Narrative - FRINGE BENEFITS (Responses exceeding 250 characters should use separate s



Object Class Category (c.): TRAVEL					
A Item	B # of Staff	C # of Units	D Unit Type	E Cost per Unit	F Cost
1.				\$	\$
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
14.					
16.					
17.					
18.					
19.					
20.					
TOTAL TRAVEL					\$

Budget Narrative: TRAVEL (Responses exceeding 250 characters should use separate sheet)

Object Class Category (d.): EQUIPMENT

(Includes equipment costing \$5,000 or more and a useful life of more than one year)

A Item	B # of Items	C Cost per Item	D Cost
1.		\$	\$
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
14.			
16.			
17.			
18.			
19.			
20.			
TOTAL EQUIPMENT			\$

Budget Narrative: EQUIPMENT (Responses exceeding 250 characters should use separate sheet)

Object Class Category (e.): SUPPLIES

(Includes equipment costing less than \$5,000)

A Item	B # of Units	C Unit Type	D Cost per Unit	E Cost
1.			\$	\$
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
14.				
16.				
17.				
18.				
19.				
20.				
TOTAL SUPPLIES				\$

Budget Narrative: SUPPLIES (Responses exceeding 250 characters should use separate sheet)

Object Class Category (f.): CONTRACTUAL	
A Brief Description	B Cost
1.	\$
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
14.	
16.	
17.	
18.	
19.	
20.	
TOTAL CONTRACTUAL	
	\$

Budget Narrative: CONTRACTUAL (Responses exceeding 250 characters should use separate sheet)

Object Class Category (h.): OTHER COSTS

(Including Training Expenses)

A Item	B # of Units	C Unit Type	D Cost per Unit	E Cost
1.			\$	\$
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
14.				
16.				
17.				
18.				
19.				
20.				
TOTAL OTHER COSTS				\$

Budget Narrative: OTHER COSTS (Responses exceeding 250 characters should use separate

Object Class Category (i.): INDIRECT CHARGES

Choose one of the following options to apply indirect charges to the grant:

OPTION A

For grantees that have an approved Indirect Cost Rate Agreement	
Federal agency that issued the agreement	
What is the approved rate (%)?	
What is the base against which rate is applied? (Note: enter description as specified in the agreement)	
What is the the base amount (\$)?	
Enter the rate (%) that will be used for this grant	
Enter the amount (\$) that will be used for this grant	\$ -

OPTION B

For grantees that DO NOT have an approved Indirect Cost Rate Agreement	
Enter fixed amount (\$) that will be used	\$ -

(Note: This will be only temporary until your Indirect Cost Rate Application is Submitted and Approved)

TOTAL INDIRECT CHARGES \$

Budget Narrative - INDIRECT CHARGES (Responses exceeding 250 characters should use separate

ADMINISTRATIVE COSTS

Pursuant to 20 CFR 641.867 and 641.870, grantees are advised that there is a 13.5% limitation on administrative costs on funds administered under this grant. The Grant Officer may, however, approve additional administrative costs up to a maximum of 15% of the total grant award amount, if adequate justification is provided by the grantee at the time of the award. In no event, may administrative costs exceed 15% of the total award amount. The cost of administration shall include those activities enumerated in 20 CFR 641.853-861.

Budget Narrative - ADMINISTRATIVE COSTS