Instructions and Summary

Award Number: _____

Award Recipient: _____

Date of Submission: 3/17/2023

Form submitted by: UMS Group

(May be award recipient or sub-recipient)

Please read the instructions on each worksheet tab before starting. If you have any questions, please ask your DOE contact!

1. If using this form for award application, negotiation, or budget revision, fill out the blank white cells in workbook tabs a. through j. with total project costs. If using this form for invoice submission, fill out tabs a. through j. with total costs for just the proposed invoice and fill out tab k. per the instructions on that tab.
2. Blue colored cells contain instructions, headers, or summary calculations and should not be modified. Only blank white cells should be populated.
3. Enter detailed support for the project costs identified for each Category line item within each worksheet tab to autopopulate the summary tab.
4. The total budget presented on tabs a. through i. must include both Federal (DOE) and Non-Federal (cost share) portions.
5. All costs incurred by the preparer's sub-recipients, vendors, and Federal Research and Development Centers (FFRDCs), should be entered only in section f. Contractual. All other sections are for the costs of the preparer only.
6. Ensure all entered costs are allowable, allocable, and reasonable in accordance with the administrative requirements prescribed in 2 CFR 200, and the applicable cost principles for each entity type: FAR Part 31 for For-Profit entities; and 2 CFR Part 200 Subpart E - Cost Principles for all other non-federal entities.
7. Add rows as needed throughout tabs a. through j. If rows are added, formulas/calculations may need to be adjusted by the preparer. Do not add rows to the Instructions and Summary tab. If your project contains more than five budget periods, consult your DOE contact before adding additional budget period rows or columns.
8. ALL budget period cost categories are rounded to the nearest dollar.

BURDEN DISCLOSURE STATEMENT

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of Information Resources Management Policy, Plans, and Oversight, AD-241-2 - GTN, Paperwork Reduction Project (1910-5162), U.S. Department of Energy 1000 Independence Avenue, S.W., Washington, DC 20585; and to the Office of Management and Budget, Paperwork Reduction Project (1910-5162), Washington, DC 20503.

SUMMARY OF BUDGET CATEGORY COSTS PROPOSED

The values in this summary table are from entries made in subsequent tabs, only blank white cells require data entry

Section A - Budget Summary								
		Federal	Cost Share			Total Costs	Cost Share %	Proposed Budget Period Dates
	Budget Period 1	(b) (4)	[redacted]			(b) (4)	[redacted]	1/1/2024-1/1/2025
	Budget Period 2	[redacted]	[redacted]			[redacted]	[redacted]	1/1/2025-1/1/2026
	Budget Period 3	[redacted]	[redacted]			[redacted]	[redacted]	1/1/2026-1/1/2027
	Budget Period 4	[redacted]	[redacted]			[redacted]	[redacted]	1/1/2027-1/1/2028
	Budget Period 5	[redacted]	[redacted]			[redacted]	[redacted]	1/1/2028-1/1/2029
	Total	[redacted]	[redacted]			[redacted]	[redacted]	

Section B - Budget Categories								
CATEGORY	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Total Costs	% of Project	Comments (as needed)
a. Personnel	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
b. Fringe Benefits	(b) (4)	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
c. Travel	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
d. Equipment	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
e. Supplies	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
f. Contractual	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
Sub-recipient	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
Vendor	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
FFRDC	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
Total Contractual	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
g. Construction	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
h. Other Direct Costs	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
Total Direct Costs	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
i. Indirect Charges	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	
Total Costs	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	

Additional Explanation (as needed):

a. Personnel

INSTRUCTIONS - PLEASE READ!!!

1. List project costs solely for employees of the entity completing this form. All personnel costs for subrecipients and vendors must be included under f. Contractual.

2. All personnel should be identified by position title and not employee name. Enter the amount of time (e.g., hours or % of time) and the base pay rate and the total direct personnel compensation will automatically calculate. Rate basis (e.g., actual salary, labor distribution report, state civil service rates, etc.) must also be identified.

3. If loaded labor rates are utilized, a description of the costs the loaded rate is comprised of must be included in the Additional Explanation section below. DOE must review all components of the loaded labor rate for reasonableness and unallowable costs (e.g. fee or profit).

4. If a position and hours are attributed to multiple employees (e.g. Technician working 4000 hours) the number of employees for that position title must be identified.

5. Each budget period is rounded to the nearest dollar.

SOPO Task #	Position Title	Budget Period 1			Budget Period 2			Budget Period 3			Budget Period 4			Budget Period 5			Project Total Hours	Project Total Dollars	Rate Basis
		Time (Hrs)	Pay Rate ($/Hr)	Total Budget Period 1	Time (Hrs)	Pay Rate ($/Hr)	Total Budget Period 2	Time (Hrs)	Pay Rate ($/Hr)	Total Budget Period 3	Time (Hrs)	Pay Rate ($/Hr)	Total Budget Period 4	Time (Hrs)	Pay Rate ($/Hr)	Total Budget Period 5			
1	Sr. Engineer **(EXAMPLE!!!)**	2000	$85.00	$170,000	200	$50.00	$10,000	200	$50.00	$10,000	200	$50.00	$10,000	200	$50.00	$10,000	2400	$190,000	Actual Salary
2	Technicians (2)	4000	$20.00	$80,000	0	$0.00	$0	0	$0.00	$0	0	$0.00	$0	0	$0.00	$0	4000	$80,000	Actual Salary

(b) (4)

[redacted]

	Total Personnel Costs

Additional Explanation (as needed):

b. Fringe Benefits

INSTRUCTIONS - PLEASE READ!!!
1. Fill out the table below by position title. If all employees receive the same fringe benefits, you can show "Total Personnel" in the Labor Type column instead of listing out all position titles.
2. The rates and how they are applied should not be averaged to get one fringe cost percentage. Complex calculations should be described/provided in the Additional Explanation section below.
3. The fringe benefit rates should be applied to all positions, regardless of whether those funds will be supported by Federal Share or Recipient Cost Share.
4. Each budget period is rounded to the nearest dollar.

Labor Type	Budget Period 1			Budget Period 2			Budget Period 3			Budget Period 4			Budget Period 5			Total Project
	Personnel Costs	Rate	Total	Personnel Costs	Rate	Total	Personnel Costs	Rate	Total	Personnel Costs	Rate	Total	Personnel Costs	Rate	Total	
EXAMPLE!!! Sr. Engineer	$170,000	20%	$34,000	$10,000	20%	$2,000	$10,000	20%	$2,000	$10,000	20%	$2,000	$10,000	20%	$2,000	$38,000
			$0			$0			$0			$0			$0	$0
			$0			$0			$0			$0			$0	$0
			$0			$0			$0			$0			$0	$0
			$0			$0			$0			$0			$0	$0
			$0			$0			$0			$0			$0	$0
Total:	**$0**		**$0**	**$0**		**$0**	**$0**		**$0**	**$0**		**$0**	**$0**		**$0**	**$0**

A federally approved fringe benefit rate agreement, or a proposed rate supported and agreed upon by DOE for estimating purposes is required at the time of award negotiation if reimbursement for fringe benefits is requested. Please check (X) one of the options below and provide the requested information if not previously submitted.

_____ A fringe benefit rate has been negotiated with, or approved by, a federal government agency. A copy of the latest rate agreement is/was included with the project application.*

_____ There is not a current federally approved rate agreement negotiated and available.**

*Unless the organization has submitted an indirect rate proposal which encompasses the fringe pool of costs, please provide the organization's benefit package and/or a list of the components/elements that comprise the fringe pool and the cost or percentage of each component/element allocated to the labor costs identified in the Budget Justification (Form EERE 335.1).

**When this option is checked, the entity preparing this form shall submit an indirect rate proposal in the format provided in the Sample Rate Proposal at http://www1.eere.energy.gov/financing/resources.html, or a format that provides the same level of information and which will support the rates being proposed for use in the performance of the proposed project.

Additional Explanation (as necessary): Please use this box (or an attachment) to list the elements that comprise your fringe benefits and how they are applied to your base (e.g. Personnel) to arrive at your fringe benefit rate.

c. Travel

INSTRUCTIONS - PLEASE READ!!!

1. Identify Foreign and Domestic Travel as separate items. Examples of Purpose of Travel are subrecipient site visits, DOE meetings, project mgmt. meetings, etc. Examples of Basis for Estimating Costs are past trips, travel quotes, GSA rates, etc.

2. All listed travel must be necessary for performance of the Statement of Project Objectives.

3. Federal travel regulations are contained within the applicable cost principles for all entity types. Travel costs should remain consistent with travel costs incurred by an organization during normal business operations as a result of the organizations written travel policy. In absence of a written travel policy, organizations must follow the regulations prescribed by the General Services Administration.

4. Each budget period is rounded to the nearest dollar.

SOPO Task #	Purpose of Travel	Depart From	Destination	No. of Days	No. of Travelers	Lodging per Traveler	Flight per Traveler	Vehicle per Traveler	Per Diem Per Traveler	Cost per Trip	Basis for Estimating Costs
	Domestic Travel	**Budget Period 1**									
1	**EXAMPLE!!!** Visit to PV manufacturer			2	2	$250	$500	$100	$160	$2,020	Current GSA rates
										$0	
										$0	
										$0	
										$0	
	International Travel										
										$0	
	Budget Period 1 Total									**$0**	
	Domestic Travel	**Budget Period 2**									
										$0	
										$0	
										$0	
										$0	
	International Travel										
										$0	
	Budget Period 2 Total									**$0**	
	Domestic Travel	**Budget Period 3**									
										$0	
										$0	
										$0	
										$0	
	International Travel										
										$0	
	Budget Period 3 Total									**$0**	
	Domestic Travel	**Budget Period 4**									
										$0	
										$0	
										$0	
										$0	
	International Travel										
										$0	
	Budget Period 4 Total									**$0**	
	Domestic Travel	**Budget Period 5**									
										$0	
										$0	
										$0	
										$0	
	International Travel										
										$0	
	Budget Period 5 Total									**$0**	
	PROJECT TOTAL									**$0**	

Additional Explanation (as needed):

d. Equipment

INSTRUCTIONS - PLEASE READ!!!

1. Equipment is generally defined as an item with an acquisition cost greater than $5,000 and a useful life expectancy of more than one year. Please refer to the applicable Federal regulations in 2 CFR 200 for specific equipment definitions and treatment.

2. List all equipment below, providing a basis of cost (e.g. vendor quotes, catalog prices, prior invoices, etc.). Briefly justify items as they apply to the Statement of Project Objectives. If it is existing equipment, provide logical support for the estimated value shown.

3. During award negotiations, provide a vendor quote for all equipment items over $50,000 in price. If the vendor quote is not an exact price match, provide an explanation in the additional explanation section below. If a vendor quote is not practical, such as for a piece of equipment that is purpose-built, first of its kind, or otherwise not available off the shelf, provide a detailed engineering estimate for how the cost estimate was derived.

4. Each budget period is rounded to the nearest dollar.

SOPO Task #	Equipment Item	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Budget Period 1						
3,4,5	**EXAMPLE!!!** Thermal shock chamber	2	$70,000	$140,000	Vendor Quote - Attached	Reliability testing of PV modules- Task 4.3
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 1 Total			$0		
Budget Period 2						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 2 Total			$0		
Budget Period 3						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 3 Total			$0		
Budget Period 4						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 4 Total			$0		
Budget Period 5						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 5 Total			$0		
	PROJECT TOTAL			**$0**		

Additional Explanation (as needed):

f. Contractual

INSTRUCTIONS - PLEASE READ!!!

1. The entity completing this form must provide all costs related to subrecipients, vendors, and FFRDC partners in the applicable boxes below.

2. Subrecipients (partners, sub-awardees): Subrecipients shall submit a Budget Justification describing all project costs and calculations when their total proposed budget exceeds either (1) $100,000 or (2) 50% of total award costs. These subrecipient forms may be completed by either the subrecipients themselves or by the preparer of this form. The budget totals on the subrecipient's forms must match the subrecipient entries below. A subrecipient is a legal entity to which a subaward is made, who has performance measured against whether the objectives of the Federal program are met, is responsible for programmatic decision making, must adhere to applicable Federal program compliance requirements, and uses the Federal funds to carry out a program of the organization. All characteristics may not be present and judgment must be used to determine subrecipient vs. vendor status.

3. Vendors (including contractors): List all vendors and contractors supplying commercial supplies or services used to support the project. For each Vendor cost with total project costs of $250,000 or more, a Vendor quote must be provided. A vendor is a legal entity contracted to provide goods and services within normal business operations, provides similar goods or services to many different purchasers, operates in a competitive environment, provides goods or services that are ancillary to the operation of the Federal program, and is not subject to compliance requirements of the Federal program. All characteristics may not be present and judgment must be used to determine subrecipient vs. vendor status.

4. Federal Funded Research and Development Centers (FFRDCs): FFRDCs must submit a signed Field Work Proposal during award application. The award recipient may allow the FFRDC to provide this information directly to DOE, however project costs must also be provided below.

5. Each budget period is rounded to the nearest dollar.

SOPO Task #	Sub-Recipient Name/Organization	Purpose and Basis of Cost	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Project Total
2,4	**EXAMPLE!!!** XYZ Corp.	Partner to develop optimal lens for Gen 2 product. Cost estimate based on personnel hours.	$48,000	$32,000	$16,000			**$96,000**
								$0
								$0
								$0
								$0
								$0
								$0
		Sub-total	$0	$0	$0	$0	$0	$0

SOPO Task #	Vendor Name/Organization	Purpose and Basis of Cost	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Project Total
6	**EXAMPLE!!!** ABC Corp.	Vendor for developing robotics to perform lens inspection. Estimate provided by vendor.	$32,900	$86,500				**$119,400**
(b) (4)								
		Sub-total						

SOPO Task #	FFRDC Name/Organization	Purpose and Basis of Cost	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Project Total
								$0
								$0
		Sub-total	$0	$0	$0	$0	$0	$0

	Total Contractual		(b) (4)

Additional Explanation (as needed):

e. Supplies

INSTRUCTIONS - PLEASE READ!!!

1. Supplies are generally defined as an item with an acquisition cost of $5,000 or less and a useful life expectancy of less than one year. Supplies are generally consumed during the project performance. Please refer to the applicable Federal regulations in 2 CFR 200 for specific supplies definitions and treatment.

2. List all proposed supplies below, providing a basis of costs (e.g. vendor quotes, catalog prices, prior invoices, etc.). Briefly justify the need for the Supplies as they apply to the Statement of Project Objectives. Note that Supply items must be direct costs to the project at this budget category, and not duplicative of supply costs included in the indirect pool that is the basis of the indirect rate applied for this project.

3. Multiple supply items valued at $5,000 or less used to assemble an equipment item with a value greater than $5,000 with a useful life of more than one year should be included on the equipment tab. If supply items and costs are ambiguous in nature, contact your DOE representative for proper categorization.

4. Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

5. Each budget period is rounded to the nearest dollar.

SOPO Task #	General Category of Supplies	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Budget Period 1						
4,6	**EXAMPLE!!!** Wireless DAS components	10	$360.00	$3,600	Catalog price	For Alpha prototype - Task 2.4
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 1 Total			**$0**		
Budget Period 2						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 2 Total			$0		
Budget Period 3						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 3 Total			$0		
Budget Period 4						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 4 Total			$0		
Budget Period 5						
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
				$0		
	Budget Period 5 Total			$0		
	PROJECT TOTAL			**$0**		

Additional Explanation (as needed):

g. Construction

PLEASE READ!!!

1. Construction, for the purpose of budgeting, is defined as all types of work done on a particular building, including erecting, altering, or remodeling. Construction conducted by the award recipient is entered on this page. Any construction work that is performed by a vendor or subrecipient should be entered under f. Contractual.

2. List all proposed construction below, providing a basis of cost such as engineering estimates, prior construction, etc., and briefly justify its need as it applies to the Statement of Project Objectives.

3. Each budget period is rounded to the nearest dollar.

Overall description of construction activities: Example Only!!! - Build wind turbine platform

SOPO Task #	General Description	Cost	Basis of Cost	Justification of need
Budget Period 1				
3	EXAMPLE ONLY!!! Three days of excavation for platform site	$28,000	Engineering estimate	Site must be prepared for construction of platform.
	Budget Period 1 Total	$0		
Budget Period 2				
	Budget Period 2 Total	$0		
Budget Period 3				
	Budget Period 3 Total	$0		
Budget Period 4				
	Budget Period 4 Total	$0		
Budget Period 5				
	Budget Period 5 Total	$0		
	PROJECT TOTAL	**$0**		

Additional Explanation (as needed):

h. Other Direct Costs

INSTRUCTIONS - PLEASE READ!!!

1. Other direct costs are direct cost items required for the project which do not fit clearly into other categories. These direct costs must not be included in the indirect costs (for which the indirect rate is being applied for this project). Examples are: tuition, printing costs, etc. which can be directly charged to the project and are not duplicated in indirect costs (overhead costs).

2. Basis of cost are items such as vendor quotes, prior purchases of similar or like items, published price list, etc.

3. Each budget period is rounded to the nearest dollar.

SOPO Task #	General Description and SOPO Task #	Cost	Basis of Cost	Justification of need
			Budget Period 1	
5	**EXAMPLE!!!** Grad student tuition - tasks 1-3	$16,000	Established UCD costs	Support of graduate students working on project
	Budget Period 1 Total	$0		
			Budget Period 2	
	Budget Period 2 Total	$0		
			Budget Period 3	
	Budget Period 3 Total	$0		
			Budget Period 4	
	Budget Period 4 Total	$0		
			Budget Period 5	
	Budget Period 5 Total	$0		
	PROJECT TOTAL	**$0**		

Additional Explanation (as needed):

i. Indirect Costs

INSTRUCTIONS - PLEASE READ!!!

1. Fill out the table below to indicate how your indirect costs are calculated. Use the box below to provide additional explanation regarding your indirect rate calculation.

2. The rates and how they are applied should not be averaged to get one indirect cost percentage. Complex calculations or rates that do not do not correspond to the below categories should be described/provided in the Additional Explanation section below. If questions exist, consult with your DOE contact before filling out this section.

3. The indirect rate should be applied to both the Federal Share and Recipient Cost Share.

4. Each budget period is rounded to the nearest dollar.

	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Total	Explanation of BASE
Provide ONLY Applicable Rates:							
Overhead Rate	0.00%	0.00%	0.00%	0.00%	0.00%		
General & Administrative (G&A)	0.00%	0.00%	0.00%	0.00%	0.00%		
FCCM Rate, if applicable	0.00%	0.00%	0.00%	0.00%	0.00%		
OTHER Indirect Rate	0.00%	0.00%	0.00%	0.00%	0.00%		
Indirect Costs (As Applicable):							
Overhead Costs						**$0**	
G&A Costs						**$0**	
FCCM Costs, if applicable						**$0**	
OTHER Indirect Costs						**$0**	
Total indirect costs requested:	**$0**	**$0**	**$0**	**$0**	**$0**	**$0**	

A federally approved indirect rate agreement, or rate proposed (supported and agreed upon by DOE for estimating purposes) is required if reimbursement of indirect costs is requested. Please check (X) one of the options below and provide the requested information if it has not already been provided as requested, or has changed.

_____ An indirect rate has been approved or negotiated with a federal government agency. A copy of the latest rate agreement is included with this application, and will be provided electronically to the Contracting Officer for this project.

_____ There is not a current, federally approved rate agreement negotiated and available*.

***When this option is checked, the entity preparing this form shall submit an indirect rate proposal in the format provided by your DOE contact, or a format that provides the same level of information and which will support the rates being proposed for use in performance of the proposed project. Additionally, any non-Federal entity that has never received a 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, may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely.As described in §200.403 Factors affecting allowability of costs, costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate for a rate, which the non-Federal entity may apply to do at any time.**

You must provide an explanation (below or in a separate attachment) and show how your indirect cost rate was applied to this budget in order to come up with the indirect costs shown.

Additional Explanation (as needed): *IMPORTANT: Please use this box (or an attachment) to further explain how your total indirect costs were calculated. If the total indirect costs are a cumulative amount of more than one calculation or rate application, the explanation and calculations should identify all rates used, along with the base they were applied to (and how the base was derived), and a total for each (along with grand total).

Cost Share

PLEASE READ!!!

1. A detailed presentation of the cash or cash value of all cost share proposed must be provided in the table below. All items in the chart below must be identified within the applicable cost category tabs a. through i. in addition to the detailed presentation of the cash or cash value of all cost share proposed provided in the table below. Identify the source organization & amount of each cost share item proposed in the award.

2. Cash Cost Share - encompasses all contributions to the project made by the recipient, subrecipient, or third party (an entity that does not have a role in performing the scope of work) for costs incurred and paid for during the project. This includes when an organization pays for personnel, supplies, equipment, etc. for their own company with organizational resources. If the item or service is reimbursed for, it is cash cost share. All cost share items must be necessary to the performance of the project. Any partial donation of goods or services is considered a discount and is not allowable.

3. In Kind Cost Share - encompasses all contributions to the project made by the recipient, subrecipient, or third party (an entity that does not have a role in performing the scope of work) where a value of the contribution can be readily determined, verified and justified but where no actual cash is transacted in securing the good or service comprising the contribution. In Kind cost share items include volunteer personnel hours, the donation of space or use of equipment, etc. The cash value and calculations thereof for all In Kind cost share items must be justified and explained in the Cost Share Item section below. All cost share items must be necessary to the performance of the project. If questions exist, consult your DOE contact before filling out In Kind cost share in this section. Vendors may not provide cost share. Any partial donation of goods or services is considered a discount and is not allowable.

4. Funds from other Federal sources MAY NOT be counted as cost share. This prohibition includes FFRDC sub-recipients. Non-Federal sources include any source not originally derived from Federal funds. Cost sharing commitment letters from subrecipients and third parties must be provided with the original application.

5. Fee or profit, including foregone fee or profit, **are not allowable** as project costs (including cost share) under any resulting award. The project may only incur those costs that are allowable and allocable to the project (including cost share) as determined in accordance with the applicable cost principles prescribed in FAR Part 31 for For-Profit entities and 2 CFR Part 200 Subpart E - Cost Principles for all other non-federal entities.

6. NOTE: A Recipient who elects to employ the 10% de minimis Indirect Cost rate **cannot claim the resulting indirect costs as a Cost Share contribution.**

7. NOTE: A Recipient **cannot claim "unrecovered indirect costs"** as a Cost Share contribution, **without prior approval.**

8. Each budget period is rounded to the nearest dollar.

Organization/Source	Type (Cash or In Kind)	Cost Share Item	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Total Project Cost Share
ABC Company **EXAMPLE!!!**	Cash	Project partner ABC Company will provide 20 PV modules for product development at the price of $680 per module	$13,600					**$13,600**
(b) (4) [redacted]								
		Totals						

Total Project Cost: (b) (4) [redacted]

Cost Share Percent of Award: [redacted]

Additional Explanation (as needed):

Applicant Name: _____ Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

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. Budget period 1				(b) (4)		
2. Budget period 2						
3. Budget period 3						
4.						
5. Totals		$0	$0			

Section B - Budget Categories

6. Object Class Categories	Grant Program, Function or Activity				Total (5)
	Budget period 1	Budget period 2	Budget period 3	(4)	
a. Personnel	(b) (4)				
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-6j)					
7. Program Income					$0

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Section C - Non-Federal Resources

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) **Totals**
8. Budget period 1				$0
9. Budget period 2				$0
10. Budget period 3				$0
11.				$0
12. **Total** (sum of lines 8 - 11)	$0	$0	$0	$0

Section D - Forecasted Cash Needs

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	$0				
14. Non-Federal	$0				
15. **Total** (sum of lines 13 and 14)	$0	$0	$0	$0	$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project

	Future Funding Periods (Years)			
(a) Grant Program	Budget period 1	Budget period 2	Budget period 3	
16.				
17.				
18.				
19.				
20. **Total** (sum of lines 16-19)	$0	$0	$0	$0

Section F - Other Budget Information

21. Direct Charges	22. Indirect Charges

23. Remarks

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Instructions for the SF-424A

Public Reporting Burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Please do not return your completed form to the Office of Management and Budget; send it to the address provided by the sponsoring agency.

General Instructions
This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the later case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)
For applications pertaining to a **single** Federal grant program (Federal Domestic Assistance Catalog number) and **not requiring** a functional or activity breakdown, enter on Line 1 under Column (a) the catalog program title and the catalog number in Column (b).

For applications pertaining to a **single** program **requiring** budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the catalog program title on each line in **Column** (a) and the respective catalog number on each line in Column (b).
For applications pertaining to **multiple** programs where one or more programs **require** a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Columns (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5—Show the totals for all columns used.

Section B. Budget Categories
In the column headings (a) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Lines 6a-i—Show the totals of Lines 6a to 6h in each column.

Line 6j—Show the amount of indirect cost.

Line 6k—Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.
Line 7—Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount. Show under the program narrative statement the nature and source of income. The estimated amount of program income may be considered by the federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11—Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19—Enter in Column (a) the same grant program titles shown in Column
(a), Section A. A breakdown by function or activity is not necessary. For new

Column (a)—Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b)—Enter the contribution to be made by the applicant.

Column (c)—Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d)—Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e)—Enter totals of Columns (b), (c), and (d).

Line 12—Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f) Section A.

Section D. Forecasted Cash Needs

Line 13—Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14—Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15—Enter the totals of amounts on Lines 13 and 14.

(a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.
If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20—Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21—Use this space to explain amounts for individual direct object-class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22—Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23—Provide any other explanations or comments deemed necessary.

Applicant Name: 0 Award Number: 0

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

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. Budget Period 1				(b) (4)			(b) (4)
2. Budget Period 2							
3. Budget Period 3							
4. Budget Period 4							
5. Budget Period 5							
6. Totals							

Section B - Budget Categories

6. Object Class Categories	Grant Program, Function or Activity					Total (5)
	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	
a. Personnel	(b) (4)					
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-6j)						
7. Program Income						$0

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