

U.S. DEPARTMENT OF THE INTERIOR
Office of Surface Mining
BUDGET INFORMATION REPORT

OMB Approval No. 1029-0059
Exp. Date: 2/28/2009

IMPORTANT: Please read instructions on the reverse of this page before completing this form.

| | | |
|--------------------------------|-------------------------------------|--|
| A. Program | E. Budget Period (Month, Day, Year) | F. Mark X in Appropriate Box |
| B. Grantee | Beginning Date | <input type="checkbox"/> New Budget |
| C. Grant Program | Ending Date | <input type="checkbox"/> Revised Budget (Enter Grant Number) |
| D. Rate of Federal Sharing (%) | | Grant Number _____ |

| | PROGRAMS/FUNCTIONS/ACTIVITIES | (a) | (b) | (c) | (d) | (e) | (f) | TOTAL (g) |
|---------------------|-------------------------------|--------|--------|--------|--------|--------|--------|--------------|
| | 1. Personnel | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 2. Fringe Benefit | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Section A | 3. Travel | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| by | 4. Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Object Class | 5. Supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 6. Contractual | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 7. Construction | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 8. Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 9. Total Direct Charges | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 10. Indirect Charges | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | 11. Total | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

| | | | | | | | | |
|------------------|-----------------------|--|--|--|--|--|--|--------|
| Section B | 12. Non-Federal Share | | | | | | | \$0.00 |
| by | 13. Federal Share | | | | | | | \$0.00 |
| Source | | | | | | | | |

| | | | | | | | | |
|------------------|--|--|--|--|--|--|--|--|
| Section C | | | | | | | | |
| by | | | | | | | | |

| | | | | | | | | |
|---------------|--------------------|--|--|--|--|--|--|--------|
| Income | 14. Program Income | | | | | | | \$0.00 |
|---------------|--------------------|--|--|--|--|--|--|--------|

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Section D Indirect Cost | 15. Detail on Indirect Cost Type of Rate (mark X in one box) <input type="checkbox"/> Predetermined <input type="checkbox"/> Provisional <input type="checkbox"/> Final <input type="checkbox"/> Fixed Rate _____% Total Amount _____ Base _____ | | | | | | | |
|--|--|--|--|--|--|--|--|--|

| | | | |
|--------------------------------------|-----------------------------------|--|--------------------------|
| E. Signature of Authorizing Official | F. Name and Title (type or print) | G. Telephone Number (Are Code, Number and Extension) | H. Date Report Submitted |
|--------------------------------------|-----------------------------------|--|--------------------------|

INSTRUCTIONS
BUDGET INFORMATION REPORT
OSM-47

General Instructions:

- Item A - Enter the name of the program for which assistance is being requested.
- Item B - Enter the grantee's name.
- Item C - Enter the name of grant program.
- Item D - Enter rate of Federal sharing.
- Item E - Enter the beginning and ending dates of the budget period for the budget submission.
- Item F - Mark AX@ in box to indicate whether it is a new or revised budget.

Programs/Functions/Activities - For Administrative and Enforcement grants, the vertical columns are used to estimate the costs for the following functions: permitting; inspection and enforcement; lands unsuitable; administrative activities and support costs; and SOAP administrative costs.

Section A - Object Class Categories

- Items 1-10 - Enter on lines 1-10 the amounts needed for each program, function, or activity by object class categories (both Federal and non-Federal funds) and total in column (g).
- Item 11 - Enter on line 11 the total for each program, function, or activity.

Section B - Budget by Source

- Item 12 - Enter the non-Federal share of the amount on line 12.
- Item 13 - Enter the Federal share of the amount on line 13.

Section C - Budget for Income

- Item 14 - Enter the amount of estimated program income, if any, which will be applied to the grant. Do not add or subtract this amount from the total grant amount.

Section D - Indirect Cost

- Item 15 - Enter the type of indirect cost rate (provisional, predetermined, final or fixed), the rate that will be in effect during the funding period and the amount of the base to which the rate is applied.
- Item E - Enter the signature of the individual authorizing the submission of the budget data, his/her name, title and telephone number, and the date of submission.

Paperwork Reduction Act Statement

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501) requires us to inform you that: Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information is being collected to review, administer and evaluate the States/Tribes grants for program development and administration and enforcement to meet the requirements of the Surface Mining Control Reclamation and Enforcement Act. The obligation to respond is required to obtain a benefit.

Public reporting burden for this form is estimated to average 10 hours per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, 1951 Constitution Ave., NW, Washington, D.C. 20240.