OMB Control No.: 0584-0512 Expiration Date: 1/31/2016

FMSSG Budget Summary -- FNS-10-545B

ATTACHMENT: FMSSG Budget Summary -- FNS-10-545B

FMSSG applicants should use the following guidance to prepare the required Budget Summary and Budget Narrative. For more detailed information, see the FMSSG Request For Applications.

In order to expedite the application review process, follow these steps to complete the Budget Summary:

1 Organization Contact Info:

Enter the: project title, organization name, contact name, contact phone number,

contact email address.

2 Supplemental Budget Information:

Complete the budget spreadsheet and narrative.

All Budget Items Must: •

Be itemized in the Budget Summary, listing separately each item and its cost. This Excel worksheet is a form that can be used as a Budget Summary.

 Be addressed in the Budget Narrative, which must correspond with the Budget Summary, and demonstrate that each proposed cost serves the bona fide needs of the project.

To be *bona fide* needs of the project, proposed budget items must correlate to the purpose/goals of the project; and must be reasonable, necessary, allocable (i.e., treated consistently with other costs for the same purpose and circumstance), and allowable for the proposed work. Proposed funding for all budget items must be based on actual cost estimates (i.e., based on a price analysis/ comparison, vendor quote, cost per unit, staff time, etc.).

Applicants should address each of the Budget Categories listed below in their Budget Summary. If an applicant does not propose a Budget Item under any of the Budget Categories, they should indicate "None" in the "Itemization" column and "\$0" in the "Requested Budget" column. If necessary, please add additional rows in the Budget Summary under each Budget Category to identify all Budget Items.

Personnel/Contractual

In the Budget Summary, list each employee and contractor's name, title, and the general categories of services the person will provide (e.g., project manager, EBT manager, etc.).

In the Budget Narrative, describe each individual's duties and how those duties correlate to the purpose/goals of the project. If a position is not currently filled, describe the job, including a list of duties. Show annual/hourly rates and estimated number of hours to be spent on the project by each project participant. For all salaries, include the number of hours, rate per hour, and the (actual) months of performance. For contractors, indicate if the expense represents a flat fee for services or an hourly rate.

Equipment

In the Budget Summary, list each proposed purchase of equipment, its cost, and use. Equipment means any tangible, nonexpendable, personal property, including exempt property charged directly to the grant having: (1) a useful life of more than 1 year, and (2) an acquisition cost of \$5,000 or more per unit (2 CFR 200.313).

In the Budget Narrative, provide the basis of the cost estimate (i.e., price analyses, vendor quotes) for each piece of equipment and its correlation to the purpose/goals of the project to justify your need for the equipment to be purchased.

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Supplies

In the Budget Summary, provide eash proposed supply expenditures separately, its cost, and use. Supplies means any tangible personal property other than equipment (as defined above), excluding debt instruments and inventions (2 CFR 200.314).

In the Budget Narrative, provide the basis of the cost estimate (i.e.,. price analyses, vendor quotes) for each supply item being requested and its correlation to the purpose/goals of the project to justify your need for the supplies to be purchased.

Other

In the Budget Summary, provide an itemized list of projected expenditures, their cost and use. Other items mean any item not fitting into the personnel, contractual, equipment, travel, and supplies categories explained above. Service fees, such as those charged by merchant service providers, should be listed as 'Other' with an explanation.

In the Budget Narrative, provide the basis of the cost estimate (e.g. price analysis, vendor quotes) for each item being requested and its correlation to the purpose/goals of the project to justify your need.

Indirect Costs

Budget requests for indirect costs may not exceed 10 percent of total expenses defined and itemized as direct costs.

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4 After completing this form, save a copy and print for your records. Please upload this file as an MS Excel file (only), along with all other application materials, in the Grants.gov application package.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0512 The time required to complete this information collection is estimated to average 30 minutes 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.

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FMSSG Rudget Summary -- FNS-10-545R

| | | TOTAL | \$0 | \$0 |
|--------------------------------|--------------|-------|-------------|--------------------------|
| | | | | |
| | | | | |
| | | Total | \$ 0 | |
| Other: | | | | |
| | | | | |
| | | | | |
| Supplies. | | | | |
| Supplies: | | | | |
| Equipment: | | | | |
| | | | | |
| | | | | |
| Contractual: | | | | |
| | | | | |
| Personnei: | | | | |
| Budget Summary Personnel: | Itemization: | | Budget | Revised/Approved |
| Contact Email: | | | Requested | FMSSG Staff Use Only: |
| Contact Phone: | | | | This Column for |
| Organization: Contact Name: | | | | FMSSG 2014 |
| Project Title: | | | | |

Organization: 0
Project Title: 0

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OMB XXXX-XXXX

FMSSG Rudget Summary -- FNS-10-545R

Budget Summary Narrative: Add additional lines, as needed.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0235. The time required to complete this information collection is estimated to average 10 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. The U.S. Department of Agriculture (USDA)

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