## RESEARCH & RELATED BUDGET (TOTAL FED + NON-FED) - BUDGET PERIOD 1

OMB Number: 4040-0001 Expiration Date: 06/30/2011

ORGANIZATIONAL DUNS:		Enter	name of Organization	on:			
Budget Type: Project	Subaward/Co	onsortium		Budget Period: 1	* Start Date:	* End Date:	
A. Senior/Key Person							
Prefix * First Name			Middle Name	* Last Nam	е		Suffix
* Project Role							
Cal. Base Salary (\$) Months		Sum. Nonths *	Req. Salary (\$)	* Fringe Ben. (\$)	* Total (Sal & FB) (Fed + Non-Fed)(\$)	* Federal (\$)	* Non-Federal (\$)
Additional Senior Key Persons:				Add Attachment	Delete Attachment View A	ttachment	
	Total Fu	nds requested	for all Senior Key Pers	sons in the attached file			
			Т	otal Senior/Key Person			
3. Other Personnel							
* Number of Personnel * Project Role	Cal. Aca		* Req. Salary (\$)	* Fringe Ben. (\$)	* Total (Sal & FB) (Fed + Non-Fed) (\$)	* Federal (\$)	* Non- Federal (\$)
Post Doctoral Associates							
Graduate Students							
Undergraduate Students							
Secretarial/Clerical							
Total Number Other	Personnel			Total Other Personnel			
		Total Sala	ry, Wages and Fri	nge Benefits (A+B)			

## C. Equipment Description List items and dollar amount for each item exceeding \$5,000 \* Total (Fed + Non-Fed) (\$) \* Equipment item \* Federal (\$) \* Non-Federal (\$) **Additional Equipment:** Add Attachment Delete Attachment View Attachment Total funds requested for all equipment listed in the attached file **Total Equipment** \* Total (Fed + Non-Fed) (\$) \* Federal (\$) \* Non-Federal (\$) D. Travel Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions) Foreign Travel Costs **Total Travel Costs** E. Participant/Trainee Support Costs \* Federal (\$) \* Total (Fed + Non-Fed) (\$) \* Non-Federal (\$) Tuition/Fees/Health Insurance Stipends Travel Subsistence Other **Number of Participants/Trainees Total Participant/Trainee Support Costs** F. Other Direct Costs \* Total (Fed + Non-Fed) (\$) \* Federal (\$) \* Non-Federal (\$) 1. Materials and Supplies 2. Publication Costs 3. Consultant Services 4. ADP/Computer Services 5. Subawards/Consortium/Contractual Costs 6. Equipment or Facility Rental/User Fees 7. Alterations and Renovations 8. 9. 10. **Total Other Direct Costs**

G. Direct Costs		Federal (\$)	Non-Federal (\$)	Total (Fed + Non-Fed) (\$)
	Total Direct Costs (A thru F)			
H. Indirect Costs				
Indirect Cost Type	Indirect Cost Rate (%) Indirect Cost Base (\$)	* Federal (\$)	* Non-Federal (\$)	* Total (Fed + Non-Fed) (\$)
	Total Indirect Costs			
Cognizant Federal Agency (Agency Name, POC Name, and Phone Number)				
I. Total Direct and Indire	ect Costs	Federal (\$)	Non-Federal (\$)	Total (Fed + Non-Fed) (\$)
	Total Direct and Indirect Institutional Costs (G + H)			
J. Fee		Federal (\$)		
K. * Budget Justificatio	n			
(Only attach one file.)	Add Attachment Delete	Attachment View Attachm	nent	

## RESEARCH & RELATED BUDGET (TOTAL FED + NON-FED) - Cumulative Budget

	Total Federal (\$)	Total Non-Federal (\$)	Totals (\$)
Section A, Senior/Key Person			
Section B, Other Personnel			
Total Number Other Personnel			
Total Salary, Wages and Fringe Benefits (A+B)			
Section C, Equipment			
Section D, Travel			
1. Domestic			
2. Foreign			
Section E, Participant/Trainee Support Costs			
1. Tuition/Fees/Health Insurance			
2. Stipends			
3. Travel			
4. Subsistence			
5. Other			
6. Number of Participants/Trainees			
Section F, Other Direct Costs			
1. Materials and Supplies			
2. Publication Costs			
3. Consultant Services			
4. ADP/Computer Services			
5. Subawards/Consortium/Contractual Costs			
6. Equipment or Facility Rental/User Fees			
7. Alterations and Renovations			
8. Other 1			
9. Other 2			
<b>10</b> . Other 3			
Section G, Direct Costs (A thru F)			
Section H, Indirect Costs			
Section I, Total Direct and Indirect Costs (G + H)			
Section J, Fee			