



**U.S. DEPARTMENT OF EDUCATION  
BUDGET INFORMATION NON-CONSTRUCTION PROGRAMS**

OMB Control Number: 1894-0008  
Expiration Date: 08/31/2020

Name of Institution/Organization

Applicants requesting funding for only one year should complete the column under "Project Year 1." Applicants requesting funding for multi-year grants should complete all applicable columns. Please read all instructions before completing form.

**SECTION A - BUDGET SUMMARY U.S. DEPARTMENT OF EDUCATION FUNDS**

Budget Categories	Project Year 1 (a)	Project Year 2 (b)	Project Year 3 (c)	Project Year 4 (d)	Project Year 5 (e)	Total (f)
1. Personnel						
2. Fringe Benefits						
3. Travel						
4. Equipment						
5. Supplies						
6. Contractual						
7. Construction						
8. Other						
9. Total Direct Costs (lines 1-8)						
10. Indirect Costs *Enter Rate Applied _____						
11. Training Stipends						
12. Total Costs (lines 9-11)						

**\*Indirect Cost Information (To Be Completed by Your Business Office):**

If you are requesting reimbursement for indirect costs on line 10, please answer the following questions:

- (1) Do you have an Indirect Cost Rate Agreement approved by the Federal government? \_\_\_Yes \_\_\_No.
- (2) If yes, please provide the following information:  
 Period Covered by the Indirect Cost Rate Agreement: From: \_\_\_/\_\_\_/\_\_\_\_\_ To: \_\_\_/\_\_\_/\_\_\_\_\_ (mm/dd/yyyy)  
 Approving Federal agency: \_\_\_ED \_\_\_Other (please specify): \_\_\_\_\_ The Indirect Cost Rate is \_\_\_\_\_%
- (3) If this is your first Federal grant, and you do not have an approved indirect cost rate agreement, are not a State, Local government or Indian Tribe, and are not funded under a training rate program or a restricted rate program, do you want to use the de minimis rate of 10% of MTDC? \_\_\_Yes \_\_\_No. If yes, you must comply with the requirements of 2 CFR § 200.414(f).
- (4) If you do not have an approved indirect cost rate agreement, do you want to use the temporary rate of 10% of budgeted salaries and wages? \_\_\_Yes \_\_\_No. If yes, you must submit a proposed indirect cost rate agreement within 90 days after the date your grant is awarded, as required by 34 CFR § 75.560.
- (5) For Restricted Rate Programs (check one) -- Are you using a restricted indirect cost rate that: \_\_\_ Is included in your approved Indirect Cost Rate Agreement? Or \_\_\_ Complies with 34 CFR 76.564(c)(2)? The Restricted Indirect Cost Rate is \_\_\_\_\_%
- (6) For Training Rate Programs (check one) -- Are you using a rate that: \_\_\_ Is based on the training rate of 8 percent of MTDC (See EDGAR § 75.562(c)(4))? Or \_\_\_ Is included in your approved Indirect Cost Rate Agreement, because it is lower than the training rate of 8 percent of MTDC (See EDGAR § 75.562(c)(4)).

Name of Institution/Organization	Applicants requesting funding for only one year should complete the column under "Project Year 1." Applicants requesting funding for multi-year grants should complete all applicable columns. Please read all instructions before completing form.
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**SECTION B - BUDGET SUMMARY  
NON-FEDERAL FUNDS**

Budget Categories	Project Year 1 (a)	Project Year 2 (b)	Project Year 3 (c)	Project Year 4 (d)	Project Year 5 (e)	Total (f)
1. Personnel						
2. Fringe Benefits						
3. Travel						
4. Equipment						
5. Supplies						
6. Contractual						
7. Construction						
8. Other						
9. Total Direct Costs (Lines 1-8)						
10. Indirect Costs						
11. Training Stipends						
12. Total Costs (Lines 9-11)						

**SECTION C – BUDGET NARRATIVE (see instructions)**