

National Historical Publications and Records Commission
BUDGET INSTRUCTIONS

Before developing a project budget, applicants should review those sections of the program guidelines and application instructions that discuss cost-sharing requirements, the different kinds of Commission funding, and any restrictions on the types of costs that may appear in the project budget. Sample budget computations are also included in the guidelines.

Requested Grant Period

Grant periods begin on the first day of the month and end on the last day of the month. All project activities must take place during the requested grant period.

Project Costs

The budget should include the project costs that will be charged to grant funds as well as those that will be supported by applicant or third-party cash and in-kind contributions.

All of the items listed, whether supported by grant funds or cost-sharing contributions, must be reasonable, necessary to accomplish project objectives, allowable in terms of the applicable federal cost principles, auditable, and incurred during the grant period. Charges to the project for items such as salaries, fringe benefits, travel, and contractual services must conform to the written policies and established practices of the applicant organization.

Fringe Benefits

Fringe benefits may include contributions for social security, employee insurance, pension plans, etc. Only those benefits that are not included in an organization's indirect cost pool may be shown as direct costs.

Travel Costs

The most economical accommodations must be used and foreign travel must be undertaken on U.S. flag carriers when such services are available.

Equipment

Only when an applicant can demonstrate that the purchase of permanent equipment will be less expensive than rental may charges be made to the project for such purchases. Permanent equipment is defined as an item costing more than \$5,000 per unit.

Indirect Costs (Overhead)

These are costs that are incurred for common or joint objectives and therefore cannot be readily identified with a specific project or activity of an organization. Typical examples of indirect cost type items are the salaries of executive officers, the costs of operating and maintaining facilities, local telephone service, office supplies, and accounting and legal services. Indirect costs are computed by applying a negotiated indirect cost rate to a distribution base (usually the direct costs of the project).

Care should be taken that expenses that are included in the organization's indirect cost pool are not charged to the project as direct costs.

The Commission will not require the formal negotiation of an indirect cost rate, provided the charge for indirect costs does not exceed 10 percent of direct costs, up to a maximum charge of \$5,000. (Applicants who choose this option should understand that they must maintain documentation to support overhead charges claimed as part of project costs.) The Commission does not negotiate indirect cost rates with its grantees, but does recognize rates negotiated between its applicants and other Federal agencies.

Public Burden Statement

Public burden reporting for this collection of information is estimated to be 3 hours per response, including time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration, NHP, Room 3200, 8601 Adelphi Road, College Park, MD 20740-6001 and to the Office of Management and Budget, Paperwork Reduction Project (3095-0013), Washington, DC 20503. DO NOT SEND COMPLETED BUDGET FORMS TO THESE ADDRESSES. Send to National Historical Publications and Records Commission - NHPRC, National Archives & Records Administration, 700 Pennsylvania Avenue, NW, Room 106, Washington, DC 20408-0001. You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number.

BUDGET FORM

Project Director	If this is a revised budget, indicate the NHPRC application/grant number:
Applicant Organization	Requested Grant Period From _____ to _____ mo/yr mo/yr

The three-column budget has been developed for the convenience of those applicants who wish to identify the project costs that will be charged to Commission funds and those that will be cost shared. In accordance with Federal regulations, the only column that applicants are required to complete is Column C, although applicants may wish to complete Columns A & B in order to provide sufficient detail to allow for a better understanding of their budget request. The method of cost computation should clearly indicate how the total charge for each budget item was determined. If more space is needed for any budget category, please follow the budget format on a separate sheet of paper. When the requested grant period is eighteen months or longer, separate budgets for each twelve-month period of the project must be developed on duplicated copies of the budget form.

SECTION A—Budget detail for the period from _____ to _____ mo/yr mo/yr

1. Salaries and Wages

Provide the names and titles of principal project personnel. For support staff, include the title of each position and indicate in brackets the number of persons who will be employed in that capacity. For persons employed on an academic year basis, list separately any salary charge for work done outside the academic year.

Name/Title of Position	No.	Method of Cost Computation	NHPRC Funds (a)	Cost Sharing (b)	Total (c)
_____	[]	_____	\$ _____	\$ _____	\$ _____
_____	[]	_____	\$ _____	\$ _____	\$ _____
_____	[]	_____	\$ _____	\$ _____	\$ _____
_____	[]	_____	\$ _____	\$ _____	\$ _____
_____	[]	_____	\$ _____	\$ _____	\$ _____
_____	[]	_____	\$ _____	\$ _____	\$ _____
SUBTOTAL			\$ _____	\$ _____	\$ _____

2. Fringe Benefits

If more than one rate is used, list each rate and salary base.

Rate	Salary Base	(a)	(b)	(c)
_____	of \$ _____	\$ _____	\$ _____	\$ _____
_____	of \$ _____	\$ _____	\$ _____	\$ _____
SUBTOTAL		\$ _____	\$ _____	\$ _____

3. Consultant Fees

Include payments for professional and technical consultants and honoraria.

Name or Type of Consultant	No. of days on Project	Daily Rate of Compensation	(a)	(b)	(c)
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
SUBTOTAL			\$ _____	\$ _____	\$ _____

4. Travel

For each trip indicate the number of persons traveling, the total days they will be in travel status, and the total subsistence and transportation costs for that trip. When a project will involve the travel of a number of people to a conference, institute, etc., these costs may be summarized on one line by indicating the point of origin as "various." All foreign travel must be listed separately.

Item	No. of Persons	Total Travel Days	Subsistence Costs +	Transportation Costs =	NHPRC Funds (a)	Cost Sharing (b)	Total (c)
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	[]	[]	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
SUBTOTAL					\$ _____	\$ _____	\$ _____

5. Supplies and Materials

Include consumable supplies, materials to be used in the project, and items of expendable equipment, i.e., equipment items costing less than \$5,000 per unit.

Item	Basis/Method of Cost Computation	(a)	(b)	(c)
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
SUBTOTAL		\$ _____	\$ _____	\$ _____

6. Services

Include the cost of duplication and printing, long distance telephone, equipment rental, postage, and other services related to project objectives that are not included under other budget categories or in the indirect cost pool.

Item	Basis/Method of cost computation	(a)	(b)	(c)
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
SUBTOTAL		\$ _____	\$ _____	\$ _____

SECTION B—Summary Budget and Project Funding

SUMMARY BUDGET

Transfer from section A the total costs (column c) for each category of project expense. When the proposed grant period is eighteen months or longer, project expenses for each twelve-month period are to be listed separately and totaled in the last column of the summary budget. For projects that will run less than eighteen months, only the last column of the summary budget should be completed.

Budget Categories	First Year/ from: to:	Second Year/ from: to:	Third Year/ from: to:	TOTAL COSTS FOR ENTIRE GRANT PERIOD
1. Salaries and Wages	\$ _____	\$ _____	\$ _____ =	\$ _____
2. Fringe Benefits	\$ _____	\$ _____	\$ _____ =	\$ _____
3. Consultant Fees	\$ _____	\$ _____	\$ _____ =	\$ _____
4. Travel	\$ _____	\$ _____	\$ _____ =	\$ _____
5. Supplies and Materials	\$ _____	\$ _____	\$ _____ =	\$ _____
6. Services	\$ _____	\$ _____	\$ _____ =	\$ _____
7. Other Costs	\$ _____	\$ _____	\$ _____ =	\$ _____
8. Total Direct Costs (items 1-7)	\$ _____	\$ _____	\$ _____ =	\$ _____
9. Indirect Costs	\$ _____	\$ _____	\$ _____ =	\$ _____
10. Total Project Costs (Direct & Indirect)	\$ _____	\$ _____	\$ _____ =	\$ _____

PROJECT FUNDING FOR ENTIRE GRANT PERIOD

Requested from NHPRC: ¹		Cost Sharing: ²	
Outright	\$ _____	Cash Contributions	\$ _____
Matching	\$ _____	In-Kind Contributions	\$ _____
		Project Income	\$ _____
		Other Federal Grants ³	\$ _____
TOTAL NHPRC FUNDING	\$ _____	TOTAL COST SHARING	\$ _____

Total Project Funding (NHPRC Funds + Cost Sharing)⁴ = \$ _____

¹Indicate the amount of outright and/or Federal matching funds that is requested from the Commission.

²Indicate the amount of cash contributions that will be made by the applicant or third parties to support project expenses that appear in the budget. Include in this amount third-party cash gifts that will be raised to release Federal matching funds. (Consult the program guidelines for information on cost-sharing requirements.)

³Indicate the amount of actual or anticipated awards from other Federal agencies for this project and this grant period only.

⁴Total Project Funding should equal Total Project Costs.

Institutional Grant Administrator

Indicate the name, title, address, and phone number of the person who will be responsible for the actual financial administration of the grant if the award is made—e.g., ensuring compliance with the terms and conditions of the award, submitting financial status reports.

Name and Title (please type or print)

Address

Telephone (____) _____
area code

Date _____