Continuation Instructions

AmeriCorps State 2020-2021

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CONTINUATION REQUESTS

The following instructions for submitting a continuation request apply only to programs that are currently in their first or second year of operation within a grant cycle. If your program is currently in the final year of its grant cycle, you must apply using the application instructions for new and recompeting programs. In addition, if you are in year two or three of a cost reimbursement grant cycle, and you need to submit a new application to participate in the fixed amount grant; you cannot continue your existing project period and switch from cost-reimbursement to fixed-amount. Volunteer Mississippi and CNCS reserve the right to consider your continuation request if your fixed-amount application is not funded.

Use these instructions in conjunction with the Notice of Federal Funding Opportunity (Notice), Application Instructions and the AmeriCorps Regulations, 45 CFR §§ 2520-2550. **The Notice includes deadlines, eligibility requirements, submission requirements, maximum amount of funding per Member Service Year (MSY)[1], and other information that is specific to the grant competition.**

The AmeriCorps regulations include pertinent information (see Table 1, below). The Notice and Application Instructions can be found at https://www.volunteermississippi.ms.gov/americorps-funding-opportunity.

The full regulations are available online at https://www.gpo.gov/fdsys/browse/collectionCfr.action?collectionCode=CFR.

Table 1: Requirements in the AmeriCorps Regulations

Topics	Citation in the AmeriCorps Regulations
Member Service Activities	§2520.20 – §2520.55
Prohibited Activities	§2520.65
Tutoring Programs	§2522.900 – §2522.950
Matching Funds	§2521.35 – §2521.90
Member Benefits	§2522.240 – §2522.250
Calculating Cost Per Member Service Year (MSY)	§2522.485
Performance Measures	§2522.500 – §2522.650
Evaluation	§2522.500 – §2522.540 and §2522.700 – §2522.740
Selection Criteria and Selection Process	§2522.400 – §2522.475

If there is any inconsistency between the AmeriCorps regulations, the Notice, and the Application Instructions, the order of precedence is as follows:

1. AmeriCorps regulations 45 CFR §§ 2520-2550 take precedence over the
2. Notice of Funding Opportunity, which takes precedence over the
3. Application Instructions.

HOW TO SUBMIT YOUR CONTINUATION REQUEST

Click **Continuation/Renewal** on your eGrants home page. You will be shown a list of grants that are eligible to be continued. Select the grant you wish to continue. **Make sure you select the correct one. Do not start a new application.** The system will copy your most recently awarded application.

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[1] One MSY is equivalent to at least 1700 service hours, a full-time AmeriCorps position. The CNCS cost per MSY is determined by dividing the CNCS share of budgeted grant costs by the number of MSYs requested in the application. It does not include childcare or the cost of the education award.

Edit your continuation application as directed in the *Continuation Request* instructions below. When you have completed your work, click the **SUBMIT** button.

Be sure you also review the *Notice* when preparing your continuation application. If you have questions about the content of your continuation request, please email acms@ihl.state.ms.us.

IMPORTANT DATES

For specific dates for both the competitive and formula submissions, please reference the Notice found on https://www.volunteermississippi.ms.gov/americorps-funding-opportunity.

Competitive Submission
November 14, 2019	Competitive Continuation Application Due
November 15, 2019 – December 18, 2020	Competitive Continuation Review and Clarification Time Period
January 8, 2020	Notification of Selection for Competitive Funding Consideration
May 1, 2020	Notification of Selection for Competitive Funding

OR

Formula Submission
April 6, 2020	Application Due
April 7 – April 30, 2020	Review and Clarification Time Period
May 29, 2020	Notification of Selection for Formula Funding

WHAT TO INCLUDE IN YOUR CONTINUATION REQUEST

I. **Applicant Info and Application Info**
Update the Applicant Info and Application Info sections in eGrants. Note in the Continuation Changes field that you have updated the Application Info and/or Application Info section(s).

- Update the project period start and end dates.

- You must enter a **one-year** project period end date. If you select September 1, 2020 as the start date, then you must select August 31, 2021 as the end date.

II. **Narrative**
Your original application will appear in the Executive Summary and in the narrative sections Rationale and Approach/Program Design, Organizational Capability, Cost-Effectiveness and Budget Adequacy, Evaluation Summary or Plan, Amendment Justification, Clarification Information, and Continuation Changes, as appropriate.

With the exception of the Executive Summary, **DO NOT MAKE ANY CHANGES** to the original application narrative.

CNCS expects that programs will maintain a consistent program design for the duration of the three-year project period; however, we recognize that, on occasion, some programmatic changes are necessary. As a result, continuation applicants may request the changes listed below during the continuation process.

Information should be provided in the **Continuation Changes** narrative field as relevant.

- Changes in Operating Sites
- Significant Changes in Program Scope or Design
- Changes to Performance Measures
- Significant Changes to Monitoring Structures or Staffing

- Budget revisions (detail provided in Section VI.). Applicants may request to reduce **or** increase funding and/or slots during the continuation process. If funding reductions are requested, please correct the funding amounts listed in the Executive Summary.

The page limit for the Continuation Changes field is six pages, as the pages print out from eGrants.

Any continuation applicant not requesting changes that fit within the above categories should enter "N/A" in Continuation Changes. CNCS expects that most continuation applications will not be requesting changes.

Evaluation plans are approved by CNCS when applicants re-compete for funding. If you wish to make changes to your evaluation plan, do NOT change the text of the Evaluation Summary or Plan field in your application. Instead, send a revised version of the evaluation plan (with the proposed changes in track-changes mode) as an attachment to acms@ihl.state.ms.us. Volunteer Mississippi will notify you if the changes are approved.

III. Logic Model

Continuation applicants do not need to enter content into these fields unless changes to the originally-submitted logic model are being requested as part of the Continuation Changes. It is important to verify that the logic model transferred over when the continuation application was opened.

IV. Performance Measures

Your performance measures are copied from your previous year's application into your continuation request. If you made changes to your program, such as adding or changing grant-funded activities, or requesting additional slots or MSYs, you may need to revise your performance measures. To revise performance measures, "View/Edit" the performance measures that copy over from your original application, or add new performance measures (see Appendix A for instructions). Note in the Continuation Changes field that you have updated your performance measures. If you are proposing to significantly increase or decrease output or outcome targets for existing performance measures, provide a justification for this change.

V. Program Information

In the Program Information Section, review and make selections as appropriate. Applicants should only select priorities and characteristics that represent a significant part of the program.

AmeriCorps Funding Priorities.

Check any priority area(s) that apply to the proposed program. Only select Priorities that represent a significant part of the program focus, high quality program design and outcomes.

- Economic Opportunity – evidence-based interventions on the CNCS Evidence Exchange. In order to qualify for this priority, the applicant must be assessed as having Moderate or Strong evidence by the reviewers (https://www.nationalservice.gov/sites/default/files/evidenceexchange/CNCS_Economic_Opportunity_Evidence_Brief_2019_508.pdf). Or, increasing economic opportunities for communities by preparing people for the workforce.

- Education – evidence-based interventions on the CNCS Evidence Exchange. In order to qualify for this priority, the applicant must be assessed as having Moderate or Strong evidence by the reviewers (https://www.nationalservice.gov/sites/default/files/evidenceexchange/CNCS_Education_Evidence_Brief_112318_508.pdf).

- Healthy Futures - evidence-based interventions on the CNCS Evidence Exchange. In order to qualify for this priority, the applicant must be assessed as having Moderate or Strong evidence by the reviewers (https://www.nationalservice.gov/sites/default/files/evidenceexchange/HF_Evidence_Brief_FINAL_v2_508.pdf). Or, reducing and/or preventing prescription drug and opioid abuse.

- Veterans and Military Families -positively impacting the quality of life of veterans and improving military family strength

- Rural intermediaries that demonstrate measureable impact and primarily serve communities with limited resources and organizational infrastructure.
- Faith-based organization
- No NOFO priority area

Grant Characteristics

Check any grant characteristics that are a significant part of the proposed program:
- Faith-based organizations
- Professional Corps
- STEM Program
- Geographic Focus – Urban
- Geographic Focus – Rural
- None of the above grant characteristics

VI. **Budget**

Your budget from the previous year's application is copied into your continuation request so you can make the necessary adjustments. Revise your detailed budget for the 2019-2020 year. Incorporate any required CNCS increases, such as an increase to the member living allowance into your budget. **Continuation applicants may apply for expansions – dollars, MSY, and/or members.**

Source of Funds (Match)

In the "Source of Funds" field that appears at the end of Budget Section III, enter a brief description of the match. Identify each match source separately. Identify if the match is secured or proposed. Include the dollar amount, the match classification (cash or in-kind), and the source type (Private, State/Local, or Federal) for your **entire match**. The amount included in the Source of Funds section should match exactly with the total "Grantee Share" on the eGrants budget and Executive Summary. Define all acronyms the first time they are used.

VII. **Increasing Grantee Overall Share of Total Budgeted Costs**

Grantees are required to meet an overall matching rate that increases over time. You have the flexibility to meet the overall match requirements in any of the three budget areas, as long as the minimum match of 24% for the first three years, and the increasing minimums in years thereafter, are maintained. See 45 CFR §§ 2521.35-2521.90 for the specific regulations.

See Appendix E of the Application Instructions for applying for the Alternative Match Schedule. In the

Funding/Demographics Section enter:
- Other Revenue funds. Enter the amount of funds that your program uses to run the program that are not CNCS share or match.
- Number of Volunteers Generated by AmeriCorps members. Please enter the number of volunteers that will be participating in one day service projects or ongoing volunteer commitments that the proposed AmeriCorps members will generate.
- If Education Evidence-Based Intervention NOFO Priority, enter the row number (1-13) of the intervention in Table 1 of the Education Evidence Brief (see NOFO for hyperlink)
- If Economic Opportunity Evidence-Based Intervention NOFO Priority, enter the row number (1-4) of the intervention in Table 1 of the Economic Opportunity Evidence Brief (see NOFO for hyperlink)
- If Healthy Futures Evidence-Based Intervention NOFO Priority, enter the row number (1-5) of the intervention in Table 1 of the Healthy Futures Evidence Brief (see NOFO for hyperlink)

VIII. Review, Authorize, and Submit

eGrants requires that you review and verify your entire application before submitting, by completing the following sections in eGrants:

- Review
- Authorize
- Assurances
- Certifications
- Verify
- Submit

Read the Authorization, Assurances, and Certifications carefully (Appendix H of the Application Instructions). The person who authorizes the application must be the applicant's Authorized Representative or his/her designee and must have an active eGrants account to sign these documents electronically. An Authorized Representative is the person in your organization authorized to accept and commit funds on behalf of the organization. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

Be sure to check your entire application prior to submission to ensure that there are no errors. eGrants will also generate a list of errors if there are sections that need to be corrected prior to submission when you verify the application. If someone else is acting in the role of the applicant's Authorized Representative, that person must log into his/her eGrants account and proceed with Authorize and Submit. After signing off on the Authorization, Assurances, and Certifications, his/her name will override any previous signatory that may appear and show on the application as the Authorized Representative.

Note: Anyone within your organization who will be entering information in the application at any point during application preparation and submission in the eGrants system must have their own eGrants account. Individuals may establish an eGrants account by accessing this link: https://egrants.cns.gov/espan/main/login.jsp and selecting "Don't have an eGrants account? Create an account."

ADDITIONAL DOCUMENT REQUIREMENTS

Additional Documents must be emailed to acms@ihl.state.ms.us with the following subject line: [Legal Applicant Name]-[Application ID number]. Emails should include the following information:

- The legal applicant name and its point of contact information
- The application ID number
- A list of documents that should be attached to the email
- Individually saved files that are clearly labeled
- Files that include the legal applicant name and application ID number in the body of each document

For Cost Reimbursement Applicants

Section I: Program Operating Costs

Complete Section I, Program Operating Costs, of the Budget Worksheet by entering the "Total Amount", "CNCS Share", and "Grantee Share" for Parts A - I, for the 2020-2021 grant year, as follows:

A. Personnel Expenses
Under "Position/Title Description", list each staff position separately and provide salary and percentage of effort as percentage of FTE devoted to this award. Each staff person's role listed in the budget must be described in the application narrative and each staff person mentioned in the narrative must be listed in the budget as either CNCS or Grantee share. Because the purpose of this grant is to enable and stimulate volunteer community service, do not include the value of direct community services performed by volunteers. However, you may include the value of volunteer services contributed to the organization for organizational functions such as accounting, audit work, or training of staff and AmeriCorps members.

Volunteer Mississippi requires applicants proposing a corps of 20 or more AmeriCorps members to budget for one full-time staff person dedicated 100% to the AmeriCorps program.

B. Personnel Fringe Benefits
Under "Purpose/Description" identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If a fringe benefit amount is over 30%, please list covered items separately and justify the high cost. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item.

C. 1. Staff Travel
Describe the purpose for which program staff will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses, multiplied by the number of trips/staff. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information. Reimbursement should not exceed the federal mileage rate unless a result of applicant policy and justified in the budget narrative. If there is a training registration fee it should be included in the Staff Training line item. Only domestic travel is allowable.

Applicants may include funds in this line item for travel for staff and site staff to attend CNCS-sponsored technical assistance meetings. There are two to three such opportunities per year, including, but not limited to the National Conference on Service and Volunteering and the National Service Regional Training Conference. It is strongly suggested that applicants budget funds in this line item for travel to the National Service Regional Training Conference in Spring 2021 at a location to be determined.

Volunteer Mississippi requires applicants to budget for the following staff travel:
- Program/Fiscal staff orientation – One day training in Jackson in August 2020 that the program director and one fiscal staff person are required to attend. Applicants should include mileage along with lodging and meals if an overnight stay is necessary due to distance.
- AmeriCorps Staff Training – This training will be in Jackson and will most likely be two days. The program director is required to attend and other program staff are encouraged to attend. Applicants should include mileage along with lodging and meals if an overnight stay is necessary due to distance.

- Regional Staff Training – One day training to be held in a location and at a date to be determined. The program director is required to attend and other program staff are encouraged to attend. Applicants should include approximately 100 miles round trip.
- AmeriCorps Member Orientation – One day member event in Jackson. The program director is required to attend and all program staff are encouraged to attend. Applicants should include mileage along with lodging and meals if an overnight stay is necessary due to distance.
- AmeriCorps Member Celebration of Service – One day member event in Jackson. The program director is required to attend and all program staff are encouraged to attend. Applicants should include mileage along with lodging and meals if an overnight stay is necessary due to distance.

All travel costs must be itemized. For example: Travel to VM AmeriCorps Staff Training for 2 staff: Lodging - $110/night x 1 night x 2 staff = $220; Mileage – 300 miles roundtrip x $0.54/mile = $162; Meals - $30/day x 2 days x 2 staff = $120 = $502.

C. **2. Member Travel**
Describe the purpose for which members will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other related expenses for members to travel outside their service location or between sites. Costs associated with local travel, such as bus passes to local sites, mileage reimbursement for use of car, etc., should be included in this budget category. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information.

Volunteer Mississippi requires applicants to budget for the following member travel:
- AmeriCorps Member Orientation – One day member event in Jackson. All full, three quarter-time and half-time AmeriCorps members are required to attend. Less than half-time members may be encouraged to attend, dependent upon space availability and funding for the event. Applicants should include mileage along with lodging and meals if an overnight stay is necessary due to distance.
- AmeriCorps Member Celebration of Service – One day member event in Jackson. All full, three quarter-time and half-time AmeriCorps members are required to attend. Less than half-time members may be encouraged to attend, dependent upon space availability and funding for the event. Applicants should include mileage along with lodging and meals if an overnight stay is necessary due to distance.

All travel costs must be itemized. For example: Travel to VM AmeriCorps Member Orientation for 30 members: 8 vehicles x 300 miles roundtrip x $0.54/mile = $1,296.

D. **Equipment**
Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of **$5,000 or more per unit** (including accessories, attachments, and modifications). Any items that do not meet this definition should be entered in E. Supplies below. Purchases of equipment (total of both CNCS and Grantee share) are limited to 10% of the total CNCS funds requested. If applicable, show the unit cost and number of units you are requesting. Provide a brief justification for the purchase of the equipment under "Item/Purpose".

E. **Supplies**
AmeriCorps members must wear an AmeriCorps logo on a daily basis – preferably clothing with the AmeriCorps Mississippi logo. The item with the AmeriCorps Mississippi logo is a required budget expense. Please include the cost of the item with the AmeriCorps Mississippi logo in your budget or explain how your program will be providing the item to AmeriCorps members without using grant funds. Grantees may add the AmeriCorps Mississippi logo to their own local program uniform items using federal funds. Please note that your program will be using the AmeriCorps Mississippi logo in the budget description.

Include the amount of funds to purchase consumable supplies and materials, including member service gear and equipment that does not fit the definition above. You must individually list any single item costing $1,000

or more. Except for safety equipment, grantees may only charge the cost of member service gear to the federal share if it includes the AmeriCorps logo. All safety gear may be charged to the federal share, regardless of whether it includes the AmeriCorps logo. All other service gear must be purchased with non-CNCS funds.

F. Contractual and Consultant Services
Include costs for consultants related to the project's operations, except training or evaluation consultants, who will be listed in Sections G. and H., below. There is not a maximum daily rate.

G. 1. Staff Training
Include the costs associated with training staff on project requirements and training to enhance the skills staff need for effective project implementation, i.e., project or financial management, team building, etc. Training registration fees will be included in this section. If using a consultant(s) for training, indicate the estimated daily rate. There is not a maximum daily rate.

G. 2. Member Training
Include the costs associated with member training to support them in carrying out their service activities. You may also use this section to request funds to support training in Life After AmeriCorps. If using a consultant(s) for training, indicate the estimated daily rate. There is not a maximum daily rate.

H. Evaluation
Include costs for project evaluation activities, including additional staff time or subcontracts, use of evaluation consultants, purchase of instrumentation, and other costs specifically for this activity not budgeted in Personnel Expenses. This cost does not include the daily/weekly gathering of data to assess progress toward meeting performance measures, but is a larger assessment of the impact your project is having on the community, as well as an assessment of the overall systems and project design. Indicate daily rates of consultants, where applicable.

Volunteer Mississippi requires applicants to budget for implementing the evaluation in the application. All programs are required to conduct a process, outcome or impact evaluation. Programs should choose which type based on their research and evaluation goals, but must include some type of evaluation and must meet any additional CNCS evaluation requirements as well.

I. Other Operating Costs
Allowable costs in this budget category should include when applicable:

- Criminal history background checks and FBI checks for all members and for all employees or other individuals who receive a salary, education award, living allowance, or stipend or similar payment from the grant (federal or non-federal share). Please include $54 for an FBI fingerprint-based check plus $32 for the costs of the state check for criminal history checks for all covered positions. If funds are not budgeted, an explanation for how the costs will be covered must be noted in the budget.

- Volunteer Mississippi requires all applicants to include costs for an online member/staff time and activity reporting service. Applicants must include $2,110.50 for up to 40 MSYs, $52.75 for each additional MSY and $52.75 for each staff included in section I (personnel) of the proposed budget. This will enable your members and staff paid through the grant and/or counted as a grantee share to complete and submit timesheets/activity reporting online.

- Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. If space is budgeted and it is shared with other projects or activities, the costs must be equitably pro- rated and allocated between the activities or projects.

- Utilities, telephone, internet and similar expenses that are specifically used for AmeriCorps members and AmeriCorps project staff, and are not part of the organizations indirect cost allocation pool. If such expenses are budgeted and shared with other projects or activities, the costs must be equitably pro-

rated and allocated between the activities or projects.

- Recognition costs for members. List each item and provide a justification in the budget narrative. Gifts and/or food in an entertainment/event setting are not allowable costs as either CNCS or Grantee share.

Section II: Member Costs

Member costs are identified as "Living Allowance" and "Member Support Costs". Your required match can be federal, state, local, or private sector funds.

A. **Living Allowance**
    The narrative should clearly identify the number of members you are supporting by category (i.e., full-time, three- quarter time, half-time, reduced-half-time, quarter-time, minimum-time) and the amount of living allowance they will receive, allocating appropriate portions between the CNCS share and grantee match (Grantee share).

    The minimum and maximum living allowance amounts are provided in the Notice of Funding Opportunity.

    In eGrants, enter the total number of members you are requesting in each category. Enter the average amount of the living allowance for each type of member. In addition, enter the number of members for which you are not requesting funds for a living allowance, but for which you are requesting education awards.

B. **Member Support Costs**
    Consistent with the laws of Texas, you must provide members with the benefits described below.

    - **FICA.** Unless exempted by the IRS, all projects must pay FICA for any member receiving a living allowance, even when CNCS does not supply the living allowance. If exempted, please note in the narrative. In the first column next to FICA, indicate the number of members who will receive FICA. Calculate the FICA at 7.65% of the total amount of the living allowance.

    - **Worker's Compensation.** Budget for Workers' Compensation or Occupational, Accidental, Death and Dismemberment coverage for members to cover in-service injury or incidents.

    - **Health Care.** You must offer or make available health care benefits to full-time members in accordance with AmeriCorps requirements. Except as stated below you may not pay health care benefits to less-than-full-time members with CNCS Funds. You may choose to provide health care benefits to less-than-full-time members from other sources (i.e., non-federal) but the costs cannot be included in the budget. Less-than-full-time members who are serving in a full-time capacity for a sustained period of time (such as a full-time summer project) are eligible for health care benefits. In your budget narrative, indicate the number of members who will receive health care benefits. CNCS will not pay for dependent coverage. If health care is not budgeted for all full-time members, please confirm all full-time members will have access to coverage.

    - **Unemployment Insurance and Other Member Support Costs.** Include any other required member support costs here. Regarding Unemployment Insurance tax, the Texas Workforce Commission has determined that Living Allowances paid to AmeriCorps members are not considered covered wages under the Texas Unemployment Compensation Act. Therefore, Unemployment Insurance tax may not be budgeted to the grant or paid on AmeriCorps member living allowances.

    - **Note:** the value of the Segal Education Awards that members earn for their service is not identified in the budget. Also, the childcare reimbursements provided to eligible full-time members is not included in the budget.

Section III: Administrative/Indirect Costs

Administrative costs are general or centralized expenses of the overall administration of an organization that

receives CNCS funds and do not include particular project costs. These costs may include administrative staff positions. For organizations that have an established indirect cost rate for federal awards, administrative costs mean those costs that are included in the organization's indirect cost rate agreement. Such costs are generally identified with the organization's overall operation and are further described in Office of Management and Budget Uniform Guidance.

Options for Calculating Administrative/Indirect Costs (choose either A, B, or C)

Applicants choose one of three methods to calculate allowable administrative costs – a CNCS fixed percentage rate method, a federally approved indirect cost rate method, or a de minimis method. Regardless of the option chosen, the CNCS share of administrative costs is limited to 5% of the total CNCS funds <u>actually expended</u> under this grant. Do not create additional lines in this category.

Volunteer Mississippi retains a portion of the CNCS share of administrative costs for use in administering its sub-grantees. This amount must not exceed a one-fifths share of the maximum 5% CNCS share (i.e., allocating 1% as set aside for administering subgrants and the remaining 4% for other administrative costs of the sub grantee).

A. **CNCS-Fixed Percentage Method**
    Five Percent Fixed Administrative Cost Option
    The CNCS-fixed percentage rate method allows you to charge administrative costs up to a cap without a federally approved indirect cost rate and without documentation supporting the allocation. If you choose the CNCS-fixed percentage rate method (Section IIIA in eGrants), you may charge, for administrative costs, a fixed 5% of the total of the CNCS funds expended. In order to charge this fixed 5%, the grantee match for administrative costs may not exceed 10% of all direct cost expenditures.
    1. To determine the maximum CNCS share for Section III: Multiply the sum of the CNCS funding shares of Sections I and II by 0.0526. This is the maximum amount you can request as CNCS share. The factor 0.0526 is used to calculate the 5% maximum amount of federal funds that may be budgeted for administrative (indirect) costs, rather than 0.0500, as a way to mathematically compensate for determining Section III costs when the total budget (Sections I + II + III) is not yet established. Enter this amount as the CNCS share for Section III.A.

        CNCS Share:
        ([CNCS share of Section I] + [CNCS share of Section II] x .0526) x (.60) = Grantee 3%
        ([CNCS share of Section I] + [CNCS share of Section II] x .0526) x (.40) = Commission 2%
    2. To determine the Grantee share for Section III: Multiply the total (both CNCS and grantee share) of Sections I and II by 10% (0.10) and enter this amount as the grantee share for Section III.A.

        Grantee Share:
        (Total of Section I + Total of Section II) x .1 = Maximum Amount 10%
    3. Enter the sums of the CNCS and grantee shares under Total Amount.

B. **State or Federally Approved Indirect Cost Rate**
    If you have a Federally Approved Indirect Cost (IDC) rate, this method must be used and the rate will constitute documentation of your administrative costs, not to exceed the 5% maximum federal share payable by CNCS. Specify the Cost Type for which your organization has current documentation on file, i.e., Provisional, Predetermined, Fixed or Final indirect cost rate. Supply your approved IDC rate (percentage) and the base upon which this rate is calculated (direct salaries, salaries and fringe benefits, etc.). CNCS does not restrict the overall indirect cost rate claimed. It is at your discretion whether or not to claim your entire IDC rate to calculate administrative costs. If you choose to claim a lower rate, please include this rate under the Rate Claimed field.

    1. **Indirect Cost Total**: Determine the base amount of direct costs to which you will apply the IDC rate, including both the CNCS and Grantee shares, as prescribed by your established rate agreement (i.e., based on salaries and benefits, total direct costs, or other). Then multiply the appropriate direct costs

by the rate being claimed. This will determine the total amount of indirect costs allowable under the grant.

2. To determine the CNCS share: Multiple the sum of the CNCS funding share in Sections I and II by 0.0526. This is the maximum amount you can claim as the CNCS share of indirect costs.

CNCS Share:
([CNCS share of Section I] + [CNCS share of Section II] x .0526) x (.60) = Grantee 3%
([CNCS share of Section I] + [CNCS share of Section II] x .0526) x (.40) = Commission 2%
Grantee 3% + Commission 2% = Total CNCS Share
Indicate Commission 2% and Grantee 3% amounts separately in the budget "Calculation" but include the "Total CNCS Share" in the CNCS share of Section IIIB.

3. To determine the Grantee share: Subtract the amount calculated in step 2 (the CNCS share) from the amount calculated in step 1 (the Indirect Cost total). This is the amount the applicant can claim as grantee share for administrative costs.

Grantee Share:
Indirect Cost Total – Total CNCS Share = Grantee Share

C. **De Minimis Rate of 10% of Modified Total Direct Costs**
Organizations who have **never**, at any point in time, held a federally negotiated indirect cost rate (except for those non-Federal entities described in Appendix VII to Part 200 – States and Local Government and Indian Tribe Indirect Cost Proposals, paragraph (d)(1)(B)) and who receive less than $35 million in direct federal funding, may indefinitely use a *de minimis* rate of 10% of modified total direct costs (MTDC). Additional information regarding what is included in MTDC and use of this option can be found at 2 CFR 200.414(f) and 200.68. If this option is elected, it must be used consistently across all federal awards.

Source of Funds

In the "Source of Funds" field that appears at the end of Budget Section III, enter a brief description of the match. Identify each match source separately. Clearly identify if the match is "secured" or "proposed" by typing "secured" or "proposed" next to each description. Include dollar amount, the match classification (cash or in-kind), and the source type (Private, State/Local, or Federal) **for your entire match**. Define all acronyms the first time they are used. **The total amount of Source of Match must equal the Grantee Share amount total of the eGrants budget and the amount listed in the Executive Summary of the application narrative.**

APPENDIX B: DETAILED BUDGET INSTRUCTIONS (EGRANTS BUDGET SECTION)

These instructions apply only to applicants for fixed-amount grants, including education award programs (EAPs). Do not use if you are a professional corps applicant.

EAP and Fixed-Amount Grant applicants may only request a fixed amount of funding per MSY. Therefore, Fixed-Amount applicants are not required to complete a detailed budget or complete the Grantee Share column. However, you must complete the Source of Matching Funds Chart to identify the sources of the additional revenue you need to operate the program. If you are applying for the Stipend Fixed-Amount grant, you must pay at least the minimum living allowance listed in the Notice of Funding Opportunity for each type of position you are proposing.

Section II: AmeriCorps member positions

Member Positions
Identify the number of members you are requesting by category (i.e. full-time, three quarter-time, half-time, reduced half-time, quarter-time, minimum-time) and list under the column labeled **#w/o Allow** (without CNCS-funded living allowance). **Leave all other columns blank.**

The total number of member service years (MSYs) will **automatically calculate** at the bottom of the Member Positions chart. The MSYs are calculated as follows:

Member Positions	Calculation	MSY
_____ Full-time (1700 hours)	(_____ members x 1.00)	= _____
_____ Three quarter-time (1200 hours)	(_____ members x 0.700)	= _____
_____ Half-time (900 hours)	(_____ members x 0.500)	= _____
_____ Reduced Half-time (675 hours)	(_____ members x 0.3809524)	= _____
_____ Quarter-time (450 hours)	(_____ members x 0.26455027)	= _____
_____ Minimum-time (300 hours)	(_____ members x 0.21164022)	= _____
	Total MSYs	_____

Under "Calculation" you will enter the calculation for your grant request.

Total # of MSYs _____ x MSY amount _____ = Total Grant Request $ _____

Type the total amount requested in the "Total Amount" and "CNCS share" columns. Leave the "Grantee Share" blank. See example below (applies to a stipended fixed amount grant):

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share	edit	del
Program Grant Request	47.5 MSY x $9,500/MSY	$451,250	$451,250	$0	view	
Subtotal		$451,250	$451,250	$0		

Source of Matching Funds

In the "Source of Funds" field that appears at the end of Budget Section III, enter a brief description of the match **for your** **entire match**. Define all acronyms the first time they are used.

Match Description *(Include whether the match source is "Secured" or "Proposed")*	Amount	Match Classification *(Cash or In-Kind)*	Match Source *(Federal, State/Local, Private)*