

Welcome to GrantSolutions! You are now ready to begin filling out your Non-Competing Continuation Application. Included in this kit, you will find all of the forms and instructions necessary for you to complete your Non-Competing Application. Please take a look at the table below before starting your application.

Form	Explanation
Instructions	Begin by reading the Instructions (this page) which will provide you with a brief overview of the contents of the application.
SF-424A, Budget Information	<p>Begin by filling out the SF-424A as it will pre-populate some of the data in the SF-424. Please remember that you should NOT use decimals on the SF-424A. Round to the nearest whole number as necessary. The budget should total no more than the 2012 approved funding level.</p> <p>This form is an online form which means that you can open it and fill it out directly in GrantSolutions. You will have the ability to save and come back to this form at a later time.</p>
SF-424, Application for Federal Assistance	<p>After completing the SF-424A, much of the necessary information will pre-populate in the SF-424. Check the data populated and make any revisions necessary.</p> <p>This form is an online form which means that you can open it and fill it out directly in GrantSolutions.</p>
SF-424B, Assurances	This form is an online form which means that you can open it and fill it out directly in GrantSolutions.
Certification Regarding Lobbying Form Upload	You should download and sign a copy of the Certification Regarding Lobbying Form from the link provided on the <i>Application Control Checklist</i> page of GrantSolutions. You will need to upload the signed form in order to complete your application.
SF-LLL, Disclosure of Lobbying Activities	The SF-LLL form is only required of continuation applicants who have used non-Federal funds for lobbying activities. If you perform lobbying activities, you can enter the form online in GrantSolutions.
Indirect Cost Rate Agreement Upload	If you request indirect costs in your budget, you must upload a copy of your <u>current</u> Indirect Cost Rate Agreement.

<p>Cooperative Agreements Upload</p>	<p>You should download and have your authorized representative sign a copy of the new Cooperative Agreement from the link provided on the <i>Application Control Checklist</i> page of GrantSolutions. You will need to upload the signed agreement in order to complete your application.</p>
<p>Budget Narrative Upload</p>	<p>Please create and upload a budget narrative with justifications broken out by the categories listed on SF-424A. All items must include the method of cost calculation. This narrative should describe how the categorical costs were derived and how they relate to the success/outcome/objectives of the program. Further information on what is required is found on the next two pages.</p> <p>The budget justification should total no more than the 2012 approved funding level.</p>
<p>Project Narrative Upload</p>	<p>The project narrative portion of the application can be completed by going into the Performance Reporting System and creating projections in the PPR for next reporting period (Year 3: 09/30/12 – 3/29/13).</p> <p>Please note that that you will need to print this report from the Performance Reporting System, scan it, and then upload it in order to complete your application.</p>

Budget Submissions to ACF/HHS

- Provide a budget with line-item detail and detailed calculations for each budget object class identified on the Budget Information Form (SF-424A).
 - Personnel
 - Fringe Benefits
 - Travel
 - Equipment
 - Supplies
 - Contractual
 - Construction
 - Other
 - Indirect Charges (if applicable)
 - Total
- Detailed calculations must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient for the calculation to be duplicated.
- Provide a narrative budget justification for the request. The narrative budget justification should describe the necessity, reasonableness and allocation of the proposed costs.

Comments on Particular Categories

- **Personnel**
 - Identify each staff member and provide: the title; time commitment to the project in months; time commitment to the project as a percentage or full-time equivalent; annual salary; grant salary; wage rates; etc.
 - For example, Project Director - \$50,000/yr x .50FTE = \$25,000
- **Fringe**
 - Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, FICA, retirement insurance, taxes, etc.
 - For example: Fringe Benefit Rate of 40% - State Retirement 10%, Medicare 1.5%, Health 15%, Unemployment 10%, and Misc. 3.5% (Worker's comp, disability, etc.) \$600,000 (total personnel) x 40% = \$240,000
- **Travel**
 - Costs of project-related travel by employees of the applicant organization.
 - For each trip show: the total number of traveler(s); travel destination; duration of trip; flight cost, hotel cost, per diem; mileage allowances; etc.
 - This category does not include local travel.
 - For example: National Grantees conference in Washington, D.C. (3 participants) flights (\$300 x 3 travelers = \$900); hotel (\$226 x 3 travelers x 3 nights = \$2,034); per diem (\$71 x 3 travelers x 3 days = \$639); mileage allowance (\$0.51 x 20 miles x 3 travelers = \$31) Total: \$3,604

- **Equipment**
 - Equipment is “an article of non-expendable, tangible personal property having a useful life of more than one year and an acquisition cost that equals ... \$5,000” or more.
 - Acquisition cost means the net invoice unit price of an item of equipment, including the cost of any modifications, attachment, accessories or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired.
 - Since the purchase of equipment requires prior approval, please include a brochure for the item and the cost estimate.
- **Supplies**
 - These include consumable items.
 - Specify general categories of supplies and their costs.
 - For example: Pens/Pencils @ \$40 + Folders/Filing @ \$20 x 10 sites x 2 people/site = \$1,200
- **Contractual**
 - This line is for those contracts which transfer substantive programmatic work only.
 - This does NOT include contracting for routine goods or services used in or in support of a grant.
 - Please provide a lump sum amount for each expected contract with the name of the proposed organization (if known). Otherwise, describe the type of work that a contractor will be conducting with the amount that you are projecting it to cost.
- **Other**
 - May include: local travel, food, space and equipment rentals, non-consumable supplies, professional services costs, printing and publication, computer use, training costs (such as tuition and stipends), support services, staff development and administrative costs.
- **Indirect Charges**
 - Identify the approved indirect cost rate and include a copy of the indirect cost rate agreement in your request.
 - Provide the cost calculation showing the base amount multiplied by the indirect cost rate, along with the total.
 - If you would like to use less than your approved cost rate, you will need a letter on official letterhead, signed by the authorized representative, which states that you would like to utilize a rate other than your approved rate and what that rate is. Please upload this letter and submit it as part of your application.

More information about the requirements of budgets can be found in the Funding Opportunity Announcement: <http://www.acf.hhs.gov/grants/open/foa/view/HHS-2010-ACF-OFA-FX-0126>.