

# PHS 398 Modular Budget, Periods 1 and 2

OMB Number: 0925-0001

<b>Budget Period: 1</b>	Start Date: <input type="text" value="07/01/2011"/>	End Date: <input type="text" value="06/30/2012"/>
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<b>A. Direct Costs</b>		<b>* Funds Requested (\$)</b>
	* Direct Cost less Consortium F&A	<input type="text" value="250,000.00"/>
	Consortium F&A	<input type="text"/>
	<b>* Total Direct Costs</b>	<input type="text" value="250,000.00"/>

<b>B. Indirect Costs</b>				
	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text" value="MTDC"/>	<input type="text" value="47"/>	<input type="text" value="250,000.00"/>	<input type="text" value="117,500.00"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)	<input type="text" value="DHHS"/>
Indirect Cost Rate Agreement Date	<input type="text" value="09/11/2008"/>
Total Indirect Costs	<input type="text" value="117,500.00"/>

<b>C. Total Direct and Indirect Costs (A + B)</b>		Funds Requested (\$)
		<input type="text" value="367,500.00"/>

<b>Budget Period: 2</b>	Start Date: <input type="text" value="07/01/2012"/>	End Date: <input type="text" value="06/30/2013"/>
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<b>A. Direct Costs</b>		<b>* Funds Requested (\$)</b>
	* Direct Cost less Consortium F&A	<input type="text" value="250,000.00"/>
	Consortium F&A	<input type="text"/>
	<b>* Total Direct Costs</b>	<input type="text" value="250,000.00"/>

<b>B. Indirect Costs</b>				
	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text" value="MTDC"/>	<input type="text" value="47"/>	<input type="text" value="250,000.00"/>	<input type="text" value="117,500.00"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)	<input type="text" value="DHHS"/>
Indirect Cost Rate Agreement Date	<input type="text" value="09/11/2008"/>
Total Indirect Costs	<input type="text" value="117,500.00"/>

<b>C. Total Direct and Indirect Costs (A + B)</b>		Funds Requested (\$)
		<input type="text" value="367,500.00"/>

# PHS 398 Modular Budget, Periods 3 and 4

<b>Budget Period: 3</b>	Start Date: <input type="text" value="07/01/2013"/>	End Date: <input type="text" value="06/30/2014"/>	
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<b>A. Direct Costs</b>	* Direct Cost less Consortium F&A	* Funds Requested (\$)
	Consortium F&A	<input type="text" value="250,000.00"/>
	* Total Direct Costs	<input type="text" value="250,000.00"/>

B. Indirect Costs	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text" value="MTDC"/>	47	250,000.00	117,500.00
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)	<input type="text" value="DHHS"/>
Indirect Cost Rate Agreement Date <input type="text" value="09/11/2008"/>	Total Indirect Costs <input type="text" value="117,500.00"/>

<b>C. Total Direct and Indirect Costs (A + B)</b>	Funds Requested (\$)	<input type="text" value="367,500.00"/>
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<b>Budget Period: 4</b>	Start Date: <input type="text" value="07/01/2014"/>	End Date: <input type="text" value="06/30/2015"/>	
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<b>A. Direct Costs</b>	* Direct Cost less Consortium F&A	* Funds Requested (\$)
	Consortium F&A	<input type="text" value="250,000.00"/>
	* Total Direct Costs	<input type="text" value="250,000.00"/>

B. Indirect Costs	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text" value="MTDC"/>	47	250,000.00	117,500.00
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)	<input type="text" value="DHHS"/>
Indirect Cost Rate Agreement Date <input type="text" value="09/11/2008"/>	Total Indirect Costs <input type="text" value="117,500.00"/>

<b>C. Total Direct and Indirect Costs (A + B)</b>	Funds Requested (\$)	<input type="text" value="367,500.00"/>
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# PHS 398 Modular Budget, Periods 5 and Cumulative

**Budget Period: 5**

Start Date:

End Date:

**A. Direct Costs**

	<b>* Funds Requested (\$)</b>
* Direct Cost less Consortium F&A	<input type="text" value="250,000.00"/>
Consortium F&A	<input type="text"/>
<b>* Total Direct Costs</b>	<input type="text" value="250,000.00"/>

**B. Indirect Costs**

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	* Funds Requested (\$)
1.	<input type="text" value="MTDC"/>	<input type="text" value="47"/>	<input type="text" value="250,000.00"/>	<input type="text" value="117,500.00"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Cognizant Agency (Agency Name, POC Name and Phone Number)

Indirect Cost Rate Agreement Date

Total Indirect Costs

**C. Total Direct and Indirect Costs (A + B)**

Funds Requested (\$)

**Cumulative Budget Information**

**1. Total Costs, Entire Project Period**

*Section A, Total Direct Cost less Consortium F&A for Entire Project Period	\$	<input type="text" value="1,250,000.00"/>
Section A, Total Consortium F&A for Entire Project Period	\$	<input type="text"/>
*Section A, Total Direct Costs for Entire Project Period	\$	<input type="text" value="1,250,000.00"/>
*Section B, Total Indirect Costs for Entire Project Period	\$	<input type="text" value="587,500.00"/>
*Section C, Total Direct and Indirect Costs (A+B) for Entire Project Period	\$	<input type="text" value="1,837,500.00"/>

**2. Budget Justifications**

Personnel Justification	<input type="text" value="PersonnelJustification.pdf"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
Consortium Justification	<input type="text" value="ConsortiumJustification.pdf"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>
Additional Narrative Justification	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/>	<input type="button" value="View Attachment"/>