Federal Agency Form Instructions

Form Identifiers	Information
Agency Owner	Grants.gov
Form Name	Budget Information for Non-Construction Programs (SF-424A)
Form Version	1.0
OMB Number	4040-0006
OMB Expiration Date	01/31/2019

Form Field Instructions

Field Number	Field Name	Required or Optional	Information
-	SECTION A – BUDGET SUMMARY	-	-
1.	Budget Summary Lines 1-4 Columns (a) and (b)	At least one row is required.	For applications pertaining to a single federal grant program (Catalog of Federal Domestic Assistance number) and not requiring a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b). The Catalog number will be in the format ##.### (e.g., 93.061 for Catalog program title "Innovations in Applied Public Health Research").
1-a.	Grant Program Function or Activity (a)	At least one is required	Enter the name of the activity or function.
1-b.	Catalog of Federal Domestic Assistance Number (b)	At least one is required	Enter the Catalog of Federal Domestic Assistance Number.

Field Number	Field Name	Required or Optional	Information
1-c.	Estimated Unobligated Federal Funds (c)	Conditionally Required. Please read the detailed information provided.	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f).

Field Number	Field Name	Required or Optional	Information
1-d.	Estimated Unobligated Non-Federal Funds (d)	Conditionally Required. Please read the detailed information provided.	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f).

Field Number	Field Name	Required or Optional	Information
1-e.	New or Revised Budget Federal Funds (e)	Conditionally Required. Please read the detailed information provided.	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f).

Field Number	Field Name	Required or Optional	Information
1-f.	New or Revised Budget Non-Federal Funds (f)	Conditionally Required. Please read the detailed information provided.	For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year). For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of the amounts in Columns (e) and (f). For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of federal funds and enter in Column (f) the amount of the increase or decrease of non-federal funds. In Column (g) enter the new total budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (go) should not equal the sum of the amounts in Columns (e) and (f).
1-g.	Total (g)	Required	Total for Row 1a – 1f. If using electronic form, these numbers are auto-calculated.
5.	Totals	Required	Totals for each column. If using electronic form, these numbers are auto-calculated.
-	SECTION B - BUDGET CATEGORIES	-	-
6.	Object Class Categories		

Field Number	Field Name	Required or Optional	Information
6-1. thru 6-4.	Grant Program, Function or Activity	Required	In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each Grant Program, Function or Activity, fill in the total requirements for funds (both federal and non-federal) by object class categories. If using the Budget Information form through Grants.gov, the Grant Program, Function, or Activity is pre-populated by the Grant Program Function or Activity from column (A) in Section A – Budget Summary.
6-a.	Personnel	Optional	Enter funds required for personnel from the selected program. If not applicable, leave blank.
6-b.	Fringe Benefits	Optional	Enter funds required for fringe benefits from the selected program. If not applicable, leave blank.
6-c.	Travel	Optional	Enter funds required for travel from the selected program. If not applicable, leave blank.
6-d.	Equipment	Optional	Enter funds required for equipment from the selected program. If not applicable, leave blank.
6-e.	Supplies	Optional	Enter funds required for supplies from the selected program. If not applicable, leave blank.
6-f.	Contractual	Optional	Enter funds required for contractual costs from the selected program. If not applicable, leave blank.
6-g.	Construction	Optional	Enter funds required for construction from the selected program. If not applicable, leave blank.
6-h.	Other	Optional	Enter funds required for other costs from the selected program. If not applicable, leave blank.
6-i.	Total Direct Charges (sum of 6a – 6h)	Required	Sum of 6a – 6h. If using electronic form, these numbers are auto-calculated.
6-j.	Indirect Charges	Optional	Enter the amount of indirect cost. If not applicable, leave blank.

Field Number	Field Name	Required or Optional	Information
6-k.	TOTALS (sum of 6i and 6j)	Required	Enter the total of amounts on Lines 6i and 6j. (This amount is auto-calculated if using Grants.gov.) For all applications for new grants and continuation grants, the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5. If using electronic form, these numbers are auto-calculated.
7.	Program Income	Optional	Enter the estimated amount of total income, if any, expected to be generated from this project. If not applicable, leave blank.
-	SECTION C – NON-FEDERAL RESOURCES	-	-
8-a.	(a) Grant Program	Required	Name of the grant program from which funds will be derived. Defaults to the corresponding program name in section A, but may be overwritten if called for by the instructions for this funding opportunity.
8-b.	(b) Applicant Contribution for Non-Federal Resources	Optional	Enter resources provided by the applicant for the selected program. If not applicable, leave blank.
8-c.	(c) State Contribution for Non-Federal Resources	Optional	Enter resources provided by one or more states for the selected program. If not applicable, leave blank.
8-d.	(d) Other Sources of Contribution for Non-Federal Resources	Optional	Enter resources provided by the other sources (e.g. donors) for the selected program. If not applicable, leave blank.

Field Number	Field Name	Required or Optional	Information
8-e.	(e) Total of Non-Federal Resources for Grant Program sum of line (a) through (d)	Required	Total Sum of 8(b) – 8(d)
12-b. thru 12-e.	Total (sum of lines 8-11)	Required	Total for each column. If using electronic form, these numbers are auto-calculated.
-	SECTION D – FORECASTED CAST NEEDS	-	-
13.	Federal Total for 1st Year	Required	Sum of Federal 1st Quarter – 4th Quarter Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
	Federal Forecasted Cash Needs for 1st Quarter	Optional	Enter the forecasted cash needs from federal sources for the first quarter of the first program year. If not applicable, leave blank.
	Federal Forecasted Cash Needs for 2nd Quarter	Optional	Enter the forecasted cash needs from federal sources for the second quarter of the first program year. If not applicable, leave blank.
	Federal Forecasted Cash Needs for 3rd Quarter	Optional	Enter the forecasted cash needs from federal sources for the third quarter of the first program year. If not applicable, leave blank.
	Federal Forecasted Cash Needs for 4th Quarter	Optional	Enter the forecasted cash needs from federal sources for the fourth quarter of the first program year. If not applicable, leave blank.
14.	Federal Total for 1st Year	Required	Sum of Federal 1st Quarter – 4th Quarter Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
	Non-Federal Forecasted Cash Needs for 1st Quarter	Optional	Enter the forecasted cash needs from federal sources for the first quarter of the first program year. If not applicable, leave blank.
	Non-Federal Forecasted Cash Needs for 2nd Quarter	Optional	Enter the forecasted cash needs from federal sources for the second quarter of the first program year. If not applicable, leave blank.

Field Number	Field Name	Required or Optional	Information
	Non-Federal Forecasted Cash Needs for 3rd Quarter	Optional	Enter the forecasted cash needs from federal sources for the third quarter of the first program year. If not applicable, leave blank.
	Non-Federal Forecasted Cash Needs for 4th Quarter	Optional	Enter the forecasted cash needs from federal sources for the fourth quarter of the first program year. If not applicable, leave blank.
15.	TOTAL (sum of lines 13 and 14)	Required	Total for each column. If using electronic form, these numbers are auto-calculated.
	Total Forecasted 1st Year	Required	Total Sum of 1st Year Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
	Total Forecasted 1st Quarter	Optional	Total 1st Quarter Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
	Total Forecasted 2nd Quarter	Optional	Total 2nd Quarter Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
	Total Forecasted 3rd Quarter	Optional	Total 3rd Quarter Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
	Total Forecasted 4th Quarter	Optional	Total 4th Quarter Federal and Non-Federal Forecasted Cash Needs. If using electronic form, these numbers are auto-calculated.
-	SECTION E – BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT	-	-
16-a. (16-19)	(a) Grant Program	Required	Name of the grant program from which funds will be derived. Defaults to the corresponding program name in section A, but may be overwritten if called for by the instructions for this funding opportunity.
-	FUTURE FUNDING PERIODS (YEARS)	-	-

Field Number	Field Name	Required or Optional	Information
16-b.	(b) First Future Funding Period (year)	Optional	Enter the estimated federal funds that will be required in the first funding year for the selected program.
16-c.	(c) Second Future Funding Period (year)	Optional	Enter the estimated federal funds that will be required in the second funding year for the selected program.
16-d.	(d) Third Future Funding Period (year)	Optional	Enter the estimated federal funds that will be required in the third funding year for the selected program.
16-e.	(e) Forth Future Funding Period (year)	Optional	Enter the estimated federal funds that will be required in the fourth funding year for the selected program.
20.	Total (sum of lines 16 – 19)	Required	Total Sum of Estimated Federal Funds needed for balance of project per year. Auto-calculated.
-	SECTION F – OTHER BUDGET INFORMATION	-	-
21.	Direct Charges	Optional	Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.
22.	Indirect Charges	Optional	Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.
23.	Remarks	Optional	Provide any other explanations or comments deemed necessary.