

OREGON DEPARTMENT OF JUSTICE

2023 - 2025

**VICTIMS OF CRIME ACT (VOCA)
CRIMINAL FINE ACCOUNT (CFA)**

NON-COMPETITIVE PROGRAM GRANT

E-GRANTS FORM INSTRUCTIONS



**Attorney General Ellen F. Rosenblum
Oregon Department of Justice
1162 Court Street NE
Salem, OR 97301-4096**

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FORM A: Cover Page

- 1. ORGANIZATION CERTIFICATION:** Certify that the information included under the “Organization Information” and “Organization Members” sections of E-Grants are complete and accurate. Ensure that the appropriate people have access to this grant application, including those who will need access for reporting purposes. Information to make necessary changes can be found in the CVSSD E-Grants Applicant User Guide.

The CIVIL RIGHTS training certification is required and must be updated & uploaded in Organizational Details every two (2) years. Information to fulfill this requirement can be found [here](#). **This requirement must be completed before signing the Grant Agreement.**

The Whistleblower Protection certification is required. All applicants must certify that they are in compliance with federal whistleblower protection requirements (41 U.S.C. 4712), including informing employees of their rights and remedies. Applicants must complete and upload the Whistleblower Certification at least once every two (2) years. **This requirement must be completed before signing the Grant Agreement.**

Applicants must agree to send at least one (1) representative to a required applicable training hosted by CVSSD. The annual trainings include Non-Profit Directors Training, Oregon District Attorney’s Association (ODAA) VAP Track and CAC - MDT Day. Though not required, costs may be included in the application budget. Annual training dates, location & details will be posted

on the CVSSD website and distributed via the DV/SA and VAP listservs.

2. Application Information:

Questions a, c, f, g, and i will automatically populate from the information entered in “My Organization”. If any of this information is incorrect, please contact CVSSD staff to have corrections made.

b. Physical address of the applicant:

Enter the physical address of the applicant if different from the mailing address. If the address is confidential, enter “confidential” instead.

d. Additional county(ies) served:

Include ALL counties being served by this applicant.

e. Congressional District(s) Served:

Indicate ALL districts that are covered by your service area. This is a federal requirement. The Congressional District map is available next to this question for reference.

3. Implementing Organization or Program Type: Choose the sub-category in the government agency type that describes the applicant agency. If the applicant selects “Other”, a written description must be included.

4. Staff Information

a. Indicate the total number of staff proposed to support the work of this VOCA award. **Do not prorate based on FTE.**

- b. Estimated number of staff hours funded through this VOCA award.

4. Application to receive funds.

This is auto populated. Double check that CVSSD has properly matched this question to your agency/program.

FORM B. Staff, Volunteers, and Training Requirements

All applicants must complete the Staff Roster for ALL grant funded staff. Form B provides the applicant access to view the Staff Roster. Reminder, no edits to the Staff Roster report can be made from this page; to make edits to the Staff Roster applicants need to access the roster under “My Organization”. Select “My Organization” at the top of the page, then select “Organization Details” to access the Staff Roster form.

On the Staff Roster, be sure to complete all of the required fields (marked with *) for each staff person. This is a multiple page form. Click on the “Add” button to create a new page for additional staff.

Staff roster information for any unfilled positions, including soon to be hired, must be completed during the application process by entering “vacant” in the name field and any other known information (title, job description, funding source). The Staff Roster MUST then be updated at the time of hire.

- **Date vacated:** For staff who are no longer employed, enter their end date. Do not delete their information.
- **Bicultural/Bilingual:** Indicate bicultural and/or bilingual, followed by the specific cultural and language capacity.

- **Job description:** Upload the *current & dated* job description for each staff funded by CVSSD grants.
- **Funding for the position:** All funding sources supporting the entire FTE of a grant funded position should be included in this table. Verify with the FTE on the grant Budget Page. E-Grants will auto-calculate the FTE on each budget page when you SAVE.
- **Training received:** Direct service staff, volunteers, and interns **MUST** comply with the [training requirements](#) outlined in the RFA and in the VOCA Handbook. Include the total number of hours per completed training for each staff.
- **SVAA and DV/SA Staff Trainings.** These are training for both nonprofit and government based service providers and they provide a foundation regarding victim services and advocacy. If YES, enter the date the requirement was met. If NO, identify an internal plan to meet this requirement as your CVSSD Fund Coordinator will inquire.

FORM D. Advancing Equity and Meaningful Engagement

All applicants must submit a written plan or other materials outlining the agencies actionable steps to enhance equity, address oppression, and reduce disparities for communities of color, LGBTQ+, people with disability, and other populations impacted by inequity.

If an applicant does not have a plan and/or other written materials available, the applicant will explain how the agency will develop this plan within the first 180 days of this award.

FORM E. Meaningful Access to Effective Services

Effective services are survivor centered, trauma informed and culturally responsive. Survivors have the right to self-determination and to make informed decisions about the services

they receive. This means offering services that are accessible and responsive to survivors' cultural, gender, and other intersecting identities. Services may include but are not limited to emergency assistance, culturally responsive services, hate or bias incident support, relationship building with culturally specific community partners, referrals to culturally appropriate services for additional services, culturally diverse material, and culturally appropriate accommodations.

In this section, applicants will describe:

- any culturally specific programming or services offered by the agency;
- how the agency will educate victims of crime of the existence of Oregon's Hate & Bias Incident Reporting Hotline and counseling support available through the Crime Victim Compensation Program (CVCP);
- existing relationships, either formal or informal, that exist between the agency and existing culturally specific community partners offering support services to communities impacted by inequity;
- the culturally specific material that is available in common waiting areas and victim specific spaces, and;
- the agencies process identifying and evaluating potential culturally appropriate accommodations;

FORM F. Project Collaboration

Community partnerships and collaborations are essential when providing services to victims of crime. In this section, applicants will describe:

- a. coordination with non-profit DVSA's or other community and or Tribal Nations or government-based programs,
- b. the status of the Sexual Assault Response Team (SART) in the applicants county;

- c. how services for child victims of abuse are coordinated with community and other government-based programs, and;
- d. how services for general victims of crime (non DV/SA/Child Abuse victims) are coordinated with community and other government-based programs.

FORM G. Services Checklist

All applicants requesting VOCA funds must complete the VOCA Services Checklists. The checklists have been updated to reflect the victimizations and direct services list in the VOCA Performance Measures Tool (PMT) that will be submitted quarterly.

FORM H. Administrative Risk Self-Assessment

An Administrative Risk Self-Assessment is required as part of the CVSSD Monitoring Process.

Complete each section or select "Not Applicable" depending on the type of agency you represent. For each statement, select one of three responses. Remember to respond to each statement. When complete, save the form before exiting the page. CVSSD will score the self-assessment to determine if the applicant is low, medium, or high risk. Depending on level of risk and its contributing factors, CVSSD may increase monitoring and technical assistance for the applicant/award recipient.

Applicants may access printable copies of CVSSD's financial and administrative risk assessment questions at [Grant Guidance Documents](#). Helpful tips and resources for successful grant administration are included in the citations and footnotes of the risk assessment documents.

FORM I. Financial Management Risk Self-Assessment

CVSSD is required to review and evaluate potential risks posed by applicants prior to awarding Federal funds (2 CFR § 200.205). For each statement, select one of three responses. Remember to respond to each statement. When complete, save the form before exiting the page. CVSSD will score the self-assessment to determine if the applicant is low, medium, or high risk. Depending on level of risk and its contributing factors, CVSSD may increase monitoring and technical assistance for the applicant/award recipient.

Applicants may access printable copies of CVSSD's financial and administrative risk assessment questions at [Grant Guidance Documents](#). Helpful tips and resources for successful grant administration are included in the citations and footnotes of the risk assessment documents.

FORM J: MOUs, Contract, and Subawards

This form page may be left blank if no Memorandum of Understanding (MOU), contract or subaward is proposed as a part of this application.

CVSSD expects that strong partnerships will be developed for project implementation purposes and to ensure that the project is effectively responding to the needs of the population being served. For any formal partnerships that do not involve an exchange of funds, a Memorandum of Understanding must be used. If grant funds will be paid to an outside entity, the *Checklist for Determining if an Entity Receiving Funds has a Contractor or Subrecipient Relationship* should be used as guidance to determine whether a contract or subaward is more appropriate. Read the guidance and procurement process [here](#).

Part “A” - Memorandum of Understanding (MOU). A sample MOU is available on this E-Grants form page. Upload a complete, signed MOU. It is okay to upload an unsigned MOU if a signed copy is not yet available. A signed copy of the MOU will be required prior to the execution of grant award documents. Up to three MOUs may be uploaded under Part ‘A’.

For applicants proposing to work with Tribal Nations (or Tribal Nations proposing to work with another partner):

- First consult with the Tribal Nation to determine if a Tribal Resolution or an MOU is the appropriate documentation. The MOU template may be revised as necessary. Additionally, ensure that Tribal Council or Leadership will meet to approve documents related to the proposed collaborative partnership within the open solicitation period.

Part ‘B’ - Contracts. View the required minimum elements of a contract [here](#). If proposing to contract funds to an individual or organization, then respond to **Question #1a - #1j: “Proposed Contract #1.”** Upload a complete, signed contract under Question #1i. It is okay to upload an unsigned Contract if a signed copy is not yet available. A signed copy of the Contract will be required prior to the execution of grant award documents.

Additional contracts may be included. Select ‘yes’ if the applicant intends to add another contract. A new section will automatically appear. Select ‘no’ if the applicant does not intend to enter another contract. Click SAVE for either answer.

Part ‘C’ – Subawards. View an example subaward agreement [here](#). If proposing to subaward funds to another organization or Tribal Nation, then respond to **Question #1a - #1h: “Proposed Subaward #1.”** Upload a complete, signed subaward under Question #1g. It is okay to upload an unsigned subaward if a

signed copy is not yet available. A signed copy of the subaward will be required prior to the execution of grant award documents.

Additional subawards may be included. Select 'yes' if the applicant intends to add another contract. A new section will automatically appear. Select 'no' if the applicant does not intend to enter another contract. Click SAVE for either answer.

FORM K: Other Attachments

- 1. Letter of Authorization (*All applicants*):** If someone other than the county Board of Commissioner Chairperson or Chairperson of the agency's Board of Directors intends to sign grant documents (including reports), applicants **MUST** upload a signed letter of authorization to the application. A sample form for the Letter of Authorization is found [here](#).
- 2. Certification of Non-Supplanting (*Government entities and Tribal Nations only*):** If applicable, upload a current signed and dated Certification of Non-Supplanting. The certificate must be signed by the authorized official. The required form is found [here](#).
- 3. Statement of Compliance (*NEW grant applicants only*):** Upload a completed Statement of Compliance. The authorized official for the applicant's agency must initial each of the listed Grant Agreement Exhibit documents to certify intended compliance. The required form is found [here](#).

An "Authorized Official" is defined as the individual legally responsible for obligating the organization to receive federal

funds and meet the terms of the federal program as included in this application and comply with the Terms and Conditions in the CVSSD Grant Agreement. CVSSD sample grant agreement language is available [here](#) on the CVSSD Website.

- 4. Certificate of District/City Attorney and Program Director (County & City VAP only):** Upload the completed Certificate after the District Attorney/City Prosecutor and the VAP Program Director has signed and dated the certificate. The required for is found [here](#).

All applicants are required to submit the following documents, unless otherwise indicated. If not indicated, check *Not Applicable*:

Note: Signing this document certifies compliance with providing core services to ALL crime victims as designated in ORS 147.227 and OAR 137-78-0000 through 137-78-0050. See the DOJ CVSSD website to download the ORS and OARs governing these funds:

<http://www.doj.state.or.us/victims/pages/cfa.aspx>

5. Organizational Chart

Upload the current organizational chart that shows the internal structure of the organization.

FORM L: Program Income Narrative

See CVSSD's [Program Income Policy](#) for more information.

If you do not intend to earn Program Income as described on Form L, click No. SAVE.

If you intend to earn Program Income as described on Form L, click Yes, and additional information and narrative responses will be required. The amount of Program Income listed on #4 must match the amount of Program Income that you include on the upcoming Budget Page.

Approval of federal Program Income requires a written policy statement assuring that services will be provided to victims at no cost, without concern for their financial resources or availability of a third party payer. Upload your policy. SAVE.

FORM M: Personnel

General Information: Each applicant is requested to complete and submit a 2-year budget. A list of VOCA Allowable and Unallowable Costs and Services is available on the grant Application Menu in E-Grants. An allocation table is located in the RFA which is available on the grant Application Menu in E-Grants.

Personnel Page Instructions: Consider how each grant funded staff person's time is identified to providing direct victim services, training, outreach, collaborative partnerships and other allowable activities. Each funded category must be for the benefit of victims.

Only include costs for staff providing direct client services and services that can be identified specifically with the project (includes supervision of direct service staff and completion of program-related records, statistics, and reports). *Any staff performing general administrative duties, duties that cannot be readily identified with the project (salaries and expenses of*

executive directors, personnel administration, fiscal administration, etc.) should be included on the Other Costs page under Administrative Costs or Indirect Costs.

Applicants completing this form should keep the following in mind:

- This is a multiple page form. A separate personnel page must be created for each grant-funded staff. After the form is SAVED, click on the ADD button to open a new page.
- Applicants should consider any personnel salary and benefit increases when preparing project budget requests for the project award period October 1, 2021 – September 30, 2023;
- Salary should only include actual wages; all mandatory and optional personnel expenses should be included in the personnel expenses lines;
- Personnel expenses (mandatory payroll taxes and optional fringe benefits) may include any of the following: FICA, workers' compensation, unemployment insurance, health insurance, short/long term disability, retirement, etc.;
- The basis for each computation should be clearly demonstrated; and
- The information entered on each page aligns with the position name(s) and FTE(s) shown on the Staff Roster and in the Project Description.

1. **Position Title:** For each position provide the position title.
2. **Salary Funded by this Grant:** List the total salary for the position to be funded by this grant, either 100% in each category or allocated between them for a two-year period. In the first text box provide a detailed calculation that clearly shows how the budgeted salary for each category of the two-year period was determined. This should be a total amount for the full award period of two years.

Example: *Salary Detail: \$30,000/year x 2 years x .6 FTE*

(DV funds) = \$36,000 and \$30,000/year x 2 years x .2 FTE (SA funds) = \$12,000. This can also be calculated using an hourly approach: \$14.4231/hour x 2496 hours (.6 DV funds) = \$36,000 AND \$14.4231/hour x 832 hours (.2 SA funds) = \$12,000.

- 3. Total Two-Year Salary:** List the total two-year salary for this position funded at a full-time equivalency (1 FTE). Even if the position is part-time, list the cost for 1 FTE. A 1 FTE position for 24 months is calculated at 4160 hours.

Example: *Two years of salary for 1 FTE would be \$60,000 (\$14.4231 x 4160 hours = \$60,000).*

- 4. Personnel Expenses Funded by this Grant:** Indicate the amounts your agency is requesting for personnel expenses to be funded by this grant, either 100% in one category or allocated between categories. In the text box, provide a detailed calculation that clearly shows how the budgeted personnel expenses were determined for the two-year grant period. Indicate the dollar amount and the rate used to calculate the personnel costs of the staff position to be allocated to the project and list the personnel costs included in the calculation (FICA, UI, Workers' Compensation, health insurance, retirement, etc.).

Example: *\$60,000 x .35 = \$21,000 X .6 (DV funds) = \$12,600 and \$60,000 x .35 = \$21,000 X .2 (SA funds) = \$4200. Personnel expenses are calculated at 35% of the total salary. Personnel expenses may include employer portion of FICA, workers' compensation, unemployment, health insurance, short/long term disability, life insurance, and retirement.*

- 5. Total Two-Year Personnel Expenses:** Indicate the total two-year costs of personnel expenses for this position funded at a full-time equivalency (1 FTE). Even if the position is part-time, list the cost for 1 FTE for a two-year

period.

Example: Personnel expenses for 1 FTE for a two-year period is \$60,000 x .35. The total two-year personnel expenses would be \$21,000.

6. **FTE Calculation:** The FTE will auto-populate once the salary and benefits are entered. The CVSSD E-Grants system calculates FTE by combining both salary and personnel expenses for a two-year period. Grantees should use the same method of calculating FTE on the Staff Roster. FTE can be calculated using the following formula:

Actual Grant Funded Salary + Actual Grant Funded Personnel Expenses / Total 1 FTE Salary + Total 1 FTE Personnel Expenses (based on amounts for a two-year period).

7. **What are the top five (5) major direct service activities to be performed by this proposed VOCA funded staff member?** Explain the need for the personnel funds requested. Specifically describe the five (5) major direct service activities to be conducted by the grant -funded position in this project. Ensure that the description is consistent with the Job Description and the associated checklists and narratives.

FORM N: Contracts and Subawards

Applicants completing this section of the budget form should keep the following in mind:

- Expenditures in this section should support and enhance direct services and show they are consistent with the project activities;

- The basis for each computation should be clearly demonstrated;
- Costs should be directly attributable to the project or represent a pro-rated cost based on an agency identified allocation method;
- Expenditures must be allowable costs for the grant funds that are being requested; and
- The budget narrative should clearly explain the benefits of each grant-funded expense to the project.

Contract/Subaward. If the applicant is requesting funds in this line item, the applicant is required to complete **Form J: MOUs, Contracts and Subawards** and upload a copy of the Contract or Subaward.

Name of Proposed Contractor/Subawardee. The name of the proposed contractor/subawardee will pre-populate on this form.

Contract/Subaward Period. Enter the dates for the contract period. This should coincide with the dates on the contract uploaded on Form J.

Contract/Subaward Amount. Enter the total Contract Amount to be funded by this grant, either 100% in one category or allocated between them. Do not include contracted services for accounting or other administrative services, these costs should be included on the Services & Supplies page under Administrative Costs or Indirect Costs.

Consultant fees in excess of \$650 per day or \$81.25 per hour require additional justification and prior approval.

Calculation Examples: Contract for FTE: \$15/hour X 1040 hours = \$15,600; 40% (\$6,240) DV funds, 60% (\$9,360) SA funds. Contract for Trainer: \$50/hour X 16 hours = \$800; 100% DV

Consider all expenses to be paid on the Contract in addition to any compensation (training costs, travel costs, mileage, meals and lodging, supplies, etc.).

Calculation Example: Contract for Trainer: \$300 for mileage, per diem and lodging and \$50 for supplies and copies.

FORM O: Services and Supplies

Each applicant is requested to complete and submit a 2-year budget. A list of *VOCA Allowable and Unallowable Costs and Services* is available on the grant Application Menu – Forms.

Program Income: Applicants who responded “yes” on **Form L. Program Income Narrative** will include within this proposed budget the amount of anticipated VOCA Program Income earned in the 2-year grant period. Program income funds are subject to the same allowances and restrictions as the federal grant on which the funds are earned. Program income is subject to the same terms and conditions under the VOCA Grant Agreement.

Applicants completing this section of the budget form should keep the following in mind:

- Expenditures in this section should support and enhance direct services and show they are consistent with the project activities;
- The basis for each computation should be clearly demonstrated;
- Costs should be directly attributable to the project or represent a pro-rated cost based on an agency identified allocation method;
- Expenditures must be allowable costs for the grant funds that are being requested; and

- The budget narrative should clearly explain the benefits of each grant-funded expense to the project.

- 1. Travel.** Indicate the amounts the applicant is requesting for Travel in the 2-year grant period. In the text box describe the purpose of the budgeted travel expenses (e.g. travel to attend meetings, travel for outreach, staff or volunteers providing client transport, and any other travel **not** related to attendance at training, etc.), show the basis of the computation (# of miles, cost per mile), and explain how the travel costs are necessary and beneficial to the project. Mileage amount cannot exceed the current GSA mileage rate.
- 2. Training.** Provide the training name and a website for each training budgeted for the project. Provide the location, the approximate date of the training and number of attendees. Identify the *total* cost of the training for each category under which it is funded. Check the box beneath the training table to confirm that all travel costs comply with CVSSD and federal guidance. Provide information about the trainings in the field below. Applicants may choose to describe the training expenses and show the basis of the computation (# of staff, registration fee, travel to training, lodging, meal per diem, etc.).

All travel costs will be based on the organization or program's written travel policy. Per diem rates will not exceed the federal per diem rates found at www.gsa.gov/travel-resources. In financial reports to CVSSD, the applicant must provide documentation of the actual expenses budgeted for this section.

Out of state travel is allowable but must be well justified and approved by DOJ CVSSD. See the fund specific guidance for further details about training requests outside of Oregon.

3. Training Conducted. Provide the training name.. Provide the location, the approximate date of the training and number of staff that will be conducting the training. Identify the *total* cost of the training for each category under which it is funded. Check the box beneath the training table to confirm that all travel costs comply with CVSSD and federal guidance. Provide information about the trainings in the field below. Applicants may choose to describe the training expenses and show the basis of the computation (# of staff, registration fee, travel to training, lodging, meal per diem, etc.).

All travel costs will be based on the organization or program's written travel policy. Per diem rates will not exceed the federal per diem rates found at www.gsa.gov/travel-resources. In financial reports to CVSSD, the applicant must provide documentation of the actual expenses budgeted for this section.

Out of state travel is allowable but must be well justified and approved by DOJ CVSSD. See the fund specific guidance for further details about training requests outside of Oregon.

No VOCA funding can be used to purchase food and/or beverages for any meeting, retreat, seminar, symposium, training, or other similar event. Some exceptions do apply. This does not apply to providing emergency support to survivors.

Instructions for Questions #4-#10. Office Supplies, Agency Rent/Utilities, Emergency Services, Capital Outlay, Indirect/De Minimis Costs, Administrative Costs, and Other Costs.

Indicate the amounts your agency is requesting for each of the cost categories to be funded in by this two-year grant period. In the text boxes for each category describe the purpose of the budgeted expenses, show the basis of the computation, and explain how the costs are necessary and beneficial to the project.

4. Office Supplies. Indicate the amounts your agency is requesting for Office Supplies to be funded for the 2-year grant period. In the text box, describe the purpose of the budgeted expenses, show the basis of the computation, and explain how the costs are necessary and beneficial to the project.

5. Agency Rent/Utilities. Indicate the amounts your agency is requesting for Rent/Utilities to be funded for the 2-year grant period. In the text box, describe the type of rent expense (office space, training space, storage space, etc.) and or the type of utilities (electric, water, gas, etc.), show how the cost was determined (cost per square foot, monthly rent, etc.), the basis for the computation, and explain how the rent/utilities costs are necessary and beneficial to the project.

NOTE: Mortgage costs are not allowed by VOCA.

6. Emergency Services. Indicate the amounts the applicant is requesting for Emergency Services to be funded for the 2-year grant period. In the text box, describe the type of Emergency Services, explain how the cost was determined, and explain how the emergency service costs are necessary and beneficial to the project.

7. Capital Outlay. Indicate the amounts the applicant is requesting for Capital Outlay to be funded in to be funded for the 2-year grant period. In the text box, list each non-expendable item to be purchased, the cost for each item, and the pro-rated portion allocated to funds unless the item is being purchased exclusively for this project. Explain how the item(s)

to be purchased is necessary for the success of the project. Capital purchases are those that have a purchase price equal to or greater than the applicant's capitalization limit and a useful life of more than one year. Expendable items should be included in Office Supplies.

8. Indirect/De Minimis Costs. If an applicant is charging indirect costs or a *de minimis*, then the applicant cannot also charge Direct Administrative costs to federal awards. An applicant may charge the indirect or *de minimis* costs to the federal awards, and Direct Administrative costs to state awards.¹

For federal grants, DOJ is required to honor an applicant's negotiated indirect cost rate, or the *de minimis* rate of modified total direct costs (not to exceed 10%). **Select the appropriate boxes to signal the organization's intent regarding the use of indirect or *de minimis* costs with this two-year award.**

A federal grant may be charged an indirect cost rate based on:

Use of a current indirect cost rate already negotiated either provisional or approved by a federal agency:

- Applicants with a federally approved or provisional² indirect cost rate agreement may choose to charge their indirect cost rate to the grant.
- Applicants that elect to charge indirect costs must use the same indirect cost rate for all federal funding awards.

¹ Applicants that wish to negotiate an indirect cost rate may contact their cognizant federal agency or follow the instructions available at <http://ojp.gov/funding/Apply/Resources/IndirectCosts.pdf>. An applicant must prepare and, if required, submit an indirect cost rate proposal no later than 90 calendar days from the date the award is made and thereafter annually within 6 months of the end of the applicant's fiscal year.

² Applicants that have a pending federally approved indirect cost rate agreement may choose to budget their provisional indirect cost rate to the grant. Applicants MUST upload their pending indirect cost rate proposal. Billing for indirect costs may require a budget revision and will be contingent on the applicant receiving a final rate from the federal awarding agency and submitting a current, signed indirect cost rate agreement. The Grant Agreement will include an award condition requiring submission of the negotiated indirect cost rate agreement when approved by the federal cognizant agency.

- Applicants can choose to charge the full amount, a reduced amount or waive their indirect cost rate for this award.
- Applicants that currently have or have had in the past a federally approved negotiated rate cannot use the 10% *de minimis* rate and must use the current negotiated rate or contact the cognizant federal agency to request an extension of the expired negotiated rate.
- Applicants **MUST** upload their current, signed indirect cost rate agreement certificate under the My Organization section of EGrants.

Use of an established *de minimis* rate of the MTDC (not to exceed 10%). Eligible organizations must certify that no unallowable expenses are included in the modified total direct cost (MTDC) rate (including lobbying and fundraising) and must keep the documentation of this decision on file. Eligible entities include:

- Nonprofit organizations that have **NEVER** negotiated a federal indirect cost rate;
- State and local government departments that have **NEVER** negotiated indirect cost rates with the Federal government and that receive less than \$35 million in direct Federal funding per year;
- Federally recognized Indian tribes that have **NEVER** negotiated an indirect cost rate with the Federal government may use the *de minimis* rate of MTDC (not to exceed 10%).

Modified Total Direct Costs (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each sub-award (regardless of the period of performance of the sub-awards under the award). MTDC excludes equipment, capital

expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each sub-award (contract) more than \$25,000.

Example: Calculating the Modified Total Direct Costs (MTDC) rate in a budget:

<i>Personnel:</i>	\$20,000
<i>Personnel Expenses:</i>	\$4,400
<i>Contractual Services:</i>	\$27,000
<i>Travel:</i>	\$1,000
<i>Office Supplies:</i>	\$400
<i>Equipment:</i>	\$3,000
Total Direct Costs:	\$55,800
<i>Less amount of a contract exceeding \$25,000 (for each contract)</i>	\$2,000
<i>Less Equipment</i>	\$3,000
<i>Less Rental costs (if part of an organization allocation plan)</i>	0
MTDC	\$50,800
<i>de minimis @ 10% of the total MTDC: \$50,800 x 10%</i>	\$5,080
Total Project Amount: \$55,800 total Direct Costs + \$5,080 Indirect Costs.	\$60,880

9. Direct Administrative Costs. Applicants that do not have an indirect/de minimis cost rate or choose not to apply the indirect cost/de minimis rate to their state awards may choose to directly charge administrative costs. Direct charge of administrative costs cannot exceed more than 10% of the total budget amount.

By category, indicate the amount your organization will directly charge administrative costs for the two-year award period. Provide a detailed explanation of the administrative costs to be funded by this grant (e.g., staff FTE, fiscal services, IT services, HR services, general liability insurance, audit costs), the method used by the organization to equitably allocate administrative costs, and how these costs are necessary and beneficial to the project.

- 10. Other.** Indicate any amounts your organization is requesting for Other Costs to be funded in the 2-year grant period. Separate costs by category as appropriate. Provide the basis for the computation and how these costs are necessary and beneficial to the project.

FORM P: VOCA Match

VOCA requires a 20% match contribution (cash or in-kind) of the total project cost. The total project cost consists of federal funds plus match contributions derived from nonfederal sources. All funds designated as match must be used for VOCA eligible activities and expended within the grant period. Match must be provided on a project-by-project basis.

All applicants: The Office for Victims of Crime has authorized CVSSD to approve a blanket match waiver for all new awards in FY 2023-2025. Thus, you are not required to contribute match during the award period, and you are not required to submit a match waiver request letter.

Applicants completing this section of the budget should keep the following in mind:

- Applicants must provide 20% match of the total project. Match can also be calculated at 25% of the requested grant funds;
- Match may be provided in cash or as an in-kind contribution;
- Match must come from a VOCA allowable activity source;
- Match needs to be part of the project but does not need to align line-item by line-item in the grant budget;
- Applicants are strongly encouraged to limit match to one or two budget line items. The applicant's accounting system must be able to track the exact matching funds;
- **Federal funds cannot be used as match for VOCA;** and
- Additional valuable references include [Office of Justice Grants Financial Guide](#), and the [Uniform Guidance – 2 CFR Part 200](#)

Calculation example of 20% match: *The amount of match required is typically calculated as a percentage of the total project cost. If the total project cost known, multiply that amount by the percentage of match required.*

Total Project Cost = Requested Grant Funds + Match Contribution

Total project cost is \$125,000. Multiply the total project cost of \$125,000 x 20%. The match contribution is \$25,000. Thus the requested grant funds are \$100,000 and the match contribution is \$25,000.

Alternate calculation example: *If the applicant doesn't know the total project cost, but knows the amount of requested grant funds, then match is calculated as follows:*

Requested grant funds are \$100,000. Multiply the requested grant funds x 25%. The match contribution is \$25,000. Thus the total project cost is \$100,000 + \$25,000 = \$125,000.

If you determine that you are not able to contribute the required match in year two of the award period, applicants may request a full or partial match waiver. See the complete guidance on match waiver requests available on Form H, Attachments to Upload. If a match waiver is requested, enter the amount the applicant is requesting to waive. Complete questions #1-#12 for the match amount the applicant can provide. **NOTE: If an applicant does not have the ability to provide match and a waiver is not approved, the applicant is only eligible to receive grant funds up to the amount of its match contribution.**

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FORM Q: Budget Summary

This page summarizes the budgets from the VOCA Personnel, Contracts and Subawards, Services and Supplies, and Match pages. **Please click the “Save” button when opening this form** to have it pull information from the budget forms and calculate totals. To address any errors that appear on this page you will need to go back to the appropriate budget form to make the necessary corrections. Once the corrections have been made

return to the Budget Summary and click the “Save” button to ensure that no additional errors exist.