

## BBBBSA ONLINE REPORTING SITE BUDGET WORKSHEET – JJ9 or MYIO2

This worksheet will help you to prepare the information that you will need when creating or updating a budget in the BBBBSA Online Reporting Site. Step-by-step instructions for creating and/or updating a budget are provided in the webinar slides which you will receive a copy of after the training webinar.

Reference Number	Field Name	Description	
1	Projected # of children served during the Grant Performance Period	Projected number of youth to be served across the agency organization during the full sub-grantee period.	
2	Projected # of children served with grant funding during the Grant Performance Period	Projected number of youth to be served by the appropriate grant funding during the full sub-grantee period. *	
3	Number of Full Time Equivalent (FTE) Staff at Agency	If an agency has the following staff: <ul style="list-style-type: none"> <li>• 4 full time (@ 40 hrs/wk) = 4 FTE</li> <li>• 3 part time (@ 30 hrs/wk) = 2.25 FTE*</li> <li>• 2 part time (@ 15 hrs/wk) = .75 FTE**</li> </ul> Total = 7 Full Time Equivalent staff	

\* This should match the number of youth served with grant funding (match goal) from your MOA.

\*\*This calculation can be done by multiplying the number of staff times the number of hours they work per week and then dividing by 40 (i.e.  $3 \times 30 = 90/40 = 2.25$ )

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Ref. #	Name	FICA	Medical	Dental	Short Term Disability (ST disability)	Long Term Disability (LT disability)	Life Insurance (Life)	Other
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### Personnel

Please have the following estimates available for each person that you plan to include in your budget

Ref. #	Name	Title	Hourly or Salaried	Hourly rate or annual salary	Total hours per week	Hours on grant per week (estimated) **	Start Date	End Date
4	Example: Sample Staffer	Program Staff	Salaried	\$35,000 per year	40	10	1/1/20	12/31/20

\*\*This figure should only include work done on the grant you are submitting the reimbursement for, not all OJJDP programs

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[illegible]

\*This field will automatically calculate in the budget form based on the entered salary. It is okay for the budget if you have a cafeteria plan or other circumstance that leads to the incorrect figure under FICA. On the reimbursement form you will be able to self-calculate FICA to ensure it matches your payroll documentation.

NOTE: This system automatically calculates the FTE (full time effort) and TCS based on the information that you have provided on the first page. (in this system, TCS is called "% children served")

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Projected # of children served during the Grant performance period:

Projected # of children served with grant funding during the Grant performance period:

Please note: If c

Number of Full Time Equivalent staff at Affiliate:

## Update Personnel Items

Name	Title	Hourly ?	Rate ?	Total Hrs/Wk ?	Grant Hrs/Wk ?
<input type="checkbox"/> Bill T.	Match Specialist	<input checked="" type="checkbox"/>	15.00	20	5
<input type="checkbox"/> Sally M.	Program Coordinator	<input type="checkbox"/>	30000.0	40	10

- TCS is calculated based on # children served with grant funds divided by total children served by agency - B/A
- FTE is calculated based on Total grant hours/week divided by (# Full Time Equivalent Staff at Affiliate x 40 hours per week) – Column D/(C x 40)

Some line items are provided below with the corresponding Factor Value. Feel free to use any or all of these or include others that you can include below. NOTE: You may want to have multiple line items for things such as 'supplies' or 'travel' to more specifically indicate what these are use for (i.e. Office supplies, orientation supplies, local travel, etc.)

Budget Line Items included w/o indirect rate	Factor Value used	Monthly Amount	Total Expense
Office Supplies	FTE		
Travel	TCS		
Background checks	TCS		
Rent	FTE		
Liability Insurance	TCS		

**\*\*Other expenses do not require a Start and End Date.**

Notes: