status, such as IRS certification, Articles of Incorporation, or By-laws, must be included as an appendix to the project narrative.

Item 8. *Type of Application*—Please check "new" application.

Item 9. Enter *DHHS-ACF/OCS*. Item 10. The Catalog of Federal Domestic Assistance number for the OCS program covered under this announcement is *93.571*. The title is Community Services Block Grant Discretionary Awards—*Community Food and Nutrition Program*.

Item 11. In addition to a brief descriptive title of the project, indicate the priority area for which funds are being requested. Use the following letter designations:

FN—General Projects

SA—Projects where Migrant and Seasonal Farmworker organizations and Indian Tribes or Indian organizations are applying specifically for set-aside funds described in Part B

NP—Grants to organizations with nationwide programs

Item 12. *Areas Affected by Project*— List only the largest unit or units affected, such as State, county or city.

Item 13. *Proposed Project*—The ending date should be calculated based on a 12-month project period.

Item 14. Congressional District of Applicant/Project—Enter the number of the Congressional District where the applicant's principal office is located and the number of the Congressional district(s) where the project will be located.

Item 15a. For purposes of this Announcement, this amount should reflect the amount requested for the entire project period.

Item 15b–e. These items should reflect both cash and third-party in-kind contributions for the total project period.

Item 15f. N/A

Item 15g. Enter the sum of Items 15a–15e.

# 2. SF-424A—"Budget Information-Non-Construction Programs"

See Instructions accompanying this page as well as the instructions set forth below:

In completing these sections, the Federal Funds budget entries will relate to the requested OCS Community Food and Nutrition Program funds only, and Non-Federal will include mobilized funds from all other sources applicants, State, and other. Federal funds other than those requested from the Community Food and Nutrition Program should be included in Non-Federal entries. Sections A and D of SF–424A must contain entries for both Federal (OCS) and non-Federal (mobilized funds).

Section A—Budget Summary

Line 1–4

Col. (a):

Line 1—Enter OCS Community Food and Nutrition Program; Col. (b): Line 1—Enter 93.571.

Col. (c) and (d): Not Applicable Col. (e)–(g):

For each line 1–4, enter in columns (e), (f) and (g) the appropriate amounts needed to support the project for the entire project period.

Line 5—Enter the figures from Line 1 for all columns completed, (e), (f), and (g).

### Section B—Budget Categories

This section should contain entries for OCS funds only. For all projects, the first budget period of 12 months will be entered in Column #1.

Allocability of costs is governed by applicable cost principles set forth in 45 CFR Parts 74 and 92.

Budget estimates for administrative costs must be supported by adequate detail for the grants officer to perform a cost analysis and review. Adequately detailed calculations for each budget object class are those which reflect estimation methods, quantities, unit costs, salaries, and other similar quantitative detail sufficient for the calculation to be duplicated. For any additional object class categories included under the object class other identify the additional object class(es) and provide supporting calculations.

Supporting narratives and justifications are required for each budget category, with emphasis on unique/special initiatives; large dollar amounts; local, regional, or other travel; new positions; major equipment purchases; and training programs.

A detailed itemized budget with a separate budget justification for each major item should be included as indicated below:

Line 6a—Personnel: Enter the total costs of salaries and wages.

# Justification

Identify the project director. Specify by title or name the percentage of time allocated to the project, the individual annual salaries and the cost to the project (both Federal and non-Federal) of the organization's staff who will be working on the project.

Line 6b—Fringe Benefits: Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate which is entered on line 6j.

### Justification

Enter the total costs of fringe benefits, unless treated as part of an approved indirect cost rate.

Line 6c—Travel: Enter total cost of all travel by employees of the project. Do not enter costs for consultant's travel.

### Justification

Include the name(s) of traveler(s), total number of trips, destinations, length of stay, mileage rate, transportation costs and subsistence allowances.

Line 6d—Equipment: Enter the total costs of all non-expendable personal property to be acquired by the project. "Non-expendable personal property", means tangible personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

### Justification

Equipment to be purchased with Federal funds must be required to conduct the project, and the applicant organization or its subgrantees must not already have the equipment or a reasonable facsimile available to the project.

Line 6e—Supplies: Enter the total costs of all tangible personal property (surplus) other than that included on line 6d.

Line 6f—Contractual. Enter the total costs of all contracts, including (1) procurement contracts (except those which belong on other lines such as equipment, supplies, etc.) and (2) contracts with secondary recipient organizations including delegate agencies and specific project(s) or businesses to be financed by the applicant.

### Justification

Attach a list of contractors, indicating the names of the organizations, the purposes of the contracts, the estimated dollar amounts, and selection process of the awards as part of the budget justification. Also provide back-up documentation identifying the name of contractor, purpose of contract, and major cost elements.

**Note:** Whenever the applicant/grantee intends to delegate part of the program to another agency, the applicant/grantee must submit Sections A and B of this Form SF–424A, completed for each delegate agency by agency title, along with the required supporting information referenced in the applicable instructions.

The total costs of all such agencies will be part of the amount shown on Line 6f. Provide draft Request for Proposal in accordance with 45 CFR Part 74, Appendix H. Free and open