

BUDGET SUMMARY

Community Investment for Families Department, City of Los Angeles

Contractor:	_____		Contact Name:	_____
Contract No.:	_____		Telephone No.:	_____
Program:	_____	Budget Approval No.:	_____	
Contract Amount:	_____	Contract Period:	_____	E-mail Address: _____

Schedule of Costs

Cost Classification		CITY SHARE	Program Income	(FSC Only) Leveraged Resources	Total Estimated Costs	Fiscal Notes
		Total City				
No.	Name					
1000	PERSONNEL COSTS	0	0	0	0	
2000	OTHER COSTS	0	0	0	0	
2100	EMERGENCY ASSISTANCE COSTS	0	0	0	0	
2200	SUBCONTRACTOR(S) COSTS	0	0	0	0	
3000	FURNITURE & EQUIPMENT	0	0	0	0	
4000	INDIRECT COSTS	0	0	0	0	
	TOTAL COSTS	0	0	0	0	

CIFD Program Ops Budget Forms (rev 7.1.2025).xls"

[illegible]

SALARY RANGE SUMMARY SHEET

AGENCY NAME:	0
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Contact Person:	0
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Contact number/email: 0 0

List all job titles budgeted in this program with respective monthly minimum and maximum salary ranges.

[illegible]

Instructional sheet on how to complete the forms (ORDER)

Budget Guidelines

Using the attached forms, complete a 12-month budget that identifies use of contracted grant funds. Please do not revise the forms as they have been pre-formatted and include formulas that should not be changed. Some of the (Excel) budget documents were formatted to automatically pre-populate other fields within the document, you should complete the budget worksheets in this order:

1. Summary
2. The Schedule of Personnel
3. The Budget Detail
4. The Budget Narrative
5. Salary/Hourly Range

1. Summary

Please enter all on the Top portion of the Summary page. Values such as "Contractor", "Contract Number" etc. will populate other budget pages based on the entry on the Summary page.

Contract Number: Please include your contract number, including any amendment - C-14000-1 or C-140000-2

Approval No.: please indicate the budget approval request. For example, for your initial budget write in "1"

Contact Person: The agency staff to contact for any questions on the budget forms.

2. The Schedule of Personnel

Start: by completing Job Title, Employee Name, Monthly Salary/Hourly Rate, and Percentage of time allocated. averaged into the salary/hourly rate and % for that line.

Note: When staff turnover occurs, positions should not be separated into additional line items. Contractors must notify their analyst of any personnel changes; however, budget modifications shall only be required if a replacement staff's salary or % shall increase the line in excess of 10%, or if a contractor wishes to reallocate estimated savings to another budget line item.

The City of LA Share will total up based on the information provided in each column. **(Please do not change the formula).**

All positions funded in whole or in part by the contract must be paid the City's Living Wage.

For FSCs, all staff must be paid a minimum of \$22/hour.

Job Title: For multiple positions of the same job title, such as Case Manager, each *position* (not approved staff) must be numbered to match the total amount of positions budgeted. Example (Case Manager 1, Case Manager 2, etc)

of Months or # of Hours: Calculate the maximum # of hours/months that will be cost allocated to this program.

**Hourly staff can also be listed with a monthly salary calculation.*

Fringe Benefits:

FICA - This amount will automatically populate (Locked cell)

Health - Enter in column G (under Fringe Benefits) the total amount of health benefits

SUI - Enter in column G (under Fringe Benefits) the total amount of SUI benefits, not to exceed SUI tax rate

Worker Comp - Enter in column G (under Fringe Benefits) the total amount of workers comp benefit

All other benefits - Enter in column G (under Fringe Benefits) the total amount of Other benefit(s)

FSC ONLY Leveraged Resources: As defined as those that are direct benefit to the customer and are paid for with finds other than those requested in the FSC grant.

Budget Support Documentation:

Organizational charts, and job descriptions must be submitted for every position title on the budget, and position title must be the same on all documents

Please note: Background checks, TB, degrees, resumes, etc., for individual staff on the budget will not be collected as part of the budget approval process. It is the sole responsibility of the agency to ensure that all requirement documents are on file and available for review upon request.

Note: Please ensure that all listed position titles match across: Schedule of Personnel, Salary Range, Organizational Chart and Job Description.

3. The Budget Detail

Procurement:

Line items exceeding \$10K must be procured as follows:

\$10,001 - \$150K = obtain 3 written bids

Over \$150K = obtain sealed bids.

Refer to "Subcontract Procurement and Procedures" (Exhibit I for FSCs) of your City contract for procurement requirements

Line items exceeding \$10K that are **exempt** from procurement: Utilities, such as LADWP and Southern CA Gas Company

FSC ONLY are required to have \$250K in leveraged resources of which \$5,000 must be allocated for 2 youth hires allocated at minimum of 120 hrs.

FSC ONLY - Leveraged Resources: As defined as those that are direct benefit to the customer and are paid for with funds other than those requested in the FSC grant.

Examples : Salaries for FSC personnel that are paid through federal private grants or other source;

Physical space/facility and is capped at the rate no greater than \$1.50 per square foot;

Direct financial support to customer for transportation, temporary shelter, food, clothing, etc.

FSC ONLY - Subcontractor Cost: FSCs are required to set aside a minimum of \$100,000 for no less than one subcontractor. The 10% flexibility rule is not allowed for subcontractor agreements.

majority of grant funds are expended on direct services. Facility costs include: rent, use allowance, depreciation, facility repair and maintenance, equipment repair and maintenance (i.e. elevator) utilities, security (alarm and security service), janitorial service and supplies, trash service, and landscaping. Any facility costs allocated to the contract must be listed as individual line-item expenses. The 10% flexibility rule may not be applied in such a way as to increase the total allocation for facility costs beyond \$150,000.

Related Costs in the form of Emergency Assistance and Supportive Services.

FSCs are required to designate \$200,000 for housing-related participant costs: rental assistance/arrears; utilities/utility arrears; fees associated with rental applications and credit checks; security deposits; relocation services, etc. Housing/Emergency Assistance must be a separate line item from supportive services.

Emergency supportive services such as food assistance, children's bed/crib, refrigerator, or stove, etc. must be separate line item(s) within the Emergency Assistance Cost Category. must be separate line item(s) within the Emergency Assistance Cost Category. Any amount allocated towards food costs within supportive service cannot be used toward the purchase of gift cards.

Subcontractor procurement: Approved procurement is valid for three years.

Furniture & Equipment: Procurement for furniture and equipment, and cost analysis must be completed and submitted to your Program Analyst by month 8, for approval prior to purchase.

Participant Related Costs may not be factored into Direct Costs for agencies applying the 15% de minimus indirect cost rate.

4. The Budget Narrative

Please identify the name and contact information of staff that may be contacted for any questions regarding your budget submission.

The budget narrative should include: A written justification or rationale that explains the need and intended use of each line item contained within the proposed budget. This includes a line item justification for each personnel position. In preparing the budget narrative, please provide information that a reviewer would need to understand the necessity of each proposed item, as well as understand the process used to arrive at each budgeted amount.

Only include The City Share of Cost on this page of the budget. Costs must equal your grant total. You may include leveraged cost descriptions; however, these should not count towards the total calculation.

Examples:

"Utilities are based on square footage. Based on square footage the \$2,000 program share of utility."

"Utilities are based on square footage. The square footage occupied by the program is 20% and the total utility cost is \$10,000. $\$10,000 \times 20\% = \$2,000$ program share of utility."

If the cost allocation changes "Utilities are based on square footage. The square footage occupied by the program is 40% and the total utility cost is \$10,000. $\$10,000 \times 40\% = \$4,000$ program share of utility."

"Program Supplies: To cover the cost of Supplies to support program operations for 12.65 FT. Estimated cost is \$52.70 per FTE/month (12.65 FTE x 52.70 x 12 months = \$7,999.86, rounded to \$8,000)"

"General insurance expenses relating to FSC programming. Total general insurance \$91,021.38. FTE when fully staffed is 16.02, of total staff roster 137.

FSC share \$10,666. Estimated at \$11,000."

NOTE: If your cost allocation changes, you may need to submit a budget modification

5. Salary/Hourly Range

List all job titles budgeted in this program with respective monthly minimum and maximum salary ranges.

10% Flexibility Rule

Agency may use the 10% flexibility rule to make modification without requesting a budget modification. Excludes any capped cost budget line items, such as Facility Costs, Subcontractor Agreements, Professional Service Agreements (PSA).

Program Income

Please indicate on the line item where you are adding back to your program any program income incurred.