



— Massachusetts —
COMMUNITY HEALTH AND
HEALTHY AGING FUNDS

Budget Walkthrough

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Introductions



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Agenda

	Time
Budget Walk through	20 minutes
Your Questions	40 minutes

Reflection Time

5mins to read the Guidelines & the budget template



Budget Guidelines

We encourage applicants to develop a detailed, realistic budget with all project costs.

We would also like to support you in considering equity within your proposed budget. We have prioritized 3 key areas which we recommend you budget for:

- Evaluation
- Capacity Building
- Compensation and Incentives.

Evaluation

- We encourage you to allocate resources that will allow your organization or partnership to evaluate your initiatives.
- Generally, we recommend at least 10% of your annual project budget be dedicated to evaluation activities.
- This can be requested from the Funds or covered by other funding sources.
- Evaluation activities could be done by staff, an individual consultant, or another organization.

Capacity Building/Funds Events

Awardees are expected to take part in learning opportunities and events. Please budget for funds to cover 1-2 staff to prepare for, take part in, and travel to these meetings, along with other travel-related expenses.

Event Type	# per year	Estimated Time
All Awardee Convenings	2	all day
Regional gathering or site visit	1	all day
1:1 TA Calls (Virtual)	4	1 hour
Learning Community Sessions (Virtual)	4	1.5 hours

**Travel: Awardees should use the Federal mileage reimbursement rate to determine travel costs. The locations for events have not been determined. Assume a venue centrally located in Massachusetts.*

Compensation and Incentives

We encourage you to budget for in-depth community engagement. When compensating community members (those who are not paid staff by the organization or subcontractors) for their time, we recommend the following:

- A minimum payment or incentive amount of \$25/hour or at least a living wage in your region. We encourage paying individuals with an extra role, such as a meeting facilitator, at a higher rate.
- Translation, interpreting, childcare, and transportation reimbursement offered to support participation in events.

Finding the Budget Template

The budget form is available on the How to Apply page of our website under Additional Application Materials

Online Application

Applications will be submitted through an online portal. Click the link below to **start a new application**.

Funding Opportunity	Application Link
PSE Application	https://www.grantrequest.com/SID_2364?SA=SNA&FID=35191
CHIP Application	https://www.grantrequest.com/SID_2364?SA=SNA&FID=35196
Healthy Aging Application	https://www.grantrequest.com/SID_2364?SA=SNA&FID=35185

*Please note that every time you click the application link will start a new form.

To **continue your started application** go to your Account using the link below

<https://www.grantrequest.com/AccountManager.aspx?sid=2364>

Additional Application Materials

- [Application Guidance](#)
- [Budget Template](#)
- [Workplan/Activities Template](#)

Budget Template



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Completing the Budget Form												
Throughout this template, there are brief instructions embedded as notes. Hover over the red triangle in the top right corner of the cell to see the note. In addition, please see detailed guidance in the Application Instructions linked on our webpage: https://mahealthfunds.org/apply												
TAB Color Key												
Green Tabs	will auto-populate as you complete your form. Please double-check for errors and insert your organization name and number of years your are applying for											
Blue Tabs	should be completed by the applicant or left blank if not applicable (Ex. Leave Year 5 blank if only applying for 4 years)											
CELL Color Key												
White cells	are fields where values should be inserted by the applicant.											
Yellow cells	are fields that will auto-calculate based on values in the white cells.											
Italic text	are examples. <i>Please remember to change/remove before completing your form.</i>											

Budget Template

Budget Summary								
Applicant:								
Start Date:	1-Jul-22		5	End Date:	6/30/2027			
PLEASE NOTE: Summary Page is Auto Populated by Detail Tabs in Workbook (Complete Tabs First)							Community Engagement	
Expense	Year 1	Year 2	Year 3	Year 4	Year 5	Total Project Expenditures	\$	2,500.00
Employee Compensation	\$ 30,000.00	\$ 30,000.00	\$ 30,000.00	\$ 30,000.00	\$ 30,000.00	\$ 150,000.00		
Non-Employee Compensation	\$ 2,500.00	\$ 2,500.00	\$ 2,500.00	\$ 2,500.00	\$ 2,500.00	\$ 12,500.00		
Operating Expenses	\$ 1,000.00	\$ 1,000.00	\$ 1,000.00	\$ 1,000.00	\$ 1,000.00	\$ 5,000.00		
Subcontracts	\$ 5,000.00	\$ 5,000.00	\$ 5,000.00	\$ 5,000.00	\$ 5,000.00	\$ 25,000.00		
SUBTOTAL	\$ 38,500	\$ 38,500	\$ 38,500	\$ 38,500	\$ 38,500	\$ 192,500		
INDIRECT	\$ 7,700	\$ 7,700	\$ 7,700	\$ 7,700	\$ 7,700	\$ 38,500		
TOTAL COSTS	\$ 46,200	\$ 46,200	\$ 46,200	\$ 46,200	\$ 46,200	\$ 231,000		

Budget Template

BUDGET				
GRANTEE:				
Lead Organization Employee Compensation				
Position Title	Annual Salary/ Hourly Wage	FTE/ Hours worked on project	Amount Requested	Explanation
EXAMPLE: Program Coordinator	\$50,000.00	0.5	\$ 25,000.00	EXAMPLE: Provide overall administrative support to this project
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
Payroll Tax & Fringe Benefits (INSERT BELOW)			\$ 5,000.00	
20.00%	SUBTOTAL PERSONNEL		\$ 30,000.00	

Budget Template

Non-Employee Compensation					
Type of Compensation	Hourly Wage/Stipend	Number of Hours / Number of Stipends	Amount Requested	Explanation	Is this line item directly related to Community Engagement activities?
EXAMPLE: Steering Committee Participation Stipend	\$250	10.00	\$ 2,500.00	EXAMPLE: 10 community members participating on 1, 1 hr steering committee meeting per month for 10 months	Yes
			\$ -		
			\$ -		
			\$ -		
			\$ -		
			\$ -		
			\$ -		
			\$ -		
SUBTOTAL NON-EMPLOYEE COMPENSATION			\$ 2,500.00		

Budget Template

Operating Expenses/Direct Project Costs			Is this line item directly related to Community Engagement activities?
Item	Amount Requested	Explanation	
Program Advertising and Outreach Materials	\$ -		
Staff Travel	\$ -		
Staff Training	\$ -		
Training and Educational Supplies	\$ -		
Office Supplies	\$ -		
Equipment	\$ 1,000.00	EXAMPLE: Dedicated laptop (\$700) and a camera (\$300) for the project lead to use for meetings and other off-site work related specifically to this initiative.	
Copying and Printing	\$ -		
Telephone and Fax	\$ -		
Postage and Delivery	\$ -		
Other Expenses (list in explanation column)	\$ -		
SUBTOTAL OPERATING EXPENSES	\$ 1,000.00		

Budget Template

Subcontracts				
Subcontractor	Amount Requested	Explanation	Is this line item directly related to Community Engagement activities?	
EXAMPLE: Community Partner XYZ	\$ 5,000.00	Ex: staff time - facilitating, promoting and planning community meetings		
	\$ -			
	\$ -			
	\$ -			
	\$ -			
	\$ -			
	\$ -			
	\$ -			
	\$ -			
SUBTOTAL SUBCONTRACTS		\$ 5,000.00		
Amount Requested Totals			Community Engagement Total	
INSERT INDIRECT RATE	DIRECT COSTS	\$ 38,500.00	\$ 2,500.00	
20.00%	INDIRECT COSTS	\$ 7,700.00		
	TOTAL	\$ 46,200.00		

Common Questions & Answers

What is the expected amount of each grant award?

PSE: \$50,000 – \$200,000 per year, up to 5 years

CHIP: \$10,000 – \$75,000 per year, up to 5 years

Healthy Aging: \$10,000 – \$100,000 per year, up to 5 years

- Requests cannot exceed the maximum in a given year.
- The funding ranges apply to all applications whether you are covering one municipality/population, or several.
- If you are applying as a partnership of several entities, the maximum funding amounts still apply to the group application. You cannot request more than the maximum amount across all of the partner organizations, unless you apply separately.
- Applicants could be conditionally accepted as a grantee pending revisions to their proposal including budget or workplan changes.

Common Questions & Answers

Is there a limit for indirect costs?

Proposed budgets should include no more than 20% for indirect or “overhead” costs for your organization or your fiscal agent. Indirect costs do NOT include fringe benefits or payroll taxes, which should be budgeted as part of your proposed personnel costs.

Does the amount we request need to be tied to our organization’s annual operating budget?

No, the amount you request is not tied to your organization’s annual budget. However, 1 of the 4 review criteria is feasibility. Please outline a realistic budget for the activities you are proposing and include context for why this project is feasible for your organization.

Common Questions & Answers

Are applicants required to show any match funding? Are proposals that have leveraged funds from other sources considered favorably?

Applicants are not required to show any match funding. In the budget form, we ask applicants to list all current and pending funding sources related to the proposed project. This should include the amount funded or requested, as well as all in-kind sources.

Do we submit activities and costs for just 1 year or all years we are requesting funding?

We would like to receive a budget request for the full number of years you are requesting funding. However, we understand that some costs for future years may be estimates. There will be an opportunity for awardees to revise their budgets.

Reminder

- Log into the online portal before the deadline to create an account and familiarize yourself with its format
 - Contact Chenchen at chensz@hria.org with any technical challenges as soon as possible.
- You can save your application and finish later.
- Consider submitting before 11:59 PM deadlines!

Upcoming Office Hours

- 6/13 1-2pm Open Question Time (The last Session before application due date)

Contact Information

Stay in touch:

MACHHAFunds@hria.org



Questions & Answers

