## RESEARCH & RELATED BUDGET - Budget Period 1

OMB Number: 4040-0001 Expiration Date: 11/30/2025

	UEI:	Kxxxxxxxxx	Ente	r name of Organiza	ation: Don	nestic Unive	ersity				
Budget Type:	✓ Project	Subaward	Consortium		Budge	et Period: 1	Sta	art Date:	: 07-01-2024	End Date: 06-30-202	<b>25</b>
A. Senior/Key	Person										
Prefix	First	Middle	Last	Suffix	Base Salary	(\$) Cal.	Months Acad.		Requested Salary (\$)	Fringe Benefits (\$)	Funds Requested (\$)
	Rachel		Khan	PD/PI		4.8			0.00	0.00	0.00
Project Role:	PD/PI										
Additional Senior Key Persons:  Add Attachment  Delete Attachment  View Attachment  Key Persons in the attached file											
									7	Total Senior/Key Person	
B. Other Pers	onnel										
Number of						Months		D <sub>2</sub>	equested	Fringe	Funds
Personnel	Project	Role			Cal.	Acad.	Sum.		alary (\$)	Benefits (\$)	Requested (\$)
	Post Doctoral Associates										
	Graduate Students										
	Undergraduate	Students									
	Secretarial/Cle	erical									
	Total Number C	Other Personnel								Total Other Personnel	0.00
Total Salary, Wages and Fringe Benefits (A+B)										0.00	

## C. Equipment Description List items and dollar amount for each item exceeding \$5,000 **Equipment item** Funds Requested (\$) **Additional Equipment:** Add Attachment Delete Attachment View Attachment 0.00 Total funds requested for all equipment listed in the attached file 0.00 **Total Equipment** D. Travel Funds Requested (\$) Domestic Travel Costs (Incl. Canada, Mexico and U.S. Possessions) Foreign Travel Costs **Total Travel Cost** E. Participant/Trainee Support Costs Funds Requested (\$) Tuition/Fees/Health Insurance Stipends Travel Subsistence Other Number of Participants/Trainees **Total Participant/Trainee Support Costs**

9. 10. 11. 12. 13. 14. 15. 16. 17.  Total Other Direct Costs  Funds R  Total Direct Costs (A thru F)  A. Indirect Cost Type Indirect Cost Rate (%) Indirect Cost Base (\$) Funds R  MTDC  Total Indirect Costs  Total Indirect Costs  Total Indirect Costs  Total Indirect Costs  Total Direct and Indirect Costs  Funds R  Total Direct and Indirect Costs (G + H)  I. Fee  Funds R	Funds Requested (\$)
3. Consultant Services 4. ADP/Computer Services 5. Subawards/Consortium/Contractual Costs 6. Equipment or Facility Rental/User Fees 7. Alterations and Renovations 8. Requested Direct Costs 9.  10.  11.  12.  13.  44.  15.  16.  17.  Total Other Direct Costs  Funds R  Total Direct Costs (A thru F)  A. Indirect Cost (A thru F)  A. Indirect Cost Spe  Indirect Cost Rate (%) Indirect Cost Base (\$)  MTDC  55  250,000.00  Total Indirect Costs  Funds R  Cognizant Federal Agency Agency Name, POC Name, and Cooper Poor Name, and Cooper Costs (G + H)  Total Direct and Indirect Costs (G + H)  I. Fee  Funds R  Total Costs and Fee (I + J)	
4. ADP/Computer Services 5. Subawards/Consortium/Contractual Costs 6. Equipment or Facility Rental/User Fees 7. Alterations and Renovations 8. Requested Direct Costs 9.  10. 11. 12. 13. 14. 15. 16. 17. Total Other Direct Costs  Funds R  Total Direct Costs (A thru F)  1. Indirect Cost Spe  Indirect Cost Rate (%) Indirect Cost Base (\$)  MTDC  Soprizant Federal Agency Agency Name, POC Name, and Coopense Number)  Total Direct and Indirect Costs (G + H)  1. Fee  Funds R  Total Costs and Fee (I + J)	
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7. Alterations and Renovations  8. Requested Direct Costs  9.	
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Funds R   Total Direct Costs	
Total Other Direct Costs  Funds R  Total Direct Costs (A thru F)  I. Indirect Costs  Indirect Cost Type Indirect Cost Rate (%) Indirect Cost Base (\$)  MTDC  Total Indirect Costs  Cognizant Federal Agency Agency Name, POC Name, and POC Phone Number)  Total Direct and Indirect Costs  Total Direct and Indirect Costs  Funds R  Total Direct and Indirect Institutional Costs (G + H)  I. Fee  Funds R  C. Total Costs and Fee  Total Costs and Fee (I + J)	
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Indirect Cost Type  MTDC  Total Indirect Cost Base (\$) Funds R  Total Indirect Costs  Cognizant Federal Agency Agency Name, POC Name, and POC Phone Number)  Total Direct and Indirect Costs  Total Direct and Indirect Institutional Costs (G + H)  Funds R  Control Costs and Fee  Total Costs and Fee (I + J)	Total Direct Costs (A thru F) 250,000.00
MTDC  Total Indirect Costs  Cognizant Federal Agency Agency Name, POC Name, and POC Phone Number)  Total Direct and Indirect Costs  Total Direct and Indirect Institutional Costs (G + H)  J. Fee  K. Total Costs and Fee  Total Costs and Fee (I + J)	
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Cognizant Federal Agency Agency Name, POC Name, and POC Phone Number)  Total Direct and Indirect Costs  Total Direct and Indirect Institutional Costs (G + H)  J. Fee  Funds R  C. Total Costs and Fee  Total Costs and Fee (I + J)	250,000.00 137,500.00
Cognizant Federal Agency Agency Name, POC Name, and POC Phone Number)  Total Direct and Indirect Costs  Total Direct and Indirect Institutional Costs (G + H)  J. Fee  Funds R  C. Total Costs and Fee  Total Costs and Fee (I + J)	Total Indirect Costs 137,500.00
Total Direct and Indirect Costs  Total Direct and Indirect Institutional Costs (G + H)  I. Fee  Funds R  C. Total Costs and Fee  Total Costs and Fee (I + J)	
Total Direct and Indirect Institutional Costs (G + H)  Funds R  C. Total Costs and Fee  Total Costs and Fee (I + J)	
K. Total Costs and Fee  Funds R  Total Costs and Fee (I + J)	Funds Requested (\$)
K. Total Costs and Fee Funds R Total Costs and Fee (I + J)	
Total Costs and Fee (I + J)	Funds Requested (\$)
Total Costs and Fee (I + J)	0.00
• • • • • • • • • • • • • • • • • • • •	Funds Requested (\$)  Total Costs and Fee (I + J) 387,500.00
	Total Costs allu Fee (I + J)
Only attach one file.) (upload a word document for budget justification)	

## **Budget justification:**

**Data Management and Sharing Costs Justification:** Budget is not requested for data management and sharing costs.

Note to applicants: This sample form is for year 1 and separate budget forms must be filled for years 2-5 and a cumulative form for the application.