

**U.S. DEPARTMENT OF ENERGY**



**BUDGET JUSTIFICATION FOR FORMULA GRANTS**

Applicant: District of Columbia  
Award number: EE0009979

Budget period: 07/01/2022 - 06/30/2027

**1. PERSONNEL** - Prime Applicant only (all other participant costs are listed in 6 below and form SF-242A, Section B. Line 6.f. Contracts and Sub-Grants).

Positions to be supported under the proposed award and brief description of the duties of professionals:

<u>Position</u>	<u>Description of Duties of Professionals</u>
Branch Chief EECB	The Branch Chief oversees the day-to-day operations of staff within the Energy Efficiency and Conservation Branch. Responsible for ensuring staff is abreast of new guidance and regulations; submitting the Davis Bacon reports; ensuring Subgrantee performance metrics are met.
Compliance Specialist	Prepares all subgrantee awards and amendments conducts, final monitoring visits; reviews Subgrantee monthly monitoring reports to ensure compliance with the 21-day work completion requirement and all other state and federal regulations.
Associate Director	The Associate Director oversees the energy efficiency programs managed by the Residential Services Division. Responsible for locating and obtaining additional funding sources to leverage US DOE funds, conducting monitoring activities with federal funders and subgrantees, and providing technical and training assistance to subgrantees and internal personnel as needed.
Deputy Director	The Deputy Director provides oversight of the Utility Affordability Administration, which encompasses the US DOE, HHS, HUD, utility, and local funding. The Deputy Director develops and implements the necessary MOU to obtain additional funding for the Weatherization Assistance Program. Also, participates in higher-level monitoring activities and programmatic training with federal funders, and for subgrantees, and internal personnel.

Direct Personnel Compensation:

<u>Position</u>	<u>Salary/Rate</u>	<u>Time</u>	<u>Direct Pay</u>
Branch Chief EECB	\$600,000.00	49.9998 % FT	\$299,998.80
Compliance Specialist	\$400,000.00	69.9998 % FT	\$279,999.20
Associate Director	\$732,050.00	26.7786 % FT	\$196,032.74
Deputy Director	\$825,000.00	24.9999 % FT	\$206,249.18
		Direct Pay Total	\$982,279.92

**2. FRINGE BENEFITS**

- a. Are the fringe cost rates approved by a Federal Agency? If so, identify the agency and date of latest rate agreement or audit below, and attach a copy of the rate agreement to the application.

Based on a potential increase in the Fringe Benefits for the remaining years of the grant, I am currently putting the amount of 29.99% to ensure ample funding is available in future years.

FY 2023 Fringe Benefits Estimated Allocation

Comp Source Group	Comp Object	Percentage allocation -for	23.70 %	allocated
0014 (FRINGE BENEFITS - CURR PERSONNEL)	0141 (GROUP LIFE INSURANCE)		0.09%	
0142 (HEALTH BENEFITS)			10.33%	
0147 (MISC FRINGE BENEFITS)			0.00%	
0148 (RETIREMENT CONTRIBUTION - FICA)			5.98%	
0152 (RETIREMENT CONTRIBUTION - CIVIL SERVICE)			0.30%	
0154 (OPTICAL PLAN)			0.08%	
0155 (DENTAL PLAN)			0.23%	
0157 (PREPAID LEGAL)			0.18%	
0158 (MEDICARE CONTRIBUTION)			1.45%	
0159 (RETIREMENT)			4.61%	
0160 (DC METRO BENEFITS)			0.00%	
0161 (DC HEALTH BENEFIT FEES)			0.45%	
0014 (FRINGE BENEFITS - CURR PERSONNEL)	Total		23.70%	

- b. If a. above does not apply, please use this box (or an attachment) to further explain how your total fringe benefits costs were calculated. Your calculations should identify all rates used, along with the base they were applied to (and how the base was derived), and a total for each (along with grand total). If there is an established computation methodology approved for state-wide use, please provide a copy. Also, please fill out the table below with the Fringe Benefits Calculations.

Fringe Benefits Calculations

<u>Position</u>	<u>Direct Pay</u>	<u>Rate</u>	<u>Benefits</u>
Branch Chief EECB	\$299,998.80	30.0000 %	\$89,999.64
Compliance Specialist	\$279,999.20	30.0000 %	\$83,999.76
Associate Director	\$196,032.74	30.0000 %	\$58,809.82
Deputy Director	\$206,249.18	30.0000 %	\$61,874.75
		Fringe Benefits Total	\$294,683.97

3. TRAVEL

- a. Please provide the purpose of travel, such as professional conference(s), DOE sponsored meeting(s), project management meeting, etc. If there is any foreign travel, please identify.

<u>Purpose of Trip</u>	<u>Number of Trips</u>	<u>Cost Per Trip</u>	<u>Total</u>
Attend necessary training courses for 5 staff persons to obtain their Building Performance Institute Healthy Homes Principles Certification. The number of trips is based on 5 events * 5 years. This cost also includes exam fees and associated costs.	25	\$2,600.00	\$65,000.00
Attend necessary training courses for 3 staff persons to maintain their current Building Performance Institute Quality Control Inspector Certification. The number of trips is based on 3 events * 5 years.	15	\$2,000.00	\$30,000.00
Attend necessary training courses for 2 staff persons to obtain their Building Performance Institute Site Supervisor Certification. The number of trips is based on 2 events * 5 years. This cost also includes exam fees and associated costs.	10	\$2,600.00	\$26,000.00
EECB obtains the necessary Six Sigma Certifications to ensure they have the necessary skill set to administer the Weatherization Assistance Programs. Depending on the staffs current duties, they will obtain their Yellow, Green, or Black Belt	1	\$8,819.00	\$8,819.00

Attend necessary training courses for 5 staff persons to obtain their Building Performance Institute Healthy Home Evaluator Certification. The number of trips is based on 5 events * 5 years. This cost also includes exam fees and associated costs.	25	\$2,000.00	\$50,000.00
Attend necessary training courses for 3 staff persons to maintain their current Building Performance Institute Energy Auditor Certification. The number of trips is based on 3 events * 5 years.	15	\$2,000.00	\$30,000.00
		Travel Total	\$209,819.00

- b. Please provide the basis for estimating the costs, such as past trips, current quotations, Federal Travel Regulations, etc. All listed travel must be necessary for the performance of the award objectives.

**4. EQUIPMENT** - Equipment is generally defined as an item with an acquisition cost greater than \$5,000 and a useful life expectancy of more than one year.

- a. List all proposed equipment below and briefly justify its need as it applies to the objectives of the award.

Equipment	Unit Cost	Number	Total Cost	Justification of Need
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- b. Please provide a basis of cost such as vendor quotes, catalog prices, prior invoices, etc. and justify need. If the Equipment is being proposed as Cost Share and was previously acquired, please provide the source and value of its contribution to the project and logical support for the estimated value shown. If it is new equipment which will retain a useful life upon completion of the project, provide logical support for the estimated value shown. Also, please indicate whether the Equipment is being used for other projects or is 100% dedicated to the DOE project.

**5. SUPPLIES** - Supplies are generally defined as an item with an acquisition cost of \$5,000 or less and a useful life expectancy of less than one year. Supplies are generally consumed during the project performance.

- a. List all proposed supplies below, the estimated cost, and briefly justify the need for the supplies as they apply to the objectives of the award. Note that all direct costs, including Supply items, may not be duplicative of supply costs included in the indirect pool that is the basis of the indirect rate applied for this project.

General Category	Cost	Justification of Need
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- b. Please provide a basis of cost for each item listed above and justify need. Examples include vendor quotes, prior purchases of similar or like items, published price list, etc.

**6. CONTRACTS AND SUBGRANTS** - Provide the following information for New proposed subrecipients and subcontractors. For ongoing subcontractors and subrecipients, this information does not have to be restated here, if it is provided elsewhere in the application; under Name of Proposed Sub, indicate purpose of work and where additional information can be found (i.e weatherization subgrants, Annual File section IV.1).

Name of Proposed Sub	Total Cost	Basis of Cost*
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Fry Nonprofit	\$2,245,728.00	Identify missed opportunities during Subgrantee pre- inspection; identify and procure certified, licensed, and qualified contractors to install; identify energy efficiency and health & safety retrofits; manage and ensure the selected contractors complete the work in accordance to the established policies and procedures for the Energy Efficiency and Conservation Programs. Subgrantee is expected to complete 280 units
Greater Washington Urban League	\$1,497,152.00	Identify missed opportunities during Subgrantee pre- inspection; identify and procure certified, licensed, and qualified contractors to install; identify energy efficiency and health & safety retrofits; manage and ensure the selected contractors complete the work in accordance to the established policies and procedures for the Energy Efficiency and Conservation Programs. Subgrantee is expected to complete 187 units
Contracts and Subgrants Total		\$3,742,880.00

\*For example, Competitive, Historical, Quote, Catalog

**7. OTHER DIRECT COSTS** - Other direct costs are direct cost items required for the project which do not fit clearly into other categories. These direct costs may not be duplicative of costs included in the indirect pool that is the basis of the indirect rate applied for this project. Examples are: conference fees, subscription costs, printing costs, etc.

a. Please provide a General Description, Cost and Justification of Need.

<b>General Description</b>	<b>Cost</b>	<b>Justification of Need</b>
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b. Please provide a basis of cost for each item listed above. Examples include vendor quotes, prior purchases of similar or like items, published price list, etc.

**8. INDIRECT COSTS**

a. Are the indirect cost rates approved by a Federal agency? If so, identify the agency and date of latest rate agreement or audit and provide a copy of the rate agreement.

b. If the above does not apply, indicate the basis for computation of rates, including the types of benefits to be provided, the rate(s) used, and the cost base for each rate. You may provide the information below or provide the calculations separately.

The name and phone number of the individual responsible for negotiating the State's indirect cost rates.

Name:

Phone Number: