Creating a Grant Budget

What to include, how to allocate, and how to make every dollar serve your goals
Lessons from CUF's TB and hepatitis B grants

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Three questions you should ask yourself

1

What goes in?

Deciding for your budget:
- What to include
- What to leave out

2

Where does it go?

Allocating funding across:
- People
- Outreach
- Materials
- Overhead

3

Does it deliver?

Making sure every line traces back to a project goal

Build the budget backward from your logic model

Goal

Increase TB/LTBI knowledge among African immigrants in King County

Objectives

Measurable targets: who, how many, by when

Activities

Workshops, materials, navigation, outreach events

Resources

Staff time, miles, printing, translation, software

Costs

Each resource × unit cost = a budget line

Test: every activity needs a line that pays for it, and every line needs an activity that justifies it. Anything left over on either side is a gap or a red flag.

Read the funding announcement like a reviewer

Award ceiling & period

TEA 2026–27: up to $15,000; preliminary awards could be reduced

Unallowable costs

TEA follows federal rules: no alcohol, food, entertainment, donations, or lobbying

Scope limits

Our TB award barred clinical costs: no TB/LTBI testing, treatment, or direct clinical services

Indirect rules

15% de minimis on MTDC, or a federally negotiated rate

Required format

Funder's own Excel template plus a narrative that must match it

Payment terms

Reimbursement, advance, or installments (this drives your cash flow)

The standard cost categories most funders use

A. Personnel

Salaries or stipends for staff (volunteer) time on the project

B. Fringe

Payroll taxes and benefits tied to personnel

C. Travel

Local mileage, conference or convening travel

D. Equipment

Durable items above the funder's threshold (often $5,000+)

E. Supplies

Printing, translated materials, workshop supplies

F. Contractual

Consultants, subrecipients, translation vendors

G. Other

Participant support, software, venue, interpretation

H. Indirect

Shared costs: rent, accounting, insurance, admin

Direct vs. indirect: claim what the work really costs

Direct costs

- Traceable to this project
- Staff time, mileage, printing, translation, participant support, project software
- Documented with logs, receipts, and timesheets

Indirect costs

- Shared costs that keep the organization running: bookkeeping, insurance, rent, audit, admin
- No negotiated rate? Federal pass-through awards allow a 15% de minimis rate (2 CFR 200.414(f))
- Applied to Modified Total Direct Costs (MTDC), which exclude participant support, equipment, rent, and patient care

Budget for the hidden costs of community work

Translation & layout

$827 to translate, lay out, and print TB/LTBI materials in Lingala, French, and Swahili

Getting people there

$20 transit cards or gift cards for 50 participants (attendance has a real cost)

Mileage

1,000 miles at $0.70 for navigators reaching shelters, churches, and partners

Content tools

Video-conferencing, Canva, Adobe for in-language videos and social media

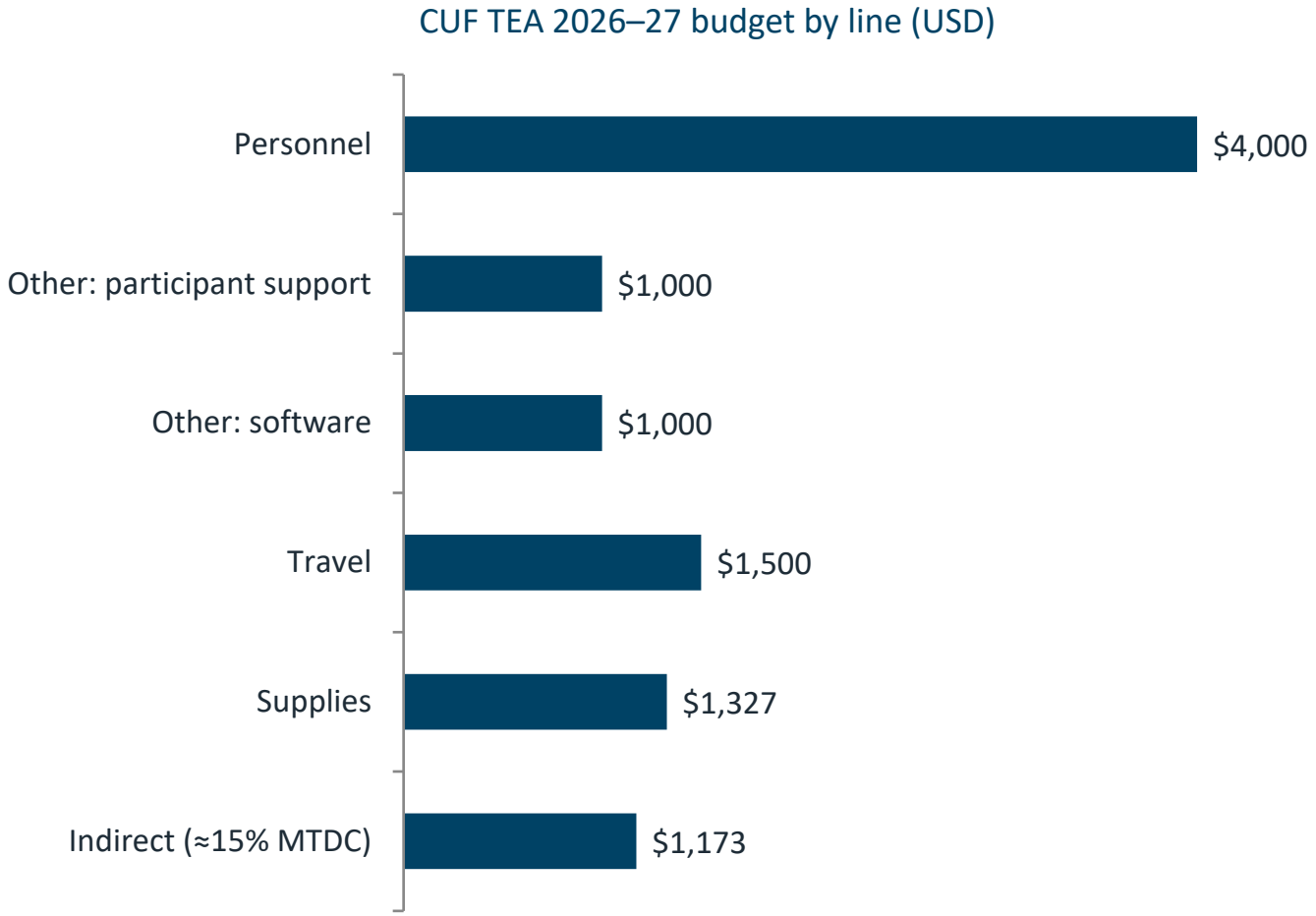
Low-literacy formats

Audio and video for community members who speak but do not read Lingala or Portuguese

Training community educators

Time to recruit and train trusted messengers from churches

Case study 1: our 2026–27 TB/LTBI mini-grant



Reading the mix

40% people: trusted messengers are the intervention

33% outreach & materials: travel, translated print, participant support

10% tools: software for in-language video and virtual sessions

12% indirect: the cost of running CUF

Show the math: every line is quantity × unit cost

Line item	Calculation	Amount	Why it is needed
Local mileage	1,000 miles × $0.70 (IRS rate)	$700	Navigator and PM travel to outreach sites; fuel is included, so no fuel line
Conference travel	1 trip × 1 traveler	$800	TEA cohort convening or national TB conference; no meals or per diem
Translated materials	Translation + layout + printing	$827	TB/LTBI materials in Lingala, French, Swahili
Workshop supplies	Forms, flip charts, toner	$500	Sign-in and evaluation forms; no clinical supplies
Participant support	50 participants × $20	$1,000	ORCA transit cards and gift cards, signed log
Software	8 months × $125	$1,000	Video-conferencing, Canva, Adobe for in-language content

A reviewer should be able to recalculate every number from the justification alone.

Indirect costs, step by step

$8,827	– $1,000	= $7,827	× 15%	$1,173
Total direct costs	Participant support	Base	De minimis rate	Indirect requested

Why $1,173 and not $1,174? 15% of $7,827 is $1,174.05. We held indirect just under 15% (an effective 14.99%), so the total landed exactly on the $10,000 award.

Lesson:

- Know which costs your rate excludes.
- Our first draft applied 15% to participant support, and the funder's review caught it.

When the award is cut: rebalance, do not just shrink

−33%

$15,000 requested → $10,000 awarded, with revised budget and narrative due one day after acceptance

1 **Protect the core**

Keep the people and languages that make the intervention work

2 **Cut scope, not quality**

Reduce reach or the number of events rather than thinning every line

3 **Revise both documents**

The narrative and the Excel budget must describe the same, smaller project

4 **Re-check the math**

Recalculate indirect and totals after every change

What the funder's final review taught us

TEA's final budget review asked CUF to align the Excel budget with the narrative. Each fix is a common mistake:

The narrative is controlling

When the two disagree, the funder follows the narrative. Fix the spreadsheet to match it.

Say exactly what travel is

The $800 travel line is conference or convening travel, not fuel; mileage already includes fuel.

Put costs in the right category

$1,000 in software subscriptions moved from Equipment to Other: subscriptions are services.

Apply the rate to the right base

Indirect recalculated excluding $1,000 participant support from MTDC (about $26 shifted to direct).

Case study 2: our 2026 hepatitis B community grant

$8,000

from the Hepatitis B Foundation, 2026

$4,000

installment received July 2026 — paid in parts, so plan your cash flow

Goal: engage 300 African immigrant community members in Washington State in hepatitis B awareness, screening, vaccination, and linkage to care

150

people in story circles and family-focused education

100

participants referred for screening and vaccination

50

people navigated to care with HealthPoint

10–15

community health educators trained

Allocation rules of thumb for small community grants

Fund people first

Trusted messengers are the intervention, not overhead. Pay them fairly.

Line-item language access

Translation, interpretation, and low-literacy formats get their own lines.

Reserve for evaluation

Set aside time and tools to count what you promised.

Claim honest overhead

Use the rate you are allowed. Your organization has real costs.

Fewer, clearer lines

On a $10,000 grant, six to eight well-justified lines beat twenty vague ones.

Plan for cash flow

Installments and reimbursement mean you may spend before you are paid.

The crosswalk: activity → budget line → deliverable

Activity (TEA 2026–27)	Budget lines that pay for it	What we report
In-language TB/LTBI workshops	Navigator and PM time; supplies; participant support	Workshops held; attendees; pre/post knowledge
Translated education materials	$827 translation, layout, printing; software	Materials produced and distributed, by language
Non-clinical navigation to HealthPoint	Navigator time; mileage	People referred and followed up
Partner coordination and learning	Project Lead time; conference travel	Meetings, presentations, shared findings

Tip: build this table before you submit. If an activity has no line, or a line has no activity, fix it now.

Write the budget justification as a short story

Each line answers four questions

Who or what?	Albertine Mikala, Community Health Navigator
How much?	$1,500
How calculated?	Stipend for the project period
Why?	Delivers TB/LTBI education in Lingala, French, and Swahili and navigates people to HealthPoint

Consistency checks

- Same numbers in the spreadsheet, narrative, and forms
- Same names and titles for staff everywhere
- Same project period and same totals
- Every activity in the narrative appears in the budget
- Have someone who did not write it check the math

After the award: manage the budget you promised



Document as you go

Trip logs for mileage, signed logs for participant support, receipts for supplies



Compare monthly

Budget vs. actual, line by line; flag anything more than 10% off



Ask before you move money

Get written approval for budget modifications before spending



Report on time

Mid-year and final reports draw on the same numbers; keep them consistent



Keep clean books

Separate each grant in your accounting system so audits are simple



Track installments

Match spending to when each payment arrives

Five lessons from three CUF grants

1	**Start from the RFP's limits**	Our TB award barred clinical costs, so the budget had to be built around education and navigation.
2	**Show your math**	Quantity × unit cost × reason, for every line.
3	**Budget for language access**	Translation and low-literacy formats are core costs, not extras.
4	**Know your indirect base**	Participant support is excluded from MTDC. We learned this in review.
5	**Let results shape the next budget**	Our TB data moved money from new sites to language-concordant navigation.

THANK YOU!

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