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U.S. Department of Transportation	
Federal Aviation Administration	

SUMMARY PROPOSAL BUDGET

Form Approved: O.M.B. No 2120-0559

	(SEE INSTRUCTION		REVERSE BEFOR		
Covering Period from to	L L	(SEE INSTRUCTIONS ON REVERSE BEFORE COMPLETING) FOR FAA USE ONLY				
ORGANIZATION		PROPOSAL NO.		DURATION (MONTHS)		
ORGANIZATION	IZATION PROFOSALINO.			PROPOSED	GRANTED	
PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR		AWARD NO.			GRANTED	
		AWARD NO.				
				_I		
A. SENIOR PERSONNEL: PI/PD. Co-PI's. Faculty and other Senior Associates (List each separately with title, A.6 Show number in brackets)		FAA Funded		Funds	Funds Granted by FAA	
each separately with title, A.o Show humber in brackets)		Person-mos.		Requested by Proposer	(If Different)	
	CAL	ACAD SU	JMR			
		ACAD CC				
1.				\$	\$	
2.						
3.						
4.						
5. () OTHERS (LIST INDIVIDUALLY ON BUDGET EXPLANATION PAGE)						
6. () TOTAL SENIOR PERSONNEL (1-5)						
B. OTHER PERSONNEL (SHOW NUMBERS IN BRACKETS)						
1. () POST DOCTORAL ASSOCIATES						
2. () OTHER PROFESSIONALS (TECHNICIAN, PROGRAMMER, ETC)					-	
3. () GRADUATE STUDENTS						
4. () UNDERGRADUATE STUDENTS						
5. () SECRETARIAL CLERICAL						
TOTAL SALARIES AND WAGES (A+B)						
C. FRINGE BENEFITS (IF CHARGED AS DIRECT COSTS)						
TOTAL SALARIES, WAGES AND FRINGE BENEFITS (A+B+C)						
D. PERMANENT EQUIPMENT (LIST ITEM AND DOLLAR AMOUNT FOR EACH ITEM EXCEE	DING \$5,000);					
TOTAL PERMANENT EQUIPMENT						
E. TRAVEL 1. DOMESTIC (INCL. CANADA AND U.S. POSSESSIONS)						
2. FOREIGN						
F. PARTICIPANT SUPPORT COSTS						
1. STIPENDS \$						
2. TRAVEL						
3. SUBSISTENCE						
4. OTHER						
() TOTAL PARTICIPANT COSTS						
G. OTHER DIRECT COSTS						
1. MATERIALS AND SUPPLIES				·		
2. PUBLICATION COSTS/DOCUMENTATION/DISSEMINATION						
3. CONSULTANT SERVICES						
4. COMPUTER (ADPE) SERVICES						
5. SUBCONTRACTS						
6. OTHER						
TOTAL OTHER DIRECT COSTS						
H. TOTAL DIRECT COSTS (A THROUGH G)						
I. INDIRECT COSTS (SPECIFY RATE AND BASE)						
TOTAL INDIRECT COSTS						
J. TOTAL DIRECT AND INDIRECT COSTS (H+I)						
				\$	\$	
PI/PD TYPED NAME AND SIGNATURE	DATE				Ŧ	
	DATE		FC	OR FAA USE ONLY		
	INDIRE					
INST. REP. TYPED NAME & SIGNATURE	DATE	DATE CHECKED		ATE OF RATE SHEET		

FAA Form 9550-2 (03-03) Supersedes Previous Edition

INSTRUCTIONS FOR USE OF SUMMARY PROPOSAL BUDGET

1. General

a. Each grant proposal, including requests for supplemental funding, must contain a summary Proposal Budget in this format unless a pertinent program guideline specifically provides otherwise.

b. Copies of this and instructions should be reproduced locally as FAA will not supply the form.

c. A separate form should be completed for each year of support requested. An additional form showing the cumulative budget for the full term requested should be completed for proposals requesting more than one year's support. Identify each year's request (e.g., "First year _____," or "Cumulative Budget," etc.) in the margin at the top right of the form.

d. Completion of this summary does not eliminate the need to fully document and justify the amounts requested in each category. Such documentation should be provided on additional page(s) immediately following the budget in the proposal and should be identified by the line item. The documentation page(s) should be titled "Budget Explanation Page."

e. If a revised budget is required by the FAA, it must be signed and dated by the Authorized Organizational Representative and Principal Investigator and submitted in at least the original and two copies.

2. Budget Line Items

The following is a brief outline of budget documentation requirements by line item. (**NOTE:** All documentation or justification required on the line items below should be provided on the Budget Explanation Page.) <u>A., B., and C. Salaries, Wages and Fringe Benefits</u>. On the Budget Explanation Page, list individually all senior personnel who were grouped under A%, the requested person-months to be funded, and rates of pay.

<u>D. Permanent Equipment</u>. While items exceeding \$500 and 2 years' useful life are defined as permanent equipment, it is only necessary to list item and dollar amount for each item exceeding \$5,000. Fully justify.

<u>E. Travel</u>. Address the type and extent of travel (including consultant travel) and its relation to the project. Itemize by destination and cost and justify travel outside the United States and its possessions. Puerto Rico, and Canada. Include dates of foreign visits or meetings. Fare allowances are limited to round-trip, jet-economy rates.

<u>F. Participant Support Costs</u>. Normally participant support may only be requested for grants supporting conferences, workshops or symposia. Show number of participants in brackets.

G. Other Direct Costs.

- 1. Materials and Supplies. Indicate types required and estimated costs.
- 2. Publication, Documentation, Dissemination. Estimated costs of documenting, preparing, publishing, dissemination, and sharing research findings.
- 3. Consultant Services. Indicate name, daily compensation and estimated days of service, and justify.
- Computer Services. Include justification based on established computer service rates at the proposing institution. Purchase of equipment is included under D.
- 5. Subcontract. Include a complete budget and justify details.
- 6. Other. Itemize and justify. Include computer equipment leasing.

Indirect Costs. Specify current rate(s) and base(s). Use current rate(s) negotiated with the cognizant Federal negotiating agency.

APPLICANTS MUST NOT ALTER OR REARRANGE THE COST CATEGORIES AS THEY APPEAR ON THIS FORM, WHICH IS DESIGNED FOR COMPATIBILITY WITH DATA CAPTURE BY FAA'S MANAGEMENT INFORMATION SYSTEM. IMPROPER COMPLETION OF THIS FORM MAY RESULT IN RETURN OF PROPOSAL TO APPLICANT.

PAPERWORK REDUCTION ACT

Paperwork Reduction Act Statement: This form is used by applicants to submit proposals in response to the Congressionally mandated Grants Program. The collection of data is required to adhere to the statutes and OMB circulars. It is estimated that it will take approximately 3 hours to complete the form. Use of the form is mandatory. No assurance of confidentiality is necessary or provided. It should be noted that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this collection of information is 2120-0559.