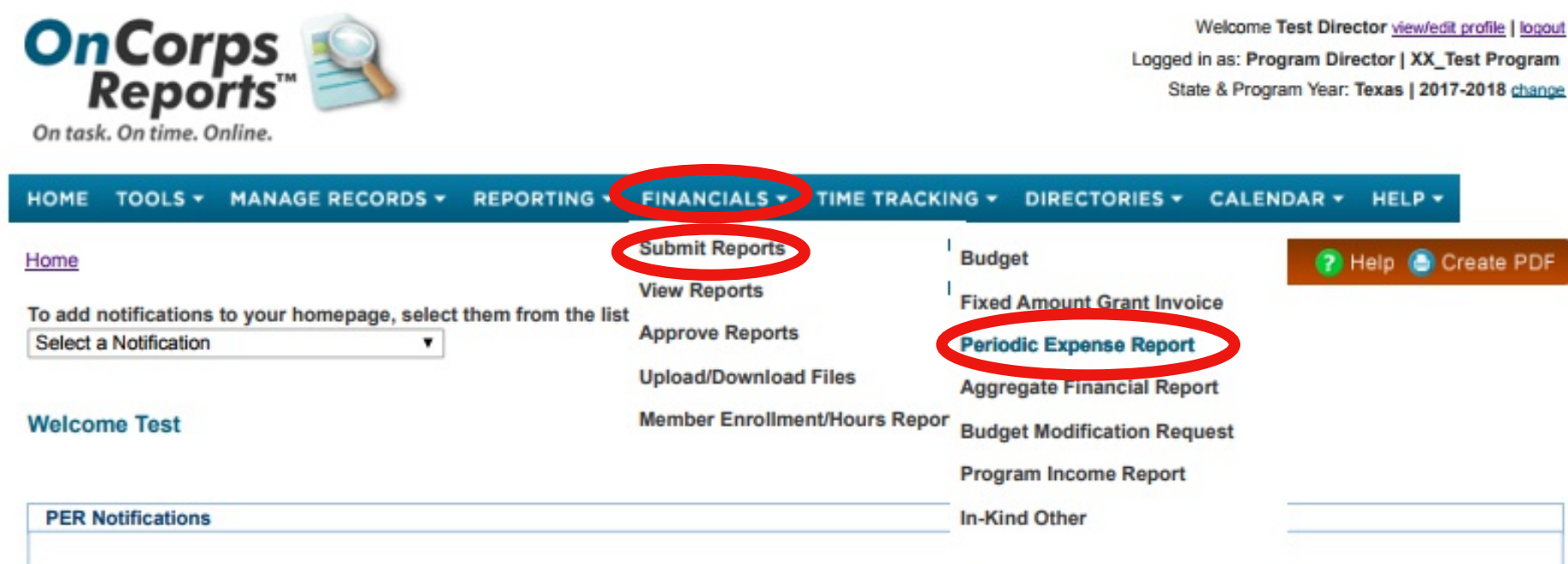


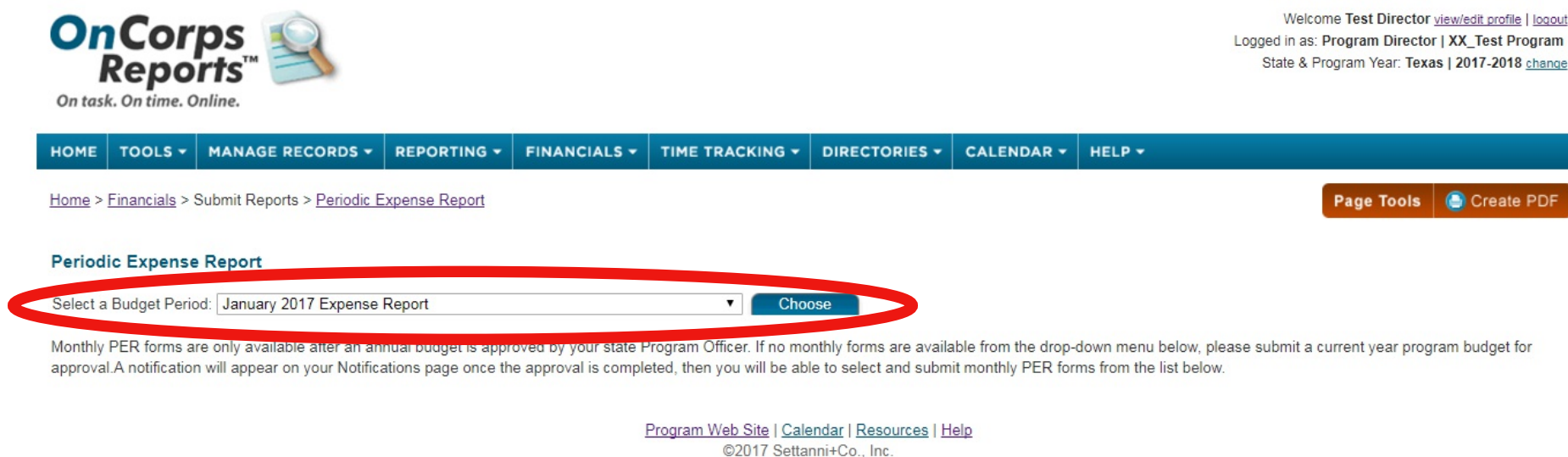
How to Submit a PER for Cost Reimbursement Grants



1. Log in to tx.oncorpsreports.com
2. From your dashboard, choose the Financials Tab, then the option “Submit Reports”, then “Periodic Expense Report”



3. Select a budget period from the drop down menu.



- For those programs that submit monthly PERs, choose July 2017 for the PER ending 7/31/17, August 2017 for the PER ending 08/31/17.
- For those programs that submit two PERs per month, choose September 2017 Part 1 for the PER ending 9/15/17 and September 2017 Part 2 for the PER ending 9/30/17.
- For those programs that submit quarter PERs, choose the quarter end date from the drop down menu that corresponds with your PER end date.

4. Enter your expenses in the section with a green label titled “Current Expenditures”. Please use only the CNCS column (CNCS Share) and Grantee Cash column (Grantee Share). Do not enter information into the column labeled “Grantee In-Kind”. Enter expenses by line item.



Periodic Expense Report

Program Name: XX_Test Program
Legal Applicant: XX_Test Program
Program Type: Competitive Cost Reimbursement (24% match)
Program Year: 2017-2018
Budget Period: March 2017 Expense Report
Yellow Background = Over Budget by less than 10%
Red Background = Over Budget by 10% or more

Budget Item	Budget Total				Current Expenditures				Year-To-Date				Budget versus YTD Actual			
	CNCS	Grantee Cash	Grantee In-kind	Total	CNCS	Grantee Cash	Grantee In-kind	Total	CNCS	Grantee Cash	Grantee In-kind	Total	CNCS	Grantee Cash	Grantee In-kind	Total
Program Operating Costs																
A Personnel Exp	\$249,650.00	\$249,650.00	\$0.00	\$499,300.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$249,650.00	\$249,650.00	\$0.00	\$499,300.00
B Fringe Benefits	\$47,433.00	\$47,433.00	\$0.00	\$94,866.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$47,433.00	\$47,433.00	\$0.00	\$94,866.00
C.1 Staff Travel	\$4,900.00	\$4,900.00	\$0.00	\$9,800.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,900.00	\$4,900.00	\$0.00	\$9,800.00
C.2 Member Travel	\$4,800.00	\$37,000.00	\$0.00	\$41,800.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,800.00	\$37,000.00	\$0.00	\$41,800.00
C.3 Travel Subtotal	\$9,700.00	\$41,900.00	\$0.00	\$51,600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9,700.00	\$41,900.00	\$0.00	\$51,600.00
D Equipment	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
E Supplies	\$2,900.00	\$20,300.00	\$0.00	\$23,200.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,900.00	\$20,300.00	\$0.00	\$23,200.00
F Consultants	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

5. For Section III, Administrative-Indirect Costs, enter your CNCS fixed cost or Federal Indirect line items only. Do not enter an amount in the blank for the commission fixed costs (this will be done later).

L	Member Support								
L.1	FICA	\$64,253.00	\$50,062.00	\$0.00	\$114,315.00	6590.94	2081.35	0	\$0.00
L.2	Workers Comp	\$4,350.00	\$4,350.00	\$0.00	\$8,700.00	457.01	144.32	0	\$0.00
L.3	Health Care	\$20,100.00	\$14,700.00	\$0.00	\$34,800.00	4747.35	1499.16	0	\$0.00
L.4	Member Support Costs	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00
L.5	Member Support Subtotal	\$88,703.00	\$69,112.00	\$0.00	\$157,815.00	\$0.00			\$0.00
Program Operating Costs		\$1,333,460.00	\$1,154,776.00	\$0.00	\$2,488,236.00	\$0.00	\$0.00	\$0.00	\$0.00
						n/a	n/a	n/a	
Administrative ~ Indirect Costs									
A	CNCS Fixed Percentage								
A.1	CNCS Fixed Costs	\$42,084.00	\$248,824.00	\$0.00	\$290,908.00	20053.75	7045.75	0	\$0.00
A.2	Commission Fixed Costs	\$28,056.00	\$0.00	\$0.00	\$28,056.00	0	0	0	\$0.00
B	Federal Indirect	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00
Administrative ~ Indirect Costs Subtotal		\$70,140.00	\$248,824.00	\$0.00	\$318,964.00	\$0.00	\$0.00	\$0.00	\$0.00
Percentage		21.99%	78.01%	0%		n/a	n/a	n/a	

Federal Indirect Cost Rate here

IMPORTANT: You should have either a CNCS Fixed Cost OR a Federal Indirect Cost Rate, NOT both.

6. When you have entered all of your program expenses, click the “Calc Admin & Match (%)” button at the bottom. This will total all of your line items and calculate percentages.

	AmeriCorps Funds	Grantee Share
1. Grant Amount (linked to budget above)	\$1,403,600.00	\$1,403,600.00
2. Expenditures to Date (Before this report)	\$0.00	\$0.00
3. Grant Balance Available (line 1 less line 2)	\$1,403,600.00	\$1,403,600.00
4. Current Period Expenditures (linked above)	\$0.00	\$0.00
5. Grant Balance Remaining	\$1,403,600.00	\$1,403,600.00
6. Amount of This Request (current expenses)	\$0.00	\$0.00
Final PER?	<input type="radio"/> Yes <input checked="" type="radio"/> No	---

CNCS Budget\$1,403,600.0010% Budget\$280,720.00CNCS Admin <= 5.26%Budget5% (OK)YTD Actual0% (OK)Overall Match >= 24%Budget50% (OK)YTD Actual0% (NO)Cost Per MSYBudget (25)\$56,144.00YTD Actual (---)---

The Cost/MSY can only be calculated after the last day of the month is complete

☐ I certify that the amounts shown above are accurate and do not exceed the grant award. All grant expenditures have been recorded and reported according to generally accepted accounting principles, OMB Circulars, & CNCS grant guidelines.

Additional Comments:

Calc Admin & Match (%)

Save

Submit for Approval

Cancel

7. This will also calculate the state commission 2% (in the Request for Funds-Payment Calculator in the bottom right hand corner). Please take this number and enter it into the line item above for Commission Fixed Costs (the one that was left blank in Step 5).

...enter it into the Commission Fixed Costs line item blank here.

Administrative ~ Indirect Costs																	
A	CNCS Fixed Percentage																
A.1	CNCS Fixed Costs	\$42,084.00	\$248,824.00	\$0.00	\$290,908.00	20053.75	7045.75	0	\$27,099.50	\$20,053.75	\$7,045.75	\$0.00	\$27,099.50	\$22,030.25	\$241,778.25	\$0.00	\$263,808.50
A.2	Commission Fixed Costs	\$28,056.00	\$0.00	\$0.00	\$28,056.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28,056.00	\$0.00	\$0.00	\$28,056.00
B	Federal Indirect	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Administrative ~ Indirect Costs Subtotal		\$70,140.00	\$248,824.00	\$0.00	\$318,964.00	\$20,053.75	\$7,045.75	\$0.00	\$27,099.50	\$20,053.75	\$7,045.75	\$0.00	\$27,099.50	\$50,086.25	\$241,778.25	\$0.00	\$291,864.50
Percentage		21.99%	78.01%	0%		74%	26%	0%		74%	26%	0%		17.16%	82.84%	0%	
TOTAL		\$1,403,600.00	\$1,403,600.00	\$0.00	\$2,807,200.00	\$200,249.47	\$63,949.67	\$0.00	\$264,199.14	\$200,249.47	\$63,949.67	\$0.00	\$264,199.14	\$1,203,350.53	\$1,339,650.33	\$0.00	\$2,543,000.86
Percentage		50%	50%	0%		75.79%	24.21%	0%		75.79%	24.21%	0%		47.32%	52.68%	0%	
TOTAL PROGRAM		\$2,807,200.00				\$264,199.14				\$264,199.14				\$2,543,000.86			
										NOTE: Year-To-Date totals and Budget versus YTD Actual totals include both approved and non-approved PERs							

	AmeriCorps Funds	Grantee Share
1. Grant Amount (linked to budget above)	\$1,403,600.00	\$1,403,600.00
2. Expenditures to Date (Before this report)	\$0.00	\$0.00
3. Grant Balance Available (line 1 less line 2)	\$1,403,600.00	\$1,403,600.00
4. Current Period Expenditures (linked above)	\$200,249.47	\$63,949.67
5. Grant Balance Remaining	\$1,203,350.53	\$1,339,650.33
6. Amount of This Request (current expenses)	\$200,249.47	\$63,949.67
Final PER?	<input type="radio"/> Yes <input checked="" type="radio"/> No	---

CNCS Budget\$1,403,600.0010% Budget\$280,720.00CNCS Admin <= 5.26%Budget5% (OK)YTD Actual10.01% (NO)Overall Match >= 24%Budget50% (OK)YTD Actual24.21% (OK)Cost Per MSYBudget (25)\$56,144.00YTD Actual (---)---

The Cost/MSY can only be calculated after the last day of the month is complete

Request for Funds(RFF) - PaymentCalculator	
CNCS Current Expenditures	\$180,195.72
(=Program Operating Costs Subtotal)	
CNCS Fixed Costs	\$28,056.00
State Commission 2% admin	\$3,791.32
(Program Operating Costs Subtotal * 0.0526 * 0.4)	
Total Payment	\$211,040.79
Amount Reimbursable to Subgrantee	\$200,249.47
(Total Payment less the State Commission's 2%)	

Take the calculated Commission 2% number here and.....

IMPORTANT: These numbers must be identical on your submitted PER

8. Click the “Calc Admin & Match (%)” button again and review.

L.3 Health Care	\$20,000.00	\$14,730.00	\$0.00	\$04,000.00	4747.05	1488.18	0	\$8,248.51	\$4,747.05	\$1,488.18	\$0.00	\$8,248.51
L.4 Member Support Costs	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
L.5 Member Support Subtotal	\$88,703.00	\$69,112.00	\$0.00	\$157,815.00	\$11,795.30	\$3,724.83	\$0.00	\$15,520.13	\$11,795.30	\$3,724.83	\$0.00	\$15,520.13
Program Operating Costs Subtotal	\$1,333,460.00	\$1,154,776.00	\$0.00	\$2,488,236.00	\$180,195.72	\$56,903.52	\$0.00	\$237,099.64	\$180,195.72	\$56,903.52	\$0.00	\$237,099.64
Percentage	53.59%	46.41%	0%		76%	24%	0%		76%	24%	0%	
Administrative - Indirect Costs												
A CNCS Fixed Percentage												
A.1 CNCS Fixed Costs	\$42,081.00	\$43,824.00	\$0.00	\$080,905.00	2070.75	7045.75	0	\$27,766.50	\$20,700.75	\$7,045.75	\$0.00	\$27,766.50
A.2 Commission Fixed Costs	\$28,051.00	\$0.00	\$0.00	\$28,051.00	\$3,701.32	0	0	\$3,701.32	\$3,701.32	\$0.00	\$0.00	\$3,701.32
B Federal Indirect	\$0.00	\$0.00	\$0.00	\$0.00	0	0	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Administrative - Indirect Costs Subtotal	\$70,140.00	\$240,024.00	\$0.00	\$010,064.00	\$23,045.07	\$7,045.75	\$0.00	\$30,090.82	\$23,045.07	\$7,045.75	\$0.00	\$30,090.82
Percentage	21.00%	70.01%	0%		77.19%	22.81%	0%		77.19%	22.81%	0%	
TOTAL \$1,403,600.00 \$1,400,600.00 \$0.00 \$2,807,200.00 \$204,040.79 \$63,949.27 \$0.00 \$267,990.46 \$204,040.79 \$63,949.27 \$0.00 \$267,990.46												
Percentage 50% 50% 0% 76.14% 23.86% 0% 76.14% 23.86% 0%												
TOTAL PROGRAM				\$2,807,200.00	\$267,990.46				\$267,990.46			
NOTE: Year-To-Date totals and Percentages include both approved and unapproved amounts.												

1. Grant Amount (linked to budget above)	\$1,403,600.00	\$1,403,600.00
2. Expenditures to Date (Before this report)	\$0.00	\$0.00
3. Grant Balance Available (line 1 less line 2)	\$1,403,600.00	\$1,403,600.00
4. Current Period Expenditures (linked above)	\$204,040.79	\$63,949.27
5. Grant Balance Remaining	\$1,199,559.21	\$1,339,650.73
6. Amount of This Request (current expenditures)	\$204,040.79	\$63,949.27
Final PER?	<input type="radio"/> Yes <input checked="" type="radio"/> No	---

CNCS Budget	\$1,403,600.00
10% Budget	\$200,720.00
CNCS Admin - 5.26%	
Budget	5% (OK)
YTD Actual	11.89% (NO)
Overall Match	>= 95%
Budget	50% (OK)
YTD Actual	23.08% (NO)
Cost Per MBY	
Budget (25)	\$58,144.00
YTD Actual (---)	---
The Cost/MBY can only be calculated after the last day of the month is complete	

Request for Funds (RF) - Payment Calculation	
CNCS Current Expenditures	\$180,195.72
(Program Operating Costs Subtotal)	
CNCS Fixed Costs	\$20,050.75
State Commission 2% admin	\$3,781.32
(Program Operating Costs Subtotal * 0.025 * 0.4)	
Total Payment	\$204,040.79
Amount Reimbursable for Subgrantee	\$200,248.47
(Total Payment less the State Commission's 2%)	

☐ I certify that the amounts shown above are accurate and do not exceed the grant award. All grant expenditures have been recorded and reported according to generally accepted accounting principles, CMB Circulars, & CNCS grant guidelines.

Additional Comments:

9. Please put the PER end date in this comments section.

Calc Admin & Match (%)

Save

Submit for Approval

Cancel

Please note that the PER will calculate your match percentages to allow you to monitor throughout the grant year. The PER also alerts you to budget variances in the budget to actuals columns on the right hand side.

10. When you are ready, click the disclaimer at the bottom and then click the “Submit for Approval” button. You can also "Save" if you need more time. OneStar staff will review and approve your PER or send it back to you for changes. Please monitor the notifications section of your OnCorps dashboard to check for status changes.

IMPORTANT: The staff member that submits this PER via OnCorps must be on file with OneStar as a fiscal contact or legal authorized signatory for your program. If you need to update your program's authorized representatives, please fill out the Authorized Representative Form (ARF) here:
<http://www.tfaforms.com/159770>