


**Illinois Department
of Transportation**
Agreement, Amendment or Renewal Overview


03.028.0041

To Holly Bieneman, Yangsu Kim, Vicki Wilson	From Andra Williams	IDOT Reference Number 23-1575-0001-A2
Subject Request For Agreement Approval over \$250,000		Date 06/06/22

AGREEMENT INFORMATION

Office Planning & Programming	District / CO	Bureau Programming																	
BoBS Contact Person Santita Nunn		Phone Number (217) 816-8165	Fax Number																
Description of Service Planing & Programming-Highway Research																			
Project in Relation to Provide administration support and oversee technical studies/research projects identified by the GRANTOR.																			
Description of Action required Executive Signatures for Grant Execution																			
<input checked="" type="checkbox"/> Initial Legal Review for Grant/IGA/Renewal/Amendment as to Form Completed By <u>Tim Morris</u> <input type="checkbox"/> Financial Disclosures Reviewed as to Form Completed By _____																			
Fiscal Year(s) 2023	Amount Being Obligated \$40,139,993.57	Start Date 07/01/2022	End Date 06/30/2023	NOSA / SAIN Number 0343-23-1575															
Appropriation Account Code																			
Compensation Method (Check One): <input checked="" type="checkbox"/> Estimated <input type="checkbox"/> Lump Sum <input type="checkbox"/> Schedule of Rates <input type="checkbox"/> Flat Rate																			
Agreement Type (Attach a copy of agreement documents & appropriate approvals) <input checked="" type="checkbox"/> UGA <input type="checkbox"/> UIGA <input type="checkbox"/> IGA <input type="checkbox"/> MOU <input type="checkbox"/> IAA <input type="checkbox"/> Initial <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Other _____																			
		<table border="1"> <thead> <tr> <th></th> <th>Dollars</th> <th>Match %</th> </tr> </thead> <tbody> <tr> <td>Local</td> <td>\$7,500,000.00</td> <td>18%</td> </tr> <tr> <td>Federal</td> <td>\$30,000,000.00</td> <td>75%</td> </tr> <tr> <td>State</td> <td>\$2,640,000.00</td> <td>7%</td> </tr> <tr> <td>Other</td> <td></td> <td></td> </tr> </tbody> </table>				Dollars	Match %	Local	\$7,500,000.00	18%	Federal	\$30,000,000.00	75%	State	\$2,640,000.00	7%	Other		
	Dollars	Match %																	
Local	\$7,500,000.00	18%																	
Federal	\$30,000,000.00	75%																	
State	\$2,640,000.00	7%																	
Other																			

Grantee / Recipient				
Name Board of Trustees of the University of Illinois		Address 364 Henry Administration Building, 506 S. Wright Street		
City Urbana	State IL	Zip Code 61801	Total Estimated Value of the Agreement	
Contact Person Paul Ellinger		Phone Number (217) 333-1560	Fax Number	GATA Reg #
Email cfo-CFO@mx.uillinois.edu				

REMARKS (List below or attach an additional sheet)

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 Approval Recommended By
Bureau Chief

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Date

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Please send to: _____

Amendment No. 23-1575-0001-UIUC-A2Agreement No. 18-1575-0001-UIUC**AMENDMENT TO THE GRANT AGREEMENT****BETWEEN****THE STATE OF ILLINOIS, ILLINOIS DEPARTMENT OF TRANSPORTATION****AND****BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS (UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN)**

The ILLINOIS DEPARTMENT OF TRANSPORTATION (Grantor) with its principal office at 2300 SOUTH DIRKSEN PARKWAY, SPRINGFIELD, IL 62764,
 and Board of Trustees of the University of Illinois University of Illinois at Urbana-Cha (Grantee) with its principal office at 364 Henry Administration Building, 506 S. Wright Street, Urbana, IL 61801,
 and payment address (if different than principal office) at 1901 S. First Street, Suite A Champaign, IL 61820-7406
 hereby hereby agree that the following amendment (Amendment) shall amend the Grant Agreement (Agreement), which is described below. Grantor and Grantee are collectively referred to herein as "Parties" or individually as a "Party."

All terms and conditions set forth in the original Agreement and any subsequent amendment, but not amended herein, shall remain in full force and effect as written. In the event of a conflict, the terms of this Amendment shall prevail. This Amendment is authorized by Paragraph 26.5 of the Agreement.

WHEREAS, it is the intent of the Parties to perform consistent with all terms herein and pursuant to the duties and responsibilities imposed by Grantor under the laws of the state of Illinois and in accordance with the terms, conditions and provisions hereof.

NOW, THEREFORE, in consideration of the foregoing and the mutual agreements contained in the Agreement and herein, and for other good and valuable consideration, the value, receipt and sufficiency of which are acknowledged, the Parties hereto agree as follows:

ARTICLE I**AWARD AND AMENDMENT INFORMATION AND CERTIFICATION**

1.1. Original Agreement. The Agreement, numbered 18-1575-0001, with an original term from 07/01/17 to 06/30/22.

1.2. Prior Amendments. Below is the list of all prior amendments to the Agreement (mark N/A if none):

Amendment Number: 20-1575-0001-UIUC-A1

Effective Date: 3/19/20

1.3. Item(s) Altered. Identify which of the following Agreement elements are amended herein (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Exhibit A (Project Description) | <input type="checkbox"/> Exhibit F (Performance Standards) |
| <input type="checkbox"/> Exhibit B (Deliverables/Milestones) | <input type="checkbox"/> Exhibit G (Specific Conditions) |
| <input checked="" type="checkbox"/> Exhibit C (Payment) | <input type="checkbox"/> PART TWO (Grantor-Specific Terms) |
| <input type="checkbox"/> Exhibit D (Contact Information) | <input checked="" type="checkbox"/> PART THREE (Project-Specific Terms) |
| <input type="checkbox"/> Exhibit E (Performance Measures) | <input type="checkbox"/> Budget |
| <input checked="" type="checkbox"/> Award Term | <input type="checkbox"/> Funding Source |
| <input type="checkbox"/> Award Amount | <input type="checkbox"/> Other (specify): _____ |

State of Illinois

AMENDMENT TO THE GRANT AGREEMENT FISCAL YEAR 2022 / 3 04 21

Page 1 of 4

Amendment No. **23-1575-0001-UIUC-A2**Agreement No. **18-1575-0001-UIUC**

1.4. **Effective Date.** This Amendment shall be effective on n/a. If an effective date is not identified in this Paragraph, the Amendment shall be effective upon the last dated signature of the Parties.

1.5. **Certification.** Grantee certifies under oath that (1) all representations made in this Amendment are true and correct and (2) all Grant Funds awarded pursuant to the Agreement shall be used only for the purpose(s) described therein, including all subsequent amendments. Grantee acknowledges that the Award is made solely upon this certification and that any false statements, misrepresentations, or material omissions shall be the basis for immediate termination of the Agreement and repayment of all Grant Funds.

1.6 **Signatures.** In witness whereof, the Parties hereto have caused this Amendment to be executed by their duly authorized representatives.

FOR THE DEPARTMENT

Check One:

- ☐ The amendment is under \$250,000. Only the Director and/or Secretary's signatures are required and may be delegated.
- ☒ The amendment is over \$250,000. All signatures below are required and cannot be delegated.

Illinois Department of Transportation

By: [Signature]
 Signature of Chief of Staff, Secretary of Transportation

By: _____

Date: 6/30/2022 Signature of Designee

PrintName: _____

Printed Title: _____

Designee

DocuSigned by:

By: [Signature]3E76F8A0B9554F5
06-29-2022

Signature of First Other Approver, if Applicable

Date: _____

Printed Name: Yangsui KimPrinted Title: Chief Counsel

Other Approver

DocuSigned by:

By: Vicki Wilson

6/30/22

Signature of Second Other Approver, if Applicable

Date: _____

Printed Name: Vicki WilsonPrinted Title: CFO

Sec and Other Approver

DocuSigned by:

By: [Signature]

9E53070B18274F1

Signature of Third Other Approver, if Applicable

Date: 06/30/2022Printed Name: Holly BienemanPrinted Title: Director of OPP

Third Other Approver

Board of Trustees of the University of Illinois

By: [Signature]
 Signature of Authorized Representative

Date: 6/21/2022Printed Name: Paul EllingerPrinted Title: Interim ComptrollerEmail: spa@illinois.eduBy: [Signature]

Signature of Authorized Representative

Date: 6/21/2022Printed Name: Robin BeachPrinted Title: Director, Pre-Award, Comptroller DelegateEmail: spa@illinois.edu

ARTICLE II AMENDMENTS

ARTICLE 1. AWARD AND GRANTEE-SPECIFIC INFORMATION AND CERTIFICATION

1.2 Amount of Agreement: Grant Funds shall not exceed \$40,140,000 of which \$30,000,000 are federal funds.

1.4 Term. This Agreement shall be effective on July 1, 2017 and shall expire on June 30, 2023, unless terminated pursuant to this agreement.

EXHIBIT C

The GRANTEE will be compensated for the services set for in this agreement in the amount not to exceed \$40,140,000 under this agreement.

Program Management & Administration

Amount not to exceed \$450,000 (excluding Cost Sharing) and earmarked for the GRANTEE to use in Fiscal Year 2023, shall be allocated for Program Management and Administration as shown in ATTACHMENT A.

RD&T Activity Management - Project Coordination

Amount not to exceed \$373,686 (excluding Cost Sharing) and earmarked for the GRANTEE to use in Fiscal Year 2023, shall be allocated for RD&T Activity Management - Project Coordination.

Editorial Support and Technology Transfer

Amount not to exceed \$165,000 (excluding Cost Sharing) and earmarked for the GRANTEE to use in Fiscal Year 2023, shall be allocated for Editorial Support and Technology Transfer.

Research Dissemination and Implementation

Amount not to exceed \$116,000 (excluding Cost Sharing) and earmarked for the GRANTEE to use in Fiscal Year 2023, shall be allocated for Research Dissemination and Implementation.

Cost Sharing

The GRANTEE shall provide a minimum cost share of 20% for the Program, excluding Program Management & Administration, amounting to \$1,300,000 as detailed in the Cost Sharing and Outsourcing Summary on ATTACHMENT B. Research Projects may be asked to provide more than 20% cost share. Fiscal Requirement related to indirect costs when used as cost share must comply with 2 CFR 200.306 (c).

PART THREE - THE PROJECT SPECIFIC TERMS

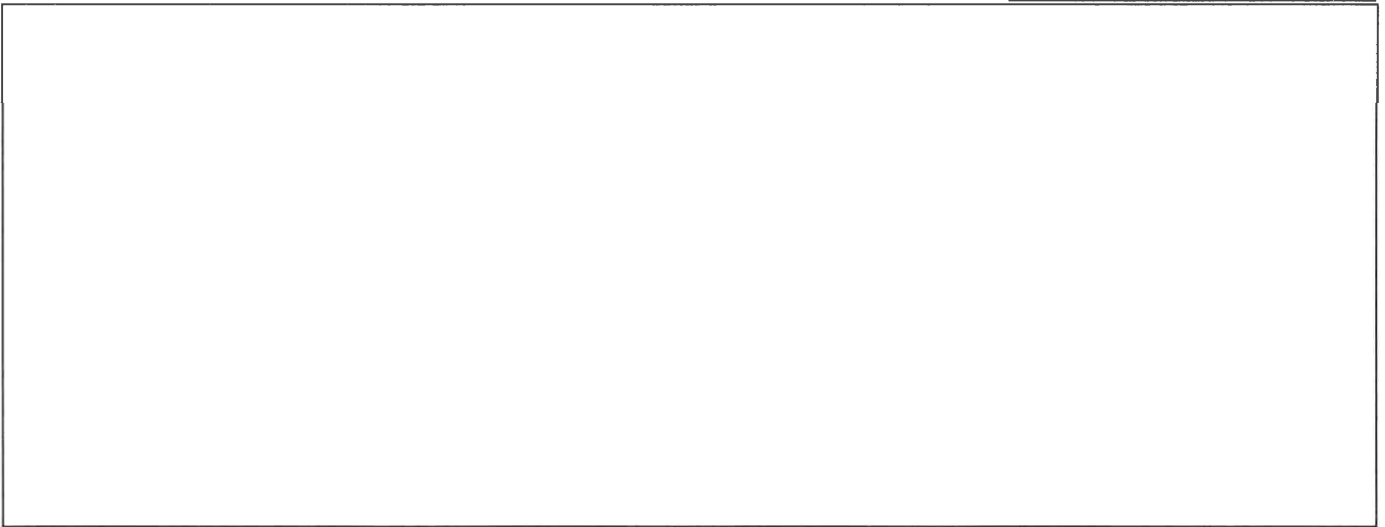
TERM - The term of this agreement is from July 1, 2017 through June 30, 2023.

ATTACHMENTS

Attachments A and B have been revised and attached for Fiscal Year 2023.

Amendment No. 23-1575-0001-UIUC-A2

Agreement No. 18-1575-0001-UIUC



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State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

This form is used to apply to individual State of Illinois discretionary grant programs. Applicants should submit budgets based upon the total estimated costs for the project including all funding sources. Pay attention to applicable program specific instructions, if attached. The applicant organization should refer to 2 CFR 200, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards" cited within these instructions.

You must consult with your Business Office prior to submitting this form for any award restrictions, limitations or requirements when filling out the narrative and Uniform Budget Template.

Section A – Budget Summary
STATE OF ILLINOIS FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories shown in lines 1-17. Eligible applicants requesting funding for only one year should complete the column under "Year 1." Eligible applicants requesting funding for multi-year grants should complete all applicable columns. **Please read all instructions before completing form.**

STATE OF ILLINOIS GRANT FUNDS

Provide a total requested State of Illinois Grant amount for each year in the Revenue portion of Section A. The amount entered in Line (a) will equal the total amount budgeted on Line 18 of Section A.

BUDGET SUMMARY – STATE OF ILLINOIS FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories shown in lines 1-17.

Line 18: Show the total budget request for each fiscal year for which funding is requested.

Please use detail worksheet and narrative section for further descriptions and explanations of budgetary line items.

Section A (continued) Indirect Cost Information: *(This information should be completed by the applicant's Business Office). If the applicant is requesting reimbursement for indirect costs on line 17, the applicant's Business Office must select one of the options listed on the Indirect Cost Information page under Section-A Indirect Cost Information (1-4).*

Option (1): The applicant has a Negotiated Indirect Cost Rate Agreement (NICRA) that was approved by the Federal government. A copy of this agreement must be provided to the State of Illinois' Indirect Cost Unit for review and documentation. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. *If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information".*

NOTE: The applicant may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for the applicant to be reimbursed for Indirect Costs from the State of Illinois, the applicant must either:

- A) Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from our State Cognizant Agency on an annual basis.
- B) Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.
- C) Use a Restricted Rate designated by programmatic statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs).



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Section A – Budget Summary (continued)

Option (2a): The applicant currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. The applicant is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c)). **Note:** If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information".

Option (2b): The applicant currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. The applicant must submit its initial Indirect Cost Rate Proposal (ICRP) immediately after the applicant is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b)). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit. **Note:** The applicant should check with the State of Illinois awarding Agency for information regarding reimbursement of indirect costs while its proposal is being negotiated.

Option (3): The applicant elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68)). **Note:** (The applicant must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs.)

Option (4): If you are applying for a grant under a Restricted Rate Program, indicate whether you are using a restricted indirect cost rate that is included on your approved Indirect Cost Rate Agreement, or whether you are using a restricted indirect cost rate that complies with statutory or programmatic policies. **Note:** See Notice of State Award for Restricted Rate Programs.

Section B – Budget Summary
NON-STATE OF ILLINOIS FUNDS

NON-STATE OF ILLINOIS FUNDS: If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-State of Illinois resources to the project, the applicant must provide a revenue breakdown of all Non-State of Illinois funds in lines (b)-(d). the total of "Non-State Funds" should equal the amount budgeted on Line 18 of Section B. If a match percentage is required, the amount should be entered in this section.

BUDGET SUMMARY – NON-STATE OF ILLINOIS FUNDS

If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-State of Illinois resources to the project, these costs should be shown for each applicable budget category on lines 1017 of Section B.

Lines 1-17: For each project year, for which matching funds or other contributions are provided, show the total contribution for each applicable budget category.

Line 18: Show the total matching or other contribution for each fiscal year.

Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items.



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Section C – Budget Worksheet & Narrative

[Attach separate sheet(s)]

Pay attention to applicable program specific instructions, if attached.

All applicants are required to submit a budget narrative along with Section A and Section B. The budget narrative is sometimes referred to as the budget justification. The narrative serves two purposes: it explains how the costs were estimated and it justifies the need for the cost. The narrative may include tables for clarification purposes. The State of Illinois recommends using the State of Illinois Uniform Budget Template worksheet and narrative guide provided.

1. Provide an itemized budget breakdown, and justification by project year, for each budget category listed in Sections A and B.
2. For non-State of Illinois funds or resources listed in Section B that are used to meet a cost-sharing or matching requirement or provided as a voluntary cost-sharing or matching commitment, you must include:
 - a. The specific costs or contributions by budget category;
 - b. The source of the costs or contributions; and
 - c. In the case of third-party in-kind contributions, a description of how the value was determined for the donated or contributed goods or services.

[Please review cost sharing and matching regulations found in 2 CFR 200.306.]

3. If applicable to this program, provide the rate and base on which fringe benefits are calculated.
4. If the applicant is requesting reimbursement for indirect costs on line 17, this information should be completed by the applicant's Business Office. Specify the estimated amount of the base to which the indirect cost rate is applied and the total indirect expense. Depending on the grant program to which the applicant is applying and/or the applicant's approved Indirect Cost Rate Agreement, some direct cost budget categories in the applicant's grant application budget may not be included in the base and multiplied by your indirect cost rate. Please indicate which costs are included and which costs are excluded from the base to which the indirect cost rate is applied.
5. Provide other explanations or comments you deem necessary.



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Keep in mind the following—

Although the degree of specificity of any budget will vary depending on the nature of the project and State of Illinois agency requirements, a complete, well-thought-out budget serves to reinforce your credibility and increase the likelihood of your proposal being funded.

- A well-prepared budget should be reasonable and demonstrate that the funds being asked for will be used wisely.
- The budget should be as concrete and specific as possible in its estimates. Make every effort to be realistic, to estimate costs accurately.
- The budget format should be as clear as possible. It should begin with a budget narrative, which you should write after the entire budget has been prepared.
- Each section of the budget should be in outline form, listing line items under major headings and subheadings.
- Each of the major components should be subtotaled with a grand total at the end.

Your budget should justify all expenses and be consistent with the program narrative:

- Salaries should be comparable to those within the applicant organization.
- If new staff is being hired, additional space and equipment are considered, as necessary.
- If the budget lists an equipment purchase, it is the type allowed by the agency.
- If additional space is rented, the increase in insurance is supported.
- If an indirect cost rate applies to the proposal, the division between direct and indirect costs is not in conflict, and the aggregate budget totals refer directly to the approved formula. Indirect costs are costs that are not readily assignable to a particular project, but are necessary to the operation of the organization and the performance of the project (like the cost of operating and maintaining facilities, depreciation, and administrative salaries).

§200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

State Agency: Illinois Department of Transportation

Organization Name: The Board of Trustees of the University of Illinois

Notice of Funding
Opportunity (NOFO) Number: N/A

Data Universal Number System (DUNS) Number (enter numbers only) : 041544081

Catalog of State Financial Assistance (CSFA) Number: 494-00-1575

CSFA Short Description: Highway Research Program

Section A: State of Illinois Funds

Fiscal Year: 2018 - 2023

REVENUES		Total Revenue
State of Illinois Grant Requested	\$	
Budget Expenditure Categories	OMB Uniform Guidance Federal Awards Reference 2 CFR 200	Total Expenditures
1. Personnel (Salary and Wages)	200.430	2,458,044.72
2. Fringe Benefits	200.431	1,007,348.12
3. Travel	200.474	80,801.04
4. Equipment	200.439	
5. Supplies	200.94	90,593.00
6. Contractual Services and Subawards	200.318 & 200.92	
7. Consultant (Professional Service)	200.459	
8. Construction		
9. Occupancy (Rent and Utilities)	200.465	
10. Research and Development (R&D)	200.87	437,333.00
11. Telecommunications		
12. Training and Education	200.472	
13. Direct Administrative Costs	200.413 (c)	40,320.00
14. Miscellaneous Costs		28,113.00
15. A. Grant Exclusive Line Item(s)		14,563,930.44
15. B. Grant Exclusive Line Item(s)		4,231,826.13
16. Total Direct Costs (add lines 1-15)	200.413	22,938,309.45
17. Total Indirect Costs	200.414	9,701,683.98
Rate %:	50	
Base:	Modified Total Direct Cost	
18. Total Costs State Grant Funds (Lines 16 and 17)		
MUST EQUAL REVENUE TOTALS ABOVE	\$	32,639,993.43

Instructions
found at end of
document.



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Organization Name: The Board of Trustees of the University of Illinois

NOFO Number: N/A

SECTION A - Continued - Indirect Cost Rate Information

If your organization is requesting reimbursement for indirect costs on line 17 of the Budget Summary, please select one of the following options

1. Our Organization receives direct Federal funding and currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with our Federal Cognizant Agency. A copy of this agreement will be provided to the State of Illinois' Indirect Cost Unit for review and documentation before reimbursement is allowed. This NICRA will be accepted by all State of Illinois agencies up to any statutory, rule-based or programmatic restrictions or limitations. **NOTE: (If this option is selected, please, provide basic Negotiated Indirect Cost Rate Agreement in area designated below.)**

Your organization may not have a Federally Negotiated Cost Rate Agreement. Therefore, in order for your organization to be reimbursed for the Indirect Costs from the State of Illinois your organization must either:

- a. Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from your State Cognizant Agency on an annual basis;
b. Elect to use the de minimis rate of 10% modified for total direct costs (MTDC) which may be used indefinitely on State of Illinois awards; or
c. Use a Restricted Rate designated by programmatic or statutory policy (see Notice of Funding Opportunity for Restricted Rate Programs).

2a. Our Organizations currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with the State of Illinois that will be accepted by all State of Illinois agencies up to any statutory, rule-based or programmatic restrictions or limitations. Our Organization is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within 6 months after the close of each fiscal year [2 CFR 200, Appendix IV(C)(2)(c)]. **NOTE: (If this option is selected, please provide basic Indirect Cost Rate information in area designated below.)**

2b. Our Organization currently does not have a Negotiated Indirect Cost Rate Agreement (NICRA) with the State of Illinois. Our organization will submit our initial Indirect Cost Rate Proposal (ICRP) immediately after our Organization is advised that the State award will be made no later than three (3) months after the effective date of the State award [2 CFR 200 Appendix (C)(2)(b)]. The initial ICRP will be sent to the State of Illinois Indirect Cost unit. **Note: (Check with you State of Illinois Agency for information regarding reimbursement of indirect costs while your proposal is being negotiated.)**

3. Our Organization has never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State or Illinois and elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards [2 CFR 200.414 (C)(4)(f) and 200.68.] **[Note: Your Organization must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs.]**

4. For Restricted Rate Programs, our Organization is using a restricted indirect cost rate that:

- ☐ is included as a "Special Indirect Cost Rate" in the NICRA, pursuant to 2 CFR 200 Appendix IV(5); or
☐ complies with other statutory policies.

The Restricted Indirect Cost Rate is: _____ %

5. No reimbursement of Indirect Cost is being requested. (Please consult your program office regarding possible match requirements.)

Basic Negotiated Indirect Cost Rate Information (Use only if option 1 or 2(a), above is selected.)

Period Covered by NICRA: From: 07-01-2017 To: 06-30-2023

Approving Federal or State Agency: Illinois Department of Transportation

Indirect Cost Rate: 50.00 %

The Distribution Base Is: Modified Total Direct Cost



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Organization Name: The Board of Trustees of the University of Illinois		Fiscal Year: 2018 - 2023	NOFO Number: N/A
Section B: Non-State of Illinois Funds			
REVENUES			Total Revenue
Grantee Match Requirement %:	20 (Agency to Populate)		
b) Cash		\$	7,500,000.00
c) Non-Cash		\$	
d) other Funding and Contributions		\$	
Total Non-State Funds (lined b through d)		\$	7,500,000.00
Budget Expenditure Categories		OMB Uniform Guidance Federal Awards Reference 2 CFR 200	Total Expenditures
1. Personnel (Salaries and Wages)		200.430	\$
2. Fringe Benefits		200.431	\$
3. Travel		200.474	\$
4. Equipment		200.439	\$
5. Supplies		200.94	\$
6. Contractual Services and Subawards		200.318 & 200.92	\$
7. Consultant (Professional Services)		200.459	\$
8. Construction			\$
9. Occupancy (Rent and Utilities)		200.465	\$
10. Research and Development (R&D)		200.87	\$
11. Telecommunications			\$
12. Training and Education		200.472	\$
13. Direct Administrative Costs		200.413 (c)	\$
14. Miscellaneous Costs			\$
15. A. Grant Exclusive Line Item(s)			\$ 4,202,809.07
15. B. Grant Exclusive Line Item(s)			\$
16. Total Direct Costs (add lines 1-15)		200.413	\$ 4,202,809.07
17. Total indirect Costs		200.414	\$ 3,297,190.93
Rate %:	58.6		
Base:	MTDC		
18. Total Costs State Grant Funds (Lines 16 and 17)		\$	7,500,000.00
MUST EQUAL REVENUE TOTALS ABOVE			



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Organization Name: The Board of Trustees of the University of Illinois	NOFO Number: N/A
Data Universal Number System (DUNS) Number (enter numbers only) : 041544081	Fiscal Year: 2018 - 2023
Catalog of State Financial Assistance (CSFA) Number: 494-00-1575	CSFA Short Description: Highway Research Program

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete and accurate and that any false, fictitious or fraudulent information or the omission of any material fact could result in the immediate termination of my grant award(s).

Board of Trustees of the University of Illinois	Institution/Organization Name:
Interim Comptroller / Comptroller Delegate, Associate Director, Non-Federal Awards	Title (Executive Director or equivalent):
Paul N. Ellinger / Alison G. Morgan	Printed Name (Executive Director or equivalent):
Paul N. Ellinger Alison G. Morgan	Signature (Executive Director or equivalent):
6/29/2022	Date of Execution (Executive Director):

Note: The State Awarding Agency may change required signers based on the grantee's organizational structure. The required signers must have the authority to enter onto contractual agreements on the behalf of the organization.



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

FFATA Data Collection Form (if needed by agency)

Under FFATA, all sub-recipients who receive \$30,000 or more must provide the following information for federal reporting. Please fill out the following form accurately and completely.

4-digit extension if applicable:

Sub-recipient DUNS: 041544081 Sub-recipient Parent Company DUNS: N/A

Sub-recipient Name: The Board of Trustees of the University of Illinois

Sub-recipient DBA Name: University of Illinois at Urbana-Champaign

Sub-recipient Street Address: 1901 South First Street, Suite A

City: Champaign State: IL Zip-Code: 61820-7406 Congressional District: 13

Sub-recipient Principal Place of Performance: 1611 Titan Drive

City: Rantoul State: IL Zip-Code: 61866 Congressional District: 15

Contract Number (if known): Award Amount: \$40,140,000.00 Project Period: From: 07-01-2017 To: 06-30-2023

State of Illinois Awarding Agency and Project Detail Description:

Illinois Department of Transportation is awarding this project for administering the highway research program.

Under certain circumstances, sub-recipient must provide names and total compensation of its top 5 highly compensated officials. Please answer the following questions and follow the instructions.

Q1. In your business or organization's previous fiscal year, did your business or organization (including parent organization, all branches and affiliates worldwide) receive (1) 80% or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants and/or cooperative agreements and (2) \$25,000,000 or more in annual gross revenue from U.S. federal contracts, subcontracts, loans, grants, subgrants and/or cooperative agreements?

Yes ☐ If Yes, must answer Q2 below. No ☐ If No, you are not required to provide data.

Q2. Does the public have access to information about the compensation of the senior executives in your business or organization (including parent organization, all branches and all affiliates worldwide) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (5 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue code of 1986 (i.e., on IRS Form 990)?

Yes ☐ If No, you must provide the data. Please fill out the rest of this form.

Please provide names and total compensation of the top five officials:

Name:	Amount:
Name:	Amount:
Name:	Amount:
Name:	Amount:
Name:	Amount:



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

1). Personnel (Salaries and Wages) (2 CFR 200.430)

List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project and length of time working on the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. Include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives in the narrative space provided below. Also, provide a justification and description of each position (including vacant positions). Relate each position specifically to program objectives. Personnel cannot exceed 100% of their time on all active projects.

Name	Position	Salary or Wage	Basis (Yr./Mo./Hr.)	% of Time	Length of Time	Personnel Cost	Add/Delete Row
Imad Al-Qadi	Director	\$337,929.00	Yearly	25 %	3	\$253,446.75	Add Delete
Kristi Anderson	Financial Operations Manager	\$75,342.00	Yearly	90 %	3	\$203,423.40	Add Delete
Lori Heinz	Assistant to the Director	\$57,229.00	Yearly	50 %	3	\$85,843.50	Add Delete
TBD	IT Support	\$72,837.00	Yearly	7 %	3	\$15,295.77	Add Delete
TBD	Invoice Assistant	\$49,300.00	Yearly	3 %	3	\$4,437.00	Add Delete
TBD	Research Engineer	\$83,243.00	Yearly	10 %	3	\$24,972.90	Add Delete
Patty Altsetter	Research Project Coordinator	\$57,874.00	Yearly	100 %	3	\$173,622.00	Add Delete
TBD	Research Project Coordinator	\$57,874.00	Yearly	100 %	3	\$173,622.00	Add Delete
TBD	Tech Communications Specialist	\$58,946.00	Yearly	100 %	3	\$176,838.00	Add Delete
Waad Ayoub	Sr. Communications Coordinator	\$61,208.00	Yearly	15 %	3	\$27,543.60	Add Delete
Imad Al-Qadi	Director	\$372,623.00	Yearly	25 %	2	\$186,311.50	Add Delete
Kristi Anderson	Sr. Financial Operations Manager	\$83,077.00	Yearly	82.45 %	2	\$136,993.97	Add Delete
Audrey Donoho	Research Projects Coordinator	\$66,547.00	Yearly	30 %	2	\$39,928.20	Add Delete
TBD	Assistant to the Director	\$63,105.00	Yearly	47.451 %	2	\$59,887.91	Add Delete



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Name	Position	Salary or Wage	Basis (Yr./Mo./Hr.)	% of Time	Length of Time	Personnel Cost	Add/Delete Row
TBD	Research Engineer	\$91,789.00	Yearly	5 %	2	\$9,178.90	Add Delete
Audrey Donoho	Research Projects Coordinator	\$63,816.00	Yearly	70 %	2	\$89,342.40	Add Delete
Brian Lorbiecki	Research Projects Coordinator	\$63,816.00	Yearly	100 %	2	\$127,632.00	Add Delete
TBD	Research Projects Coordinator	\$56,100.00	Yearly	100 %	2	\$112,200.00	Add Delete
McCall Macomber	Technical Communications Spec Coordinator	\$64,998.00	Yearly	90 %	2	\$116,996.40	Add Delete
TBD	Communications Coordinator	\$67,492.00	Yearly	20 %	2	\$26,996.80	Add Delete
Imad Al-Qadi	Director	\$368,486.00	Yearly	20 %	1	\$73,697.20	Add Delete
Kristi Anderson	Asst. Director for Finance & Admin	\$89,440.00	Yearly	80 %	1	\$71,552.00	Add Delete
Audrey Donoho	Sr. Research Projects Coordinator	\$66,393.00	Yearly	30 %	1	\$19,917.90	Add Delete
Nick York	Program Coordinator	\$58,240.00	Yearly	25 %	1	\$14,560.00	Add Delete
TBD	Research Engineer	\$183,578.00	Yearly	5 %	1	\$9,178.90	Add Delete
Audrey Donoho	Sr. Research Projects Coordinator	\$66,393.00	Yearly	70 %	1	\$46,475.10	Add Delete
Brian Lorbiecki	Research Projects Coordinator	\$56,222.40	Yearly	100 %	1	\$56,222.40	Add Delete
TBD	Research Projects Coordinator	\$56,000.00	Yearly	100 %	1	\$56,000.00	Add Delete
McCall Macomber	Technical Communications Coor dination	\$56,914.00	Yearly	90 %	1	\$51,222.60	Add Delete
TBD	Communications Coordination	\$58,823.00	Yearly	25 %	1	\$14,705.75	Add Delete
State Total						\$2,458,044.85	



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Name	Position	Salary or Wage	Basis (Yr./Mo./Hr.)	% of Time	Length of Time	Personnel Cost	Add/Delete Row
				%			Add Delete
NON-State Total							
Total Personnel							\$2,458,044.35
<p>Personnel Narrative (State): These personnel are responsible for administering the state research program and the average salary is used for the three year period of the project. This includes an annual 4% salary increase for the last two years of the project.</p> <p>These personnel are responsible for administering the state research program and the average salary is used for the two year period of the project. This includes an annual 4% salary increase for the last year of the project.</p> <p>These personnel are responsible for administering the state research program. A 4% salary increase per year is assumed.</p>							
Personnel Narrative (Non-State): (i.e. "Match" or "Other Funding")							



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

2). Fringe Benefits (2 CFR 200.431)

Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in category (1) direct salaries and wages, and only for the percentage of time devoted to the project. Provide the fringe benefit rate used and a clear description of how the computation of fringe benefits was done. Provide both the annual (for multiyear awards) and total. If a fringe benefit rate is not used, show how the fringe benefits were computed for each position. The budget justification should be reflected in the budget description. Elements that comprise fringe benefits should be indicated.

Name	Position(s)	Base	Rate (%)	Fringe Benefit Cost	Add/Delete Rows
Imad Al-Qadi	Director	\$253,446.75	44.45 %	\$112,657.08	Add Delete
Kristi Anderson	Financial Operations Manager	\$203,423.40	44.45 %	\$90,421.70	Add Delete
Lori Heinz	Assistant to the Director	\$85,843.50	44.45 %	\$38,157.44	Add Delete
TBD	IT Support	\$15,295.77	44.45 %	\$6,798.97	Add Delete
TBD	Invoice Assistant	\$4,437.00	44.45 %	\$1,972.25	Add Delete
TBD	Research Engineer	\$24,972.90	44.45 %	\$11,100.45	Add Delete
Peggy Altsetter	Research Project Coordinator	\$173,622.00	44.45 %	\$77,174.98	Add Delete
TBD	Research Project Coordinator	\$173,622.00	44.45 %	\$77,174.98	Add Delete
TBD	Tech Communications Specialist	\$176,838.00	44.45 %	\$78,604.49	Add Delete
Waad Ayoub	Sr. Communications Coordinator	\$27,543.60	44.45 %	\$12,243.13	Add Delete
Imad Al-Qadi	Director	\$186,311.50	36.93 %	\$68,804.84	Add Delete
Kristi Anderson	Sr. Financial Operations Manager	\$136,993.97	36.93 %	\$50,591.87	Add Delete
Audrey Donoho	Research Projects Coordinator	\$39,928.20	36.93 %	\$14,745.48	Add Delete
TBD	Assistant to the Director	\$59,887.78	36.93 %	\$22,116.56	Add Delete



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Name	Position(s)	Base	Rate (%)	Fringe Benefit Cost	Add/Delete Rows
TBD	Research Engineer	\$9,178.90	36.93 %	\$3,389.77	Add Delete
Audrey Donoho	Research Projects Coordinator	\$89,342.40	36.93 %	\$32,994.15	Add Delete
TBD	Research Projects Coordinator	\$127,632.00	36.93 %	\$47,134.50	Add Delete
TBD	Research Projects Coordinator	\$112,200.00	36.93 %	\$41,435.46	Add Delete
McCall Macomber	Technical Communications Spec	\$116,996.40	36.93 %	\$43,206.77	Add Delete
TBD	Communications Coordinator	\$26,996.80	36.93 %	\$9,969.92	Add Delete
Imad Al-Qadi	Director	\$73,697.20	40.3 %	\$29,699.97	Add Delete
Kristi Anderson	Asst Director for Finance and Admin	\$71,552.00	40.3 %	\$28,835.46	Add Delete
Audrey Donoho	Sr. Research Projects Coordinator	\$19,917.90	40.3 %	\$8,026.91	Add Delete
Nick York	Program Coordinator	\$14,560.00	40.3 %	\$5,867.68	Add Delete
TBD	Research Engineer	\$9,178.90	40.3 %	\$3,699.10	Add Delete
Audrey Donoho	Sr. Research Projects Coordinator	\$46,475.10	40.3 %	\$18,729.47	Add Delete
Brian Lorbiecki	Research Projects Coordinator	\$56,222.40	40.3 %	\$22,657.63	Add Delete
TBD	Research Projects Coordinator	\$56,000.00	40.3 %	\$22,568.00	Add Delete
McCall Macomber	Technical Communication Coordi	\$51,222.60	40.3 %	\$20,642.71	Add Delete
TBD	Communications Coordinator	\$14,705.75	40.3 %	\$5,926.42	Add Delete
State Total				\$1,007,348.12	



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

Name	Position(s)	Base	Rate (%)	Fringe Benefit Cost	Add/Delete Rows
			%		Add
					Delete
			Non-State Total		
			Total Fringe Benefits	\$1,007,348.12	
Fringe Benefits Narrative (State): All personnel on this project have the same fringe benefit rate. The rate may adjust annually; however, the current fringe benefit rate is applied for all three years of the project.					
All personnel on this project have the same fringe benefit rate. The rate may adjust annually; however, the current fringe benefit rate is applied for both years of the project.					
All personnel on this project have the same fringe benefit rate. The rate may adjust annually.					
Fringe Benefits Narrative (Non-State): (i.e. "Match" or "Other Funding")					



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

3). Travel (2 CFR 200.474)

Travel should include: origin and destination, estimated costs and type of transportation, number of travelers, related lodging and per diem costs, brief description of the travel involved, its purpose, and explanation of how the proposed travel is necessary for successful completion of the project. In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and unit cost involved. Identify the location of travel, if known; or if unknown, indicate "location to be determined." Indicate source of Travel Policies applied, Applicant or State of Illinois Travel Regulations. NOTE: Dollars requested in the travel category should be for staff travel only. Travel for consultants should be shown in the consultant category along with the consultant's fee. Travel for training participants, advisory committees, review panels and etc., should be itemized the same way as indicated above and placed in the "Miscellaneous" category.

Purpose of Travel/Items	Location	Cost Rate	Basis	Quantity	Number of Trips	Travel Cost	Add/Delete Row
Administrative meetings	Various	\$110.00	Monthly	3	12	\$3,960.00	Add Delete
Research panel meetings	Various	\$110.00	Avg of 3 per yr	3	105	\$34,650.00	Add Delete
Administrative meetings	Various	\$102.25	Monthly	2	12	\$2,454.00	Add Delete
Research panel meetings	Various	\$106.82	Avg of 3 per yr	2	105	\$22,432.20	Add Delete
Administrative meetings	Various	\$106.82	Monthly	1	12	\$1,281.84	Add Delete
Research panel meetings	Various	\$106.82	Avg of 3 per yr	1	150	\$16,023.00	Add Delete
State Total						\$80,801.04	
NON-State Total							Add Delete
Total Travel						\$80,801.04	

Travel Narrative (State):
Monthly administrative meetings will be attended by the Director, Financial Operations Manager, and other staff as required. These meetings will be conducted at various locations and will occur approximately once per month for the three years of the project.
Research Project Coordinators and other staff as required will attend research panel meetings at various locations. Each research panel meets between two and four times annually over the course of the project. An average of 45 projects will be active each year of the project. The number of trips for these meetings is based on an average of three meetings per year for the average number of active projects.
For both meeting types, the quantity is three for the three years of the project life.



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

3). Travel (2 CFR 200.474)

Monthly administrative meetings will be attended by the Director, Sr. Financial Operations Manager, and other staff as required. These meetings will be conducted at various locations and will occur approximately once per month for both years of the project.

Research Project Coordinators and other staff as required will attend research panel meetings at various locations. Each research panel meets between two and four times annually over the course of the project. An average of 45 projects will be active each year of the project. The number of trips for these meetings is based on an average of three meetings per year for the average number of active projects.

For both meeting types, the quantity is two for the two years of the project life.

Monthly administrative meetings will be attended by the Director, Assistant Director for Finance and Administration, and other staff as required. These meetings will be conducted at various locations and will occur approximately once per month.

Research Project Coordinators and other staff as required will attend research panel meetings at various locations. Each research panel meets between two and four times annually over the course of the project. An average of 50 projects are assumed to be active for the year. The number of trips for these meetings is based on an average of three meetings per year for the average number of active projects.

Travel Narrative (Non-State): (i.e.e "Match" of "Other Funding)



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

4). Equipment (2 CFR 200.439)

Provide justification for the use of each item and relate them to specific program objectives. Provide both the annual (for multiyear awards) and total for equipment. Equipment is defined as an article of tangible personal property that has a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. An applicant organization may classify equipment at a lower dollar value but cannot classify it higher than \$5,000. (Note: Organization's own capitalization policy for classification of equipment can be used). Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

Item	Quantity	Cost Per Item	Equipment Cost	Add/Delete Rows
				Add
				Delete
		State Total		
				Add
				Delete
		Non-State Total		
		Total Equipment		
Equipment Narrative (State):				
Equipment Narrative (Non-State): (i.e. "Match" or "Other Funding")				



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

5). Supplies (2 CFR 200.94)

List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

Item	Quantity/Duration	Cost Per Item	Supplies Cost	Add/Delete Rows
Materials and supplies for administering program	3	\$2,505.00	\$7,515.00	Add Delete
Materials and supplies for project coordination	3	\$1,198.00	\$3,594.00	Add Delete
Materials and supplies for editorial support	3	\$4,612.00	\$13,836.00	Add Delete
Materials and supplies for administering the program	2	\$2,798.00	\$5,596.00	Add Delete
Materials and supplies for project coordination	2	\$1,411.00	\$2,822.00	Add Delete
Materials and supplies for editorial support	2	\$5,248.50	\$10,497.00	Add Delete
Materials and supplies for administering the program	1	\$33,683.00	\$33,683.00	Add Delete
Materials and supplies for project coordination	1	\$3,728.00	\$3,728.00	Add Delete
Materials and supplies for editorial support	1	\$9,322.00	\$9,322.00	Add Delete
State Total			\$90,593.00	
				Add Delete
Non-State Total				
Total Supplies			\$90,593.00	

Supplies Narrative (State):
Each area of administering the program has various needs for materials and supplies. Each line is based on an average value of materials and supplies such as copying paper for meeting agendas and draft reports, digital tape recorders for taking meeting minutes, and specialty items necessary for developing technology transfer items.
Each area of administering the program has various needs for materials and supplies. Each line is based on an average value of materials and supplies such as copying



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

5). **Supplies** (2 CFR 200.94)

paper for meeting agendas and draft reports, digital tape recorders for taking meeting minutes, and specialty items necessary for developing technology transfer items.
Each area of administering the program has various needs for materials and supplies. Each line is based on an average value of materials and supplies such as copying paper for meeting agendas and draft reports, digital tape recorders for taking meeting minutes, and specialty items necessary for developing technology transfer items.
Supplies Narrative (Non-State): (i.e. "Match" or "Other Funding")



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UNIFORM GRANT BUDGET TEMPLATE

6). Contractual Services (2 CFR 200.318) & Subawards (200.92)

Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole contracts in excess of \$150,000 (See 2 CFR 200.88). NOTE : this budget category may include subawards. Provide separate budgets for each subaward or contract, regardless of the dollar value and indicate the basis for the cost estimates in the narrative. Describe products or services to be obtained and indicate the applicability or necessity of each to the project.

Please also note the differences between subaward, contract, and contractor (vendor):

- 1) Subaward (200.92) means an award provided by a pass-through entity to a sub-recipient for the sub-recipient to carry out part of a Federal/State award, including a portion of the scope of work or objectives. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal/State program.
- 2) Contract (200.22) means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward.
- 3) "Vendor" or "Contractor" is generally a dealer, distributor or other seller that provides supplies, expendable materials, or data processing services in support of the project activities.

Item	Contractual Services Cost	Add/Delete Rows	
		Add	Delete
State Total			
		Add	Delete
Non-State Total			
Total Contractual Services			
Contractual Services Narrative (State):			
Contractual Services Narrative (Non-State): (i.e. "Match" or "Other Funding")			



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

7). Consultant Services and Expenses (2 CFR 200.459)

Consultant Services (Fees): For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project.
Consultant Expenses: List all expenses to be paid from the grant to the individual consultant in addition to their fees (i.e., travel, meals, lodging, etc.) Consultant--
Indicate whether applicant's formal, written Procurement Policy or the Federal Acquisitions Policy is used.

Consultant Services (Fees)	Services Provided	Fee	Basis	Quantity	Consultant Services (Fee) Cost	Add/Delete Row	
						Add Delete	
State Total							
						Add Delete	
NON-State Total							
Total Consultant Services (Fees)							
Consultant Services Narrative (State):							
Consultant Services Narrative (Non-State):							
Consultant Expenses - Items	Location	Cost Rate	Basis	Quantity	Number of Trips	Consultant Expenses Cost	Add/Delete Row
							Add Delete
State Total							
							Add Delete
NON-State Total							
Total Consultant Expenses							
Consultant Expenses Narrative (State):							
Consultant Expenses Narrative (Non-State): (i.e. "Match" or "Other Funding")							



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

8). Construction

Provide a description of the construction project and an estimate of the costs. As a rule, construction costs are not allowable unless with prior written approval. In some cases, minor repairs or renovations may be allowable. Consult with the program office before budgeting funds in this category. Estimated construction costs must be supported by documentation including drawings and estimates, formal bids, etc. As with all other costs, follow the specific requirements of the program, the terms and conditions of the award, and applicable regulations.

Purpose	Description of Work	Construction Cost	Add/Delete Rows
			Add Delete
	State Total		Add Delete
	Non-State Total		
	Total Construction		
Construction Narrative (State):			
Construction Narrative (Non-State): (i.e. "Match" or "Other Funding")			



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

9). Occupancy - Rent and Utilities (2 CFR 200.465)

List items and descriptions by major type and the basis of the computation. Explain how rental and utility expenses are allocated for distribution as an expense to the program/service. For example, provide the square footage and the cost per square foot rent and utility, and provide a monthly rental and utility cost and how many months to rent. **NOTE:** This budgetary line item is to be used for direct program rent and utilities, all other indirect or administrative occupancy costs should be listed in the indirect expense section of the Budget worksheet and narrative. Maintenance and repair costs may be included here if directly allocated to program.

Description	Quantity	Basis	Cost	Length of Time	Occupancy Cost	Add/Delete Row
						Add
						Delete
State Total						
						Add
						Delete
NON-State Total						
Total Occupancy - Rent and Utilities						
Occupancy - Rent and Utilities Narrative (State):						
Occupancy - Rent and Utilities Narrative (Non-State): (i.e. "Match" or "Other Funding")						



State of Illinois
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10). Research & Development (R&D) (2 CFR 200.87)

Definition: All research activities, both basic and applied, and all development activities that are performed by non-Federal entities directed toward the production of useful materials, devices, systems, or methods, including design and development of prototypes and processes. Provide a description of the research and development project and an estimate of the costs. Consult with the program office before budgeting funds in this category.

Purpose	Description of Work	Research and Development Cost	Add/Delete Rows
Research Dissemination and Implementation	Communicate and implement research findings	\$208,000.00	Add Delete
Research Dissemination and Implementation	Communicate and implement research findings	\$152,000.00	Add Delete
Research Dissemination and Implementation	Communicate and implement research findings	\$77,333.00	Add Delete
	State Total	\$437,333.00	
			Add Delete
	Non-State Total		
	Total Research and Development	\$437,333.00	

Research and Development Narrative (State):
Activities conducted in this line item are a variety of methods of sharing findings of research projects with other agencies and academia. These activities include developing webinars, attending conference, and conducting implementation meetings. The annual average cost of these activities for the three year period of this project is \$69,333.

Activities conducted in this line item are a variety of methods of sharing findings of research projects with other agencies and academia. These activities include developing webinars, attending conference, and conducting implementation meetings. The annual average cost of these activities for the two year period of this project is \$76,000.

Activities conducted in this line item are a variety of methods of sharing findings of research projects with other agencies and academia. These activities include developing webinars, attending conference, and conducting implementation meetings.

Research and Development Narrative (Non-State): (i.e. "Match" or "Other Funding")



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11). Telecommunications

List items and descriptions by major type and the basis of the computation. Explain how telecommunication expenses are allocated for distribution as an expense to the program/service. NOTE: This budgetary line item is to be used for direct program telecommunications, all other indirect or administrative telecommunication costs should be listed in the indirect expense section of the Budget worksheet and narrative.

Description	Quantity	Basis	Cost	Length of Time	Telecommunications Cost	Add/Delete Row
						Add
						Delete
State Total						
						Add
						Delete
NON-State Total						
Total Telecommunications						
Telecommunications Narrative (State):						
Telecommunications Narrative (Non-State): (i.e. "Match" or "Other Funding")						



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

12). Training and Education (2 CFR 200.472)

Describe the training and education cost associated with employee development. Include rental space for training (if required), training materials, speaker fees, substitute teacher fees, and any other applicable expenses related to the training. When training materials (pamphlets, notebooks, videos, and other various handouts) are ordered for specific training activities, these items should be itemized below.

Description	Quantity	Basis	Cost	Length of Time	Training and Education Cost	Add/Delete Row
						Add
						Delete
State Total						
						Add
						Delete
NON-State Total						
Total Training and Education						
Training and Education Narrative (State):						
Training and Education Narrative (Non-State): (i.e. "Match" or "Other Funding")						



State of Illinois
UNIFORM GRANT BUDGET TEMPLATE

13). Direct Administrative Costs (2 CFR 200.413 (c))

The salaries of administrative and clerical staff should normally be treated as indirect (F&A) costs. Direct charging of these costs may be appropriate only if all of the following conditions are met: (1) Administrative or clerical services are integral to a project or activity; (2) Individuals involved can be specifically identified with the project or activity; (3) Such costs are explicitly included in the budget or have the prior written approval of the State awarding agency; and (4) The costs are not also recovered as indirect costs.

Name	Position	Salary or Wage	Basis (Yr./Mo./Hr.)	% of Time	Length of Time	Direct Administrative Cost	Add/Delete Row
TBD	Engineering IT	\$84,000.00	Yearly	8 %	3	\$20,160.00	Add Delete
TBD	Engineering IT	\$84,000.00	Yearly	8 %	2	\$13,440.00	Add Delete
TBD	Engineering IT	\$84,000.00	Yearly	8 %	1	\$6,720.00	Add Delete
State Total						\$40,320.00	
NON-State Total							Add Delete
Total Direct Administrative Costs						\$40,320.00	
Direct Administrative Costs Narrative (State): These costs are for information technology support of the project. The required level of effort for this activity is approximately one month per year for each of the three years in the project. These costs are for information technology support of the project. The required level of effort for this activity is approximately one month per year for each of the two years in the project. These costs are for information technology support of the project. The required level of effort for this activity is approximately one month per year. Direct Administrative Costs Narrative (Non-State): (i.e. "Match" or "Other Funding")							



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14). Other or Miscellaneous Costs

This category contains items not included in the previous categories. List items by type of material or nature of expense, break down costs by quantity and cost per unit if applicable, state the necessity of other costs for successful completion of the project and exclude unallowable costs (e.g.. Printing, Memberships & subscriptions, recruiting costs, etc.)

Description	Quantity	Basis	Cost	Length of Time	Other or Miscellaneous Cost	Add/Delete Row
Printing Services	9	Reports per yr	\$405.00	3	\$10,935.00	Add Delete
Printing Services	11	Reports per yr	\$409.00	2	\$8,998.00	Add Delete
Printing Services	20	Reports per yr	\$409.00	1	\$8,180.00	Add Delete
State Total					\$28,113.00	
						Add Delete
						Add Delete
NON-State Total						
Total Other or Miscellaneous Costs					\$28,113.00	

Other or Miscellaneous Costs Narrative (State):
These printing services are for printing the final reports of research projects. The number of projects that are completed each year and the required number of printed reports varies. An average of nine projects completed per year was used in this estimate, along with an average cost per printing.

These printing services are for printing the final reports of research projects. The number of projects that are completed each year and the required number of printed reports varies. An average of 11 projects completed per year was used in this estimate, along with an average cost per printing.

These printing services are for printing the final reports of research projects. The number of projects that are completed each year and the required number of printed reports varies. An average of 20 projects completed during the year was used in this estimate along with an average cost per printing.

Other or Miscellaneous Costs Narrative (Non-State): (i.e. "Match" or "Other Funding")



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15). GRANT EXCLUSIVE LINE ITEM

Grant Exclusive Line Item Description:

Costs directly related to the service or activity of the program that is an integral line item for budgetary purposes. To use this budgetary line item, an applicant must have Program approval. (Please cite reference per statute for unique costs directly related to the service or activity of the program). (Note: Use columns within table as needed for the item being reported. Leave blank those columns that are not applicable. This table does NOT auto-calculate each line. You must enter the line totals. The table will auto-calculate the State, Non-State, and Total Grant Exclusive Line Item amounts based on your line entries. The State, Non-State and Total Grant Exclusive Line Item amounts will NOT carry forward to the Budget Narrative Summary table. You will have to enter the State and Non-State Totals for ALL Grant Exclusive Line Items in the Budget Narrative Summary table. Use the "Add New Grant Exclusive Line Item" button below to add additional tables as needed.)

Description	Quantity	Basis	Cost	Length of Time	Grant Exclusive Line Item Cost	Add/Delete Row
Identified Research Projects	39	Active Projects	\$1,426,724.48	3	\$4,280,173.44	Add Delete
Unidentified Research Projects	1	Research TBD	\$1,410,608.71	3	\$4,231,826.13	Add Delete
Research Projects	1	Research TBD	\$3,430,758.00	2	\$6,861,516.00	Add Delete
Research Projects	1	Research TBD	\$3,422,241.00	1	\$3,422,241.00	Add Delete
State Total					\$18,795,756.57	
Cost Share for Research Projects	1	Research TBD	\$4,202,809.07	1	\$4,202,809.07	Add Delete
NON-State Total					\$4,202,809.07	
Total Grant Exclusive Line Item					\$22,998,565.64	

Grant Exclusive Line Item Narrative (State):
The identified research projects (active research projects) span different lengths of time over the three year period. The total funding of the active research projects was calculated and an average cost per year applied and multiplied by three for the total line item cost. The unidentified research projects (Research TBD) is the remaining funding available for future research efforts. The total funding available for future research projects was calculated and an average cost per year was multiplied for the total three year period.

The research projects is the funding available for research efforts. The total funding available for research projects was calculated and an average cost per year was multiplied for the total two year period.



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The research projects is the funding available for research efforts for the year.	
Grant Exclusive Line Item Narrative (Non-State): (i.e. "Match" or "Other Funding")	
The university must provide 20% cost share for all federal funding provided to the grant.	
Add New Grant Exclusive Line Item	Delete Grant Exclusive Line Item



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16). Indirect Cost (2 CFR 200.414)

Provide the most recent indirect cost rate agreement information with the itemized budget. The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a program budget. The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s). After the amount of indirect costs is determined for the program, a breakdown of the indirect costs should be provided in the budget worksheet and narrative below.

Description	Base	Rate	Indirect Cost	Add/Delete Rows
Indirect cost of administration of identified research projects	10,460,000	\$0.50	\$5,229,999.98	Add Delete
Indirect cost of modified total direct costs	5,960,764	\$0.50	\$2,980,382.00	Add Delete
Indirect cost of modified total direct costs	2,982,604	\$0.50	\$1,491,302.00	Add Delete
State Total			\$9,701,683.98	
Indirect cost on unrecovered F&A	9,701,684	\$0.09	\$834,344.82	Add Delete
Indirect cost of modified total direct costs	4,202,809	\$0.59	\$2,462,846.12	Add Delete
Non-State Total			\$3,297,190.94	
Total Indirect Costs			\$12,998,874.92	

Indirect Costs Narrative (State):
The base for these indirect costs are the salaries, fringe, supplies, travel, etc. for administering the research program. The indirect cost rate of 50% was negotiated between the GRANTOR and GRANTEE.

The base for these indirect costs are the salaries, fringe, supplies, travel, etc. for administering the research program. The indirect cost rate of 50% (modified total direct cost) was negotiated between the GRANTOR and GRANTEE.

The base for these indirect costs are the salaries, fringe, supplies, travel, etc. for administering the research program. The indirect cost rate of 50% (modified total direct cost) was negotiated between the GRANTOR and GRANTEE.

Indirect Costs Narrative (Non-State):
The base for these indirect costs are the salaries, fringe, supplies, travel, etc. for administering the research program. Unrecovered F&A (fully negotiated rate minus 50% rate) is also used to meet the cost share requirement.



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Budget Narrative Summary--When you have completed the budget worksheet, transfer the totals for each category to the spaces below to the uniform template provided (SECTION A & B). Verify the total costs and the total project costs. Indicate the amount of State requested funds and the amount of non-State funds that will support the project.. (Note: The State, Non-State, and Total cost amounts for each line item below are auto-filled based upon the entries in the preceding budget tables 1-14 and 16. The State and Non-State Total amounts from Table 15 above, Grant Exclusive Line Item(s), must be entered into this table by hand due to the possibility of there being more than one Grant Exclusive Line Item table. Once the Grant Exclusive Line Item(s) amounts are entered into this table, the State Request amount, Non-State Amount and the Total Project Costs will be calculated automatically. It is imperative that the summary tables be completed accurately for the Budget Narrative Summary to be accurate.)

Budget Category	State	Non-State	Total
1. Personnel	\$2,458,044.85		\$2,458,044.85
2. Fringe Benefits	\$1,007,348.12		\$1,007,348.12
3. Travel	\$80,801.04		\$80,801.04
4. Equipment			
5. Supplies	\$90,593.00		\$90,593.00
6. Contractual Services			
7. Consultant (Professional Services)			
8. Construction			
9. Occupancy (Rent and Utilities)			
10. Research and Development (R & D)	\$437,333.00		\$437,333.00
11. Telecommunications			
12. Training and Education			
13. Direct Administrative Costs	\$40,320.00		\$40,320.00
14. Other or Miscellaneous Costs	\$28,113.00		\$28,113.00
15. GRANT EXCLUSIVE LINE ITEM(S)	\$18,795,756.57	\$4,202,809.07	\$22,998,565.64
16. Indirect Costs	\$9,701,683.98	3,297,190.94	\$12,998,874.92
	State Request	\$32,639,993.56	
	Non-State Amount	\$7,500,000.01	
TOTAL PROJECT COSTS			\$40,139,993.57



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For State Use Only

Grantee: The Board of Trustees of the University of Illinois

Notice of Funding
Opportunity (NOFO) Number: N/A

Data Universal Number System (DUNS) Number (enter numbers only) : 041544081

Catalog of State Financial Assistance (CSFA) Number: 494-00-1575 CSFA Short Description: Highway Research Program

Fiscal Year(s): 2018 - 2023

Initial Budget Request Amount: \$40,140,000.00

Prior Written Approval for Expense Line Item: LaDonna R. Rowden

Statutory Limits or Restrictions: 2 CFR 200, 23 CFR 420, applicable portions of 49 CFR

Checklist:

Final Budget Amount Approved: \$40,140,000.00

Megan E. Swanson

6/29/2022

Program Approval Name

Program Approval Signature

Date

LaDonna R. Rowden

06/29/2022

Fiscal & Administrative Approval Name

Fiscal & Administrative Approval Signature

Date

Budget Revision Approved:

Program Approval Name

Program Approval Signature

Date

Fiscal & Administrative Approval Signature

Fiscal & Administrative Approval Signature

Date

\$200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.

Attachment A

Cost Sharing and Outsourcing Summary				
Item	FY18-20	FY21-22	FY23	Total
IDOT Share (Federal SPR)	\$ 14,400,000.00	\$ 10,400,000.00	\$ 5,200,000.00	\$ 30,000,000.00
Cost Share @ 20% of Total Program	\$ 3,600,000.00	\$ 2,600,000.00	\$ 1,300,000.00	\$ 7,500,000.00
Subtotal Research Work Program (inc cost share)	\$ 18,000,000.00	\$ 13,000,000.00	\$ 6,500,000.00	\$ 37,500,000.00
IDOT Administrative - 100% state funds (no cost share req.)	\$ 1,290,000.00	\$ 900,000.00	\$ 450,000.00	\$ 2,640,000.00
Total Research Program (Federal SPR, Direct IDOT Support, Cost Share)	\$ 19,290,000.00	\$ 13,900,000.00	\$ 6,950,000.00	\$ 40,140,000.00
Outsourcing Requirements (20% of Program over \$2.0M annually)				
Outsourcing Requirements	FY18-20	FY21-22	FY23	Total
Total Program Subject to Outsourcing Requirements	\$ 18,000,000.00	\$ 13,000,000.00	\$ 6,500,000.00	\$ 37,500,000.00
Less Outsourcing Exclusion	\$ (6,000,000.00)	\$ (4,000,000.00)	\$ (2,000,000.00)	\$(12,000,000.00)
Program Subject to 20% Outsourcing	\$ 12,000,000.00	\$ 9,000,000.00	\$ 4,500,000.00	\$ 25,500,000.00
Minimum Outsourcing Requirement	\$ 700,000.00	\$ 1,800,000.00	\$ 900,000.00	\$ 3,400,000.00

Attachment B

ICT Research Project Budget				
Research Number and Topics	FY18-20	FY21-22	FY23	Total
R27-ET2 - Editorial Support and Technology Transfer	\$ 480,000.00	\$ 325,000.00	\$ 165,000.00	\$ 970,000.00
R27-PC RD&T Activity Management	\$ 840,000.00	\$ 734,153.00	\$ 373,686.00	\$ 1,947,839.00
R27-RDI - Research Dissemination and Implementation	\$ 312,000.00	\$ 228,000.00	\$ 116,000.00	\$ 656,000.00
R27 - Transportation Problems - Funds for Research Projects	\$ 16,368,000.00	\$ 11,712,847.00	\$ 5,845,314.00	\$ 33,926,161.00
Subtotals - Federal Research Funding	\$ 18,000,000.00	\$ 13,000,000.00	\$ 6,500,000.00	\$ 37,500,000.00
R60 - ICT Program Management - State Funds Only	\$ 1,290,000.00	\$ 900,000.00	\$ 450,000.00	\$ 2,640,000.00
Totals - Total Research Program	\$ 19,290,000.00	\$ 13,900,000.00	\$ 6,950,000.00	\$ 40,140,000.00
Funding Sources				
Funding Sources	FY18-20	FY21-22	FY23	Total
IDOT Share - Federal SPR Funding	\$ 14,400,000.00	\$ 10,400,000.00	\$ 5,200,000.00	\$ 30,000,000.00
Cost Share - Core Partner Cost Share	\$ 3,600,000.00	\$ 2,600,000.00	\$ 1,300,000.00	\$ 7,500,000.00
Subtotals - Federal Research Funding	\$ 18,000,000.00	\$ 13,000,000.00	\$ 6,500,000.00	\$ 37,500,000.00
State Funds Only - Direct IDOT Support - 100% State Funds	\$ 1,290,000.00	\$ 900,000.00	\$ 450,000.00	\$ 2,640,000.00
Total Research Program	\$ 19,290,000.00	\$ 13,900,000.00	\$ 6,950,000.00	\$ 40,140,000.00