**Budget Justification**

**Personnel**

(PI name), Principal Investigator, (Effort in months per year)
Here you will want to write a description of what you (the PI) will be doing on the project.

(Co-I name), Co-Investigator, (Effort in months per year)
Here you will want to write a description of what the Co-I will be doing on the project.

(Name or TBN), Postdoc, (Effort in months per year)
Here you will want to write a description of what the postdoc will be doing on the project.

(Name or TBN), Graduate Student (Effort in months per year)
Here you will want to write a description of what the GRA will be doing on the project.

**Fringe Benefits**

Fringe benefit rates are based on the applicable state and federally negotiated rates.

**Equipment**

(If applicable) $X is requested for equipment in year 1 to fund….Here you will want to describe the equipment you will be purchasing and why it’s necessary.

**Travel**

(If applicable) $X in travel expenses per year is requested for …. Here you will want to describe why/where you will be going with the travel expenses.

NOTE: some sponsors require itemized details for the travel request indicating the number of travelers, location of travel, and costs for transportation, per diem, conference registrations, etc.

**Supplies**

(If applicable) $X is requested for Materials and Supplies

Here you will want to list what materials and supplies you will be purchasing, and your best guess on how much each will cost. If you’re listing out each cost, please be sure it totals match between the budget and the list in the justification.

**Publication**

(If applicable) $X is requested for publication charges for….here you will want to describe what you will be using the publication charges for.

**Tuition**

(If applicable) Tuition for graduate students is budgeted using the standard University at Buffalo projected tuition rates.

**Indirect Costs**

The indirect costs are calculated at the University at buffalo predetermined Facilities and Administrative (F&A) cost rate of MTDC per DHHS agreement dated 04/27/2023.