





# LEGACY FUND

**APPLICATION PACKAGE** 



### INTRODUCTION

The McLean Day Schools Settlement Corporation (MDSSC) is pleased to announce the launch of the Legacy Fund Call for Applications. The Legacy Fund was born out of the class action settlement for Federal Indian Day School Survivors; and will be used to support Survivors, their families and communities to develop and deliver programs and initiatives for healing, language and culture revitalization and commemoration. It is intended to provide Survivors with opportunities for positive outcomes.

Approximately 200,000 First Nations and Inuit children were forced to attend federally-operated Indian Day Schools, in every province and territory, from the mid-1800s until 2000. An often overlooked part of First Nations and Inuit and Canadian history, Indian Day Schools resulted in the severing of cultural connections, including First Nations and Inuit languages, cultural practices and ways of being, for hundreds of thousands of First Nations and Inuit children and families. Government-sanctioned abuses led to a painful legacy that was still felt today due to the abuse, neglect, and negligible education at these schools.

To be clear, Indian Day Schools were schools where First Nations and Inuit children were sent during the day, remaining in their communities and living with their families; in essence these schools were within First Nation and Inuit communities. Indian Day Schools (IDS) were separate from Indian Residential Schools (IRS) – despite the different 'education' policies, the goals and experiences were the same: loss of language, culture deprivation, abuses and intergenerational trauma.

The McLean Day Schools Settlement Corporation was established as part of the historic McLean Federal Indian Day Schools Class Action settlement, which endowed MDSSC with a \$200 million Legacy Fund for projects to support Survivors of federally-operated Indian Day Schools, their families and communities.

### The Legacy Fund has four (4) pillars:

1. Healing and Wellness 2. Language and Culture Preservation

**3.** Commemoration

4. Truth Telling

The Legacy Fund is not for individual compensation but rather funding supports for Survivors via collective efforts in program activities.

In this Legacy Fund Call for Applications there are two Categories for application:

Category 1: Establishment of Indian Day School (IDS) Survivors Committee

Category 2: Legacy Fund Four Pillars

Survivor Applicant Group refers to the Community who is eligible to submit an application for Legacy Funds on behalf of the Survivors, their families and communities: First Nation or Inuit identified in Schedule K of the Federal Indian Day Schools Settlement Agreement.

Survivor Committee is the existing group of Survivors within a community who is eligible to submit an application for Legacy Funds on behalf of their Survivors, families and communities: First Nation or Inuit identified in Schedule K of the Federal Indian Day Schools Settlement Agreement.

The Legacy Fund is specific to Survivors, their families and Survivor communities. The MDSSC Board has taken the view that the Legacy Fund is not based on the number of Indian Day Schools in a community nor the religious order that operated the day schools. Therefore, only one application per Survivor community regardless of how many schools were in the community.

### MDSSC is accepting Legacy Fund applications commencing July 7th, 2025 to the end of September 2025.

This application package contains the MDSSC Legacy Fund Guidelines; Application Form and Budget Template.

Please read the guidelines below and follow the instructions contained in this application package.

If you need help, please contact us at <a href="mailto:legacyfund@mdssc.ca">legacyfund@mdssc.ca</a>.

# MDSSC LEGACY FUND APPLICATION GUIDELINES



### **SECTION 1: ELIGIBILITY**

### Who is eligible to apply?

Federal Indian Day Schools Survivors, their families and communities in Canada. The Survivors and their communities are those identified in Schedule K of the Settlement Agreement. Schedule K lists the First Nations communities, Inuit communities and the Indian Day Schools which operated in their respective communities.

Currently, Federal Indian Day School Survivor organizations recognized by the MDSSC Board and existing Community Survivors Committee are eligible to submit an application on behalf of their communities and Survivors. The MDSSC Board retains discretion to consider and adjust who may apply for Legacy Funds from time to time.

Only one application per community regardless of the number of day schools that were in a community.

### Who is not eligible to apply?

- Charities
- Mainstream education institutions or programs or agencies
- Non-Indigenous organizations, agencies, institutions, etc.
- For profit Indigenous organizations /entities
- Existing First Nation / Inuit entities or any recognized Indigenous entity established exclusively to provide program and services or project funding
- First Nation and Inuit organizations or corporations administering settlement agreements
- Political and Religious organizations or groups
- Program Funders
- Government (Federal; Provincial; Territorial; Municipal)
- Media and Event industries
- Any group or entity outside of Canada



### **SECTION 2: LEGACY FUND CALL FOR APPLICATION CATEGORIES**

Please see the eligibility / criteria for each category.

Category 1: Establishment of Indian Day School (IDS) Survivors Committee

Funding Amount: Up to \$25,000.00 to set an IDS Survivors Committee within community (one time funding

only)

Project Timeline: Three to six months

### Eligibility / Criteria for Category 1:

i. Only one application per community regardless of the number of day schools that were in a community

- ii. Survivor applicant group must be Indian Day School Survivors who attended an Indian Day School identified in Schedule K
- iii. Survivor applicant group must prove they have a bank account in the name of applicant group, with three signing authorities. If the applicant group is an ad hoc group, the requirement is three or more individuals to form the applicant group, have a bank account in the group's name, and the ad hoc group will need to sign an acceptance of liability declaration.
- iv. Must have support and provide proof of support from two of the following: Federally recognized (Indian Act) Chief and Council, existing Indian Day School Survivors Committee, Band Council Resolution, Tribal Council Resolution, National Inuit leadership, Cultural Education Centre (a qualified centre must be funded from Indigenous Services Canada's First Nation and Inuit Cultural Education Centres Program administered either by Indigenous Services Canada or First Nations Confederacy of Cultural Education Centres); Spiritual leader such as a ceremonial elder; Church leader such as priest or minister; Community or Nation Elders Council
- v. Support Letter from an individual (person) will not be accepted
- vi. Legacy Funds cannot be used to off set existing costs of a survivor applicant group's operations or for human resources capacity
- vii. Legacy Funds will not be provided to Survivors as independent source funding (an individual survivor will not receive legacy funding)

### Category 2: Legacy Fund Four Pillars

Communities (Survivor Applicant Group) and IDS Survivor Committees can apply to one of the four pillars:

Healing & Wellness; Language & Culture; Commemoration; Truth Telling

### Applicants can only apply to one pillar.

- □ Healing & Wellness Up to \$250,000 per year for 1 to 4 years
- □ Language & Culture Up to \$100,000 per year for 1 to 4 years
- □ Commemoration Up to \$100,000 for one time only funding this funding can be split over 4 years (for maximum total of \$100,000.00)
- □ Truth Telling Up to \$100,000 for one-time only funding this funding can be split over 4 years (for maximum total of \$100,000.00)

It is the applicant's discretion to decide the time period of their program activities, ie: one year, two years; three years; or four years. Your application must identied the number of years for your legacy fund program activities.

### Eligibility / Criteria for Category 2:

- 1. Only one application per community regardless of the number of day schools that were in a community.
- 2. Applicant group (community or survivors committee) must be Indian Day School Survivors who attended an Indian Day School identified in Schedule K.
- 3. Must be community based applicant.
- 4. Legacy Fund program activities must be community- based and Survivor Led.
- 5. IDS Survivors must be involved and be the beneficiaries of the legacy fund program activities.
- 6. Must have support and provide proof of support from two of the following: Federally recognized (Indian Act) Chief and Council, existing Indian Day School Survivors Committee, Band Council Resolution, Tribal Council Resolution, National Inuit leadership, Cultural Education Centre (a qualified centre must be funded from Indigenous Services Canada's First Nation and Inuit Cultural Education Centres Program administered either by Indigenous Services Canada or First Nations Confederacy of Cultural Education Centres); Spiritual leader such as a ceremonial elder; Church leader such as priest or minister; Community or Nation Elders Council.
- 7. Support Letter from an individual (person) will not be accepted.
- 8. Legacy Funds will not be provided to Survivors as independent source funding (an individual survivor will not receive legacy funding).
- 9. Legacy Funds cannot be used to off set existing costs of an applicant group's existing core operations or for human resources capacity or to hire staff for regular business.
- 10. Applicant group cannot obtain funding to pay external individuals and entities to develop and deliver the legacy fund program/project activities.

Any applicant group applying as an 'organization' must be community based and community must be a community listed in Schedule K; must prove the organization has a long established existence with strong governance, human resources, financial and program capacity, and successful programming; must be First Nation or Inuit community owned, controlled, managed; must demonstrate its experience with First Nation / Inuit specific Survivor groups; must be supported by local or national First Nation or Inuit political leadership and community Elders; must be not for profit Incorporated for at least two years with sound Board structure and members [corporation number must be provided, letter patent, annual filing, as well as financial statements as proof of existence and operations].

Organization cannot be an 'individual' organization, a social agency, political organization or for profit entity.



### **SECTION 3: ELIGIBLE AND INELIGIBLE EXPENSE**

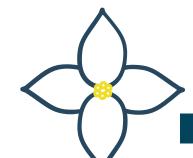
Please read carefully the eligibile and ineligible expenses to assist you in developing your program activities budget.

### 3.1: ELIGIBLE EXPENSES

- · Wages specifically related to project activity such as coordinator or project lead
- Professional fees (honoraria) for elders, knowledge keepers, language speakers
- Professional fees for healing and wellness counsellors or program developers
- · Professional fees for training programs
- Equipment purchases
- Production of technology / media, if applicable to activities
- Rent and utilities
- · Ceremonial and healing lodges
- Ceremonies
- Supplies and resource materials
- Communication and translation services
- General liability insurance
- Costs associated with information technology internet, website fees, including purchases and update of hardware and software
- Travel expenses must not exceed the rates set by Treasury Board (refer to treasury board site for rates)

### 3.2: INELIGIBLE EXPENSES:

- Payments to individuals as Day School Compensation
- Payments to media or event companies.
- Purchse of vehicles, facilities and/or private homes
- Travel outside of Canada
- Payment of education tuition
- Capital construction and renovations or repairs
- Salaries and honoraria for band council, organization leadership, board members in the delivery of regular operations
- Travel outside of Canada
- Start up and operational costs for business ventures
- Support for development of cultural and professional industries or institutions
- Research fees, operational and administrative costs of an organization and institution existing or newly created programs and studies
- Attendance in post secondary academic courses offering language lessons
- Conferences or conference fees or travel to conferences or meetings
- Awards or bursaries
- · Deficit recovery
- Volunteer hours
- Charitable donations



### SECTION 4: RESTRICTION AND INELIGIBITIES OF THE LEGACY FUND

The Legacy Fund will not fund the following projects associated with:

- Capital infrastructure projects such as new construction or renovation of existing buildings
- Purchase of vehicles
- Operations of private homes or facilities
- Any programs, projects and services outside of Canada
- · Mainstream education programs, including post secondary institutions
- Non-Indigenous healing programs
- Personal living expenses in private homes or facilities

### **SECTION 5: HOW TO SUBMIT AN APPLICATION**

Eligible applicants can submit their application by using the Application Form and Budget Templates or by using a Narrative (Word) Format. Please ensure all the sections in the Application are filled in with the required information. If you choose to submit your application in a narrative form, your narrative form must include and answer all the questions which are in Application Form. You can use the Budget Template or create your own budget template, however, please ensure that your budget template is submitted with the application.

### Applications will be accepted from July 7th, 2025 to the end of September 2025.

Please email your application to: <a href="mailto:legacyfund@mdssc.ca">legacyfund@mdssc.ca</a>

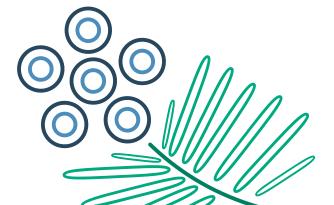
If you require assistance with your application, please contact MDSSC office via email to: <a href="mailto:legacyfund@mdssc.ca">legacyfund@mdssc.ca</a>

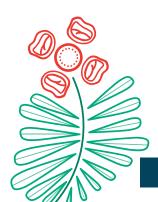
### Disclaimer:

Submission of an application by an eligible applicant does not guarantee funding. The decisions regarding eligibility and funding amounts are final. Applicants who are not successful in receiving Legacy Funds but decide to engage in activities - this is at the discretion of the applicant to do so, the MDSSC is not responsible for the work or any of the expenses incurred by non-funded applicants.

### **SECTION 6: APPLICATION FORM AND BUDGET TEMPLATE**

Please see attached Application Form and Budget Template. You may use the form and template, or you may submit your application in narrative (word) format and your budget in excel or word format. These templates are available on the website and link to <a href="https://mcleanlegacyfund.ca/documents/">https://mcleanlegacyfund.ca/documents/</a>.





### **SECTION 7: TERMS OF CONDITIONS OF FUNDING**

Funds will be released to the successful Legacy Fund recipients once a funding agreement is signed by both parties. The funding agreement will outline obligations to be fulfilled.

Reporting Requirements will be part of the terms and conditions – this is to ensure support for a successful outcome for Survivors Legacy Fund program activities and also to provide any kind of capacity assistance which may be required to support Survivors. MDSSC will be available to provide capacity support to assist Survivor Groups with their programming.

### **Funding Distribution:**

Category 1 Legacy Fund Recipients will receive funding in one lump sum.

Category 2 Legacy Fund Recipients will receive fuding on an annual basis. A ten percent (10%) holdback will be applied which will be paid when the yearly program activities are completed, and the submission of a final program report and financial report.

### **Reporting Requirements:**

Legacy Fund recipients will be required to provide an interim, a final report and financial report of the legacy fund program activities. They can submit their report either by narrative word format or MDSSC can provide a reporting tempate. Recipients can also include testimonies, photographs, participants short stories as part of their report.

The interim activity report will be due six months from the program / project start date. The final activity report will be due at the year end (one full year of work activity) from the program/project start date. The financial report will be due at the same time as the final program report.

Reminder: If you have questions or require assistance with your application, please contact MDSSC at <a href="mailto:leaacvfund@mdssc.ca">leaacvfund@mdssc.ca</a>

A team member will be available to assist you.





# ANNEX 1: APPLICANT FORM

Part A First Nation / Inuit Community or Federal Indian Day	School Survivor Committee		
1. Legal name of Community or Survivor Committee			
2. Name of Federal Indian Day School that was in your Cor	nmunity		
Name:			
3. Identify the Years the Indian Day School operated in you	r Community		
Years:			
4. Is the Applicant (please identify which one is applicable t	o you):		
□ First Nations Community			
☐ First Nation Indian Day School Survivor Committee			
□ First Nations Organization			
□ Inuit Community			
□ Inuit Organization			
□ Inuit Survivor Committee			
5. Incorporated jurisdiction (if applicable) a) Federal b) Provincial c) Territorial	6. Corporation or business number (if applicable)		
ENTER TYPE OF INCORPORATED JURISDICTION ENTER BUSINESS NUMBER			
•	Nation / Inuit Community		
7. Primary address – number, street, P.O box			
ENTER PRIMARY ADDRESS			
8. City	9. Province/Territory (required)		
ENTER CITY	ENTER PROVINCE		
10.Postal code			
ENTER POSTAL CODE			
11. Telephone	12. Extension (if applicable)		
ENTER TELEPHONE	ENTER EXTENSION		
13. Official email address			
ENTER OFFICIAL EMAIL ADDRESS			
14.Official website (if applicable)			
ENTER OFFICIAL WEBSITE			
Mailing Addre	ss of Applicant		
15.Mailing address – number, street, P.O box			
ENTER MAILING ADDRESS			
16.City & Province	17. Postal Code		
ENTER CITY & PROVINCE			

Part B Name of Applicant – Person who is	making application on behalf of Com	nmunity or Committee
Identify name and contact information	of applicant	
17. Salutation a) Mr. b) Ms. c)	Mrs. d) Chief e) Dr. f) Other	
ENTER SALUTATION		
18. First name		
ENTER FIRST NAME		
19. Last name		
ENTER LAST NAME		
20. Title/Position		
ENTER TITLE/POSITION		
21. Email address		
ENTER EMAIL ADDRESS		
22. Telephone	23. Extension (if applicable)	24. Fax number (if applicable)
ENTER TELEPHONE	ENTER EXTENSION	
	Alternative contact person	
25. Salutation a) Mr. b) Ms. c)	Mrs. d) Chief e) Dr. f) Other	
ENTER SALUTATION		
26. First Name		
ENTER FIRST NAME		
27. Last Name		
ENTER LAST NAME		
28. Title/Position		
ENTER TITLE/POSITION		
29. Email address		
ENTER EMAIL ADDRESS		
30. Telephone	31. Extension (if applicable)	32. Fax number (if applicable)
ENTER TELEPHONE	ENTER EXTENSION	

## Part C IDENTIFY WHICH LEGACY FUND PILLAR YOU ARE APPLYING FOR

### Category 1:

- ☐ Establishment of Indian Day School Survivors Committee
  - ▶ Up to \$25,000.00 (one time only funding)

### Category 2: Select only one pillar.

- □ Healing & Wellness Up to \$250,000 per year for 1 to 4 years
- □ Language & Culture Up to \$100,000 per year for 1 to 4 years
- □ Commemoration Up to \$100,000 for one time only funding this funding can be split over 4 years (for maximum total of \$100,000.00)
- □ Truth Telling Up to \$100,000 for one time only funding this funding can be split over 4 years (for maximum total of \$100,000.00)

Part D CATEGORY 1 PROJECT ACTIVITY - Identify Project Title and Project Time Period			
Project Title:			
ENTER PROJECT TITLE			
Start Date of Project:	End Date of Project:		
ENTER PROJECT START DATE (YYYY-MM-DD)	ENTER PROJECT END DATE (YYYY-MM-DD)		

Part E			
CATEGORY 2 PROJECT ACTIVITY - Identify Project Tit	le and Project Time Period		
Project Title:			
ENTER PROJECT TITLE			
Start Date of Project:	End Date of Project:		
ENTER PROJECT START DATE (YYYY-MM-DD)	ENTER PROJECT END DATE (YYYY-MM-DD)		



Section 1.A

## **ANNEX 2:**

FUNDING REQUEST – CATEGORY 1 (if you selected Category 1 – provide information)

### APPLICATION FUNDING REQUEST AND DESCRIPTION OF ACTIVITIES

Start Date of Project:		End Date of Project
ENTER PROJECT START DATE (YYYY	(-MM-DD)	ENTER PROJECT END DATE (YYYY-MM-DD)
Amount of Funding Requested:		
Funding Request		
\$ ENTER AMOUNT		
Section 1.B Provide descriptive details of you lead, beneficiaries, goals and ou		y 1 activity – the timeline, the participants, project
Please list the activity or activities		
you are planning to develop for the creation of a Survivors		
Committee; provide a timeline		
for the activity/activities; include		
the project lead; participants; beneficiaries, goals, milestones,		
outcomes/results, and budget (see		
template).		
Who are the leads and		
participants of your overall project		
and each activity?		
Identify what expertise and		
resources you will use.		
Describe how Federal Indian Day		
School Survivors will be involved		
with the project; and how will they benefit from this project?		
, ,		
Describe how your Survivors		
Committee will be implemented,		
managed and ongoing.		
Describe how your project will be		
supported by your Community leadership.		
ieducisiiip.		

### Section 2.A FUNDING REQUEST - CATEGORY 2 (if you selected Category 2 & are requesting for 1- 4 years of funding, provide information) Start Date of Project: End Date of Project: ENTER PROJECT START DATE (YYYY-MM-DD) ENTER PROJECT END DATE (YYYY-MM-DD) Amount of Funding Requested: Amount of Funding Requested: Funding Request Year 1 Funding Request Year 3 **S ENTER AMOUNT S ENTER AMOUNT** Funding Request Year 2 Funding Request Year 4 \$ ENTER AMOUNT \$ ENTER AMOUNT

### Section 2.B

Provide a Work Plan of your proposed Category 2 activities – the timeline, the participants, project lead, beneficiaries and goals – you must provide a work plan for each year (funding is up to 4 years, if you are applying for less than four years of funding, you only need to provide a work plan for the relevant years of your application). Please provide details in the space beside each question.

Please list the activities you are planning to develop and deliver over the course of a year or years; provide a timeline for each year of	Work Plan Year 1
the activities, for example:	Work Plan Year 2
Year 1: 2025-2026: Work Plan Year 2: 2026-2027: Work Plan Year 3: 2027-2028: Work Plan Year 4: 2028-2029: Work Plan	Work Plan Year 3
Include the project lead; participants; beneficiaries; goals; milestones; outcomes/results; and budgets (see templates).	Work Plan Year 4
Who are the leads and participants of your overall project and for each activity?	
Identify what expertise and resources you will use.	

Describe how Federal Indian Day School Survivors will be involved with the project; and how will they benefit from your proposed project?	
Describe how your project will be implemented and managed; and continued on after the end date of your overall project.	
Describe how your project will be supported by your Community leadership.	



# ANNEX 3: APPLICANT INFORMATION FORM

<b>Background:</b> Provide a brief description of your First Nation or Inuit Community or Federal Indian Day School Survivor Committee and include the name of the Federal Indian Day School that was operating in your community.
<b>Experience:</b> Provide a brief description of your work with Federal Indian Day School Survivors or Survivors Group.
Partnerships: If your proposed activities will include partners, please list partners and their roles.
<b>Participation and Beneficiaries:</b> Describe how your program / project activities will align with the objectives of the MDSSC Legacy Fund. Also include how Federal Indian Day School Survivors will be included, involved and benefit from the legacy fund activities.



# ANNEX 4: APPLICANT DECLARATION FORM READ AND SIGN

### **Declaration and Attestation**

#### I declare that:

- The information in the application is true, accurate and complete.
- I have all the necessary authorities to undertake the proposed project, or will obtain these authorities prior to the approval of the project.
- I am in compliance with the Legacy Fund Guidelines for this application for funding.
- I commit to take measures conducive to creating a workplace free from harassment, abuse and discrimination.
- I have the necessary capacity to conduct and complete the program activities and initiatives identified in the propsed work plan(s).

### I agree that:

✓ The submission of this Application does not constitute a commitment on the part of the MDSSC to award funding.

### If funds are approved, I agree that:

- Where the Applicant is found to have submitted false or unsupported information, the Applicant shall be required to repay the full amount.
- This Agreement does not create a partnership, agency or joint venture and I shall not represent myself as an agent, partner or employee in carrying it out.
- The terms and conditions of the Funding Agreement will be respected and fulfilled.
- Where the Applicant fails to remain eligible or where there is a default under this Agreement, the MDSSC may reduce the funding level, suspend any payment, rescind this Agreement and immediately terminate any financial obligation arising out of it and recover any unexpended amount or any amount that the Applicant was not eligible or entitled to receive.
- To share the outcomes / results of the legacy fund progam and activities.

### In addition, I shall:

- Use the funds only for the purposes specified in the Funding Agreement.
- Indemnify the MDSSC from any claim or cause of action arising from injury, damage, or death sustained in carrying out the Applicant's activities
- □ **| Accept** (you must apply a check mark)

## Application requires your signature PLEASE FILL IN THE REQUIRED INFORMATION – DO NOT FORGET TO SIGN

Signature (required)
Enter full name
Enter title/position
Enter date (DD/MM/YYYY)

### MANDATORY REQUIREMENT OF APPLICATION SUBMISSION

Do not forget to attach the Budget identifying each Activity, Expenses & Cost

## PLEASE SEE BUDGET TEMPLATE

FILL IN THE REQUIRED BUDGET INFORMATION APPLICABLE TO EACH ACTIVITY LISTED IN YOUR APPLICATION FORM





# LEGACY FUND: ACTIVITIES & BUDGET TEMPLATE

Name of Community /Survivors Group	Name:
Project Title - Category 1	Title:
Project Title – Category 2	Title:

Revenue			
LEGACY FUND	Amount	Identify own source funding and in kind supports, if applicable	Is the funding confirmed? (Y / N)
MDSSC Legacy Funding Request	\$		
Own Source Funding, if applicable	\$		
In-kind support, if applicable	\$		
Total Revenues	\$		

Activity 1			Other sources of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 2			es of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 3			Other sources of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 4			Other source	es of funding	
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 5		Other source		es of funding	
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 6			es of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 7			Other sources of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 8			es of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$

Activity 9			Other sources of funding		
Expense category	Description of Activity	Budget	Own Source	In-kind	Total cost
Subtotal		\$	\$	\$	\$