

**Budget Information:**

**ORGANIZATION’S TOTAL BUDGET:**

Enter figures for organization’s total projected budget for the fiscal year in which the programs will take place.

Fiscal Year ending: \_\_\_\_/\_\_\_\_/\_\_\_\_ Income: \_\_\_\_\_ Expenses: \_\_\_\_\_

**ORGANIZATION’S BUDGET or PROGRAM BUDGET:**

If funds are requested only for specific programs, use figures for those programs. Itemize/describe all expenses and income on a separate sheet. Do not include in-kind contributions in cash budget. Itemize all in-kind contributions and list total dollar value in the space provided below. (Refer to Budget instructions for help.)

**INCOME:**

**A. Earned**

- 1. Admissions \_\_\_\_\_
- 2. Memberships \_\_\_\_\_
- 3. Contractual Services \_\_\_\_\_
- 4. Tuition/Workshop Fees \_\_\_\_\_
- 5. Fundraising Gross \_\_\_\_\_
- 6. Advertising & Sales \_\_\_\_\_

**Total Earned** \$ \_\_\_\_\_

**B. Contributed**

- 1. Corp/Business Donations \_\_\_\_\_
- 2. Foundations \_\_\_\_\_
- 3. Individual Contributions \_\_\_\_\_
- 4. Federal (specify) \_\_\_\_\_
- 5. State (specify) \_\_\_\_\_
- 6. Local Govt (specify) \_\_\_\_\_
- 7. Other (specify) \_\_\_\_\_

**Total Unearned** \$ \_\_\_\_\_

**TOTAL INCOME:** \$ \_\_\_\_\_

**EXPENSES:**

**A. Personnel**

- 1. Administrative \_\_\_\_\_
- 2. Artistic \_\_\_\_\_
- 3. Other \_\_\_\_\_

**B. Outside Professionals**

- 1. Artists \_\_\_\_\_
- 2. Other \_\_\_\_\_

**C. Space Rental** \_\_\_\_\_

**D. Travel** \_\_\_\_\_

**E. Promotion** \_\_\_\_\_

**F. Remaining Operating** \_\_\_\_\_

**TOTAL EXPENSES** \$ \_\_\_\_\_

– **TOTAL INCOME:** \$ \_\_\_\_\_  
(from left column)

(Expenses minus income) \$ \_\_\_\_\_

**REQUEST TO CIP PROGRAM** 

Please specify which portion of your expenses you would like to fund through CIP (ie: artists’ fees, promo) -

**IN-KIND CONTRIBUTIONS: (Dollar Value)** \$ \_\_\_\_\_