FORM A STATEMENT OF REVENUE/SUPPORT and EXPENSE for MOST RECENTLY COMPLETED FISCAL YEAR

Nam	ne of Organization:		
Time	e Period:		
	REVENUE/SUPPORT		

REVENUE/SUPPORT	
Corporate grants	
Foundation grants	
Government grants/contracts/per diem (identify)	
Contributions	
United Way	
Other federated campaigns (identify)	
1 5 (),	
Fine Arts Funds	
Membership dues	
Special events, fundraisers	
Sponsorships	
Admissions	
Sales, rent	
Revenue, tuition	
Investment income	
Interest, dividends	
Other	
Total Revenue/Support	
EXPENSES	
Salaries	
Employee benefits, taxes	
Professional fees	
Equipment, supplies, materials	
Telephone, utilities	
Postage, mailing	
Occupancy	
Insurance	
Training, staff development	
Travel	
Conferences	
Evaluations	
Other	
Total Expenses	
Revenue less Expenses	

If expenses exceeded revenues/support, please explain. Accompanying narrative is welcome if additional explanation is warranted.

FORM B TOTAL ORGANIZATION BUDGET FOR <u>CURRENT</u> FISCAL YEAR

Name of Organization	n:	
Time Period:		

		Year-to-Date
REVENUE/SUPPORT	Budget for Year	(specify date)
Corporate grants		(openiy date
Foundation grants		
Gov't grants/contracts/per diem (identify)		
Contributions		
United Way		
Other federated campaigns (identify)		
1 3 \ 7/		
Fine Arts Fund		
Membership dues		
Special events, fundraisers		
Sponsorships		
Admissions		
Sales, rent		
Revenue, tuition		
Investment income		
Interest, dividends		
Other		
Total Revenue/Support		
EXPENSES		
Salaries		
Employee benefits, taxes		
Professional fees		
Equipment, supplies, materials		
Telephone, utilities		
Postage, mailing		
Occupancy		
Insurance		
Training, staff development		
Travel		
Conferences		
Evaluations		
Other		
_ , , _		
Total Expenses		
Revenue less Expenses		

If expenses exceed revenues/support, please explain how difference will be offset. Accompanying narrative is welcome if additional explanation is warranted.

FORM C

GRANT PROGRAM REQUEST BUDGET

name of Organization:			
Time Period:			
Items typical for operating a program – feel free to add more items:			
REVENUES/SUPPORT	BUDGET		
Corporate grants			
Foundation grants			
Gov't. grants/contracts/per diem (identify)			
Contributions			
United Way			
Other federated campaigns (identify)			
Fine Arts Funds			
Membership dues			
Special events, fundraisers			
Sponsorships			
Admissions			
Sales, rent			
Revenue, tuition			
Investment income			
Interest, dividends			
Other			
Culoi			
Total Revenue Support			
EXPENSES			
Salaries			
Employee benefits, taxes			
Professional fees			
Equipment, supplies, materials			
Telephone, utilities			
Postage, mailing			
Occupancy			
Insurance			
Training, staff development			
Travel			
Conferences			
Evaluations			
Other			
Total Expenses			
Revenue less Expenses			

If expenses exceed revenues/support, please explain how difference will be offset.

Accompanying narrative is welcome if additional explanation is warranted; for example, an explanation of in-kind gifts.

FORM D GRANT CAPITAL REQUEST BUDGET

Name of Organization:		
BUDGET		

If Capital expenses exceed revenues/support, please explain how difference will be offset. Accompanying narrative is welcome if additional explanation is warranted; for example, an explanation of in-kind gifts.