

BUDGET REPORT

Your organization's fiscal year begins (month/day): _____ and ends (month/day): _____

18. Cash Expenses		Cash match	MAC grant	Total
1. Outside fees (contractors):	Artistic			
	Consultant			
2. Travel:	*Transportation			
	*Conference Registration			
	*Lodging			
3. Other (please specify):				
4. Total cash expenses (must not exceed Total Cash Income):				

*Include a copy of paid receipts for travel, registration, and lodging.

19. Cash Income		Cash	In-Kind*
1. Revenue:	Admissions		
	Earned Income		
	Other revenue		
2. Private-sector support:			
3. Government support:	Federal		
	State or Regional (other than MAC grants)		
	County		
	Municipal		
4. Grantee cash:			
5. Portion of the grant already received:			
6. Remainder of the grant due:			
7. Total Income (must be equal to or greater than your Total Cash Expenses)			

*Defined as the cash value of goods and services contributed by sources other than the grantee organization, such as work done by volunteers or donated office space. You must be able to produce records of in-kind contributions.