

OPERATING GRANT BUDGET REPORT

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

Please itemize each line item on a separate page.

16. Cash Expenses		Cash Match	MAC Grant	Total
1. Personnel (staff):	Administrative			
	Artistic			
	Technical/production			
2. Outside fees (contractors):	Artistic			
	Other			
3. Space or equipment rental:				
4. Travel:	Transportation			
	Food			
	Lodging			
5. Marketing:	Printing			
	Other			
6. Remaining expenses:	Postage			
	Supplies			
	Insurance			
	Other			
	Other			
7. Total cash expenses (must not exceed total cash income)				

17. Cash Income		Cash	In-Kind**
1. Revenue:	Admissions		
	Earned Income		
	Other revenue		
2. Private-sector support:	Corporate contributions		
	Foundation grants		
	Other private contributions		
3. Government support:	Federal		
	State/regional (other than MAC grants)		
	County		
	Municipal		
4. Grantee cash:			
5. Portion of this grant already received:			
6. Remainder of this grant due:			
7. Total (must equal or exceed 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.

Budget Itemization: Create an itemization for both your expenses and income on a separate page from the budget. Do not list Cash Match and MAC Grant numbers separately. The itemization should reflect the totals of each line item. Be sure to detail and explain each item that is not already clearly defined (example: Food and supplies do not need further explanation. Anything listed as other and the other categories that have more than one aspect will need a brief detailed explanation). You can create your own itemization page if you require additional space, but please follow the format listed below which follows the budget formatting.

Cash Expenses

	Amounts
1. Personnel (staff):	
• Administrative	
• _____	_____
• _____	_____
• _____	_____
• Artistic	
• _____	_____
• _____	_____
• _____	_____
• _____	_____
• _____	_____
• Technical/Production	
• _____	_____
• _____	_____
• _____	_____
2. Outside Fees to Contractors:	
• Artistic	
• _____	_____
• _____	_____
• _____	_____
• Other	
• _____	_____
• _____	_____
• _____	_____
3. Space or Equipment Rental:	
• _____	_____
• _____	_____
• _____	_____
4. Travel (Transportation, Lodging, Food):	
• _____	_____
• _____	_____
• _____	_____
5. Marketing:	
• _____	_____
• _____	_____
• _____	_____
6. Remaining Expenses:	
• _____	_____
• _____	_____
• _____	_____
Total Expenses:	_____

Comments: for any Expense item above that needs additional space for the explanation, please identify and explain here:

Cash Income

Amounts

1. Revenue:

- _____
- _____
- _____

2. Private-Sector Support:

a. Corporate Contributions

- _____
- _____
- _____

b. Foundation Grants

- _____
- _____
- _____

c. Other Private Contributions

- _____
- _____
- _____

3. Government Support:

a. Federal

- _____
- _____
- _____

b. State/Regional (Other than MAC Grants)

- _____
- _____
- _____

c. County

- _____
- _____
- _____

d. Municipal

- _____

4. Applicant Cash:

5. Funds Request from MAC:

Total Income:

Comments: for any Income item above that needs additional space for the explanation, please identify and explain here:

In-Kind

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Total In-Kind:
