NEA Application Project Budget, Page 1 of 2

Read the instructions for this form before you start.

OMB No. 3135-0112 Expires 11/30/2016

Applicant (official IRS name):								
INCOME								
1.	Amount requested from the Arts Endowment: \$							
2.	Total match for this project	t Be as specific as	s possible. Asterisk (*) those	funds that are committed	or secured.			
	Cash (Refers to the cash do project)	d or received for this	AMOUNT					
	Total cash a. \$							
	In-kind: Donated space, supplies, volunteer services (These same items also must be listed as direct costs under "Expenses" below or in Page 2 of the Project Budget form; identify sources)							
	Total donations b. \$							
	Total match for this project (2a. cash + 2b. donations) \$							
3.	Total project income (1 + 2) \$							
EXPENSES								
1.	Direct costs: Salaries and	Direct costs: Salaries and wages						
	TITLE AND/OR TYPE OF PERSONNEL	NUMBER OF PERSONNEL	ANNUAL OR AVERAGE SALARY RANGE	% OF TIME DEVOTED TO THIS PROJECT	AMOUNT			
	Total salaries and wages a. \$							
Fringe benefits Total fringe benefits b. \$								
	Total salaries, wages, and fringe benefits (a. + b.) \$							

NEA Application Project Budget, Page 2 of 2

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Applicant (official IRS name):								
EXPENSES, CONTINUED								
2.	Direct costs: Travel (Include subsistence)							
	# OF TRAVELERS	FROM	ТО	AMOUNT				
3.	rights, evaluation and as	ssessment fees, access acco istribution, transp	and artist fees, contractual services immodations, telephone, photocontation of items other than personal content of the conte	opying, postage, supplies and				
	Tatal disease and (4.6	Desired Dudant Days 4.4		expenses \$				
4.		rom Project Budget, Page 1 +	-2.+3.)	<u> </u>				
5.	Indirect costs (if applic	·						
	Federal Agency:	Rate (.0000)	x Base	= \$				
6.	Total project costs (4. Must equal total project	+5.) income (3. From Project Bud	lget, Page 1)	\$				