

**New Hampshire State Council on the Arts**  
**OPERATING GRANT BUDGET FORM FOR ORGANIZATIONS**



**APPLICANT NAME:**  
**Dates of Fiscal Year**

<b>Expenses</b>	<b>Past Year</b>	<b>Current Year</b>	<b>Future Year</b>	<b>Future Year</b>
	<b>CASH</b>	<b>CASH</b>	<b>CASH</b>	<b>IN-KIND</b>
<b>Salaried Employees</b> <i>(salaries, wages, fringe benefits)</i>				
Administrative				
#FT=      #PT=				
Artistic				
#FT=      #PT=				
Technical				
#FT=      #PT=				
<b>Outside Fees &amp; Services</b>				
<i>Artistic</i>				
<i>Other (specify):</i>				
<b>Marketing/Publicity (specify):</b>				
Paid Advertising				
Printing				
Mailing Postage				
<b>Remaining Project Expenses:</b>				
Space Rental: <i>(location/rate)</i>				
Travel:				
Accessibility expenses:				
Supplies, materials & miscellaneous expenses:				
Other <i>(specify)</i>				
<b>Total Expenses:</b>				

**APPLICANT NAME:**  
**Dates of Fiscal Year**

<b>INCOME</b>	<b>Past Year</b>	<b>Current Year</b>	<b>Future Year</b>	<b>Future Year</b>
	<b>CASH</b>	<b>CASH</b>	<b>CASH</b>	<b>IN KIND</b>
<b>Earned Income:</b>				
Admissions:				
Contracted Services <i>(specify)</i> :				
Concessions, sales, rentals:				
Fees, tuition:				
Other Revenue <i>(specify)</i> :				
<b>Contributed Income:</b>				
Memberships:				
Corporate Contributions <i>(identify)</i> :				
Private Foundations <i>(identify)</i> :				
Other Private Support: <i>(includes fundraisers)</i>				
<b>Government Support</b>				
Federal <i>(specify)</i> :				
State <i>(do not include this request)</i> :				
Local:				
<b>Applicant Cash:</b>				
(See Glossary for definition - <a href="http://www.nh.gov/nharts/grants/basic/glossary.htm">http://www.nh.gov/nharts/grants/basic/glossary.htm</a> )				
<b>Sub-Total (Income from Above):</b>				
<b>Anticipated NHSCA Grant Support</b> (amount requested)				
<b>Total Cash Income:</b> <i>(Column 3 only: Total Cash Income must equal Total Cash Expenses)</i>				

(\*) **asterisk secured contributed income**