

# PROGRAM INCOME

(For SBDC Use Only)

**SBDC NETWORK** \_\_\_\_\_ **PERIOD** \_\_\_\_\_

1) **Net Program Income** Carried Forward **From the Prior Year(s)** \$ \_\_\_\_\_

2) **Current Year Gross Program Income**

SOURCE	AMOUNT
Training	\$ _____
Sales of Books etc	_____
Advertising	_____
Research Work	_____
Trade Shows	_____
Other (Describe)	_____
_____	_____
_____	_____
_____	_____

**TOTAL CURRENT YEAR PROGRAM INCOME** \$ \_\_\_\_\_

3) **Current Year Program Income Expenditures**

EXPENSE CATEGORY	AMOUNT
<b>Personnel</b>	_____
<b>Fringe</b>	_____
<b>Consultants</b>	_____
<b>Subcontracts</b>	_____
<b>Travel</b>	_____
<b>Equipment</b>	_____
<b>Supplies</b>	_____
<b>Other (Describe)</b>	_____
_____	_____
_____	_____

**TOTAL CURRENT YEAR EXPENDITURES** \$ \_\_\_\_\_

4) **Current Year Net Income (2-3)** \$ \_\_\_\_\_

5) **Net Program Income Carried Forward to Following Year (1+4)** \$ \_\_\_\_\_

6) **Narrative Description of how program income was used to further program objectives.**

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\_\_\_\_\_

\_\_\_\_\_

I certify that this report is true in all respects and that all disbursements have been made in accordance with current SBA requirements. I further certify that this institution maintains working papers supporting these figures.

NAME and TITLE \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNATURE \_\_\_\_\_