NEA Application Project Budget, Part 1

Read the instructions for this form before you start.

OMB No. 3135-0112 Expires 11/30/2007 W

Applicant (official IRS name):										
INCOME										
1.	Amount requested from the	\$								
2.	Total match for this project Be as specific as possible. Asterisk (*) those funds that are committed or secured.									
	Cash (Refers to the cash do this project)	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 Part 2 of the Project Budget form; identify sources)									
	Total donations b. \$									
		Total matc	h for this project (2a. cas	h + 2b. donations) \$						
EXI	PENSES									
1.	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, Part 2

Read the instructions for this form before you start.

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Applicant (official IRS name):										
EXPENSES, CONTINUED										
2.	Direct costs: Travel (Include subsistence)									
	# OF TRAVELERS	FROM		то		AMOUNT				
					Total travel \$					
3.	Direct costs : Other expenses (Include consultant and artist fees, contractual services, promotion, acquisition fees, rights, evaluation and assessment fees, access accommodations, telephone, photocopying, postage, supplies and materials, publication, distribution, translation, transportation of items other than personnel, rental of									
	space or equipment, and other project-specific costs) AMOUNT									
		Total other expenses \$								
4.	Total direct costs (1. f	rom Project Budget, F	Part 1 +2.+3.)		\$					
5.	Indirect costs (if applic	cable)								
	Federal Agency:		Rate (%)	c Base	= \$					
6.	Total project costs (4.	+5.)			\$					