

# Revised Project Budget

**Application # (pre-award changes):**

**or Award # (post-award changes):**

<b>1. Applicant (official IRS name/ mailing address):</b>	<b>2. Period of Support Requested</b> (Use 2-digit numerals, e.g., 01/01/13 for Jan. 1, 2013): <b>Starting</b> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> /                  <div style="border: 1px solid black; width: 40px; height: 20px;"></div> /                  <div style="border: 1px solid black; width: 40px; height: 20px;"></div> </div> <b>Ending</b> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px;"></div> /                  <div style="border: 1px solid black; width: 40px; height: 20px;"></div> /                  <div style="border: 1px solid black; width: 40px; height: 20px;"></div> </div>
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**3. Revised Project Description.** If it is necessary to revise your project, clearly describe how the recommended grant and matching funds would be spent. Give a justification for the change (e.g., reduced amount of funding recommended as conveyed by the Endowment).

<b>4. Project Budget Summary:</b> Amount Recommended (see accompanying memo) \$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>	Plus "Total match for this project" + \$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>	Must equal "Total project costs" = \$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>
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**5. Authorizing Official** (Last, first): \_\_\_\_\_  Mr.  Ms.

Title: \_\_\_\_\_

Telephone: (    )                      ext.                      Fax: (    )

E-Mail: \_\_\_\_\_ Date:    /    /

**6. Project Director** (Last, first): \_\_\_\_\_  Mr.  Ms.

Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Telephone: (    )                      ext.                      Fax: (    )

## Project Budget

**Income**

**7. Total MATCH for this project.** Be as specific as possible. Asterisk (\*) those funds that are committed or secured.  
**CASH** (refers to the cash donations, grants, and revenues that are expected or received for this project.) Amount

Total cash a. \$ \_\_\_\_\_

**IN-KIND** (these same items also must be listed as direct costs under "Expenses" below.) Amount

Total in-kind b. \$ \_\_\_\_\_

**Total MATCH for this project (a. + b.) \$ \_\_\_\_\_**

# Revised Project Budget

## Expenses

**8. Direct costs: SALARIES AND WAGES** (Do not include salaries associated with fund raising.)

Title and/or type of personnel	Number of personnel	Annual or average salary range	% of time devoted to this project	Amount
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**Total salaries and wages a. \$** \_\_\_\_\_

**Fringe benefits**

**Total fringe benefits b. \$** \_\_\_\_\_

**Total salaries, wages, and fringe benefits (a. + b.) \$** \_\_\_\_\_

**9. Direct costs: TRAVEL** (Include subsistence.)

# of travelers	From	To	Amount
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**Total travel \$** \_\_\_\_\_

**10. Direct costs: OTHER EXPENSES** (such as consultant and artist fees, contractual services, telephone, utilities, photocopying, postage, supplies and materials, publication, distribution, transportation of items other than personnel, rental of space or equipment, etc.)

Amount

**Total other expenses \$** \_\_\_\_\_

**11. Total DIRECT COSTS (8.+9.+10.)** **\$** \_\_\_\_\_

**12. INDIRECT COSTS** (if applicable. Include a copy of federal indirect cost rate agreement):

**Federal Agency:** \_\_\_\_\_ **Rate (%)** \_\_\_\_\_ **x Base** \_\_\_\_\_ **= \$** \_\_\_\_\_

**13. TOTAL PROJECT COSTS (11. + 12.)** **\$** \_\_\_\_\_