AIE PROJECT BUDGET FORM-6B

Neatly handwrite or type in 12-point. List expenses and income that directly relates to the cost of the project described in this application. Round to nearest dollar.

Applicant Organization Name	
Federal Tax ID #	
	eative Alternatives for Youth box for one grant category)
PROJECT EXPENSES • Professional Services	
Artist/Consultant Fee (hrs x rate \$) Artist/Consultant Planning Fee (hrs x rate \$) Visiting Artist Fee	\$ \$ \$
(School personnel time devoted to the project is eligible in Teache	r Incentive grants only.)
Organizational/Social Work Title Annual salary range % \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$ \$
Other Expenses	
Lodging Travel Supplies (itemize) Documentation Equipment Rental/Lease Other TOTAL PROJECT EXPENSES.	\$ \$ \$ \$ \$
TOTAL PROJECT EXPENSES	p
PROJECT REVENUE	
• Applicant Cash	\$
• Other Revenue (grants, contributions, memberships)	\$
• In-Kind Contributions * (identify sources)	\$
• ICA Grant Amount requested Total grant request is limited to 50% of total project expenses and should not exceed the maximum allowable request of the grant category.	\$
TOTAL PROJECT REVENUE	\$
Total Project Expenses must Equal Total Project Revenue	

Footnotes that provide more detailed information may be included on a separate page.

^{*}In-Kind contributions are goods and services, directly benefiting and identifiable to the proposed activity, donated by individuals or organizations other than the applicant and must correspond to identified Project Expenses.