

Section 7: PROJECT OPERATING BUDGET

Please enter the **project** operating budget for fiscal year 2014. Do not include in-kind costs or revenue. The budget must balance. Total revenue (line 21) must equal total expenses (line 55). Round all budget figures to the nearest whole dollar.

Indicate if the proposed revenue is confirmed or projected. The Foundations (line 9) and Corporations (line 10) line items should be itemized on the Budget Itemization form in Section 8. All expenses greater than \$1,000 should be itemized as well.

PROJECT REVENUE	2014 PROPOSED	Confirmed/Projected
1. CITY OF SAVANNAH INCOME		
2. Department of Cultural Affairs (DCA)		
3. Other City of Savannah Depts.		
4. Total COS Income		
5. CONTRIBUTED INCOME		
6. Chatham County		
7. State of Georgia		
8. Federal		
9. Foundations		
10. Corporations		
11. Individual Contributions		
12. Fundraisers/Benefits		
13. Total Contributed Income		
14. EARNED INCOME		
15. Admissions		
16. Classes/Workshops		
17. Merchandise		
18. Vendors		
19. Other (list):		
20. Total Earned Income		
21. TOTAL PROJECT REVENUE		

Organization Name:

Project:

PROJECT EXPENSES	2014 DCA SHARE	2014 ORG. SHARE	2014 TOTAL PROJECT EXPENSE
22. PERSONNEL (Internal/Contracted)			
23. Administrative			
24. Artistic			
25. Production/Technical			
26. Contracted Administrative			
27. Contracted Artistic			
28. Contracted Production/Technical			
29. Total Personnel Expenses			
30. SUPPLY EXPENSES			
31. Office			
32. Production/Technical			
33. Total Supply Expenses			
34. MARKETING EXPENSES			
35. Advertising/Promotion			
36. Printing			
37. Total Marketing Expenses			
38. RENTAL EXPENSES			
39. Performance Space Rental			
40. Exhibition Space Rental			
41. Rehearsal Space Rental			
42. Office Space			
43. Equipment Rental			
44. Total Rental Expenses			
45. OTHER EXPENSES			
46. Hospitality (meals)			
47. Travel/Transport			
48. Lodging			
49. Insurance			
50. Security			
51. Dues/Subscript./Royalties/Rights			
52. Postage			
53. Other			
54. Total Other Expenses			
55. TOTAL PROJECT EXPENSES (MUST EQUAL LINE 21)			
SURPLUS/DEFICIT (LINE 21 – LINE 55)			