

Budgeted Revenue/Support & Expense for Current Fiscal Year

Akron Bar Foundation | 57 S. Broadway St., Akron, OH 44308 | www.akronbar.org | (330) 436-0103

Name of Applicant Organization: _____

Fiscal Year: _____ to _____

<u>REVENUE/SUPPORT</u>	<u>Budget for Year</u>	<u>Year-to-Date</u>
Corporate Grants	\$ _____	\$ _____
Foundation Grants	\$ _____	\$ _____
Government Grants/Contracts/Per Diem (describe):	\$ _____	\$ _____
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Contributions	\$ _____	\$ _____
Affiliate Orgs./Non-Government Contracts (describe):	\$ _____	\$ _____
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Federated Campaigns (describe):	\$ _____	\$ _____
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Membership Dues	\$ _____	\$ _____
Special Events, Fundraisers	\$ _____	\$ _____
Sponsorships	\$ _____	\$ _____
Admissions	\$ _____	\$ _____
Sales, Rent	\$ _____	\$ _____
Revenue, Tuition	\$ _____	\$ _____
Endowment Funds	\$ _____	\$ _____
Interest, Dividends, Non-Endowment Investments	\$ _____	\$ _____
Other (describe if more than 20% of total revenues):	\$ _____	\$ _____
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Total Revenue/Support:	\$ _____	\$ _____
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<u>EXPENSES</u>		
Salaries	\$ _____	\$ _____
Employee Benefits, Taxes	\$ _____	\$ _____
Affiliate Orgs. or Contracts (describe):	\$ _____	\$ _____
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Professional Fees	\$ _____	\$ _____
Equipment, Supplies, Materials	\$ _____	\$ _____
Telephone, Utilities	\$ _____	\$ _____
Postage, Mailing	\$ _____	\$ _____
Occupancy	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Training, Staff Development	\$ _____	\$ _____
Travel	\$ _____	\$ _____
Conferences	\$ _____	\$ _____
Evaluations	\$ _____	\$ _____
Other (describe if more than 20% of total expenses):	\$ _____	\$ _____
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Total Expenses:	\$ _____	\$ _____
Total Revenue/Support Less Total Expenses:	\$ _____	\$ _____

If expenses exceed revenues by 10% or more, please explain how the difference will be offset. Also, attach narrative if you have expenses, revenues or a deficit that requires more information or if you believe additional explanation is warranted.