

Budget and Finances

The Thomas B. Fordham Foundation (TBFF)

1. Budget Narrative/Justification

- Grant budget; use the **Grant Budget Format** that follows, if appropriate.
- A plan (on a separate sheet) that shows how each budget item relates to the project and how the budgeted amount was calculated.
- List of amounts requested of other foundations, corporations and other funding sources to which this proposal has been submitted.

2. Attachments

(Please attach the following documents (Upload these into their respective Epicenter tasks)

- A copy of the current IRS determination letter indicating 501(c)(3) tax-exempt status.
- Audited financial statement for past 2 years.
- Certificate of authority of non-profit status.
- List of Board of Directors with affiliations (note if any board members are compensated for their services on the board).
- Organization's current annual operating budget, including expenses and revenue.
- Annual report, if available.

GRANT BUDGET FORMAT

Below is a listing of standard budget items. Please provide the project budget in this format and in this order.

- A. Organizational fiscal year: _____
 B. Time period this budget covers: _____
 C. For a CAPITAL request, substitute your format for listing expenses. These will likely include: architectural fees, land/building purchase, construction costs, and campaign expenses.
 D. **Expenses:** include a *description and the total amount* for each of the following budget categories, in this order:

<i>expenses</i>	<i>Amount requested from this organization</i>	<i>Total project</i>
Salaries	\$ _____	\$ _____
Payroll Taxes	\$ _____	\$ _____
Fringe Benefits	\$ _____	\$ _____
Consultants and Professional Fees	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Travel	\$ _____	\$ _____
Equipment	\$ _____	\$ _____
Supplies	\$ _____	\$ _____
Printing and Copying \$ _____	\$ _____	\$ _____
Telephone and Fax	\$ _____	\$ _____
Postage and Delivery	\$ _____	\$ _____
Rent	\$ _____	\$ _____
Utilities	\$ _____	\$ _____
Maintenance	\$ _____	\$ _____
Evaluation	\$ _____	\$ _____
Marketing	\$ _____	\$ _____
Other (specify)	\$ _____	\$ _____
Total amount requested	\$ _____	Total project expenses \$ _____

- E. **Revenue:** include a *description and the total amount* for each of the following budget categories, in this order; please indicate which sources of revenue are committed and which are pending.

	<u>Committed</u>	<u>Pending</u>
1. Grants/Contracts/Contributions		
Local Government	\$ _____	\$ _____
State Government	\$ _____	\$ _____
Federal Government	\$ _____	\$ _____
Foundations (itemize)	\$ _____	\$ _____
Corporations (itemize)	\$ _____	\$ _____
Individuals	\$ _____	\$ _____
Other (specify)	\$ _____	\$ _____
2. Earned Income		
Events	\$ _____	\$ _____
Publications and Products	\$ _____	\$ _____
3. Membership Income	\$ _____	\$ _____
4. In-Kind Support	\$ _____	\$ _____
5. Other (specify)	\$ _____	\$ _____
Total Revenue	\$ _____	\$ _____

(Common Grant Application)