

Howard Youth Endowment Program Budget

Agency: Amount Requested:

Below is a listing of standard budget items. Please provide the program/project budget on this form and attach to each copy of the grant application submitted.

A. **Organizations fiscal year:**

B. **Time period this budget covers:** to

C. **Expenses:** include the total amount for each of the following budget categories:

	Amount Requested	Total Program Expense
Salaries		
Payroll Taxes		
Fringe Benefits		
Consultants & Professional Fees		
Stipends		
Insurance		
Travel		
Equipment		
Supplies		
Printing & Copying		
Telephone & Fax		
Rent		
Utilities		
Maintenance		
Evaluation		
Marketing		
Other (specify)		
Other (specify)		
Totals		

D. **Revenue:** include the total amount expected for the program for each of the following budget categories, in this order; please indicate which sources are committed and which are pending.

	Received:	Pending:
Grants/Contracts/Contributions	Amount Received	Amount Pending
Local Government		
State Government		
Federal Government		
Foundations		
Corporations		
Church Groups		
Individual Donations		
Earned Income from Events		
In-kind Support		
Other (specify)		
Other (specify)		
Total Revenue		