

PART 6 – DOCUMENTATION OF FISCAL ACCOUNTABILITY

Please complete according to your organization's fiscal year, rather than calendar year.

Does your organization have an accumulated operating (choose one):

Surplus =

Deficit =

(Do not include endowment/capital funds)

\$

\$

REVENUE	<i>(FULL FISCAL YEARS) (total in line 23)</i>	FY 2014 Actual	FY 2015 Actual	FY 2016 Budget	FY 2016 Actual YTD	FY 2017 Projected
Earned Income						
1.	Admissions					
2.	Memberships					
3.	Fundraising events (gross)					
4.	Tuition (workshops)					
5.	Contracted services					
6.	Facility Rental					
7.	Proceeds: Goods Sales					
8.	Remaining/Other (specify):					
	a.					
	b.					
9.	Total Earned Income					
Private Contributions						
10.	Individual Donations					
11.	Corporate Support – See Attach. J					
12.	Foundation Support – See Attach. J					
13.	Total Private Contributions					
Public Funding						
14.	National Endowment for the Arts					
15.	Other Federal					
	a.					
	b.					
16.	NYSCA					
17.	NYSCA Decentralization Regrant					
18.	Other State					
	a.					
	b.					
19.	Municipal Funding					
20.	Erie County Cultural Funding					
21.	Erie County – Other					
22.	Total Public Funding					
23.	TOTAL REVENUE					