

Fund for Small Theatres

Attachment 1

Include only actual income and expenses. Do not include income or expenses covered by in-kind donations (except on the line provided), loans, depreciation, or relating to funds that are legally restricted for capital expenditures.

Company: _____

Current Fiscal Year Ends (month/day/year): _____

	Most Recently Completed FY ended _____	Current Year-To-Date Actuals	Current Year-End Projections
INCOME			
Earned			
Box Office/Subscriptions	_____	_____	_____
Other (specify):	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Earned Income	_____	_____	_____
Contributed			
Individual Giving	_____	_____	_____
Corporate Giving	_____	_____	_____
Foundation Giving	_____	_____	_____
Government Giving	_____	_____	_____
Special Events (net)	_____	_____	_____
Other (specify):	_____	_____	_____
_____	_____	_____	_____
Total Contributed Income	_____	_____	_____
TOTAL INCOME	_____	_____	_____
TOTAL IN-KIND	_____	_____	_____
EXPENSES			
Artistic Personnel	_____	_____	_____
Administrative Personnel	_____	_____	_____
Tech/Prod Personnel	_____	_____	_____
Other Personnel	_____	_____	_____
Production Costs	_____	_____	_____
Occupancy Costs	_____	_____	_____
Marketing Costs	_____	_____	_____
Fundraising Costs	_____	_____	_____
Administrative Costs	_____	_____	_____
Other (specify):	_____	_____	_____
_____	_____	_____	_____
TOTAL EXPENSES	_____	_____	_____
Surplus/Deficit for Fiscal Year	_____	_____	_____
Accumulated Surplus/Deficit	_____	_____	_____