

Detailed Grant Budget Form for Nonprofits

Organization Name

Project Title

Project Period

Contact Name & Email

Personnel Expenses

Position/Title	FTE/Hours	Salary (Annual or Hourly)	Grant Funds Requested	Other Sources	Total
Personnel Subtotal					

Fringe Benefits

Type	Amount	Grant Funds Requested	Other Sources	Total
Fringe Benefits Subtotal				

Non-Personnel Expenses

Item/Description	Quantity	Unit Cost	Grant Funds Requested	Other Sources	Total
Non-Personnel Subtotal					

Indirect Costs

Type/Description	Rate (%)	Amount	Grant Funds Requested	Other Sources	Total
Indirect Subtotal					

Budget Summary

Category	Grant Funds Requested	Other Sources	Total
Personnel			
Fringe Benefits			
Non-Personnel			
Indirect			
Total Project Cost			

Budget Notes/Justification