

**SECTION III: IMPACT GRANT BUDGET SUMMARY – (1 PAGE)**

Please list each income source and anticipated expense associated with the project for which this grant is being requested. If your Agency is selected to move to the Document Packet phase, you will be required to give a detailed project budget with a comprehensive listing of all items and the timeline for receipt of grant funds.

<b>PROJECT FUNDING</b>	
Nevada Women's Philanthropy Request (this grant request)	\$500,000
Other <b>Secured</b> Funding Sources (Confirmed funding - please list)	
Other <b>Pending</b> Funding Sources (Funding MUST BE CONFIRMED by March 1, 2023)	
<b>(a) HOW MUCH FUNDING will Project/Program Require? TOTAL:</b>	

<b>PROJECT EXPENSES</b>					
	YEAR 1	YEAR 2	YEAR 3	TOTAL	% of Total
Project Development Costs					
Capital Costs					
Personnel Costs					
Equipment and Supplies					
Operational Costs					
<b>TOTAL EXPENSES (a)</b>					100%

<b>USE OF NWP FUNDS – \$500,000</b>					
	YEAR 1	YEAR 2	YEAR 3	TOTAL	% of Total
Project Development Costs					
Capital Costs					
Personnel Costs					
Equipment and Supplies					
Operational Costs					
<b>TOTAL NWP FUNDS (b)</b>				\$500,000	100 %

What percent of the Total Project do NWP Funds represent? Calculate (b) divided by (a) from above for percentage* (500,000) ÷ (Total Expense) = %					%
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\*30% minimum - Larger percentages are preferred.