

4.0 Budget Summary

Provider Name

Goodwill Industries of S.E. WI, Inc.

Contract Period

01/01/2018 - 12/31/2018

Program/Service

Case Management & Delivery Service

ITEM	1	2	3	4	5	6
	Department on Aging Request	Non-Federal Match (10% of Program Costs)		Program Revenue	All Other Resources	Total
		Cash	In-Kind			
1. PERSONNEL						
A. Wages & Salaries	657,906				132,443	790,349
B. Fringe (25%)	165,256				-	165,256
C. Other (Describe)						-
SUBTOTAL	823,161	-	-	-	132,443	955,605
2. TRAVEL EXPENSES						
A. Local	114,076					114,076
B. Out of Town						-
SUBTOTAL	114,076	-	-	-	-	114,076
3. FACILITIES EXPENSE						
A. Rent	13,541		108,000			121,541
B. Utilities						-
C. Other (Describe)						-
SUBTOTAL	13,541	-	108,000	-	-	121,541
4. OPERATING EXPENSES						
A. Office Supplies	4,795					4,795
B. Consumable Supplies						-
C. Telephone	6,560					6,560
D. Postage	1,382					1,382
E. Equipment ³	19,647					19,647
F. Other (Describe) ¹	246					246
SUBTOTAL	32,630	-	-	-	-	32,630
5. MISCELLANEOUS						
A. Office Supplies						-
B. Consultant Fees						-
C. Audit						-
D. Other (Describe) ²	1,049					1,049
SUBTOTAL	1,049	-	-	-	-	1,049
6. INDIRECT COSTS						
A. Indirect Costs (Form 4.1)	98,446		12,323		13,244	124,013
B. Other (Describe)						-
SUBTOTAL	98,446	-	12,323	-	13,244	124,013
7. COLUMN TOTAL FOR ALL COSTS						
	1,082,903	-	120,323	-	145,688	1,348,914
8. TOTAL NON-FEDERAL						
9. PROFIT FACTOR						

*Provide source of Non-Federal Cash match or description of In-Kind Match: