



Residency Budget Worksheet Museum Healthcare Partnership

Southern Alleghenies Museum of Art
P.O. Box 9, Loretto, PA 15940
p: 814-472-3920 / f: 814-471-1151
loretto@sama-art.org or jcampbell@sama-art.org

Please type or print clearly in ink:

Eligible Expenses are residency expenses which are eligible up to a 50% matching grant from SAMA. This includes artist fees and mileage. Additional funding may be granted for materials. Please contact SAMA Education Coordinator to discuss availability for supplies.

Residency Length	SAMA		Host Organization			Total Artist/Admin. Fees
	Percentage	Dollars	Percentage	Dollars	10% Admin Fee	
10 Days	30%	\$600	70%	\$1,400	\$200	\$2,200
15 Days	40%	\$1,200	60%	\$1,800	\$300	\$3,300
20 Days	50%	\$2,000	50%	\$2,000	\$400	\$4,400

I. Planning & Residency Days

Number of Planning Days (maximum of 3 days/20 day residency, maximum of 1 day/10 day residency) (A) _____

Number of Residency/Teaching Days (min. of 17 days for a 20 day residency) (B) _____

Total Number of Days (A+B) (C) _____

Artist Fee per Day (min. \$195, artist/host are free to negotiate a higher fee) (D)\$ _____

Total Artist Fees [(C) X (D)] (E)\$ _____

II. Travel Expenses

Mileage: (only applicable when artist travels 50 miles or more, one way per day, to residency site)*

Miles per Day (from mile one, if over 50 miles) (F) _____

Total Mileage [(C) X (F) X \$0.51] (G)\$ _____

III. Total Eligible Expenses

(E + G) (H)\$ _____

IV. Funding Requested

Amount Requested from SAMA (cannot be more than half of Total Eligible Expenses) (I)\$ _____

Amount of Matching Funds(must be at least half of Total Eligible Expenses) (J)\$ _____

Administration Fee (10% of E) (K) \$ _____

Total Funds paid by Organization (J+K) (L) \$ _____

Source of Matching Funds: _____

Matching Funds are: Secured Pending

*Please be sure to check mileage for an artist before submitting a Residency Request Form. SAMA cannot guarantee money for mileage due to the uncertainties of grants. SAMA uses mapquest.com to verify mileage.

**Administration Fee is 10% of Total Eligible Expenses (E)