

Lake Charles Partnership Grant Organizational Support Application Fiscal Year (FY) 2018–2019



Grant Activity Period: April 1, 2018–March 31, 2019

Submit final report to:

Arts Council of SWLA
P.O. Box 1437, Lake Charles, LA 70602 (mailing)
809 Kirby St., Suite 202, Lake Charles, LA 70601 (physical)

Grant # LCP-18/19-_____

For Arts Council Use Only

DEADLINE:

Friday, January 19, 2018, 5 p.m.

Completed applications must be hand-delivered or received in the Arts Council office by 5:00 p.m. on Friday, January 19, 2018 or the application is ineligible. Applications **MUST** be typed on an official application form. Handwritten applications are ineligible. Applications may not be submitted via fax. Please read the LCP FY 2018-2019 Guidelines carefully before completing this application. Applicants are encouraged to contact the Community Development Coordinator for assistance **PRIOR** to the application deadline. The guidelines are available online at www.artscouncilswla.org. Organizations seeking organizational support must be domiciled within the city limits.

GRANT INFO

- 1. **Amount Requested** (from page 8, line 37 in this application): _____
- 2. **Total Project Expenses** (from page 8, line 55 in this application): _____
- 3. **Are you submitting two LCP applications this FY cycle?** Yes No

APPLICANT DATA

- 4. **Organization Name:** _____
- 4a. Address: _____
- 4b. City: _____ 4c. State: _____ 4d. Zip: _____
- 4e. Parish: _____ 4f. Phone: _____ 4g. Fax: _____
- 4h. Website: _____ 4i. Email: _____

5. **Federal Employer Tax ID# of Applicant (REQUIRED):** _____

6. **Legislative and congressional district numbers of applicant.** Districts are available from your local registrar of voters, clerk of court, or online at www.legis.la.gov/legis/FindMyLegislators.aspx

House District #: _____ LA Senate District #: _____ US Congressional District #: _____

7. **Primary Contact and Title:** _____

If different from above:

- 7a. Address: _____
- 7b. City: _____ 7c. State: _____ 7d. Zip: _____
- 7e. Phone: _____ 7f. Fax: _____
- 7g. Email: _____

8. **Has your organization ever received a Lake Charles Partnership Grant?** Yes No

If yes, indicate the last three grant awards:

_____	_____	_____
<i>Amount</i>	<i>Amount</i>	<i>Amount</i>
_____	_____	_____
<i>Year</i>	<i>Year</i>	<i>Year</i>

9. Mission statement of the applicant organization. What is your mission statement as adopted by your board of directors? What are your goals and what is the focus of your programming?

10. Artistic Discipline of Your Organization. Check One.

- | | | |
|----------|------------|-----------------|
| Dance | Literature | Theatre |
| Design | Media | Visual Arts |
| Folklife | Music | Multidiscipline |

11. Primary Target Audience. Check One.

- | | | | |
|------------------|---------------------------------|------------------|---------------------------|
| General Audience | Ages 3–18/
Students Pre-K–12 | College Students | Special Population: _____ |
|------------------|---------------------------------|------------------|---------------------------|

12. List your organization’s actual cash income and expenses for the past two completed fiscal years, projections for the current fiscal year, and projection for the next year.

YEAR	INCOME	EXPENSES
Two Years Past	_____	_____
One Year Past	_____	_____
Current Year Projection	_____	_____
Future Projection	_____	_____

13. If the figures vary from year to year or if there is an accumulated surplus or deficit, please discuss the reason(s) for the variation, how the surplus will be used, and the plan to reduce the deficit.

14. In-Kind Support for Last Completed Fiscal Year. In the space below, list the budget category or source of the donation/contribution, type of donation/contribution and the value of the in-kind donations or volunteer support. You may continue on an additional sheet of paper, if necessary.

Source (List Budget Category or Company)	Contribution (Items or Hours)	Cash Equivalent
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total In-Kind Support:		_____

Complete the following with date from the last completed fiscal year:

Community Impact Data

- 15. Number of public performances and/or exhibitions: _____
- 16. Number of workshops, forums, educational, and training programs offered: _____
- 17. Number of professional artists paid for providing programs/services: _____
- 18. Amount paid in artist fees in last completed fiscal year: _____
- 19. Number of schools (Pre-K–12) that benefit from your programs and services: _____

Benefitted Individuals Data

- 20. Number of volunteers involved with organization: _____
- 21. Number of artists who benefit from your programs and services: _____
- 22. Number of youth who benefit from your programs and services: _____
- 23. Number of teachers who benefit from your programs and services: _____
- 24. Total number of individuals who benefit (add lines 20 through 23): _____
- 25. Estimate audience numbers for the event/year: _____

THE NARRATIVE

Answer each question in the space provided. Your application will be evaluated on the clarity of the information presented in the proposal. **Please read the evaluation criteria before answering the narrative questions.**

Please:

- DO NOT type in font smaller than 12 point.**
- DO NOT bold your text.**
- DO NOT use any font that is difficult to read.**

Quality: 50%

- Artistic merit of the organization’s programs;
- The value of the organization’s programs and services to the community;
- Contribution to the art form or the understanding and appreciation of the art form(s).

Need and Impact: 30%

- Need for the organization’s programs or services;
- Involvement of diverse (social, geographic, economic) populations reflective of the community, including those with limited access to the arts;
- Use of grant funds to further the mission of the organization;
- Efforts for increased access, participation, and exposure to the arts.

Administration and Budget: 20%

- Sound fiscal history as shown in financial statements;
- Diverse funding sources and community support;
- Quality of organizational planning;
- Compliance with past grant contracts, if applicable.

26. Narrative Questions.

Read all questions before beginning. Please answer the narrative questions, using only the pages provided, according to the evaluation criteria on page 3. Be specific—your application will be evaluated on the clarity of the information presented.

Note: There is a limited amount of space for each answer. Please be concise.

QUALITY: 50%

1. Describe the Artistic Merit of the Organization. Describe programming activities for your organization’s current fiscal year and the projections for next fiscal year with inclusive dates or length of programs. Include descriptions of productions, performances, exhibits, festivals, and any educational outreach programs.

2. Briefly explain how these programs and services described in Question #1 further the organization's mission and/or contribute to the understanding or appreciation of the arts. Include details on the involvement of diverse (social, geographic, economic) populations, including those with limited access to the arts.

NEED AND IMPACT: 30%

1. Briefly describe the community served by your organization's programs and services. How is the community involved with the development of programs and services? How do your services impact the community?

2. Address your organization's efforts to increase access, participation, knowledge, and/or exposure to the arts. Include details on the involvement of diverse (social, geographic, economic) populations, including those with limited access to the arts.

ADMINISTRATION AND BUDGET: 20%

1. Provide a brief description of qualifications and experience of management staff, either paid or volunteer, full and part-time.

2. Describe how grant funds will be used.

ORGANIZATION BUDGET DIRECTIONS AND DEFINITIONS

Directions for Completing the Organization Budget:

- Round all dollar amounts to the nearest \$1.
- Include the dates of the organization's fiscal year.
- Include actual cash figures for the last completed fiscal year, the current projected year and the upcoming projected fiscal year.
- List the source of revenue where indicated.
- All columns and rows should total correctly.
- Line 37 – FY 2018-2019: Grant Request must equal Question #1 on page 1.
- You may also attach more detailed budget information, although it does not substitute for the information on the Organization Budget. This information will be forwarded to the panel with the application budget.
- Definitions below are for reference purposes. For more complete definitions, review the Glossary section of the Guidelines.

REVENUE:

- **Admissions, Memberships, Subscriptions** refers to income earned as a result of the project you are applying for, such as individual ticket sales, price charged for involvement, etc.
- **Contracted Services Revenues** refers to income earned from services your agency offers on a contract for services basis, such as touring, school performance, etc.
- **Other Applicant Cash** refers to agency cash on hand that will be used towards the project you are applying for. The applicant will provide cash that is not earned as a part of this project.
- **Fundraising** refers to any solicitation for donations or contributions from individuals in support of this project.
- **Corporate Support** refers to cash contributed by local, national or international businesses that will be used towards the project you are applying for.
- **Foundation Support** refers to support provided by local or national foundations.
- **Other Private Support** refers to sponsorships from small businesses, etc.
- **Federal, State** refers to government support contributed by the United States Government, and State of Louisiana.
- **Local/Regional** refers to cash contributed by a local government, community group, or Parish government.
- **Lake Charles Partnership Program Grant Requests and Awards** refers to the amount requested from the applicant organization for this project. This line should be broken down under the Grant Expenses column of the Project Budget to represent what items grant money will support, if funded.
- **Total Cash Revenue** represents all cash income that will be used to administer the project.

EXPENSES:

- **Personnel** refers to permanent employees of the organization who will be paid for his/her time as a part of this project.
- **Personnel – Administrative** refers to permanent, paid staff of the organization in charge of operations and/or programming.
- **Personnel – Artistic** refers to permanent, paid staff of the organization responsible for the artistic direction of the organization and/or programming.
- **Payroll Taxes** refers to FICA, etc.
- **Fiscal Agent Fees** are defined as fees charged by an organization to act as the applicant for another organization and are intended to offset the cost of personnel, time, and supplies. Fiscal agent fees should not exceed either \$150 or 8% of the total project costs – whichever figure is less.
- **Outside Professional Services – Artistic** refers to artistic services by firms or people not considered employees of the applicant (e.g., individual artists, folklorist, curator, etc. whose services are contracted for the project). A provider of services form is required for anyone listed under this category.

- **Outside Professional Services – Other** refers to non-artistic services by firms or people not considered employees of the applicant (e.g., project director, consultants, technical director, publisher, etc.). A provider of services form is required for anyone listed under this category.
- **Production** refers to event related components such as lighting, sound, etc.
- **Occupancy/Utilities** refer to costs associated with telephone, gas and electric, water, etc.
- **Equipment Rental and Maintenance** refers to the costs associated with renting and maintaining equipment for the purpose of producing the project.
- **Technology and Communications** refers to office related items, such as email, newsletters, etc.
- **Insurance** refers to the cost of liability insurance related to the project.
- **Materials and Supplies** refers to costs paid for producing your organization's programs, services, or operations, such as pens, pencils, paper, staples, etc. If supplies and materials exceed \$500, you must submit a detailed breakdown of costs. Elaborate with monetary value statement as noted on page.
- **Postage/Shipping Costs** refers to the cost for mailing and shipping related to the project.
- **Marketing Costs** refers to the cost associated with advertising, soliciting involvement, or promoting the project and includes design, printing, advertising, flyers, playbills, tickets, etc.
- **Staff and Board Development** refers to staff training, workshops, etc.
- **Travel/Per Diems** refers to the cost of travel incurred as a result of your arts project (busing students, artist travel, etc.), for outside professional services, per diems, and travel for services outside the area.
- **Other Expenses** refers to expenses not listed under any other expense category. List all expenses under Other.
- **Total Expenses** represents all cash costs involved to administer the project being proposed.

IN-KIND SUPPORT

(budget found on page 3)

- **In-kind** refers to donated personnel and volunteer time, materials, and services associated with the project.
- **Source** is either an organization contributing materials, facilities, services, etc. for the project or an individual contributing volunteer time.
- **Contribution** is the item being donated, such as a facility space or for individuals, the number of hours.
- **Cash Equivalent** is the amount the applicant would pay in cash for items, services or time listed.

FISCAL YEAR ORGANIZATION BUDGET

See directions on page 10 for completing the project budget before completing lines 27 through 57.

Fiscal Year: _____ / _____ (day/month) Is this a _____ Cash or _____ Accrual Basis of accounting?

REVENUE	Last Year	Current Year	Next Year
Earned Income			
27. Admissions, Memberships, Subscriptions	_____	_____	_____
28. Contracted Services Revenues	_____	_____	_____
29. Other Applicant Cash: <i>List Source</i>	_____	_____	_____
<hr/>			
Contributed Income			
30. Corporate Support	_____	_____	_____
31. Foundation Support	_____	_____	_____
32. Other Private Support	_____	_____	_____
Government Support, List Sources			
33. Federal Support	_____	_____	_____
<hr/>			
34. State, not Louisiana Division of the Arts	_____	_____	_____
<hr/>			
35. State, Louisiana Division of the Arts	_____	_____	_____
<hr/>			
36. Local/Regional Support	_____	_____	_____
<hr/>			
37. Sub-Total	_____	_____	_____
38. LCP Grant Request and Awards	_____	_____	_____
39. Total Cash Revenue <i>(add lines 37 and 38)</i>	_____	_____	_____
EXPENSES			
40. Salaries/Wages/Benefits, Personnel-Administrative	_____	_____	_____
41. Salaries/Wages/Benefits, Personnel-Artistic	_____	_____	_____
42. Payroll Taxes	_____	_____	_____
43. Outside Professional Services—Artistic	_____	_____	_____
44. Outside Professional Services—Other	_____	_____	_____
45. Production	_____	_____	_____
46. Occupancy/Utilities Rent Own	_____	_____	_____
47. Equipment Rental and Maintenance	_____	_____	_____
48. Technology and Communications	_____	_____	_____
49. Insurance	_____	_____	_____
50. Supplies and Materials*	_____	_____	_____
51. Postage/Shipping	_____	_____	_____
52. Marketing Costs	_____	_____	_____
53. Staff and Board Development	_____	_____	_____
54. Travel/Per Diems	_____	_____	_____
55. Other Expenses: <i>List</i>	_____	_____	_____
<hr/>			
56. Total Expenses <i>(add lines 40 through 55)_</i>	_____	_____	_____
57. Surplus/Deficit <i>(subtract line 39 from 56)</i>	_____	_____	_____
58. Accumulated Surplus/Deficit, if any	_____	_____	_____

*Line 53, Supplies and Materials: If supplies and materials exceed \$500, a detailed breakdown must accompany this application.

ATTACHMENTS

Attach an IRS letter determining nonprofit tax exemption under section 501(c)(3) of the Federal Tax Code.

Attach a board of directors listing that includes names and addresses, identifying officers, ethnicity, and professional affiliation.

Attach a year-end financial statement, the most current IRS Form 990, OR a P&L statement for the most recently completed fiscal year.

Optional, but recommended, attach your organization's most recent strategic, annual, or long-range plan.

Optional, but recommended: One or two sets of supplemental materials, including a scrapbook or set of materials to document recent projects, artist samples, extended resumes, brochures/marketing materials, and letters of recommendation and support may be submitted. **Include all supplemental materials with this application.** Items may be picked up between February 20, 2018 and March 29, 2018. **After March 29, 2018, any supplemental materials left in our office will be subject to disposal.**

CHECK LIST

Original single-sided application form with seven (7) copies (may be double-sided) on three-hole punch paper with complete narrative, organizational budget, and all required attachments (8 sets total);

Appropriate signatures signed in BLUE INK below (**original signatures, not photocopies**);

Amount requested does not exceed 25% of the previous year's annual operating revenue or \$2,000 (whichever is less);

Do not staple, bind, or tape the application, the required attachments, or the supplemental materials together;

Keep a copy of the completed application form for your records;

Application received by the Arts Council office by **5:00 p.m.** on or before **January 19, 2018.**

ASSURANCES

The applicant hereby gives assurances to the City of Lake Charles and the Arts Council of SWLA that: the applicant has read and understands all information contained in the FY 2018-2019 Lake Charles Partnership Grant Program Guidelines; the activities and services proposed in this application will be administered by the applicant organization; and any grant funds received for this application will be used exclusively for payment of allowable expenditures incurred for proposed services, and such grant funds will be administered by the applicant. The applicant will comply with all rules, regulations, laws, terms, and conditions described in the FY 2018-2019 Lake Charles Partnership Grant Program Guidelines. The undersigned have been duly authorized by the governing authority of the applying organization to submit this application to the Arts Council of SWLA and as authorized by the City of Lake Charles. We hereby certify that all figures, statements, and representations made in this application, including any attachments, are true and correct to the best of our knowledge.

Signatures are required and indicate that the signers have read the above "ASSURANCES" and agree to the grant conditions. "Authorizing Official" should be the president of the board or other individual with the authority to enter into a legal contract on behalf of the agency (in the event of an application from a school or school system, a duly authorized representative on behalf of the parish school board or private/parochial school board). "Chief Fiscal Officer" should be the individual immediately responsible for the disbursement of funds for the project. "Project Director" is the individual who will be directly responsible for the implementation of the activities of the above-described project. The application with the signatures constitutes a legal document. The signatures **MUST** be the original signatures (not photocopies) in blue ink and all three spaces must be completely filled in.

59. Authorizing Official (usually president or chairman)

Signature: _____ Date: _____

Typed Name: _____ Title: _____

Phone (Day): _____ Phone (Other): _____

60. Chief Fiscal Officer (may be same as Authorizing Official, usually treasurer)

Signature: _____ Date: _____

Typed Name: _____ Title: _____

Phone (Day): _____ Phone (Other): _____

61. Project Director

Signature: _____ Date: _____

Typed Name: _____ Title: _____

Phone (Day): _____ Phone (Other): _____

Please check your final application package carefully. Incomplete applications may not be funded. Remember to keep a copy of the application and all attachments in your files to help answer questions during the review of your application.

Grant Review Panel: Wednesday, February 15, 2018, 10 a.m. — Subject to change.