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### View Application Data

The data below is from the application you submitted through Grants.gov. It is for review only; this information cannot be edited here. If changes are needed, contact the NEA.

Category

Applicant Organization Name

Organization Address

Organization Address 2

Applicant Organization City

Applicant Organization State

Organization Zipcode

Organization Website

1000 characters remain

Project Start Date



Project End Date



Project Director Prefix Name

Project Director First Name

Project Director Middle Name

Project Director Last Name

Project Director Title

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**Part 1a: Organizational Information**

Please refer to the NEA's website for instructions on how to fill out the Grant Application Form, as well as what items to upload, in "Step 2: Submit Materials to NEA-GO". See here for more information: <https://www.arts.gov/grants-organizations/challenge-america/step-2-submit-through-nea-go>

OMB Number: 3135-0112

Expiration Date: TBD

NOTE: All red asterisked (\*) items on this form are required and must be completed before you will be able to submit the form.

**Legal Name** (per your IRS Determination Letter): \*

**Popular Name** (if different):

**For this application, are you serving as the Parent of an Independent Component:** \*

**Mission of your organization:**

Briefly summarize the mission of your organization. For non-arts organizations (e.g., universities, human service agencies), summarize your mission as it pertains to your cultural programs or services. \*

102 characters to remove

Please enter required value or fix the error.

Briefly summarize the background/history of your organization. \*

2000 characters

**Organization Budget:** Complete this section using figures from completed fiscal years. If you are a parent organization, this information should refer to the component on whose behalf you are applying.

	Most Recently Complete	Previous FY	Two FYs Prior
FY End Date (MM/DD/YY)	12/31/2015	12/31/2014	12/31/2013
Income			
Earned			
Contributed			
TOTAL INCOME			
Expenses			
Artistic Salaries			

Production / Exhibition			\$0
Administrative Expenses			
<b>TOTAL EXPENSES</b>			
Operating Surplus / Def			

ADD ROW FOR CUMULATIVE SURPLUS/DEFICIT

In the space below, discuss the fiscal health of your organization. In addition, you must explain: 1) any changes of 15% or more in either your income or expenses from one year to the next, and 2) plans for reducing any deficit (include the factors that contributed to the deficit and its amount). \*

987 characters remain

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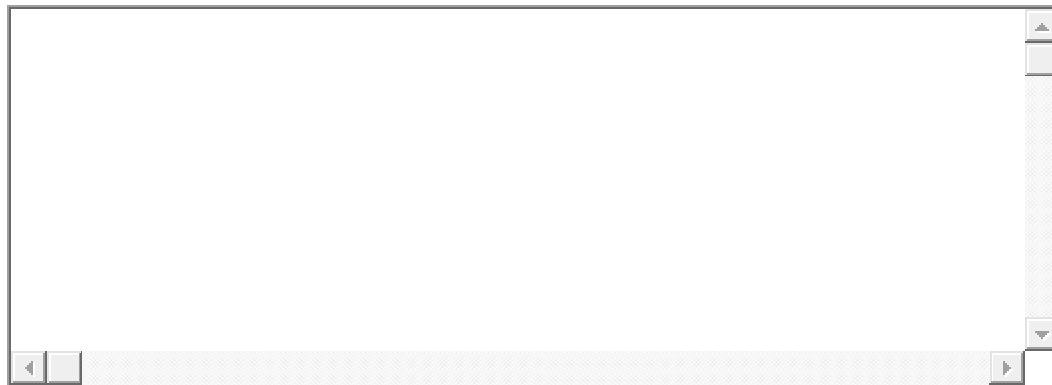
### Part 1b: Programmatic Activities

#### Programmatic Activities

Submit representative examples of your **programmatic activities** for the past three years/seasons (up to 5 examples per year/season). While the headings may not fit in every case, use these spaces to demonstrate what your organization has done for the last three years. Note: You can't change the years/seasons. If you need to provide information for different years/seasons, please note the years you are using in the "Programmatic Activity notes" section below.

These examples should demonstrate eligibility (i.e., your organization's three-year history of programming) and the artistic excellence and merit of your organization. For projects that involve touring, list your organization's touring activities for the past three years/seasons. If you do not have touring information, leave the section blank (i.e., do not type "N/A").

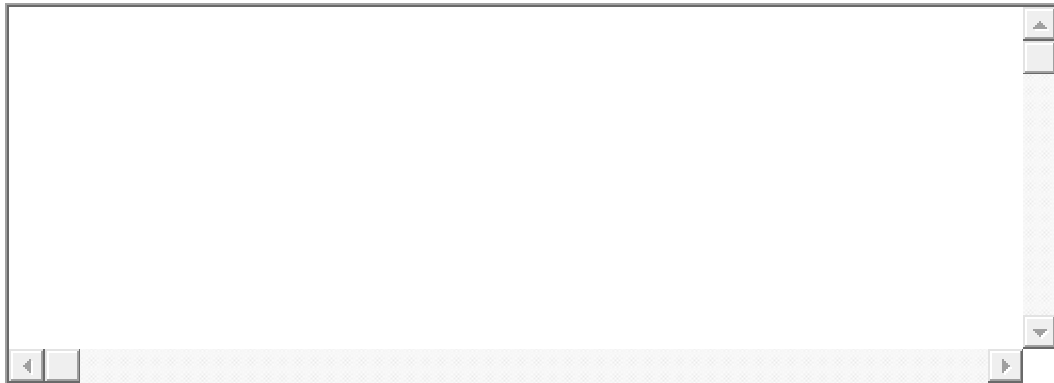
- Year 1   
REQUIRED FIELD
- **Representative examples:** REQUIRED FIELD



(3,500 Character Limit, including spaces)

- 
- Year 2   
REQUIRED FIELD

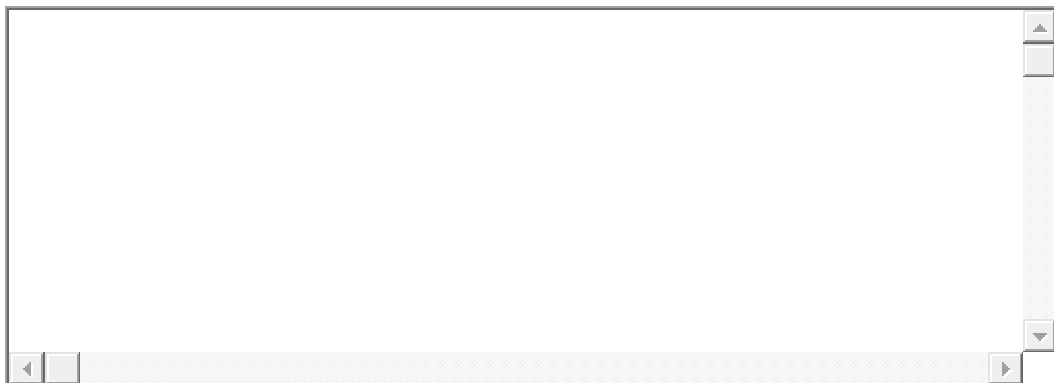
- **Representative examples:** REQUIRED FIELD



(3,500 Character Limit, including spaces)

- **Year 3**  REQUIRED FIELD

- **Representative examples:** REQUIRED FIELD



(3,500 Character Limit, including spaces)

**Programmatic Activity notes:**

Provide any notes about your programmatic activity.

1000 characters remain



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### Part 2: Project Information

**NEA Discipline for Proposed Project:** This refers to the artistic discipline associated with your project, not necessarily your organization as a whole.

MODIFY THEATER & MUSICAL THEATER TO THEATER; ADD MUSICAL THEATER; UPDATE CODES; NOTIFY ITM FOR DATA MANAGEMENT

NEA Grant Category: \*

Who is your Guest Artist? \*

33 characters to remove

Please enter required value or fix the error.

What is the Guest Artist's role in the culminating event? \*

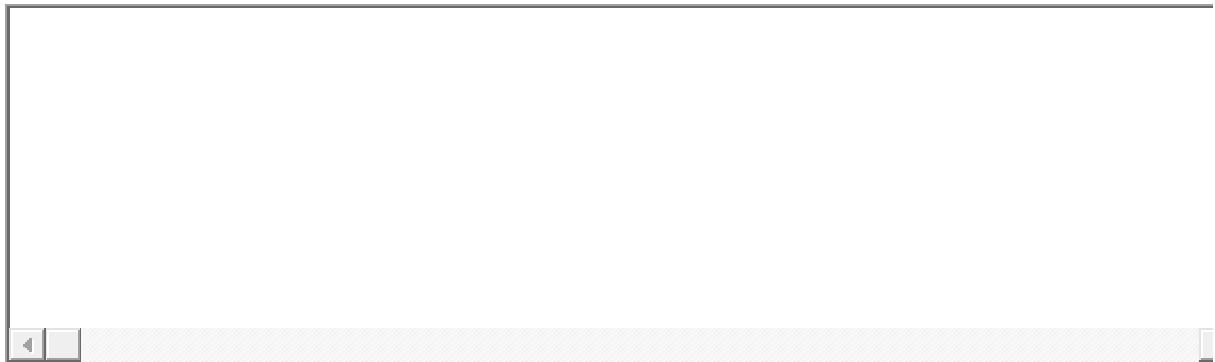
1492 characters remain

**Project Activities**

**Project Title:** If your project title has changed since you submitted your SF-424 through Grants.gov, provide a new project title in the text field below. Text cannot be formatted (e.g., bold, italics). **If you have no changes, leave the text as is. Do not type "N/A" as this will replace the previously submitted project title.**



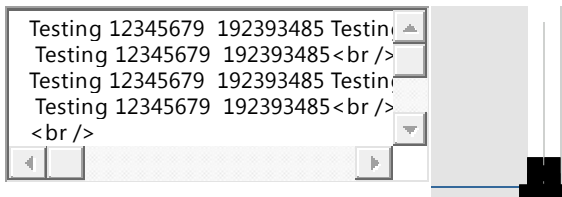
**Project Description:** If your project description has changed since you submitted your SF-424 through Grants.gov, provide a new description in the text field below. Text cannot be formatted (e.g., bold, italics). **If you have no changes, leave the text as is. Do not type "N/A" as this will replace the previously submitted project description.**



980 characters remain


**Major Project Activities:** This serves as the project narrative. Describe the proposed project. Be as thorough and specific as possible about the Challenge America project type you identified above and the activities that will take place during the allowable project period. **Where relevant, include information on any additional public components such as educational or outreach activities associated with the project.** Do not describe unrelated organizational programming. If applicable, identify any works of art that will be central to the project and the reason for their selection.

Please see the "Grant Program Description" for Challenge America (<https://www.arts.gov/grants-organizations/challenge-america/grant-program-description>) to make sure that your project fits within your selected project types: Guest artists, unified promotion, or public art projects. \*



3382 characters remain



A large text input area with a vertical scrollbar on the right and horizontal scrollbars at the top and bottom. The text is currently empty.

985 characters remain

Add more Individuals?

First Name

Last Name (use this field for artistic group names or single names)

Proposed or committed?

Bio including the proposed role in the project

A large text input area with a vertical scrollbar on the right and horizontal scrollbars at the top and bottom. The text is currently empty.

989 characters remain

First Name

Last Name (use this field for artistic group names or single names)

Proposed or committed?

Bio including the proposed role in the project

A large text input area with a vertical scrollbar on the right and horizontal scrollbars at the top and bottom. The text is currently empty.

1000 characters remain

First Name

Last Name (use this field for artistic group names or single names)

Proposed or committed?

Bio including the proposed role in the project

1000 characters remain

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**Selection of Key Organizational Partners:** If your project involves organizational partners, describe the process and criteria for the selection of key organizations. Where relevant, describe their involvement in the development of the project to date. Where they remain to be selected, describe the selection procedures that you plan to follow and the qualifications that you seek. An organizational partner is an outside entity that will provide resources (other than money) to support the project. Because all NEA projects require matching resources from non-federal sources, organizations that only provide money are not considered partners. Funders are not excluded from being partners, but they must also supply human resources or information capital, or actively participate in another way.

1000 characters remain

**Description of Key Organizational Partners:** Include brief, current descriptions of the key organizational partners and their proposed role in the project. You may include up to 10.

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization




500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Add more Organizations?

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



500 characters remain

Organization Name

Proposed or committed?

Description of the Organization



A screenshot of a text input field with a scrollbar on the right side. The field is currently empty. Below the field, the text "500 characters remain" is displayed.

500 characters remain

### Underserved Populations

Identify the specific underserved audience(s) your project is intended to reach. For the Challenge America category, all projects must extend the reach of the arts to one of the four populations. See here for more information <https://www.arts.gov/grants-organizations/challenge-america/grant-program-description> .

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.*

*To select more than one option on Mac, hold down the Command key and select multiple options.)*

 A screenshot of a multi-select dropdown menu. The menu is open, showing three options: "Geography", "Ethnicity", and "Economics". A red asterisk is visible to the left of the "Economics" option.

### Intended Audience/Participants/Community

Who will benefit from the project and how? In your response, address the expected benefit. For the Challenge America category, in your narrative, please describe specifically how your project will extend the reach of the arts to underserved populations as defined by either geography, ethnicity, economics, or disability. \*

 A screenshot of a text input field with a scrollbar on the right side. The field is currently empty. Below the field, the text "1995 characters remain" is displayed.

1995 characters remain

**Schedule of key project dates:** Describe the significant dates in the project. If you include activities that occur before January 1, 2017, indicate by adding an asterisk (\*) and make sure that those activities and costs are not included on the Project Budget form. \*



1499 characters remain

**Promotion & Publicity:** Briefly describe your plans for promoting and/or publicizing the project. \*



999 characters remain

**Performance Measurement:** How will you measure the success of your project? Describe any plans you have for program evaluation, for working collaboratively with researchers, strategic consultants, program evaluators, and/or any other plans for performance measurement related to the project.

Please see "Program Evaluation Resources" (<https://arts.gov/grants-organizations/art-works/program-evaluation-resources>) for additional information. \*



997 characters remain



				\$0
<b>Total Salaries and w</b>				\$ 100,000
<b>Fringe Benefits</b>				
<b>Total fringe benefits</b>	\$0			
<b>Total salaries and fri</b>	\$ 100,000			
<b>2. Direct Costs: Trave</b>				
<b># OF TRAVELERS</b>	<b>FROM</b>	<b>TO</b>	<b>AMOUNT</b>	
1			\$500	
			\$0	
			\$0	
			\$0	
			\$0	





Base:	\$0			
Total Indirect Costs	0			
6. Total Project Costs	\$ 225,500			

**Income**

1. Amount Requested from	\$10,000
2. Total Cost Share/Match	
Cash	Cash Amount
	\$0
	\$0
Refers to the cash donations, grants, and revenues that are expected or received for this project.	
	\$0
	\$0
	\$0
	\$0
Total cash (a):	
In-kind	In-kind Amount
	\$0

		\$0
		\$0
		\$0
		\$0
Total In-Kind (b):		0
Total cost/share match f		
3. Total project income		

The amounts below will populate from what you have entered after clicking Save at the bottom.

Total Project Income MUST equal Total Project Costs.

If they do not equal, you must adjust your figures in your budget above and Save. If you included an Indirect Cost Rate, the figures may not exactly match. In this case, click Save and continue.

Amount Requested from the NEA (1)

Total Cost Share/Match (2a 2b)

TOTAL PROJECT INCOME (3)

TOTAL PROJECT COSTS (4 5)



**Part 4: Items to Upload**

Upload your work samples here.

Reviewers will not review more than 20 minutes of work samples.

Upload files here. DO NOT click the Manage Folders button. Simply click Upload and reorder or edit your files if necessary:

Folder is Empty.

**Folder Name:** CA FY17-CA FY17

**Folder Size:** 0.00 MB

**User Storage:** 120.723MB out of 250MB Used, 129MB Available

Upload requirements	Min #	Max #	Max File Size	Uploaded
Images	0	20	20 MB	
Videos	0	5	250 MB	
Documents	0	20	40 MB	
Audios	0	5	20 MB	

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## Part 5: Organization and Project Profile

The National Endowment for the Arts collects basic descriptive information about all applicants and their projects. The information that follows will help the NEA to comply with government reporting requirements, and will be used to develop statistical information about the organizations and projects it funds to report to Congress and the public. Your responses will not be a factor in the review of your application.

**Applicant Organization Discipline:** Select the primary discipline that is most relevant to your organization and, optionally, up to two additional disciplines. This refers to the primary artistic emphasis of your organization. This selection will not be used in the review of your application. See Part 2: Project Information: NEA Discipline to choose the discipline that you would like to review your project. \*

DISCUSS WITH ORA CHANGING THEATER & MUSICAL THEATER TO MUSICAL THEATER AND THEATER;  
CODING IMPLICATIONS; IF CODING IMPLICATIONS NOTIFY ITM FOR DATA MANAGEMENT

**Applicant Organization Discipline:** Optionally, choose up to two additional disciplines.

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.)*

*(To select more than one option on Mac, hold down the Command key and select multiple options.)*

DISCUSS WITH ORA CHANGING THEATER & MUSICAL THEATER TO MUSICAL THEATER AND THEATER;  
CODING IMPLICATIONS; IF CODING IMPLICATIONS NOTIFY ITM FOR DATA MANAGEMENT

**Applicant Organization Description:** Select the primary description that is most relevant to your organization and,

optionally, up to two additional descriptions. \*

**Applicant Organization Description:** Optionally, choose up to two additional descriptions.

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.)*

*(To select more than one option on Mac, hold down the Command key and select multiple options.)*

Select	▲
Artists' Community, Arts Institute, or Camp	□
Arts Council / Agency	▼

**Project Activity Type:** \*

**Additional Project Activity Type** Optionally, choose up to two additional activity types.

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.)*

*(To select more than one option on Mac, hold down the Command key and select multiple options.)*

Select	▲
Agreement	□
Arts Introduction - Includes lectures, classes and other means to teach knowledge of and/or skills in the arts.	□
Arts and Crafts - Includes media arts, design projects, and commissions.	▼

### Audience/Participants/Communities

If known, select all descriptors that best describe the intended audience/participants/communities that the project aims to reach.

Race/Ethnicity (choose all that apply)

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.)*

*(To select more than one option on Mac, hold down the Command key and select multiple options.)*

- Race/Ethnicity - U.S. federal government agencies must adhere to [standards issued by the Office of Management and Budget \(OMB\)](#) in October 1997, which specify that race and Hispanic origin (also known as ethnicity) are two separate and distinct concepts. These standards generally reflect a social definition of race and ethnicity recognized in this country, and they do not conform to any biological, anthropological, or genetic criteria. Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or the person's ancestors before their arrival in the United States.
  - American Indian or Alaskan Native - A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
  - Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
  - Black or African American - A person having origins in any of the Black racial groups of Africa.

- Hispanic or Latino - People who identify their origin as Hispanic, Latino, or Spanish may be of any race.
- Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

American Indian or Alaskan Native	<input type="checkbox"/>
Asian	<input type="checkbox"/>
Black or African American	<input type="checkbox"/>

Age Ranges (choose all that apply)

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.  
To select more than one option on Mac, hold down the Command key and select multiple options.)*

Children/Youth (0-18 years)	<input type="checkbox"/>
Young Adults (19-24 years)	<input type="checkbox"/>
Adults (25-64 years)	<input type="checkbox"/>

Underserved/Distinct Groups (choose all that apply)

*(To select more than one option on Windows, hold down the CTRL key and select multiple options.  
To select more than one option on Mac, hold down the Command key and select multiple options.)*

Individuals with Disabilities	<input type="checkbox"/>
Individuals in Institutions (include people living in hospitals, hospices, nursing homes, assisted care facilities, correcti	<input type="checkbox"/>
Individuals below the Poverty Line	<input type="checkbox"/>

**Be sure to click Save before clicking Submit.**

**You must click Submit to finalize your application for NEA review.**

Don't forget to hit the "Submit" button when you are ready to submit your application. If you do not hit the "Submit" button, your application will not be received.

After submitting your application, you may log back into NEA-GO and make modifications to your submission up until the system closes on the day of the deadline. Remember to hit the "Save" and "Submit" button again prior to the deadline.

You will receive confirmation of your successful submission in two ways: 1) a pop up on your screen, and 2) an email from noreply@culturegrants.org. Maintain documentation of your successful submission (take a screenshot and/or keep the email). If you modify your application after you submit, you will not receive additional confirmations.

You also can confirm that your application was received when you log in to NEA-GO. On the first screen it will say "Received" if your application has been received. If your application has not yet been received, it will say "In Progress."