

GAF

PLEASE DO NOT WORRY ABOUT FORMATTING AT THIS POINT -- IT'S JUST TO HAVE THE GAF QUESTIONS TO WORK WITH

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 ot@arts.gov.

- Applicant Organization Name

- Organization Address

- Organization Address 2

- Applicant Organization City

- Applicant Organization State

- Organization Zipcode

- Organization Website

- Project Title

- **Project Description**

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- **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 1: Organizational Information

- See here for additional instructions:
 - For Arts Engagement, Cultural Planning, and Design Projects:
<http://arts.gov/sites/default/files/fy16-gaf-instructions-arts-engagement-planning-design.pdf>
 - For Projects that Build Knowledge About Creative Placemaking:
<http://arts.gov/sites/default/files/fy16-gaf-instructions-knowledge-building.pdf>
- OMB Number: 3135-0112
Expiration Date: 11/30/2016
- NOTE: All red asterisked (*) items on this form are required and must be completed before you will be able to submit the form.
- **Applicant Legal Name** (per your IRS Determination Letter): *
- **Applicant Popular Name (if different):**
- **Date organization was incorporated (if applicable):** 
- **Applicant Organization Status:** Select the one item that best describes the legal status of the organization *

- • **Mission/purpose of your organization:** Briefly summarize the mission and purpose of your organization. For non-arts organizations (e.g., universities, human service agencies), summarize your mission as it pertains to your creative placemaking activities. *

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- **Organization Budget:** Complete this section using figures from completed fiscal years. In the case of a local government, limit this information to the department or office that will oversee the proposed project.

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	Most Recently Comple	Previous FY	Two FYs Prior
FY End Date (MM/DD)	12/31/14	12/31/13	12/31/12
Income			
Earned	\$ 100,000	\$ 100,000	\$ 95,000
Contributed	\$ 50,000	\$ 75,000	\$ 50,000
TOTAL INCOME	\$ 150,000	\$ 175,000	\$ 145,000
Expenses			
Artistic Salaries	\$ 50,000	\$ 40,000	\$ 25,000
Production / Exhibitor	\$ 10,000	\$ 7,500	\$ 5,000
Administrative Expen	\$ 200,000	\$ 150,000	\$ 125,000
TOTAL EXPENSES	\$ 260,000	\$ 197,500	\$ 155,000
Operating Surplus / D	(\$ 110,000)	(\$ 22,500)	(\$ 10,000)

- 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). *

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93 characters remain

- **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.)*

- **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. *

- • **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.)*

- **Primary Partner Legal Name** (per your IRS Determination Letter) *

- **Primary Partner Popular Name (if different)**

- **Primary Partner's Taxpayer ID Number** (9-digit number) *

- **Date organization was incorporated (if applicable)** 

- **Primary Partner Organization Status:** Select the one item that best describes the legal status of the organization *

- • **Mission/purpose of partner organization:** Briefly summarize the mission and purpose of your primary partner's organization. For non-arts organizations (e.g., universities, human service agencies), summarize your mission as it pertains to creative placemaking activities.

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1 characters remain

- **Primary Partner Proposed Role:**

Briefly describe your primary partner organization's involvement in planning and executing the project including programming, management, finances, and any responsibilities for matching the National Endowment for the Arts grant. Be specific; do not provide a general statement of support for the project.

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1 characters remain

- **Primary Partner Organization Description:** Select the primary description that is most relevant to your primary partner's organization and, optionally, up to two additional descriptions. *

- • **Primary Partner 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.)

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- **Primary Partner Organization Discipline:** Select the primary discipline that is most relevant to your primary partner's organization and, optionally, up to two additional disciplines. This refers to the primary artistic emphasis of your primary partner's organization. This selection will not be used in the review of your application. *

- • **Primary Partner 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.)

Part 2a: Project Information

- **NEA Project Activity Category**
- Our Town Project Area: *

- • Our Town Project Type: *
- • **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.)

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- **Project Background and Context**

See here for additional instructions:

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1500 characters remain

- **Major Project Activities:** Be as specific as possible about the activities that will take place during the allowable project period. Where relevant, include information on any educational component or outreach activities of the project. Do not describe organizational programming unrelated to the proposed project.

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1015 characters remain

- **Schedule of key project dates:** Costs incurred prior to the earliest allowable start date (August 1, 2017) cannot be included in the project budget. If you include activities that occur before the earliest allowable start date, make sure you note that those activities and costs are not included on the Project Budget form. *

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1428 characters remain

- **Accessibility:** Explain how you will make your project accessible to individuals with disabilities in compliance with federal law and regulations through access accommodations for both facilities and programs, such as audio description, sign-language interpretation, closed or open captioning, large-print brochures/labeling, etc. See the Nondiscrimination Statutes in "Assurance of Compliance" for more information <http://arts.gov/grants-organizations/our-town/award-administration>. (For technical assistance on how to make your project fully accessible, contact the Arts Endowment's Accessibility Office at accessibility@arts.gov, 202/682-5532, or the Civil Rights Office at 202/682-5454 or 202/682-5082 Voice/T.T.Y.) *

977 characters remain

Part 2b: Project Objectives

- **Livability Narrative:** Briefly discuss how your project will affect Livability: Strengthening communities through the arts.

See here for additional instructions:

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<http://arts.gov/sites/default/files/fy16-gaf-instructions-knowledge-building.pdf>

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- 125 characters remain

- **Performance Measurement:** Briefly describe the performance measurements you will use to provide evidence that the Livability objective was achieved, including plans for documenting and disseminating the project results, as appropriate. If applicable, include the metrics or indicators that you will use to identify and evaluate the project's short-term and long-term impact on your community's livability.

See the "Measuring Project Results" page on Exploring Our Town for help determining successful measurements for your project: <http://arts.gov/exploring-our-town/project-process/measuring-project-results>. *

- 74 characters remain

- **Intended Beneficiaries (Audience/Participants/Community):** Briefly describe the target community to whom the project is directed. In your response, address the expected benefit. *

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13 characters remain

- Have the intended beneficiaries been consulted in the development of this project? *
- • **Community Engagement:** Describe substantive and meaningful engagement with the target community in the development of the shared vision for your project and its implementation. Describe past engagement or experience in working with the target community, as well as your plans for engaging the community moving forward.

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2000 characters remain

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Is this project intended to reach a population historically underserved by arts programming and/or does the project target a specific audience based on characteristics such as race, ethnicity, or age? *

- • From the options below, select all descriptors that best describe the intended audience and/or other beneficiaries to whom the project is directed.
- **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.

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• **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.)

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• **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.)

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• Describe how the project will benefit the underserved community.

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47 characters remain

• **Population for your Town/City/Tribal Land:**

Part 2c: Project Locations

Provide the city, state, and five-digit zip code in which project activities are expected to occur. For international locations, provide the city, country, and enter "00000". You may submit individual locations using the webform. To upload multiple locations at once, consider using the multiple location spreadsheet upload option. You may submit up to 100 locations.

If you enter a location that can't be validated, you will receive an option to "Save Anyway." Choose this and continue with your application.

Once entered (either one at a time or by using the spreadsheet upload option) you will be able to review your entries on the bottom of this page, and make revisions. You can make changes in an entry or move to another entry by clicking the Edit button for that entry.

Add project locations one at a time

City *

State *

Zip Code *

Upload project locations from a spreadsheet



Use the project location template to list your projects and upload a single spreadsheet. The system will validate whether the data is in the correct format. For a smooth upload process, please abide to the formatting for each data type. [» Download the project location template](#)

Part 3: Project Budget

Flip so Expenses fields come before Income fields

Edit field title TOTAL MATCH to TOTAL COST SHARE/MATCH

- Budget descriptor fields with more than 100 characters will be truncated when reviewed by panelists.

See here for additional instructions:

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- **Income**

1. Amount Requested	\$ 150,000
2. Total Match for this	
Cash	Cash Amount
Other grants	\$ 75,000
donations	\$ 25,000
tickets	\$ 15,000
other	\$ 25,000

Total cash (a):	\$ 140,000
In-kind	In-kind Amount
supplies	\$ 5,000
photographer	\$ 5,000
Total In-Kind (b):	\$ 10,000
Total match for this pr	\$ 150,000
3. Total project incom	\$ 300,000

- Expenses

Total Salaries and w				\$ 55,000
Fringe Benefits				
Total fringe benefits (
Total salaries and fr	\$ 55,000			
2. Direct Costs: Trav				
# OF TRAVELERS	FROM	TO	AMOUNT	
2	Here	There	\$ 2,500	
2	There	Here	\$ 2,500	
1	Here	Back Again	\$ 1,000	

6. Total Project Costs				
Must equal Total Project Income (3. From Income budget table above)	\$ 300,000.00			

- **The amounts below will populate from what you have entered after clicking Save at the bottom.** If you included an Indirect Cost Rate, the figures may not exactly match. In this case, click Save and continue.

Total Project Income MUST equal Total Project Costs.

If they do not equal, you must adjust your figures in your budget above and Save.

- Amount Requested from the NEA (1)
- Total Match (2a 2b)
- TOTAL PROJECT INCOME (3)
- TOTAL PROJECT COSTS (4 5)

Part 4a: Project Participants - Individuals

- **Selection of Key Individuals:** Briefly describe the process and criteria for the selection of key staff, consultants, advisors, artists, designers – anyone who will be a key contributor to the success of your proposed project, regardless of their organizational affiliation -- that will be involved in this project . Where relevant, describe their involvement in the development of the project to date. Where they remain to be selected, describe the procedures that you plan to follow and the qualifications that you seek. *

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- 19 characters remain

- **Bios of Key Individuals:** Include brief, current biographies of the key individuals. You may include up to 10.

- First Name

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

- Title

- Project Role

- Proposed or committed?

- • Bio

Part 4b: Project Participants - Organizations

- **Other Organizational Partners:** 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-NEA 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. If applicable, briefly describe the process and criteria for the selection of key organizations that will be involved in the project. 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.

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- 18 characters remain

• **Description of Other Organizational Partners:** Include brief, current descriptions of the key organizational partners. You may include up to 10.

- Organization Name
- Proposed or committed?
- • Organization Type
- • Description of the Organization Role in Proposed Project

6 characters remain

Part 4c: Project Participants - Works of Art

- **Selection and Description of Key Works of Art:**

See here for additional instructions:

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Part 5a: Programmatic Activities

- **Lead Applicant 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. This section must show the eligibility of the Lead Applicant; however, if applicable you may also show activities undertaken by the Primary Partner as well.

FIELDS BELOW ARE REPEATED FOR THREE YEARS, FIVE EXAMPLES PER YEAR

- **Year/Season**

- **Title/Work/Program**

200 characters remain

• **Key Artists/Personnel**



200 characters remain

• **Location**

• # of classes, performances, exhibitions, residencies, etc.

• # of participants or audience

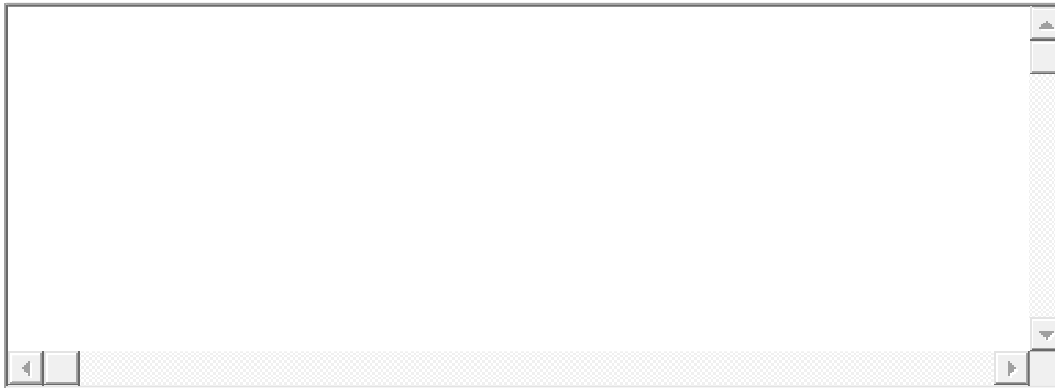
• **Fees (was Touring Info. on other GAFs)**



200 characters remain

Programmatic Activity notes:

Provide any notes about your programmatic activity.



1000 characters remain

Part 5b: Items to Upload

- Upload your work samples and statements of support here.

See here for additional instructions:

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-
- Panelists 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.

-
- **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.

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."