Attachment A: Instruments

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Instrument 1. Review Panelist Survey

The National Endowment for the Arts (NEA) is conducting an evaluation of ArtsHERE to better understand the project activities supported through this program and how grantees approached the work. The evaluation will result in a summary of lessons learned that will be shared with other arts funders, organizations, and cultural practitioners seeking to do similar work. Additionally, the evaluation will inform the implementation of the ArtsHERE program.

The purpose of this voluntary survey is to hear from you about your perspectives, understanding, and experience with the ArtsHERE panel review process. The information and feedback you provide will generate information and learning that can be used by ArtsHERE funders (Regional Arts Organizations and the NEA) to assess progress toward the program's goals and inform the replication and scale-up of effective ArtsHERE practices and components.

These data will be made available to the program Evaluator and will not be shared with the NEA, South Arts, and RAOs except as described below. Information collected for evaluation purposes, including individual information deemed sensitive in nature, is considered confidential and will remain anonymous and private to the extent permitted by law. When results of the ArtsHERE evaluation are shared with the public via reports, presentations, and other materials, these results will only be shared in aggregate form (percentages, means, summaries) to protect the identity of participants. Any subject-identifiable information (including names, contact information, etc.) will not be released without a participant's explicit permission. The Evaluator may ask to identify a participant to attribute direct quotes or case studies to it in reports, presentations, or other materials, and the participant may choose to remain anonymous.

Your responses in this survey will not impact your current or future awards from the NEA or its partners. You will not receive any compensation for responding to the survey. You may decline to answer any question you wish. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XX/XXX.

We realize how limited your time is; the survey should take an average of 20 minutes to complete.

If you have any questions, please contact Dr. Patricia Moore Shaffer, lead for the evaluation, at shafferp@arts.gov.

Instructions: Please complete the following information about your experience as an ArtsHERE panel reviewer.

Demographics/Panelist Backgrounds

| 1. | Did you participate as a volunteer screener conducting independent review of Part 1 applications for ArtsHERE (i.e. Statement of Interest)? |
|----|---|
| | ☐ Yes |
| | □ No |

| 2. | For which Regional Arts Organization did you serve as an ArtsHERE peer panel reviewer? Please select from the drop-down list. |
|----|--|
| | ☐ Arts Midwest ☐ Mid-America Arts Alliance ☐ Mid Atlantic Arts ☐ New England Foundation for the Arts ☐ South Arts ☐ Western States Arts Federation |
| 3. | Have you or an organization you represent been awarded a grant from an ArtsHERE funder (Regional Arts Organizations and/or the National Endowment for the Arts) in the past 5 to 10 years? |
| | ☐ Yes ☐ No |
| 4. | What sector(s) do you most closely associate your background and experience with? Please select all that are relevant. |
| | □ Arts and cultural sector □ Child development □ Child welfare system □ Community center or multi-use nonresidential facility where people meet for social, educational, and/or recreational activities. □ Education □ Economic/business development □ Faith-based organizations □ Family services □ Health □ Housing □ Military support □ Rehabilitation, treatment, and recovery services/programs (substance abuse) □ Re-entry programs/Justice (juvenile, adult) □ Senior services □ Youth services □ Other (please describe): |
| | a. Please select the category that best describes your affiliation: Please select all that are relevant. □ Government |
| | □ Non-profit with 501(c)(3) status □ Federally recognized tribe □ Non-federally recognized tribe with 501(c)(3) |

| | | ☐ For-profit organization |
|----|-------|---|
| | | □ Self-employed |
| | | \square Other, please specify: (open comment box) |
| 5. | - | ur first time serving on a review panel for a program of any ArtsHERE funders (Regional anizations and/or the National Endowment for the Arts)? |
| | ☐ Yes | |
| | □ No | |
| | a. | If no, please estimate of the number of ArtsHERE funder review panels you have served on |
| | | in the past: |
| | | ☐ 1-3 other panels |
| | | ☐ 4 or more |
| | b. | [if relevant] To what extent, if any, has your experience on the ArtsHERE review panel |
| | | differed from your prior experience(s)? |
| Da | | and the Antoliene David Davidson Duranes |

Perspectives on the ArtsHERE Panel Review Process

6. Panelist Orientation Process. Please provide your perspectives on the panel review process. Indicate your level of agreement with the following statements.

| Statement: | Strongly agree | Agree | Neither Agree nor Disagree | Disagree | Strongly disagree |
|---|----------------|-------|-------------------------------|----------|----------------------|
| The orientation clearly communicated | | | | | |
| panel expectations. | | | | | |
| I was adequately oriented to the goals of | | | | | |
| ArtsHERE. | | | | | |
| The panelist training handbook provided | | | | | |
| helpful information on the review process | | | | | |
| and was easy to use. | | | | | |
| The GO Smart Grants Management System | | | | | |
| training prepared me to effectively use the | | | | | |
| platform to access the necessary | | | | | |
| documentation for my reviews. | | | | | |
| My questions about ArtsHERE and the | | | | | |
| panel process were adequately addressed. | | | | | |
| After the orientation, I felt confident in my | | | | | |
| understanding of how to apply criteria to | | | | | |
| applications. | | | | | |
| After the orientation I had a clear | | | | | |
| understanding of the scoring rubric. | | | | | |

6a. Please provide any additional feedback you have on the <u>orientation provided to you.</u>

7. Satisfaction. Please rate your level of satisfaction with the following indicators of your experience as a panelist.

| Indicator: | Very satisfied | Satisfied | Neutral | Unsatisfied | Very Unsatisfied |
|--|-------------------|-----------|---------|-------------|---------------------|
| Pacing and flow of panel review process | | | | | |
| Number of applications you were assigned | | | | | |
| to review | | | | | |
| Robustness and relevance of material | | | | | |
| received to review and score applications | | | | | |
| Quality of ArtsHERE applications | | | | | |
| Stipend amount relevant to time and effort | | | | | |
| needed to complete reviews | | | | | |
| Quality of reviews by other panelists | | | | | |
| RAO facilitation of the panel discussions | | | | | |
| Overall level of reviewer participation in | | | | | |
| the panel discussions | | | | | |
| Extent to which my perspectives were | | | | | |
| valued | | | | | |
| Processes for addressing differences in | | | | | |
| opinions among panelists | | | | | |
| Level of consensus among panelists | | | | | |
| Fairness of final panel ratings | | | | | |
| Overall review process | | | | | |

[if respondent indicated neutral to very unsatisfied in the table above, they will receive the following prompt(s)]: **Please briefly expand on your rating of [statement].**

Overall Reflections (narrative responses)

- 8. What worked well with the panel review process?
- 9. Please provide suggestions for improving the panel review process.

Additional Feedback

10. Is there anything else you would like to share about your experience as a panelist for ArtsHERE?

Instrument 2. Grantee Baseline Survey

The National Endowment for the Arts (NEA) is conducting an evaluation of ArtsHERE. The evaluation aims to understand the project activities supported through this program and how grantees approach the work. As part of the evaluation, this survey is being administered to all ArtsHERE grantees upon acceptance of a grant award.

As an ArtsHERE grantee organization, your participation in this survey is required. This survey expands on information collected during the application process about ArtsHERE awarded organizations' characteristics and capacities, community(ies) needs and priorities, and program and community demographics prior to implementation of an ArtsHERE capacity-building project. Your responses will inform the development of learning and information services tailored to meet the specific needs and interests of ArtsHERE-awarded organizations, particularly those historically underfunded cultural organizations.

These data will be made available to the program evaluator and will not be shared with the NEA, South Arts, and RAOs except as described below. Information collected for evaluation purposes, including individual information deemed sensitive in nature, is considered confidential and will remain anonymous and private to the extent permitted by law. When results of the ArtsHERE evaluation are shared with the public via reports, presentations, and other materials, these results will only be shared in aggregate form (percentages, means, summaries) to protect the identity of participants. Any subject-identifiable information (including names, contact information, etc.) will not be released without a participant's explicit permission. The Evaluator may ask to identify a participant to attribute direct quotes or case studies to it in reports, presentations, or other materials, and the participant may choose to remain anonymous.

Reporting on grant activities, including annual progress and final reports, and completing forms or surveys intended to collect information or feedback that can inform ArtsHERE services will be required of all grantees. Your responses in this survey will not impact your current or future awards from the NEA or its partners. You will not receive any compensation for responding to the survey. You may decline to answer any question you wish. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XX/XXX.

We realize how limited your time is; the survey should take an average of 30 minutes to complete.

If you have any questions, please contact Dr. Patricia Moore Shaffer, lead for the evaluation, at shafferp@arts.gov.

Instructions: Please complete the following questions about your organization. Your organization will submit one survey, but responses should reflect input from the core group of individuals involved in planning and implementing your ArtsHERE capacity-building project.

Your Organization and Environment

- 1. Grant award number [open text box]
- 2. What are the primary "sectors" of focus for your organization? (check all that apply)

| | ☐ Arts and cultural sector |
|----|--|
| | ☐ Child development |
| | ☐ Child welfare system |
| | Community center or multi-use nonresidential facility where people meet for social, educational, and/or recreational activities |
| | ☐ Education |
| | ☐ Economic/business development |
| | ☐ Faith-based organizations |
| | ☐ Family services |
| | ☐ Health |
| | ☐ Housing |
| | ☐ Military support |
| | \square Rehabilitation, treatment, and recovery services/programs (substance abuse) |
| | ☐ Re-entry programs/Justice (juvenile, adult) |
| | ☐ Senior services |
| | ☐ Youth services |
| | ☐ Other (please describe): |
| 3. | What is the primary artistic discipline(s) of your program (i.e. your standard programming)? (check all that apply) |
| | ☐ Artist Communities (residencies that provide dedicated space, time, and resources to artists for the creation or development of new work) |
| | ☐ Arts Education |
| | ☐ Dance |
| | ☐ Design |
| | ☐ Folk & Traditional Arts |
| | ☐ Literary Arts |
| | ☐ Local Arts Agencies |
| | ☐ Media Arts |
| | ☐ Museums |
| | ☐ Music |
| | ☐ Musical Theater |
| | □ Opera |
| | Presenting & Multidisciplinary Works (presenting works from across disciplines, multidisciplinary works, and/or interdisciplinary artists) |
| | ☐ Theater |
| | ☐ Visual Arts |
| | ☐ Other (please describe): |
| 4. | What are your organization's primary service delivery models for arts and cultural programming? (check all that apply) |

| | ☐ Ongoing class/other ongoing engagement (e.g., meets regularly for a distinct period) ☐ Ongoing drop-in program (e.g., an open studio where participation may vary) ☐ Single event (e.g., workshop or exhibition individuals participate in one time) ☐ Participant exhibitions or performances of their work ☐ Participants attend performances or exhibitions as viewers ☐ Other (please describe): |
|-----|---|
| 5. | What is your organization's primary method for offering arts and cultural programming? (Select one) |
| | □ In-person only. Refers to arts experiences that occur 100% in-person and do NOT have an online component. □ Virtual only. Refers to arts experiences that occur 100% online. □ Both in-person and virtual (i.e., hybrid). Refers to arts experiences that have both virtual |
| | and in-person components. |
| 6. | Has the number of staff, volunteers, and board members that are part of your organization changed since the submission of your full ArtsHERE application? (Select one) |
| | □ Yes |
| | □ No |
| [Sk | cip Logic: Only show if YES to Q5] |
| | 5a. What staffing changes has/is your organization facing? (please select all that apply) |
| | \square Loss of executive director and/or founder |
| | ☐ New executive director or interim director hired |
| | ☐ Loss of board chair |
| | □ New board chair |
| | ☐ Significant board turnover (50% or more) |
| | ☐ Significant staff turnover (50% or more) |
| | ☐ Significant volunteer turnover (50% or more) |
| | ☐ Other (please describe) |
| | 5b. Please let us know how many staff, volunteers, and board members are a part of your organization at this time. (Provide a count of number of individuals for each category specified below) |
| | # full-time staff |
| | # run-time staff # part-time staff |
| | # full-time volunteers |
| | # part-time volunteers |
| | # board members |
| | |

7. Please use this comment box to clarify or describe any staffing, volunteer, and/or board structure trends that may need additional explanation. (Example: how many people hold

multiple positions such as staff/volunteer, volunteer/board member, etc.?) (Open Comment Box)

- 8. What aspects of your organization's current staffing and/or board structure work well? Consider in your response: (Open Comment Box)
 - a. What has helped your staffing and/or board structure to be successful in these areas?
 - b. How, if at all, do you envision ArtsHERE will support your staffing and board structure to be successful?
- 8. What, if any, aspects of your organization's current staffing and/or board structure are not working as well as you would like? Consider in your response: (Open Comment Box)
 - a. What organizational capacities, resources, and/or tools might be needed to support staffing and board structures at your organization?

| 9. | Which types of financial support does your organization receive? (Check all that apply) |
|----|---|
| | ☐ Federal |
| | ☐ State |
| | □ Local |
| | ☐ Corporate donations or sponsorships |
| | ☐ Other [please specify] |
| 10 | What financial or fundraising support pools have you identified if any 2 (Open Comment Day) |

- **10.** What financial or fundraising support needs have you identified, if any? (Open Comment Box)
 - a. What have been some of your fundraising strengths?
- 11. What accomplishments or milestones would your organization like to achieve with its capacity building project? Consider in your response: (Open Comment Box)
 - a. Ideally, where do you hope to be as an organization relevant to staffing, board, budget, operations, or other capacities?
- 12. What, if any, barriers or challenges to building organizational capacity has your organization experienced in the past, and/or might it anticipate during the period of performance for ArtsHERE? Consider in your response: (Open Comment Box)
 - a. How, if at all, do you envision your participation in ArtsHERE informing strategies, capacities, and/or resources to address these barriers and challenges?

About Your Community

13. How would you describe the participation trends of your organization's arts and cultural programs and services among underserved groups/communities in the most recent fiscal year? Please respond based on your organization's fiscal year. (please select one)

| (The term "underserved" refers to those whose opportunities to experience the arts are |
|--|
| limited relative to: geography, race/ethnicity, economics, or disability.) |
| ☐ Our participation numbers among underserved groups/communities are growing |
| \square Our participation numbers among underserved groups/communities are stable |
| ☐ We're seeing a mix (some events are up and some are down) |

| | We're seeing a decline in participation among underserved groups/communities. Don't know |
|--------------|--|
| | are your community's needs that your organization has worked to address? Consider in esponse: (Open Comment Box) |
| a. | How were these needs identified? |
| | strategies, practices, and/or programs are working well to engage underserved unities? Consider in your response: (Open comment box) |
| a. | What supports the success of these strategies, practices, and/or programs (i.e., organizational strengths, resources, tools and/or community strengths)? |
| | strategies, practices, and/or programs would you like to improve to better engage served communities? (Open comment box) |
| a. | Please consider in your response any challenges your organization has experienced relevant to sustaining or increasing participation in programs by underserved communities. |
| | o you envision your ArtsHERE capacity-building project supporting your organization's to meaningfully engage underserved communities? (Open comment box) |
| a. | Please consider in your response any types of support you need to sustain and/or improve your community engagement efforts. |
| About Your N | etworks and Partnerships |
| 18. What s | sectors do your organization's key partners belong to? (check all that apply) |
| □ A | arts and cultural sector |
| | Child development |
| | Child welfare system |
| | Community center or multi-use nonresidential center facility where people meet for social, educational, and/or recreational activities. |
| □ E | ducation |
| □ E | conomic/business development |
| □ F | aith-based organizations |
| □ F | amily services |
| | lealth |
| | lousing |
| | Ailitary support |
| | ehabilitation, treatment, and recovery services/programs (substance abuse) |
| | e-entry programs/Justice (juvenile, adult) |
| | enior services |
| | outh services |
| | Other (please describe): |

| 0 0 | , | Open Comme | ne boxy | |
|-----|---|------------|---------|--|
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19. What partnership opportunities would further your organization's capacity to sustain

Instrument 3. Annual Progress Report

characters maximum)

OMB No. XXXX-XXXX. Date Approved xxxx. Expires XX/XX/XXX

| 1. | What type of capacity-building project was supported at your organization through ArtsHERE? This may or may not have changed from your original application. Please select all that apply from the drop-down menu. (multi-select checkbox) | | | | | | |
|----|--|--|--|--|--|--|--|
| | | Organizational needs assessment and/or equity planning assessments Strategic planning or logic model development and/or implementation Staff development or leadership training (such as cultural competency training for staff | | | | | |
| | | d/or those who develop and implement programming) | | | | | |
| | | Stakeholder- and/or community-engagement activities | | | | | |
| | cor | □ Field-based or community research that will help organizations to better document their commitment to equity as evidenced by their practices and programming and their relationship within communities □ Promotional and marketing activities □ Translation services to allow individuals with Limited English Proficiency (LEP) to participate in programmatic activities | | | | | |
| | □- | | | | | | |
| | | Other capacity-building activities [please specify]: (500 aracters maximum) | | | | | |
| 2. | | describe the capacity building project activities supported by ArtsHERE that your ration has completed in the past 12 months. (Open comment box) (3,300 characters um) | | | | | |
| | In your | response, please consider the following prompt to inform your reflection: | | | | | |
| | a. | How, if at all, did these project activities relate to the arts or cultural programs and services already offered by your organization to underserved groups/communities? | | | | | |
| 3. | | if any, success(es) has your organization had with its capacity-building project in the painths? (Open comment box) (3,300 characters maximum) | | | | | |
| 4. | | be any challenge(s) that your organization encountered with its capacity-building grant st 12 months. (Open comment box) (3,300 characters maximum) | | | | | |
| | In your | response, please consider the following prompts to inform your reflection: | | | | | |
| | a. | How, if at all, did your organization address these challenges? | | | | | |
| | b. | How, if at all, did the challenge(s) influence your organization's ability to conduct your capacity-building project as planned? | | | | | |

5. How, if at all, has your organization's participation in ArtsHERE **strengthened and/or sustained** its arts and cultural programs and services in the past 12 months? (Open comment box) (3,300

In your response, please consider the following prompts to inform your reflection:

0

- a. Describe <u>who participated</u> in your organization's arts or cultural programs and services. What, if any, relationship does your capacity-building project have with community engagement in arts/cultural experiences?
- b. How has participation in ArtsHERE informed any strategies your organization uses to increase equitable access to the arts for underserved groups/communities?
- c. How, if at all, has the participation of underserved groups/communities in your organization's arts and cultural programs and services changed over the past 12 months as a result of ArtsHERE?
- 6. How, if at all, have your experiences and learning in ArtsHERE **informed your activities or priorities** for the upcoming year? (Open comment box) (3,300 characters maximum)

PAPERWORK REDUCTION ACT STATEMENT

The public reporting burden for this collection of information is estimated at an average of two hours per response. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. We welcome any suggestions that you might have on improving the guidelines and making them as easy to use as possible. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: research@arts.gov, Attention: Reporting Burden. Note: Applicants/awardees are not required to respond to the collection of information unless it displays a currently valid U.S. Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XX/XXX.

Instrument 4. Grantee Learning Opportunities Quarterly Survey

The National Endowment for the Arts is conducting an evaluation of ArtsHERE to better understand the project activities supported through this program and how grantees approached the work. As part of the evaluation, this required quarterly survey is an opportunity to learn about your organization's experiences with ArtsHERE learning opportunities.

The term "learning opportunities" refers to any type of topic-based workshop, one-on-one coaching, or consultation with ArtsHERE coaches, and peer cohort convenings provided to increase the knowledge, skills, connections, and/or capacity of grantee organizations to work toward their project and organizational goals.

As an ArtsHERE grantee organization, your participation in this quarterly survey is required. Your organization's feedback will be used to help ArtsHERE funders (Regional Arts Organizations and the NEA) better respond to grantees' needs and improve the ArtsHERE program.

These data will be made available to the program Evaluator and will not be shared with the NEA, South Arts, and RAOs except as described below. Information collected for evaluation purposes, including individual information deemed sensitive in nature, is considered confidential and will remain anonymous and private to the extent permitted by law. When results of the ArtsHERE evaluation are shared with the public via reports, presentations, and other materials, these results will only be shared in aggregate form (percentages, means, summaries) to protect the identity of participants. Any subject-identifiable information (including names, contact information, etc.) will not be released without a participant's explicit permission. The Evaluator may ask to identify a participant to attribute direct quotes or case studies to it in reports, presentations, or other materials, and the participant may choose to remain anonymous.

Reporting on grant activities, including annual progress and final reports, and completing forms or surveys intended to collect information or feedback that can inform ArtsHERE services will be required of all grantees. **Your responses in this survey** will not impact your current or future awards from the NEA or its partners. You will not receive any compensation for responding to the survey. You may decline to answer any question you wish. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XX/XXX.

We realize how limited your time is; the survey should take an average of 15 minutes to complete.

If you have any questions, please contact Dr. Patricia Moore Shaffer, lead for the evaluation, at shafferp@arts.gov.

Instructions: Please complete the following information about the ArtsHERE learning opportunities you have received in the past 3 months.

Learning Opportunity Participation

[Text box to appear at the top of each survey page that reads: "Learning opportunities" include monthly cohort sessions, one-on-one meetings with your assigned coach, and workshops with topic-based experts.]

- **1.** Grant award number: [Text box]
- 2. [ONLY IF grantee received learning opportunities in the past three months- evaluation contractor will provide a pre-filled summary of service types and topics from organizational tracking data. Text to read: "Please indicate the type(s) and topic(s) of learning opportunity activities you participated in during the past three months"]

Based on our records in the past three months (between [start date] and [end date], your organization participated in learning opportunities in the following areas: Please confirm whether you participated in the following learning opportunities.

| | \square Yes, my organization participated in this activity. |
|----|--|
| | \square No, my organization did not participate in this activity. |
| b. | [Type/topic of learning opportunity to be pre-filled based on provider data] |
| | \square Yes, my organization participated in this activity. |
| | \square No, my organization did not participate in this activity. |
| c. | [Type/topic of learning opportunity to be pre-filled based on provider data] |
| | \square Yes, my organization participated in this activity. |
| | \square No, my organization did not participate in this activity. |
| | If No, [if none of the above are accurate], Please indicate the type(s) and topic(s) of learning opportunity activities you participated in during the past three months: |
| | □ Topic based workshop If checked, list the topic(s): [open box] □ One-on-One with workshop facilitator If checked, list the topic(s): [open box] □ One-on-one consultation with coach If checked, list the topic(s): [open box] □ Cohort Meeting |
| d. | Did your organization participate in any other learning opportunities supported through ArtsHERE not specified? |
| | ☐ Yes ○ If yes, please specify type and topic of learning opportunities received: [open box] ☐ No ○ If no, please specify type and topic of learning opportunities received: [open box] |

| 3. | records in t | rantee did NOT receive learning opportunities in the past three months] Based on our the past three months (between [start date] and [end date]), your organization did not rning opportunities. Is this accurate? |
|----|------------------------|--|
| | □ Yes ∘ | If yes, please provide additional information regarding why your organization did not receive learning opportunities: [open box] |
| | □ No ○ [If no is | If no, please specify type and topic of learning opportunities received: [open box] is selected, skip to Question 11 and end survey there] |

Perspectives on Learning Opportunity Activities in the Past Three Months

Learning opportunities include monthly cohort sessions, one-on-one meetings with your assigned coach, and workshops with topic-based experts.

[Q4-Q8 will only be asked if respondent indicated that they received organizational services in Q1-Q3 above] Please provide your perspective on all the learning opportunities supported through ArtsHERE you participated in the past three months by indicating your level of agreement with the following statements.

4. Relevance

| Statement: | Strongl y agree | Agree | Neither Agree nor Disagree | Disagree | Strongly disagree |
|---|--------------------|-------|----------------------------------|----------|----------------------|
| Overall, the learning opportunities I received in the past three months met the needs of my organization (e.g., applicability of services and/or topics addressed to my interests, services align with project's and/or community's context, and overall usefulness). | | | | | |

4.a. Please provide any additional feedback you have on the <u>relevance of learning opportunities</u> you participated in over the past three months. [Open comment box]

5. Engagement

| Strongly | Agree | Neither Agree nor Disagree | Disagree | Strongly disagree |
|----------|-------|----------------------------------|----------------|----------------------|
| | | | | |
| | • • | 0, | gree Agree nor | gree Agree nor |

5.a. Please provide any additional feedback you have about how <u>engaging</u> the learning opportunities you received during the past three months were for you: [Open comment box]

6. Quality/Satisfaction

| Statement | Strongl | Agre | Neither Agree | Disagree | strongly |
|---|---------|------|---------------|----------|----------|
| Statement | y agree | е | nor Disagree | | disagree |
| Overall, I was satisfied with the quality | | | | | |
| of the learning opportunities (e.g., | | | | | |
| services are timely, clear, present | | | | | |
| information in an effective manner). | | | | | |

6.a. Please provide any additional feedback you have on the <u>quality</u> of learning opportunities you participated in over the past three months: [Open comment box]

7. Responsiveness of Coach/Facilitator

| Statement | Not responsi | Somewhat responsive | Neutral | Responsiv e | Highly respons |
|---|--------------|---------------------|---------|----------------|----------------|
| | ve | | | | ive |
| Please rate how responsive your coach | | | | | |
| and/or facilitator(s) were to your needs | | | | | |
| over the past three months (e.g., | | | | | |
| coach/facilitator engaged in active | | | | | |
| listening, acknowledged and was | | | | | |
| sensitive to the project's needs and | | | | | |
| interests; was open to addressing | | | | | |
| topics requested by the project; and | | | | | |
| was aware of the project's unique | | | | | |
| organizational and/or community | | | | | |
| context): | | | | | |
| ArtsHERE Coach (as applicable): [pre- | | | | | |
| filled text about which organization | | | | | |
| provided coaching will be piped here] | | | | | |
| Topic-based workshop facilitator (as | | | | | |
| applicable): [pre-filled text about which | | | | | |
| organization led the workshop will be | | | | | |
| piped here] | | | | | |
| Other service provider, specify: [open | | | | | |
| text box] | | | | | |

7.a. Please provide any additional feedback you have on the <u>responsiveness</u> of your learning opportunities coach and/or workshop facilitator(s) over the past three months: [Open comment box]

8. Effectiveness of Learning Opportunities by Type

| Statement | Extremely | Very | Moderately | Slightly | Not at all | N/A; Did |
|-----------|-----------|-----------|------------|-----------|------------|----------|
| | effective | effective | effective | effective | effective | not use |

| What best describes the | | | |
|------------------------------------|--|--|--|
| effectiveness of each of the | | | |
| following (e.g., did services meet | | | |
| their intended | | | |
| objectives/purpose, producing the | | | |
| intended result)? | | | |
| Monthly cohort convening with | | | |
| your coach | | | |
| Individual session(s) with your | | | |
| coach | | | |
| Topic based workshop with a | | | |
| facilitator | | | |
| Optional 1:1 with workshop | | | |
| facilitator | | | |

8.a. Please provide any additional feedback you have on the effectiveness of learning opportunities you participated in over the past three months: [Open comment box]

Overall Reflections (Narrative)

Learning opportunities include monthly cohort sessions, one-on-one meetings with your assigned coach, and workshops with topic-based experts.

| 9. | | here ways the learning opportunities in which you participated over the past three months be improved? |
|----|------------|---|
| | □ Yes ∘ | If yes, please describe how the learning opportunities could have been improved. [Open comments box] |
| | □ No | |
| 10 | | other types of learning opportunities would you find valuable for enhancing your knowledge, connections, or capacity? [Open comments box] |

- 11. What, if any, additional feedback would you like to share about the learning opportunities and support you received in the past three months? [Open comments box]

Instrument 5. Learning Opportunities Tracker

The National Endowment for the Arts (NEA) is conducting an evaluation of ArtsHERE to better understand the project activities supported through this program and how grantees approached the work. As part of the evaluation, this tracking form will be used to provide information to ArtsHERE funders (Regional Arts Organizations and the NEA) about the learning opportunities and organizational services provided to ArtsHERE grantees on an ongoing basis. The evaluator will also share a summary of findings about grantees and providers' experiences with learning opportunities with providers on an ongoing basis.

<u>This form is required and should be completed within 48 hours of every learning opportunity session</u> <u>you hold with an ArtsHERE grantee.</u> The term "learning opportunities" refers to any type of topic-based workshop, one-on-one coaching or consultations, and peer cohort convenings provided to increase the knowledge, skills, connections, and/or capacity of grantee organizations to work toward their own project and organizational goals.

These data will be made available to the program Evaluator and will not be shared with the NEA, South Arts, and RAOs except as described below. Information collected for evaluation purposes, including individual information deemed sensitive in nature, is considered confidential and will remain anonymous and private to the extent permitted by law. When results of the ArtsHERE evaluation are shared with the public via reports, presentations, and other materials, these results will only be shared in aggregate form (percentages, means, summaries) to protect the identity of participants. Any subject-identifiable information (including names, contact information, etc.) will not be released without a participant's explicit permission. The Evaluator may ask to identify a participant to attribute direct quotes or case studies to it in reports, presentations, or other materials, and the participant may choose to remain anonymous.

Your responses in this form will not impact your current or future awards from the NEA or its partners. You will not receive any compensation for responding to the survey. You may decline to answer any question you wish. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XX/XXX.

We realize how limited your time is; the form should take an average of 10 minutes to complete per entry.

If you have any questions about completing this form or how the information will be used, please contact Dr. Patricia Moore Shaffer, lead for the evaluation, at shafferp@arts.gov.

Instructions: Please complete this form within 48 hours from the ArtsHERE learning opportunity session you recently provided. Enter a single learning session/interaction at a time (one per form).

Provider Information

Summary of Service Provided

| 1. | Type of | ^f Learning | Opportunity | Provided | (Select o | ne) |
|----|---------|-----------------------|-------------|----------|-----------|-----|
|----|---------|-----------------------|-------------|----------|-----------|-----|

☐ Topic-based expert workshop (quarterly)

| | ☐ Workshop facilitator one-on-one meeting with grantee (optional for grantees, as provided) |
|--------|---|
| | ☐ One-on-one coaching or consultation (monthly) |
| | ☐ Cohort sessions (monthly) |
| | ☐ Other, specify: |
| | |
| worksh | gic: Q3 and Q3a will only show for one-on-one coaching/consultation and one-on-ones with op facilitator service entries (i.e., selected in Q1).] [Note that MAAA will provide the evaluator gistration and participation rates for workshops and convenings.] |
| 2. | Date of Service for the learning opportunity provided (please use MM/DD/YYYY format in your response). |
| | • [Open box] |
| 3. | ArtsHERE grantee organizations that participated in this $\underline{coaching/consultation\ session}$ (Select one) |
| | ☐ List of all grantees [organized by region for ease of navigating] ☐ Other, please specify: |
| | . [Number of participants in this <u>coaching/consultation session</u> (please enter whole number in se fields, or enter "don't know" if you did not track the number of participants) |
| | # Board members: [Open box] # Paid staff: [Open box] #Volunteer staff: [Open box] #Other volunteers (non-staff, non-paid): [Open box] #Others: [Open box] |
| end sk | ip logic] |
| 4. | How many total hours of <u>direct service</u> were provided on the date of service? (please enter to the closest 30-minute increment, e.g., 1.5 hours, 2 hours) • [Open box] |
| 5. | <u>Primary mode</u> of communication for this learning session (select one) |
| | ☐ Conference Call (voice only) |
| | ☐ Videoconference call (audio/video) |
| | ☐ In-Person meeting |
| | ☐ Hybrid meeting |
| | ☐ Other, specify: |
| 6. | Primary topic area of learning opportunity offered (select one) |
| | ☐ Finance |
| | ☐ Fundraising |
| | ☐ Governance |

| | ☐ Community Engagement |
|--------------|---|
| | ☐ Other, Specify |
| 7a. | . Were any other topic area(s) addressed during the learning opportunity offered (Y/N) |
| | ☐ No, move on to Q8 |
| | ☐ Yes, [follow-up question pops up] |
| | What other topics were addressed? (check all that apply)[|
| | ☐ Finance |
| | ☐ Fundraising |
| | ☐ Governance |
| | ☐ Community Engagement |
| | ☐ Other, Specify |
| Overall S | Service Description |
| 7. F | Please provide a brief summary of the learning opportunity session provided, including: |
| | Purpose and/or objectives for the session. |
| | What were you trying to achieve? |
| | What did the session entail (e.g., discussion, materials used, etc.)? (open comment) |
| Overall S | Service Reflections |
| | How successful was the learning opportunity session? Please rate your level of agreement |
| | with the statement below. |
| 1 | The session I provided was: |
| | ☐ Very successful |
| | ☐ Successful |
| | ☐ Somewhat successful |
| | ☐ Not at all successful |
| 9. \ | What factors contributed to the session's level of success? (open comment) |
| 10. I | s there anything you would want to either repeat or do differently for future sessions? (open |
| C | comment) |
| Next Ste | ps (optional) |
| V | n what ways, if any, are you noticing—as a result of the session—changes in your behavior, values, ways of thinking, experience of power and relational dynamics, and/or expectations as you provide learning opportunities? (open comment) |
| 12. <i>A</i> | As a result of this learning opportunity session, what are the next action steps for you, if any? |

(open comment)

13. As a result of this learning opportunity session, what are the next action steps for grantee organization participants? (open comment)

Anything else (optional)

15. Is there anything else you would like to share about your experience providing this learning opportunity session? (open comment)

Instrument 6. Learning Logs

The National Endowment for the Arts (NEA) is conducting an evaluation of ArtsHERE to better understand the project activities supported through this program. As part of the evaluation, this voluntary learning log will provide important feedback about key lessons learned throughout the implementation of ArtsHERE from the perspective of the ArtsHERE planning group (the NEA, South Arts, Regional Arts Organizations (RAOs), and evaluation contractors) for the purposes of program improvement.

Your responses will be shared anonymously on a secure shared workspace accessible to other members of the ArtsHERE planning group. Information collected in the learning logs is not to be distributed outside of the planning group. Responses provided through this form will inform follow-up discussions with the planning group.

These data will be made available to the program Evaluator and will not be shared with the NEA, South Arts, and RAOs except as described above. Information collected for evaluation purposes, including individual information deemed sensitive in nature, is considered confidential and will remain anonymous and private to the extent permitted by law. Your responses in this log will not impact your current or future awards from the NEA or its partners. You will not receive any compensation for responding to the log. You may decline to answer any question you wish. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XX/XXX.

Learning logs will be administered at various time points throughout ArtsHERE implementation and will cover four topics. We realize how limited your time is; the log should take an average of 30 minutes to complete.

If you have any questions about completing this form or how the information will be used, please contact Dr. Patricia Moore Shaffer, NEA lead for the evaluation, at shafferp@arts.gov.

Log Date: May 2024 Instructions: Learning log questions are designed to prompt thoughtful reflection and capture valuable insights into your experiences and lessons learned throughout the planning and implementation of ArtsHERE. Please fill out this learning log based on what you recently learned regarding the panel/selection process. 1. What <u>went well</u> regarding the **panel/selection process**? 2. What *challenges or obstacles* are you experiencing or observing in the implementation of ArtsHERE regarding the panel/selection process? 3. What strategies or approaches do you recommend to <u>address any challenges</u> regarding the panel/selection process? 4. What insights are you learning from the panel/selection process that could guide future work for NEA and RAOs?

Learning Log Topic 1: ArtsHERE panel/selection process

Learning Log Topic 2: ArtsHERE application and award data Log Date: June 2024 Instructions: Learning log questions are designed to prompt thoughtful reflection and capture valuable insights into your experiences and lessons learned throughout the planning and implementation of ArtsHERE. Please fill out this learning log based on what you recently learned regarding the summary of application and award data. 1. What went well regarding the summary of application and award data? 2. What *challenges or obstacles* are you experiencing or observing in the implementation of ArtsHERE regarding the summary of application and award data? 3. What strategies or approaches do you recommend to address any challenges faced regarding the summary of application and award data? 4. What insights are you learning from the summary of application and award data that could guide future work for NEA and RAOs?

Learning Log Topic 3: Grantee Learning Opportunities Quarterly Survey Results

Log Date: Every 3 months from January 2025 through January 2026

Instructions: Learning log questions are designed to prompt thoughtful reflection and capture valuable insights into your experiences and lessons learned throughout the planning and implementation of ArtsHERE. Please fill out this learning log based on what you learned from the information that has recently been shared with you regarding recent Grantee Learning Opportunities Quarterly Survey results. The term "learning opportunities" refers to any type of topic-based workshop, one-on-one coaching or consultations, and peer cohort convenings provided to increase the knowledge, skills, connections, and/or capacity of grantee organizations to work toward their own project and organizational goals.

| 1. | What <u>is going well</u> regarding to learning opportunities ? |
|----|---|
| | |
| | |
| | |
| 2. | What <u>challenges or obstacles</u> are you experiencing or observing in the implementation of ArtsHERE regarding learning opportunities ? |
| | |
| | |
| | |
| 3. | What strategies or approaches do you recommend to <u>address any challenges</u> regarding learning opportunities ? |
| | |
| | |
| | |
| 4. | What insights are you learning from the most recent Grantee Learning Opportunities Survey results that could guide future work for NEA and RAOs? |
| | |
| | |
| | |

Learning Log Topic 4: Grantee Annual Progress Report Data Log Date: December 2025 Instructions: Learning log questions are designed to prompt thoughtful reflection and capture valuable insights into your experiences and lessons learned throughout the planning and implementation of ArtsHERE. Please fill out this learning log based on what you recently learned regarding the summary of **Annual Progress Report data.** 1. What <u>is going well</u> regarding the **summary of Annual Progress Report data**? 2. What challenges or obstacles are you experiencing or observing in the implementation of ArtsHERE regarding the summary of Annual Progress Report data? 3. What strategies or approaches do you recommend to address any challenges regarding the summary of Annual Progress Report data? 4. What insights are you learning from the summary of Annual Progress Report data that could

guide future work for NEA and RAOs?

Instrument 7. Final Descriptive Report

OMB No. xxxx-xxxx. Date Approved xxxx. Expires xx/xx/xxxx

PART I: Project Narrative

In this section, please respond to each narrative question in the text fields provided below. You may cut and paste the answer into the form from another document, but please limit your response to the posted character limits. As you exit each text field, it will expand to show your entered text.

Within your narrative, please discuss the activities funded by your organization's ArtsHERE grant. Include any relevant web links to copies of programs, relevant news clippings, or other evidence of your accomplishments, including evidence of your acknowledgement of National Endowment for the Arts (NEA) and Regional Arts Organization (RAO) support.

| 1. | What type of capacity-building project was supported at your organization through ArtsHERE? This may or may not have changed from your original application. Please select all that apply. (multi-select checkbox) |
|----|---|
| | ☐ Organizational needs assessment and/or equity planning assessments |
| | ☐ Strategic planning or logic model development and/or implementation |
| | ☐ Staff development or leadership training (such as cultural competency training for staff and/or those who develop and implement programming) |
| | ☐ Stakeholder and community engagement activities |
| | ☐ Field or community research that will help organizations to better document their |
| | commitment to equity as evidenced within their practices and programming and relationship with their communities |
| | ☐ Promotion and marketing activities |
| | ☐ Translation services to allow individuals with Limited English Proficiency (LEP) to participate in programmatic activities |
| | ☐ Other capacity-building activities [please specify]: (500 characters) |
| 2. | Describe the capacity-building project activities that were supported by ArtsHERE. Please report solely on activities funded by your organization's ArtsHERE grant. These activities must be consistent with your organization's final application narrative, the approved project budget, and any approved amendments in accordance with your grantee agreement document. (3,300 characters maximum) |
| 3. | Did the project encounter any challenges that disrupted or otherwise hindered your organization's ability to conduct the project as planned? (Yes/No check box) |
| | □ Yes □ No |
| | If yes, then please describe the challenge(s) and how you addressed them. (2,000 character limit) |
| | |

| 4. | Has ArtsHERE, including your participation in learning opportunities (i.e., e.g., monthly cohorts, one-on-one coaching, facilitated workshops), in any way strengthened and/or supported progress towards your organization's mission and goals? | | |
|----|---|---|--|
| | ☐ Yes | | |
| | □ Uns | ure – please describe: (3,300 characters maximum) | |
| | a. | How, if at all, has your organization's participation in ArtsHERE informed its strategies to sustain or increase equitable access to arts and cultural programs and services for underserved groups/communities? (3,300 characters maximum) | |
| 5. | | t extent has your organization increased engagement with underserved /communities as a result of ArtsHERE? | |
| | ☐ To so☐ To a | at all small extent ome extent moderate extent large extent | |
| | a. | [If respondent selected "to some extent", "to a moderate extent", or "to a large extent" only] How, if at all, has the participation of underserved groups/communities in your organization's arts and cultural programs and services changed as a result of ArtsHERE? Please consider practices that relate to organizational capacity building and/or community engagement in arts and cultural programs in your response. (3,300 characters maximum) | |
| 6. | 5. Please describe any improvements to existing practices and programs or new practices and programs implemented with the support of ArtsHERE that your organization intends to continu after the grant period. Please consider practices that relate to organizational capacity building and/or community engagement in arts and cultural programs in your response. (3,300 charact maximum) | | |
| 7. | What early indications of change, if any, could your organization see by the end of your grant project? Select one or more of these early indications of change from the list below and briefly explain your selection(s) in the text box that follows. If none of these early indications are visible, please select "none." | | |
| | | eased overall organizational capacities due to participation in learning opportunities uired better or stronger connections between my organization and peers throughout the | |
| | strateg | roved cultural strategies that engage communities my organization serves (cultural ies may include ways in which your programs or services are centered in cultural es, traditions, and identities). | |
| | \Box Gained deeper understanding of the different ways that communities my organization serves engage in the arts and cultural practice | | |

| $\hfill\square$ Strengthened my organization's capacity to sustain or increase engagement with underserved |
|---|
| communities |
| ☐ Accomplished or made significant progress toward self-identified goals from the beginning of |
| the grant period |
| ☐ Other – please describe: (500 characters maximum) |
| □ None |

- a. Please explain your selection(s). Include any reflections on the degree and type of capacity change as well as any data or information that demonstrates the early indications of change identified above. (5,000 characters maximum)
- 8. Did any of your relationships with these key partners or others expand during the ArtsHERE performance period? If so, with whom and in what ways? (3,300 characters maximum)

Part II: Population Descriptors

Questions in this section are **for research purposes only**; your response will not be used in panel deliberations or in making funding decisions related to grant awards you may apply for in the future.

For the next section, please select all racial/ethnic groups of **people that your project intended to serve** directly. Then answer the follow-up questions.

9. Select all the racial/ethnic groups of people that your organization makes intentional efforts to engage. Select all that apply and enter additional details in the spaces below.

| Racial/Ethnic Groups | |
|----------------------|--|
| | No specific Racial/Ethnic Group |
| | American Indian or Alaska Native – Enter, for example, Navajo Nation, |
| | Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native |
| | Village of Barrow Inupiat Traditional Government, Nome Eskimo |
| | Community, Aztec, Maya, etc. |
| | (open comment box) (500 characters maximum) |
| | Asian – Provide details below |
| | ☐ Chinese |
| | □ Vietnamese |
| | ☐ Asian Indian |
| | ☐ Korean |
| | ☐ Filipino |
| | □ Japanese |
| | Enter, for example, Pakistani, Hmong, Afghan, etc. |
| | (open comment box) (500 characters maximum) |
| | Black or African American – <i>Provide details below</i> |
| | ☐ African American |
| | □ Nigerian |
| | □ Jamaican |
| | ☐ Ethiopian |
| | ☐ Haitian |
| | ☐ Somali |

| Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, |
|--|
| etc. |
| (open comment box) (500 characters maximum) |
| Hispanic or Latino – Provide details below |
| ☐ Mexican |
| ☐ Cuban |
| ☐ Puerto Rican |
| ☐ Dominican |
| ☐ Salvadorian |
| ☐ Guatemalan |
| Enter, for example, Colombian, Honduran, Spaniard, etc. |
| (open comment box) (500 characters maximum) |
| Middle Eastern or North African – <i>Provide details below</i> |
| ☐ Lebanese |
| ☐ Syrian |
| ☐ Iranian |
| □ Iraqi |
| ☐ Egyptian |
| □ Israeli |
| Enter, for example, Moroccan, Yemeni, Kurdish, etc. |
| (open comment box) (500 characters maximum) |
| Native Hawaiian or other Pacific Islander – <i>Provide details below</i> |
| ☐ Native Hawaiian |
| ☐ Tongan |
| ☐ Samoan |
| ☐ Fijian |
| ☐ Chamorro |
| ☐ Marshallese |
| Enter, for example, Chuukese, Palauan, Tahitian, etc. |
| (open comment box) (500 characters maximum) |
| White – Provide details below |
| □ English |
| □ Italian |
| German |
| □ Polish |
| ☐ Irish |
| □ Scottish |
| Enter, for example, French, Swedish, Norwegian, etc. |
| (open comment box) (500 characters maximum) |

10. Select all the age groups of people that your organization makes intentional efforts to engage.

| Age Groups | |
|------------|-----------------------|
| | No specific age group |

| Children/youth (0-17 years) |
|-----------------------------|
| Young adults (18-24 years) |
| Adults (25-64 years) |
| Older Adults (65+ years) |

11. When thinking about the underserved groups/communities your organization engages, please select the factors that limit their opportunities to benefit from arts programming. Check all that apply.

| Underserved Groups/Communities | |
|--------------------------------|--|
| | Geography |
| | Economic Status |
| | Race or Ethnicity |
| | Disability |
| | Other limiting factor/s. Please describe: (Text boxes - 100) |

12. Please select all the factors below that have limited opportunities for underserved groups/communities to benefit from arts programming in your project. Check all that apply.

| Limiting Facto | Limiting Factors | |
|----------------|---|--|
| | Access and representation: Barriers to accessing arts programming due to | |
| | geographical location, economic constraints, or lack of representation within the arts | |
| | sector. Limited access to arts institutions, museums, theaters, and galleries. | |
| | Financial barriers: Cost associated with participating in arts programming. | |
| | Cultural relevance: Arts programming that does not resonate with the cultural | |
| | backgrounds and experiences of underrepresented communities. Lack of | |
| | representation of diverse voices, stories, and art forms. | |
| | Educational disparities: Disparities in arts educational opportunities for | |
| | underrepresented communities. Limited resources for arts education. | |
| | Systemic discrimination: Discrimination and bias within the arts sector for individuals | |
| | from underrepresented communities, including limited opportunities for employment, | |
| | exhibition, and recognition. Structural inequities within funding mechanisms, hiring | |
| | practices, and artistic programming. | |
| | Language and communication: Language barriers; lack of materials and | |
| | communications are provided in languages spoken by the community. | |
| | Transportation and infrastructure: Limited access for individuals to physically access | |
| | arts venues and events. | |
| | Other limiting factor/s. Please describe: (1,000 characters maximum) | |

PAPERWORK REDUCTION ACT STATEMENT

The public reporting burden for this collection of information is estimated at an average of two and a half hours per response. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. We welcome any suggestions that you might have on improving the guidelines and making them as easy to use as possible. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: research@arts.gov, Attention: Reporting Burden. Note: Applicants/awardees are not required to respond to the collection of information unless it displays a currently valid U.S. Office of Management and Budget (OMB) control number. The OMB control number for this survey is OMB No. 3135-XXXX, which expires XX/XXX/XXX.