**NEWPORT BEACH CITY ARTS COMMISSION**

**2023 CULTURAL ARTS GRANT APPLICATION**

**(Applications must be typed or word-processed- you may reformat on the computer as long as it appears the same: i.e. use Times New Roman 12 point and the same pagination.)**

Popular Name of Organization

Legal Name (if different) Federal Tax ID No.

Mailing Address

City Zip

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact Name Telephone

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FAX E-mail Web Site

Geographical Area Served

Have you received a City of Newport Beach Cultural Arts Grant before? \_\_\_\_ If so, when? \_\_\_\_\_\_\_\_

Year organization was founded Number of paid staff **\_\_\_\_\_** # of active volunteers **\_\_\_ \_\_\_**

**Total amount requested:** (from request line of project budget) **$ \_\_\_\_\_\_\_\_\_**

**Estimated number of people in Newport Beach that the proposed project(s) will serve: \_\_\_\_\_\_\_**

**CULTURAL ARTS GRANT APPLICATION**

1. Briefly describe below your organization’s purpose, mission, and goals.

2. Identify and describe why there is a need **in the Newport Beach Community** for your proposed project/program. Include a quantitative description of the need and on what you based your findings (i.e. “Based on a study done by the PTA, there are one hundred children in the 4th-6th grades at Newport Elementary who have had no training with musical instruments.” ) Describe how you have determined that your organization is the *best* organization for the proposed project/program.

3. Describe the specific project/program that will be funded by a cultural grant. Include how the proposed project/program will be implemented and outline a schedule or project timeline, with planned dates and locations. Identify individuals and groups involved, particularly artists and performers, and describe their roles and responsibilities. Describe the background and qualifications of your organization and key personnel to be involved in the program. *Remember: the City funds only projects and programs- not operating expenses. These projects and programs must promote community involvement and awareness of the arts in Newport Beach.*

 Is this a new**\_\_\_\_\_** or existing **\_\_\_ \_** project/program?

1. Define or describe the segment of the population in Newport Beach that you intend to serve by your

 project/program. Include such things as age, location, numbers served, etc.

1. Complete the project budget form. Address *only the budget for the specific project*, not your annual operating budget. For multi-project proposals, please duplicate and fill out a budget for each project. Please annotate the budget at the bottom if there are details (such as a breakdown of personnel or a marketing budget) critical to the proposal.

|  |  |  |
| --- | --- | --- |
| **PROJECT BUDGET** | **Funding from the City of Newport Beach** | **Funding from Other Sources** |
| **EXPENSES-Personnel** |  |  |
| Artistic  |  |  |
| Administrative  |  |  |
| Technical Production  |  |  |
| **EXPENSES-Operating** |  |  |
| Facility Expense/Space Rental |  |  |
| Marketing |  |  |
| Production/Exhibition Expense |  |  |
| Touring/Presentation Expense |  |  |
| Educational Materials |  |  |
| Transportation |  |  |
| Equipment |  |  |
| Other (if greater than 10%, annotate below) |  |  |
| **GRAND TOTAL** |  |

6. Describe the expected **quantifiable** outcomes of your project/program and how you will evaluate the

 results. Be very specific in addressing the ways that you will determine that your project/program met

 the needs that you identified and accomplishes the goals you set out to achieve (i.e. you provide 50

 hours of musical instruction and instruments to the 100 children at Newport Elementary school as

 measured by music store rental receipts and logs of instructors.)

7. Attachments Requested

 ***Please do not send material in excess of what is requested; it will not be seen by the City Arts Commission***.

1. A list of Board Members and their affiliations
2. A recent list of individuals, corporations and foundations that provide organizational support- not to exceed one page.
3. If you are a 501(c) (3) organization attach a copy of your IRS determination letter (or your fiscal agent’s) indicating tax exempt status.
4. **One** brochure and/or **one** press clipping. Do not send photos, videos, CDs or any other extraneous material. It will not be presented to the City Arts Commission.

8. Please complete this operating budget form for 2023 and 2024. This is not the

 project/program budget for which you are applying, but your overall organizational budget.

 You may annotate at the bottom if there are details critical to the proposal.

**OPERATING BUDGET**

|  |  |  |
| --- | --- | --- |
|  | **2023 Budget (current)** | **2024** **Budget (projected)** |
| **I. Income (cash only)** |  |  |
| Contributed |  |  |
| Earned |  |  |
| **Total Income** |  |  |
|  |  |  |
| **II. Expenses** |  |  |
|  Program |  |  |
| General and Administrative |  |  |
| Marketing and Development |  |  |
| **Total Expenses** |  |  |
|  |  |  |
| **III. Operating Surplus/Deficit**(Income minus Expenses) |  |  |
| **IV. Fund Balance at Beginning of Year** |  |  |
| **V. Accumulated Surplus (Deficit)**(Add lines III and IV) |  |  |
|  |  |  |
| **VI. In-Kind Contributions** (attach schedule if greater than 10% of total income) |  |  |

9. I verify that the information submitted in this application is true and correct to the best of my

 knowledge.

 Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_