

# 2025 AIP Eligibility



Which of the following are you?

- A 501c3 or Model A Fiscally Sponsored Arts Organization
- A Community Impact Arts Grant (CIAG) Grantee
- Neither of the above

501c3 and Model A Fiscally Sponsored Arts Organizations must meet all of the following eligibility requirements:

- Are you a performing, presenting, film, media, arts service or literary arts organization?
  - Yes
  - No
- Have you possessed 501(c)(3) tax-exempt status as defined by the IRS for at least two years?
  - Yes
  - No
- Do you have principal offices in the County of Los Angeles?
  - Yes
  - No
- Is your primary mission to provide arts programming or services in the County of Los Angeles?
  - Yes
  - No
- Do you have a functioning board of directors that meets regularly with at least 51% of members residing in California?
  - Yes
  - No
- Have you been in existence for at least two consecutive years and have you produced during that period no less than four public performances or programs each fiscal year?
  - Yes
  - No
- Do you comply with all applicable federal, state and local laws and ordinances, including but not limited to those which bar discrimination on the basis of race, color, religion, national origin, ancestry, sex, age, condition of physical or mental disability or marital status or political affiliation?
  - Yes
  - No
- Do you comply with Fair Labor Standards and pay professional performers, artist and supporting personnel at least the minimum level of compensation paid to people employed in similar activities?
  - Yes
  - No
- Are you a part of a college or university?
  - Yes
  - No
- Are you a museum or a visual arts organization?
  - Yes
  - No



CIAG Grantees must meet all of the following eligibility requirements:

- Were you AWARDED a Community Impact Arts Grant (CIAG) between July 1, 2016 and September 30, 2024?
  - Yes
  - No
- Do you CURRENTLY engage in arts programming, and can you propose an intern project rooted in arts programming?
  - Yes
  - No
- Have you successfully completed all CIAG requirements (reports, invoicing, etc) to date?
  - Yes
  - No



Municipality eligibility requirements:

- Are you a local arts agency OR municipal performing arts organization that serves as an agency of city government, officially designated by local government to provide programs, services, and/or financial services to a variety of arts organizations, individual artists and the community as a whole?
  - Yes
  - No

# 2025 Arts Internship Applicant Information

## Organization Account Info

Any prepopulated information seen below is being generated from your SMAApply account. Please verify the information below is current and up to date.

Organization Legal Name \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_0 }})  
Popular Name or DBA (if different from legal name) \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_1 }})  
Main Address 1 \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_4 }})  
Main Address 2 \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_5 }})  
City \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_6 }})  
State \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_7 }})  
Zip Code \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_8 }})  
Main Phone \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_10 }})  
Main Email \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_11 }})  
Website (include https://) \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_12 }})


## Primary Organizational Contact


Primary Organizational Contact Name: \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_13 }})  
Primary Organizational Contact Title: \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_14 }})  
Primary Organizational Contact Phone: \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_15 }})  
Primary Organizational Contact Email: \_\_\_\_\_ ({{ elig.var\_\_720956\_\_T2Odetcfav\_16 }})

## 1. Primary Application Contact (person to whom to direct questions about the application within the organization):

Enter contact information for the individual at your organization responsible for managing this grant agreement. **Grant notifications, requests for site visits (if applicable) and application follow-up will be sent to this email address. Note: Do not provide generic phone numbers or email addresses. This contact information will be used, in many cases, for important and time sensitive information. If any of this contact information changes after the application is submitted, please contact [internship@arts.lacounty.gov](mailto:internship@arts.lacounty.gov). Applicants are responsible for updating new address and contact information.**

Primary Application Contact Name: \_\_\_\_\_  
Primary Application Contact Title: \_\_\_\_\_  
Primary Application Contact Phone: \_\_\_\_\_  
Primary Application Contact Email: \_\_\_\_\_


 **Please verify that your answers to questions 2 and 3 below are correct. It is very important that you answer these questions accurately as your responses will change certain sections of the application.**

 2. Is the applicant a **current (FY 23/24 or 24/25)** Organizational Grant Program (OGP) or **current (FY 24/25)** Community Impact Arts (CIAG) recipient?

- Yes  
 No

 3. Was the organization awarded intern(s) in the 2024 Arts Internship Program?

- Yes  
 No

 4. Organization Budget Size:

Enter your budget size for the last completed fiscal year. The Department of Arts and Culture defines budget size as cash revenue - less income received that is dedicated to a cash reserve, endowment and/or capital project - for the most recently completed fiscal year for which the organization possesses a submitted Federal Form 990. This number must be the same or close to the organization's budget size in the most recently submitted Federal Form 990 (total revenue, line 120 for a tax year ending on or after December 31, 2022). Do not include in-kind support when calculating the organization's budget size.

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 5. Organizational Discipline (Arts Organizations ONLY)


If you are a nonprofit or municipal arts organization (NOT a CIAG grantee), please select your organization's primary artistic discipline from the list below. **Please note that visual arts organizations are not eligible for this program and should apply instead to The Getty Foundation's Marrow Undergraduate Internship Grant Program. \***

- Arts Education
- Arts Service Organization
- Dance
- Literary
- Media Arts
- Multidisciplinary
- Music - Choral/Opera
- Music - Instrumental
- Presenting
- Theatre
- Traditional and Folk Art

 6. Programmatic Artistic Discipline (CIAG Grantees ONLY)

If you are a CIAG grantee, please select the primary artistic discipline reflected through your organization's arts programming.


- Arts Education
- Crafts
- Dance
- Design Arts
- Folklife/Traditional Arts
- Humanities
- Literature
- Media Arts
- Multidisciplinary
- Music
- Opera/Musical Theatre
- Photography
- Presenting
- Theatre
- Visual Arts

 7. Please enter your mission statement and a BRIEF (2-3 sentence) description of your major programming. *CIAG grantees must include their arts program(s) in this description.*

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 8. The LA County Arts Internship Program seeks to ensure that all participating organizations provide their interns with meaningful, on-the-job training and mentorship. Briefly describe your organization's approach and experience regarding supporting future leaders. Please use specific examples of strategies you have used to mentor past interns. If you have experienced challenges with past interns, please highlight what you might do differently based on that experience.

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 9. The Department of Arts and Culture is committed to cultural equity and inclusion; all participating organizations are strongly encouraged to recruit and select interns of diverse backgrounds, including students with disabilities. Describe your organization's recruitment and hiring processes for ensuring a diverse applicant pool.

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 10. How many internships is your organization requesting? Beginning with the 2025 cycle, the maximum intern request has been reduced to two. Please refer to the [Arts Internship Guidelines](#) for more information.

**Remember to submit a unique application for each internship position you are requesting!**

- One internship
- Two internships

# 2025 Internship Position - Project and Supervisor Information



**Reminder:** Applicants to the LA County Arts Internship Program must submit an individual application for each internship position requested. While you will be able to repopulate other forms in the application to save time, this form (the 2025 Internship Position - Project and Supervisor Information form) will need to be redone each time for each of the positions you are requesting.

## Internship Position Job Title:

Provide an appropriate job title for the proposed intern, e.g. Administration Intern, Production Intern, Marketing Intern, etc. Note: words like "assistant" or "administrator" **should not** be part of the intern position job title, e.g. Assistant to the Executive Director or Marketing Administrator. **Please keep the title as succinct as possible.**

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Please select the category that most closely describes the intern's proposed work plan for the summer.

- Administration
- Arts Education
- Audience Services
- Civic Engagement
- Event Planning
- Development/Fundraising
- Graphic Design
- Marketing
- Production
- Research and Evaluation
- Other

If other, please specify:

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## Internship Project:

Describe the intern's primary project during the internship, detailing specific duties and responsibilities. This should function as the primary job description for the position. **Reminder to CIAG applicants: the project must be primarily rooted in the organization's arts programming.**

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## Internship Additional Duties and Activities:

Describe the additional day-to-day tasks activities you anticipate the intern will participate in beyond the primary project.

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## Internship Learning Objectives (please list up to five):

What will the intern learn as a result of this experience?

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How might fulfilling these objectives prepare an intern to better engage in the arts, creative economy, nonprofit sector and civic life?

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 Internship Workspace Description:

Please describe the proposed on-site workspace for the intern.

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 Remote Work

Should the intern be working remotely, please describe how you will support an intern in a remote position.

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 Is this a home office?

If yes, refer to the [Arts Internship Application Guidelines](#) for more information regarding our policies on home offices.

Yes

No

 If the **majority** of the internship will be taking place at a location that differs from the organization's main address, please include the additional address below.


Main Address 1

Main Address 2


City

State


Zip Code

 In what month would the intern **start** their internship?

- June 2025
- July 2025
- August 2025
- September 2025
- October 2025
- November 2025
- December 2025


 In what month would the intern **end** their internship?

- August 2025
- September 2025
- October 2025
- November 2025
- December 2025
- January 2026
- February 2026

 Approximately how many hours per week would this intern be working?


Note: The hours per week will determine the number of weeks the intern will be working, and should be in alignment with your start and end dates above.

- 15-20 hours a week
- 20-30 hours a week
- 30-40 hours a week
- 40 hours a week


 Primary Supervisor

Reminder: there must be one primary supervisor for each internship position. In the event of a change, you will be able to update this information during the intern approval process.

Name of Supervisor: \_\_\_\_\_  
Title of Supervisor: \_\_\_\_\_  
Email of Supervisor: \_\_\_\_\_

 Is this proposed supervisor a paid, full-time employee?

- Yes
- No


 **Primary Supervisor Qualifications:**

Describe the supervisor's qualifications to supervise and mentor this intern. Describe how long the proposed supervising mentor has worked at the organization, previous experience supervising staff and whether the proposed supervisor has participated in this program before. **CIAG grantees: be sure to specify this individual's knowledge and experience as relates to arts programming.**

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 **Additional Supervisors (if applicable):**

If there are any additional individuals whom the intern will be working with on a regular basis to support the development of their arts-related skills and knowledge, please list them below. Include name, title, a brief description of relevant qualifications, and the context in which they will support the intern.

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 **Internship Position Website Posting Information**

Your answers to the following questions will be used to list this position on the Arts & Culture website if this position is funded. Please keep the following in mind: **Do not use bullet points in any of these sections as our website cannot read them and it will cause issues for your job posting. This information should be clear and engaging for prospective interns. Please include as many relevant details as possible. Verify the "how to apply" section has the appropriate information for students to apply to your position. This can include a staff email, link to an online application, etc.** *NOTE: The Los Angeles Department of Arts and Culture reserves the right to edit your responses prior to posting online.*

 **Brief Organizational Information:**

Please provide a 2-3 sentence description of your organization for interested students.

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 **Brief Position Description:**

2-3 sentences that will help students decide whether to apply to this particular position. **Please be sure to include a line about how many hours a week the intern will be expected to work, as well as the months the intern will start and end the internship.** For example: "This position will work approximately 20 hours a week from June through September."

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 **Required or preferred qualifications:**

If any specialized skill, knowledge or other requirements are expected of prospective intern applicants for this position (e.g. research, social media, accounting), please list those here.

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 How to Apply to Internship:


Provide a brief description of how a student should apply to the Internship (i.e. "submit a resume and cover letter to..."). Please double check that all information provided is spelled correctly and accurate.

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 **Below, please select which date you'd like this position to be posted ("launched") to our website in the event the position is awarded to your organization.** Positions will be launched on a monthly basis, and you should choose your launch date based on how much time you will need for recruitment. For example, if you want to have your intern start in July, consider posting your position in June. Please do not exceed 2 months in advance of your start date, as interns are usually applying for positions they can start immediately.

 What date would you like this position to launch on our website?NOTE: Your organization will not be able to begin recruitment until the selected date.


- April 1, 2025
- May 1, 2025
- June 2, 2025
- July 1, 2025




# 2025 Community College Hosting and Educational Components

## Community College Recruitment


In 2018, the Arts Internship Program was expanded under the Cultural Equity and Inclusion Initiative (CEII) to provide a minimum of 28 internships prioritized specifically for community college students, which allowed for some organizations to request up to three interns. Due to the overwhelming applicant demand for the Arts Internship Program over the last few years, the maximum intern request has been reduced to two interns. However, our commitment to supporting students from the community colleges has not changed. Moving forward, no organizations will be “required” to host a community college student. Instead, all organizations who indicate an openness to hosting students from the community colleges via the questions below will be listed on our dedicated Community College webpage to assist in your recruitment. Please note that **all** funded organizations are encouraged to be inclusive in recruiting and hiring students of all backgrounds.

 1. Assuming your application is successful, is your organization interested in prioritizing at least one awarded position for a community college student?

- Yes
- No

 2. Does your organization have any current relationships with community colleges or a history of working with community college students?


- Yes
- No

 If yes, please describe:

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 3. (Optional) If there's anything else you would like us to know regarding your interest in and capacity to host a community college student, please indicate that below.


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## Educational Programming Support Interest

Since the inception of the Arts Internship Program, the Los Angeles Department of Arts and Culture has divided interns into groups of 10-15 students to better facilitate networking and allow program participants to get to know other arts organizations, leaders, and careers. Groups engaged in activities and educational events coordinated by a Peer Group Leader – a nonprofit administrator working at one of the Arts Internship Grantee organizations or an artist working in the field of Arts & Culture. Gatherings have ranged anywhere from two to four hours, and included activities like speed networking sessions with artistic staff, tours of local arts venues, public art walks, and museum visits. In 2021 and 2022, due to the COVID-19 pandemic, most Peer Group events were moved to a virtual format. In the virtual space, Peer Group Leaders have coordinated virtual panels, AMAs (ask me anything), resume workshops, inspirational workshops and more. Leaders are paid an honorarium and also provided additional funding to offset any costs associated with such gatherings (i.e. parking, materials, lunch, etc).

 Is your organization interested in leading educational events for interns during the 2024 program cycle? Depending on public health guidelines, events may continue to be virtual in 2024.

- Yes
- No
- I'm not sure


 If yes, who within your organization would take the lead to conceive of and produce events and communicate with interns? This is usually an intern supervisor.

Name \_\_\_\_\_

Title \_\_\_\_\_


Email \_\_\_\_\_

Phone \_\_\_\_\_

 Please describe any relevant experience for the above individual(s) and, if applicable, any specific themes or areas of expertise they would hope to explore with interns (e.g. theater, development, resume writing, etc).


NOTE: Leaders will be selected after internship grants are awarded and staff reviews geographic locations and needs for each region.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Is your organization interested in hosting events for interns during the 2024 program cycle? Depending on public health guidelines, events may continue to be virtual in 2024.

Yes

No


 Please describe the kinds of events your organization could host (i.e. tours, roundtables, art-making activities, etc.) These responses will only be applicable in the event public gatherings are safe at the time.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_


# 2025 Arts Internship Program Supplemental Materials

1. One copy of the organization's financial statement from the last completed fiscal year. Applicants can satisfy this requirement by submitting one of the following:

- Data Arts Los Angeles County Arts OGP Funder Report (highly recommended for OGP grantees only).
- A copy of an audited financial statement for the applicant organization's most recently completed fiscal year for a tax year ending on or after June 30, 2022.
- Financial report prepared by an accountant and signed by the Board President or Chair, or signed federal tax returns for a tax year ending on or after December 31, 2022.


 Upload a file

2. One copy of the organization's list of board members including names, professional affiliations, place of residence and officers identified by title.

 Upload a file

3. One copy of a history and background of the organization (report no more than two pages, single-spaced) to include:

- Mission and purpose of the organization.
- Brief history, including major accomplishments.
- Description of the organization's constituency or community.
- List of recent programming or projects. **NOTE: CIAG grantees must include a description of their current arts program(s).**
- Brief description of the administrative infrastructure of the organization, including number of employees and reporting structure.

 Upload a file

Is your organization fiscally sponsored through a Model A arrangement?


Reminder: only Model A fiscal sponsorship agreements are eligible. Model A fiscal sponsorship is also known as a direct-program agreement. In this relationship, the organization's administrative, legal and fiscal governance is overseen by the fiscal-sponsor and the sponsor owns and is legally liable for the work of the organization it sponsors.

Yes


No

Clear

4. Please upload a copy of the agreement or verification letter from the fiscal sponsor.

 Upload a file

5. Please upload a copy of the fiscal sponsor's 990 listing a State of California Address.

 Upload a file

# "Levine Act Compliance"


## Contribution and Agent Declaration Form

### Applicants to Department of Arts and Culture Grant Programs


This digital form must be completed by applicants for a grant award from the County of Los Angeles ("County") through the Department of Arts and Culture's Organizational Grant Program ("OGP"), Community Impact Arts Grant ("CIAG") and Arts Internship Program ("AIP") (collectively, "Grant"). Effective January 1, 2023, the Levine Act (SB1439) prohibits certain appointed and elected local officers, including members of the County Board of Supervisors, from taking part in decisions about awarding contracts, grants, licenses, or permits if the officer received a political contribution of more than \$250 in the last 12 months from a bidder, proposer, or applicant (or the bidder, proposer, or applicant's paid representative/agent). California State law requires you to disclose information about contributions made by certain individuals (such as paid employees, paid agents, or paid board members) that represent your organization/agency. Please answer the questions below and take reasonable steps to ensure your responses are complete and accurate. Information is being collected for transparency and compliance purposes only. Reporting contributions will not disqualify you from the grant program. However, incomplete or false answers may lead to disqualification. **Failure to complete this form in its entirety will result in immediate disqualification of your application to the grant program without exception. No grace period will be provided to complete this requirement. Additional information and resources can be found [here](#).**

 Check the box that describes your organization type:

- Nonprofit Organization or Model A Fiscally Sponsored Organization
- Tribal Government
- Municipal Agency

 1. Does your organization (inclusive of any Related Organizations named above) have a parent, subsidiary, or related organization, including a related political organization or committee (collectively "Related Organizations")?

- Yes
- No

 1a. If yes, name the organization(s).

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 2. Does your organization (inclusive of any Related Organizations named above) have paid employees that:

- Have appeared or will appear before or communicate with the County to influence the County's decision about this grant award (do not list individuals whose communications with the County are not for the purpose of influencing decisions about this grant award), OR- Have authority for the organization to make decisions about contributions.

- Yes
- No

 2a. Paid Employees

If yes, list their names and titles below:

	Name	Title/Role
Employee 1	_____	_____
Employee 2	_____	_____
Employee 3	_____	_____
Employee 4	_____	_____
Employee 5	_____	_____
Employee 6	_____	_____
Employee 7	_____	_____

Employee 8 \_\_\_\_\_

Employee 9 \_\_\_\_\_

Employee 10 \_\_\_\_\_

**3. Does your organization (inclusive of any Related Organizations named above) have paid board members?**

- Yes
- No

**3a. Paid board members**

List your organization's paid board members:

	Name	Title/Role
Board Member 1	_____	_____
Board Member 2	_____	_____
Board Member 3	_____	_____
Board Member 4	_____	_____
Board Member 5	_____	_____

**4. Does/will your organization (inclusive of any Related Organizations named above) pay other individuals such as, but not limited to, consultants, lobbyists, or attorneys, to communicate with County employees or officers on behalf of your organization to influence the County's decision about this grant award?**

- Yes
- No

**4a. Paid individuals outside your organization.**

List their names, employer, and title/role:

	Name	Name of Employer	Title/Role
Individual 1	_____	_____	_____
Individual 2	_____	_____	_____
Individual 3	_____	_____	_____
Individual 4	_____	_____	_____
Individual 5	_____	_____	_____

**5. Did any individual(s) listed above make one or more contributions totaling more than \$250 in the past 12 months to any County Supervisor, another elected County officer, or any other County officer or employee?**

- Yes
- No

**5a. Contributions**

5a. Please provide information for each instance, including the date:

	Date contribution was made	Name of Contributor	Name of Officer that received contribution	Amount of Contribution
Individual 1	_____	_____	_____	_____

Individual 2	_____	_____	_____	_____
Individual 3	_____	_____	_____	_____
Individual 4	_____	_____	_____	_____
Individual 5	_____	_____	_____	_____
Individual 6	_____	_____	_____	_____
Individual 7	_____	_____	_____	_____
Individual 8	_____	_____	_____	_____
Individual 9	_____	_____	_____	_____
Individual 10	_____	_____	_____	_____
Individual 11	_____	_____	_____	_____
Individual 12	_____	_____	_____	_____
Individual 13	_____	_____	_____	_____
Individual 14	_____	_____	_____	_____
Individual 15	_____	_____	_____	_____

**6. In the past 12 months, has your organization (inclusive of any Related Organizations named above) asked or directed your employees or agents to make a contribution to a County Supervisor, another elected County officer, or any other County officer or employee, either through fundraising events, communications, or any other way?**


Yes

No

**6a. Contributions**

Please provide information for each instance, including the date.

	Date Contribution was Solicited or Directed	Name of Recipient Officer	Amount of Contribution
Individual 1	_____	_____	_____
Individual 2	_____	_____	_____
Individual 3	_____	_____	_____
Individual 4	_____	_____	_____
Individual 5	_____	_____	_____
Individual 6	_____	_____	_____
Individual 7	_____	_____	_____
Individual 8	_____	_____	_____
Individual 9	_____	_____	_____
Individual 10	_____	_____	_____
Individual 11	_____	_____	_____
Individual 12	_____	_____	_____
Individual 13	_____	_____	_____
Individual 14	_____	_____	_____
Individual 15	_____	_____	_____

 **1. Does your agency have any paid non-employee(s) and/or any other paid representative(s) (such as an attorney, lobbyist, or consultant) who has communicated or will communicate with the County about this grant application?**

- Yes
- No


 **1a. Paid non-employees/representatives**

List their names and titles below:

	Name
Representative 1	_____
Representative 2	_____
Representative 3	_____
Representative 4	_____
Representative 5	_____
Representative 6	_____
Representative 7	_____
Representative 8	_____
Representative 9	_____
Representative 10	_____
Representative 11	_____
Representative 12	_____
Representative 13	_____
Representative 14	_____
Representative 15	_____

 **2. Do any of the paid non-employee(s) and/or representative(s) listed above have decision-making authority for your public agency related to this grant application?**

- Yes
- No

 **3. Did any of the paid non-employee(s) and/or representative(s) listed above make one or more contributions in the past 12 months to any County Supervisor, another elected County officer, or any other County officer or employee that, when added together, is more than \$250?**

- Yes
- No

 **3a. Contributions**

Provide the following information for each contribution:

	Date contribution was made	Name of Contributor	Officer's Name	Amount
Representative 1	_____	_____	_____	_____
Representative 2	_____	_____	_____	_____
Representative 3	_____	_____	_____	_____
Representative 4	_____	_____	_____	_____
Representative 5	_____	_____	_____	_____



Representative 6	_____	_____	_____	_____
Representative 7	_____	_____	_____	_____
Representative 8	_____	_____	_____	_____
Representative 9	_____	_____	_____	_____
Representative 10	_____	_____	_____	_____
Representative 11	_____	_____	_____	_____
Representative 12	_____	_____	_____	_____
Representative 13	_____	_____	_____	_____
Representative 14	_____	_____	_____	_____
Representative 15	_____	_____	_____	_____

**ATTESTATIONS**

By checking this box you attest that you made a reasonably diligent investigation regarding the organization/ agency that is seeking a grant award, and that the responses to the questions in this Contribution and Agent Contribution Declaration Form are true and correct to the best of your knowledge and belief.

Check Here

**IMPORTANT NOTICE REGARDING FUTURE AGENTS AND FUTURE CONTRIBUTIONS**

By checking this box, you also agree that, if your organization/ agency hires an agent during the course of these proceedings and has compensated or will compensate them for communicating with the County about this grant application, you or your organization/ agency will inform the County of the identity of the agent and the date of their hire. You also agree to disclose to the County any future contributions made to members of the County Board of Supervisors, another elected County officer, or any other County officer or employee by your organization's/agency's paid agents who have communicated or will communicate with the County about this grant application after the date of signing this disclosure form, and within 12 months following the approval, renewal, or extension of the requested grant award.

Check Here

**This material is intended for use by applicants for a Grant issued by the County of Los Angeles through the Department of Arts and Culture and does not constitute legal advice.**

If you have questions about the Levine Act and how it applies to you and your organization/agency, you should call your lawyer or contact the Fair Political Practices Commission for further guidance at 1-866-ASK-FPPC (1-866-275-3772) or [advice@fppc.ca.gov](mailto:advice@fppc.ca.gov).