

2021-2022 COMMUNITY IMPACT ARTS GRANT - MAIN PAGE

Welcome to the [Department of Arts and Culture's Community Impact Arts Grant](#) program application. The mission of the Los Angeles County Department of Arts and Culture is to advance arts, culture, and creativity throughout LA County. We provide leadership, services, and support in areas including grants and technical assistance for nonprofit organizations, countywide arts education initiatives, commissioning and care for civic art collections, research and evaluation, access to creative pathways, professional development, free community programs, and cross sector creative strategies that address civic issues. All of this work is framed by our longstanding commitment to fostering access to the arts, and the [County's Cultural Equity and Inclusion Initiative](#). [Read more about cultural equity and the Cultural Equity and Inclusion Initiative in a report we published about the process.](#)

DEADLINE: Applications, artistic documentation and supporting materials must be submitted no later than 11:59 PM PST on October 7, 2020. Applications that are submitted after the deadline will not be considered and deadlines cannot be extended. We recommend submitting 3-5 days prior to the deadline to avoid last-minute technical issues that could delay your submission.*

Organizational Account Information

IMPORTANT NOTE: Fields of the application are auto-populated using information that was entered in the User Setup, for this specific User Account. If the information below is not current, please update the User Setup and these fields will reflect those changes.

Organization Legal Name _____

Popular Name or DBA (if different from legal name) _____

Organization Type _____

Main Address 1 _____

Main Address 2 _____

City _____

State _____

Zip Code _____

Main Phone (Format: ###-###-####) _____

Website _____

LA County Vendor Number

NOTE: Not required during the application, however, to receive a grant, you must be a registered LA County Vendor with an active vendor number. Visit this website and register today <http://camisvr.co.la.ca.us/webven/>

Federal Employer Identification Number (EIN)

Primary Organizational Contact Information

The individual at your organization with the responsibility and authority to make decisions about your grant and use of funds, with the responsibility of managing and completing your grant application, including making corrections to the application. Do not provide generic phone numbers or e-mail addresses.

This contact information will be used for communication to the applicant, in many cases, with important and time sensitive information. Should you be awarded a grant, this contact information will be used for all communication to the grantee with important and time sensitive information, e.g. award announcements, the grant contract and requirements.

Primary Organizational Contact Full Name: _____

Primary Organizational Contact Title: _____

Primary Organizational Contact Phone:
(This field must be a 10 digit phone
number in ###-###-#### format.) _____

Primary Organizational Contact Email: _____


 Executive Director/Organizational Leadership

Executive Director/Leadership Full
Name: _____

Executive Director/Leadership Phone:
(Format: ###-###-####.) _____

Executive Director/Leadership E-Mail: _____

Executive Director/Leadership Title: _____

 Primary Arts Programming Contact Information

The individual at your organization with the responsibility of managing and completing your arts and culture projects and programs. Do not provide generic phone numbers or e-mail addresses. This contact information will be used for communication to the applicant, in many cases, with important and time sensitive information.

Primary Application Contact Full Name: _____

Primary Application Contact Title: _____

Primary Application Contact Phone:
(This field must be a 10-digit phone
number in ###-###-#### format.) _____

Primary Application Contact Email: _____

 COUNTY SUPERVISORIAL DISTRICT INFORMATION

District where Main
(Administrative/Office) is located: _____

COUNTY SUPERVISORIAL DISTRICT INFORMATION

District where most of your programming takes place: ([Look up your district HERE](#))

- District 1
- District 2
- District 3
- District 4
- District 5

District(s) your organization serves (check all that apply):

- District 1
- District 2
- District 3
- District 4
- District 5

 California Secretary of State Entity #

If the applicant is awarded funding, the organization must be listed on the California Secretary of State website and the organization's status must be "active at the time of contracting. ([Look up HERE](#))


California Secretary of State Entity #: _____

Is your organization a first-time applicant to the Community Impact Arts Grant program?

- Yes
- No

Has your organization previously been awarded a CIAG grant? If yes, how many years?

- Yes _____
- No

 National Taxonomy of Exempt Entities (NTEE) Classification

To find your organization's NTEE classification (Look Up)


For more information on NTEE codes (Look Up)

NTEE classification: (If not applicable, please enter n/a.) _____

Organizational Budget Size

Organizational Budget Size

The Department of Arts and Culture defines budget size as total operating revenue less in-kind for the most recently completed fiscal year. This number must correspond with the organization's most recently submitted Federal Form 990 (for organizations with budgets over \$2M, this must correspond with the most recently completed audit). Budget size should not include any revenue dedicated to a cash reserve, endowment and/or capital project. *Reference the [2021-2022 CIAG Guidelines](#) for additional information about these required documents.*

 If applicant is a fiscal sponsor or parent organization, please list the annual operating budget for the fiscally sponsored project/site:

Fiscal Sponsors may apply on behalf of sponsored projects that otherwise meet all eligibility requirements. Fiscally sponsored projects must have a budget of \$25,000 or more. Note: The fiscal sponsor is the applicant of record.

Annual Arts and Culture Programming Budget Size

Provide the dollar amount of the arts programming budget for the most recently completed fiscal year. This information is required and is an indication of your organization's investments to arts and culture.

Arts and Culture Programming Experience

Years of arts and culture programming experience.

TOTAL GRANT AMOUNT REQUESTED

(Request can be between \$5,000 and \$20,000)

ORGANIZATION TYPE and/or COMMUNITY SERVED (check all that apply):

- Community Building/Service
- Disability Community
- Environmental
- Homeless Community
- Mental Health Community
- Social Justice
- Youth Afterschool
- Youth and Family
- Other (please describe)
- Health/Wellness Services
- Workforce Development
- Economic Development
- Veterans
- Immigrants
- Seniors

 If other, please describe:

DISCIPLINE OF PROPOSED PROJECT (check all that apply):

- Crafts
- Dance
- Design Arts

- Folklife/ Traditional Arts
- Humanities
- Literature
- Media Arts
- Multidisciplinary
- Music
- Opera/Musical Theatre
- Photography
- Theatre
- Visual Arts

ARTS AND CULTURE PROJECT/PROGRAM REACH (check all that apply):

Check all descriptions of the specific communities targeted for service in this project.

- Foster youth or former foster youth
- Homeless individuals
- Incarcerated or previously incarcerated individuals
- Individual artists
- Individuals of a particular faith (describe below)
- Individuals with disabilities (describe below)
- Individuals in residential facilities or institutions
- Individuals with low income
- LGBTQ individuals
- Military veterans/active personnel
- Recent immigrants
- General audience/constituency - no group specified
- Pre-Kindergarten (0-5 years)
- K-12 (6-17 years)
- Young Adults (18-24 years)
- Adults (25-64 years)
- Older Adults (65 plus years)
- Other distinct group(s) (describe below)

 Brief Project Description

Please complete the following sentence:

_____ (The applicant requests funding from the Los Angeles County Department of Arts and Culture to support...)

If other, please describe:



CIAG Narrative Part 1 - Organizational Information

Reference the [2021-2022 CIAG Guidelines](#) for additional information and to view the Review Criteria.

A. MISSION/PURPOSE OF THE APPLICANT: [Criteria 2, 5] *500 Character Limit* Provide the applicant's mission statement.

B. ORGANIZATIONAL HISTORY/CORE PROGRAMMING: [Criteria 2, 5] *2,000 Character Limit*

Briefly describe the history of current core programs and services. Note any significant administrative changes and/or major accomplishments and initiatives that took place over the past two years.

C. How many arts-related classes/workshops/events did your organization produce in the last two years? [See definition in 2021-2022 CIAG Guidelines] Reminder: 8 activities are required to be eligible to apply.

Enter a numerical value only.

D. ARTS + CULTURE HISTORY/PROGRAMMING: [Criteria 1, 5] *1,500 Character Limit* Please describe organizational history of arts and culture programming as part of the broader services the organization provides. How does arts and culture programming support the applicant's mission? Describe the types of programming the applicant is engaged in. How are artists selected to work with the program? Describe the applicant's practice of payment to artists.


E. COMMUNITY/CORE CONSTITUENCY: [Criterion 5] *1,500 Character Limit* Describe the applicant's community and core constituency in terms of geography, age, cultural, economic or other characteristics, as applicable or that are important to your organization. Please include demographic information.

F. CULTURAL EQUITY AND INCLUSION: [Criterion 5] *2,000 Character Limit* Describe how the applicant addresses and is taking steps to integrate and reflect the values of cultural equity and inclusion both internally and externally. Provide specific details highlighting progress or efforts made in the last two or more years. Please reference the CEII definitions listed on our website: [CEII Definitions](#)


G. How has your organization been impacted by the challenges of the last 6 months and how has it responded to those challenges? *1,000 Character Limit*

PROJECT BUDGET

Complete the table with the projected budget for proposed arts project during the grant period: July 1, 2021 - June 30, 2022.



 Complete the table on page 2 with the projected budget for the proposed arts and culture project. Only include income and expenses that are specific to the arts project; **do not enter your organization's total annual budget**. **FORMATTING NOTE:** Please enter plain non-formatted numbers into the table on the next page. This form will not accept dollar signs (\$), commas (,) or cents (i.e."0.50"). Please round figures to the nearest dollar. **IMPORTANT NOTE:** CIAG funds cannot be used for catering and hospitality, lodging, meals or travel outside of LA County. These types of expenses, however, can be included as part of the matching funds. Please see [2021-22 CIAG Guidelines](#) for a full list of unqualified expenses.

 Click "Next" to Start.

 Enter projected budget for proposed arts project during the grant period. Only include income and expenses that are specific to the arts project; **do not enter your organization's total annual budget**. Indicate how your organization will match grant funds in the CASH MATCH column. We do not require a match across categories/line items. For example, the full CIAG fund request could be placed in the Artistic Personnel and Fringe Benefits line items, while the Cash Match could be reflected in Production/Exhibition Costs. [Criteria 2, 3]

IMPORTANT NOTE: CIAG funds cannot be used for catering and hospitality, lodging, meals or travel outside of LA County. These types of expenses, however, can be included as part of the matching funds. Please see [2021-22 CIAG Guidelines](#) for a full list of unqualified expenses. **FORMATTING NOTE:** Please enter plain non-formatted numbers into the table below. This form will not accept dollar signs (\$), commas (,) or cents (i.e."0.50"). Please round figures to the nearest dollar.

CIAG Project Budget Expense Detail

	CIAG Fund Request	CIAG Required Match
Request/Match Amount	_____	_____
 Personnel/Salary		
Expenses	GRANT EXPENSES	MATCH EXPENSES
Artistic	_____	_____
Program (non-artistic)	_____	_____
Fringe Benefits	_____	_____
 Project Expenses		
	GRANT EXPENSES	MATCH EXPENSES
Advertising, Marketing, PR	_____	_____
Artist Fees - Non Salary	_____	_____
Fees paid to Partner Organization	_____	_____
Other Consultant Fees**	_____	_____
Space Rental	_____	_____
Equipment Rental or Purchase	_____	_____
Facility Fees	_____	_____

Insurance	_____	_____
Honoraria	_____	_____
Printing	_____	_____
Production & Exhibition Costs	_____	_____
Project Materials & Supplies	_____	_____
Other**	_____	_____
GRAND TOTAL EXPENSE	_____	_____

 **Verification of Budget**

Do not edit this section. This field is auto-calculated to ensure that your budget meets CIAG minimum requirements. If this reads "False" your math is wrong or you have added formatting that prevents validation.

Meets or Exceed Explanations _____

 **Budget Expense Explanations - REQUIRED**

Use this space to explain the budget expenses. Detail all "Other" expenses, including consulting fees. Also use this space to explain, clarify and detail the type, frequency and breakdown of relevant expenses, as applicable. This includes details regarding multiple program and non-artistic salary positions. List "MATCH EXPENSES" sources specific to the project by entering both anticipated and confirmed sources of funding with the amount of each contribution. The total match amount must at least equal (1:1) the CIAG request.

 **Partner Expenses**

If project partner is independently paying for a portion of the project, please describe. If not applicable, enter N/A.

 **CIAG Project Budget Income Detail** *Identify income sources of Matching Funds*

LACDAC Grant Request Amount: _____

Government (Federal, State, City)	_____
Foundation Contributions	_____
Corporate Contributions	_____
Trustee/Board Contributions	_____
Other Individual Contributions	_____
Earned Income	_____
Other**	_____

 **Grand Total Project Income**


 *Meets or Exceeds Matching Fund Requirements*


 Budget Income Explanations - REQUIRED


Use this space to provide details about the sources of the stated income budget. If there are multiple sources of income in the Government (City, County, State, Federal), Foundation or Corporate categories, provide a detailed list naming the sources along with the amount of each contribution. Provide a detailed list of "Other" income sources.


CIAG Narrative Part 2 - Proposed Arts Project


Reference the [2021-22 CIAG Guidelines](#) for additional information and to view the Review Criteria.

 A. PROJECT OVERVIEW: [Criteria 1, 3] *1,500 Character Limit* Describe the arts project for which funds are requested. Is this a new initiative or an expansion of a current program? If applicable, how does this arts project relate to any previous initiatives?

 B. PROJECT TIMELINE and PARTICIPANTS: [Criteria 3, 5] *750 Character Limit* Include the start and end date of the proposed project/program. Clarify which sections/elements of the project will be supported by CIAG funding, if the start and end date exceed the CIAG project time frame. Where will it take place? Describe *in detail* the target participants for your arts and culture project/program. How will participants be selected for participation? What is the total number of participants the organization expects to serve with this project/program?


 C. PROJECT ACTIVITIES: [Criteria 1, 3] *1,500 Character Limit* Describe what happens/will happen during project planning and implementation. If applicable, what happens during a workshop, class or presentation? NOTE: *We recommend attaching a sample lesson plan/curriculum/agenda in the Support Materials section if applying to support a workshop/class-based program.*


 D. If applicable, briefly describe your approach to developing curriculum and content for arts program/project – particularly if serving youth. Consider providing 1-2 concrete examples. [Criteria 1, 3] *1,500 Character Limit*


 E. PROJECT PARTNERS/ARTISTS/STAFF/VOLUNTEERS: [Criteria 1, 3, 5] *1,500 Character Limit* Describe the planning process of working with the partner organization(s) or artist(s). How are partner organizations, artists, staff, volunteers selected for this project? If not yet selected, what are the selection criteria? What is the compensation rate for project/program partners? If you are working with a partner organization(s) or artist(s), please describe what role and title each will be filling. If utilizing temporarily employed individuals or volunteers, how are they trained?


 F. PROJECT FEES: Is there a fee constituents/clients must pay to participate in the project/program?

- Yes
 No


 If yes, please describe rate to participate. If applicable, describe sliding scale and how sliding scale rates are determined.

 G. PROJECT GOALS and OBJECTIVES: [Criteria 3, 4] *1,000 Character Limit* What are the goals and objectives of this arts project/program? How does this project/program serve the applicant's overall mission? How does it meet community, constituent and/or client needs? How is information about community, constituent and/or client needs gathered?

 H. PROJECT EVALUATION: [Criterion 4] *750 Character Limit*How will you monitor, measure and track the success of this arts project? What qualitative (narrative) and/or quantitative (numbers/data) will you use to demonstrate how well you are achieving the arts project/program goals and objectives, as described above?

 I. PROJECT OUTREACH: [Criterion 5] *1,000 Character Limit*What kind of outreach/marketing strategy do you have for this arts project/program? How are culminating events promoted, if applicable?

CIAG Arts Partner(s) Information - Optional

 Is your organization working with a partner arts organization(s) or artist(s) for this project?

- Yes
- No

Primary Partner Information

Primary Partner Organization Name or Artist Name: _____

Website: _____

Partner Mission/Experience: _____

Years of consistent arts programming by Partner (numerical value): _____


Partner Contact Full Name: _____

Partner Contact Title: _____

Partner Contact Phone: _____

Partner Contact Phone Ext.: _____

Partner Contact Email: _____

 Is your organization working with a secondary partner?

- Yes
- No

Secondary Partner Information

Primary Partner Organization Name or Artist Name: _____

Website: _____

Partner Mission/Experience: _____

Years of consistent arts programming by Partner (numerical value): _____

Partner Contact Full Name: _____

Partner Contact Title: _____

Partner Contact Phone: _____

Partner Contact Phone Ext.: _____

Partner Contact Email: _____

Project Primary Staff & Artists Profiles

[CRITERIA 1,2] Provide short biographies of key organizational staff. Begin with the applicant's leadership (e.g. Executive Director, Managing Director) and follow with key project staff, emphasizing their experience in areas of **direct relevance to the proposal**, e.g. professional, educational or community-based experience in arts and culture including years of experience.

NOTE: All volunteer organizations should provide the biographies of volunteers who are accomplishing the work on the proposed project.

If beneficial, an attachment may be uploaded listing additional staff to support/carry out the proposed project and highlight organizational capacity.



Full Name: _____

Title: _____

Bio: _____

Project
Role: _____



Full Name: _____

Title: _____

Bio: _____

Project
Role: _____



Full Name: _____

Title: _____

Bio: _____

Project
Role: _____



Full Name: _____

Title: _____

Bio: _____

Project
Role: _____



Full Name: _____

Title: _____

Bio: _____

Project
Role: _____



Full Name: _____

Title: _____

Bio: _____

Project _____

Role: _____

Board of Directors

Provide a list of the applicant organization's board of directors **beginning with board officers (President/Chair, Vice President/Co-Chair, Secretary, Treasurer) listed in first four rows.** You may upload an additional attachment to accommodate more board members.

NOTE: Professional affiliation is intended to provide insight about the board member's area of expertise and experience. PLEASE SCROLL TO THE RIGHT TO ACCESS FULL TABLE and COLUMNS.



Full Name	Board Position Title	Professional Affiliation (Organization)	City and State of Residence (e.g. LA, CA)	Years Served on Board
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do the board members have term limits?

- Yes
 No

How often does the board meet on an annual basis?

Does the board have a "Give or Get" policy?

WHAT IS A GIVE-OR-GET POLICY? Board members agree to either donate (give) a certain amount of money every year, paid out of their own personal resources, or to raise the equivalent amount from others (get).

- Yes
 No

Artistic Documentation and Support Materials

Name files using the following naming conventions: • Organization Name-Artistic Documentation-Video

- Organization Name-Artistic Documentation-Images
- Organization Name-990
- Organization Name-Financial Audit
- Etc.

A. ARTISTIC DOCUMENTATION

Artistic documentation is crucial for evaluating the artistic quality of the applicant and/or project. REMINDER: Provide the context of the submission in the Artistic Description section. This includes, as applicable, title, location, artist(s), date(s) and participant impact.

A minimum of one (1) and maximum of two (2) artistic samples must be included with the application. [Review 2021-22 CIAG Guidelines for specific artistic documentation requirements.](#)

NOTE: Each video sample may be a maximum of 5 minutes long. Panelist may not watch/listen to the entire sample. It is suggested that samples are edited to show the strongest or most compelling components at the beginning of the video. Please be aware that the entire sample (not just the selected segment) is considered a part of the application and may be reviewed.

REMINDER: All materials must remain active and viewable until July 2021. PASSWORDS: If applicable, include the passwords for uploaded artistic documentation in the Artistic Description text section for the corresponding sample. DISCLAIMER: All submitted application materials are documents of public record upon submission to the Los Angeles County Department of Arts and Culture and subject to public records requests.

Sample 1 - DETAILS

	Video/Audio /Images/Published Materials (Please specify sample type below.)	Title	Artist(s)
Sample 1	_____	_____	_____
	–	–	–
	Year work was completed		
Sample 1	_____		

Sample 1 - RUNNING TIME (Video and Audio only)

Sample 1 - ARTISTIC DESCRIPTION

Briefly describe the artistic sample and explain its relationship to the application.

Sample 2 - DETAILS

	Video/Audio /Images/Published Materials (Please specify sample type below.)	Title	Artist(s)
Sample 2	_____	_____	_____
	–	–	–
	Year work was completed		

 Sample 2 - RUNNING TIME (Video and Audio only)

 Sample 2 - ARTISTIC DESCRIPTION

Briefly describe the artistic sample and explain the relationship of the artistic sample to the application.

 **SUPPORTING DOCUMENTATION**

B. Reviews/Letters of Recommendation - Two (2) reviews or letters of recommendation written within the past 18 months. Reviews/Letters of Recommendation must be compiled and submitted as one PDF.

C. ADDITIONAL REQUIREMENT of all Applicants proposing workshop or class-based arts programs. Provide a sample lesson plan/agenda outlining the activities/work planned and scheduled during a workshop or class session.

D. Promotional Materials (OPTIONAL) - One piece of promotional material. I.e. Season brochures, flyers, postcards, newsletters, reviews, etc.

Financial Information - NONPROFIT ORGANIZATIONS

E. Federal Form 990, 990 EZ or 990-N*

Only upload a Federal Form 990 for a tax year ending on or after December 31, 2017. *Religious organizations should submit a financial statement or annual profit/loss and balance sheet information.

F. Financial Audit

All applicants with budgets of \$2,000,000 and greater are required to submit a financial audit for the applicant organization's most recently completed fiscal year. If an audit for the organizations most recently completed fiscal is not available, the applicant may submit a financial audit for the previous year. *Religious organizations should submit a financial statement or annual profit/loss and balance sheet information.

Financial Information for Fiscally Sponsored Projects

E. Federal Form 990, 990 EZ or 990-N of Fiscal Sponsor*

Only upload a Federal Form 990 for a tax year ending on or after December 31, 2018. *Religious organizations should submit a financial statement or annual profit/loss and balance sheet information.

F. Financial Audit of Fiscal Sponsor*

All applicants with budgets of \$2,000,000 and greater are required to submit a financial audit for the applicant organization's most recently completed fiscal year. If an audit for the organizations most recently completed fiscal is not available, the applicant may submit a financial audit for the previous year.

*Religious organizations should submit a financial statement or annual profit/loss and balance sheet information.

Financial Information for Fiscally Sponsored Projects

G. Revenue & Expense Statement of Fiscally Sponsored Projects

Revenue & Expense or Profit & Loss Statement of the Annual Operating Budget

Financial Information - MUNICIPALITIES

E. Adopted Annual Department Budget

FINALIZING AND SUBMITTING YOUR APPLICATION



Applications, artistic documentation and support materials **must be submitted** via the Department of Arts and Culture's online application system at SurveyMonkey Apply no later than **11:59 p.m. on OCTOBER 7, 2020**. Applications that are submitted after the deadline will not be considered. Deadlines cannot be extended. All applications are time stamped upon submission. Applications that do not include all required attachments by 11:59 p.m. Pacific Time on the date of the deadline will not be considered.

COVID-19 UPDATE: Hardcopy materials will not be accepted.

DISCLAIMER: All submitted application materials are documents of public record upon submission to the Los Angeles County Department of Arts and Culture and subject to public records requests.

Certification Instruction Provide the Name and Title of the authorized official submitting this application. This individual must be a representative of the applicant organization with authority to submit this application on behalf of the applicant organization. By entering in their name below, the authorized individual certifies that they have reviewed the content of this application and certifies that the information contained in this application is true and correct to the best of their knowledge. Once this section is complete, please click the **green "Submit" button** on the left to finalize and submit your 2021-22 CIAG application.

Full Name: _____

Title: _____

Telephone #: _____

Email Address: _____

I certify: