

FY 2013 Core Funding Program

APPLICATION & AGREEMENT

Section 1: Summary Information

Applicant Name	<input type="checkbox"/> Sponsored Project	Sponsored Project Name
Project/Activity Title	Start Date	End Date

Core Funding Programs

- Organizational Support**

 Project Support

 Project Support II

Organization Budget Size

- Excess of \$1,000,000
 \$250,001 - \$500,000
 \$50,001 - \$100,000
 \$500,001 - \$1,000,000
 \$100,001 - \$250,000
 Below \$50,000

- Unincorporated Group**
 Individual Artist Project

Primary Artistic Discipline – Select one only

- Dance
 Literature
 Film/Media Arts
 Multidisciplinary
 Music
 Opera/Musical Theatre
 Theatre/Performance Art
 Visual Arts/Public Art

Project Summary: Please limit your response to the space provided.

_____ is requesting \$_____ in cultural contract funding to/for...

For CAD staff use only

Control Number 13

- | | | | | |
|--------------------------------------|-------------------------------------|--|-----------------------------------|--|
| <input type="checkbox"/> App Forms | <input type="checkbox"/> Tax Exempt | <input type="checkbox"/> Letters | <input type="checkbox"/> Original | <input type="checkbox"/> Documentation 1 |
| <input type="checkbox"/> Narrative | <input type="checkbox"/> Board List | <input type="checkbox"/> Op Budget (OS & PS) | <input type="checkbox"/> Copy 1 | <input type="checkbox"/> Documentation 2 |
| <input type="checkbox"/> Itemization | <input type="checkbox"/> Form 990 | <input type="checkbox"/> Audit (OS only) | <input type="checkbox"/> Copy 2 | <input type="checkbox"/> Documentation 3 |
| <input type="checkbox"/> Org History | <input type="checkbox"/> Résumés | <input type="checkbox"/> Documentation | <input type="checkbox"/> Copy 3 | |

Section 2: Applicant Information		
Applicant's Legal Name	Federal Tax I.D. Number	Other Common Name
Official Mailing Address		City State Zip
Telephone	Fax	Website (URL)
Contact/Project Director		Title
Telephone	Fax	Email
Board Chair		Title
Address		City State Zip
Telephone	Fax	Email
Sponsored Contact/Project Director		Title
Address		City State Zip
Telephone	Fax	Email
Applicant Race Code	Sponsored Race Code	Project Race Code

Section 3: Organizational Budget History					
	2008-2009 Actual	2009-2010 Actual	2010-2011 Projected or Actual	2011-2012 Projected	2012-2013 Proposed
Revenue					
Expenses					

Section 4: COA Funding History						
	2008-2009		2009-2010		2011-2012	
COA Funding	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was this project/applicant funded previously under a different organization name or sponsor? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes:	Year:	Name:				

Section 5: Proposed Budget

The budget must balance. Total income (line 12) must equal total expenses (line 23). Round all budget figures to the nearest whole dollar.

PROJECT INCOME	CASH	IN-KIND	TOTAL
EARNED INCOME			
1. Total Admissions			
2. Total Other Earned Income			
3. TOTAL EARNED INCOME (Add Lines 1 and 2)			
UNEARNED INCOME			
4. <i>Total Private Support</i> (Corp, Foundation, Individual)			
5. Total Public Support (Government Grants)			
6. Total Other Unearned Income			
7. Applicant Cash			
8. TOTAL UNEARNED INCOME (Add Lines 4 – 7)			
9. COA Request Amount			
10. TOTAL CASH INCOME (Add Lines 3, 8, and 9)			
11. Total In-Kind Support (must equal In-Kind line 24)			
12. TOTAL INCOME (Add Lines 10 and 11)			

PROJECT EXPENSES	CASH	IN-KIND	TOTAL
13. Administrative Employee Costs			
14. Artistic Employee Costs			
15. Administrative Non-Employee Costs			
16. Artistic Non-Employee Costs			
17. Travel			
18. Space Rental			
19. Equipment Rental			
20. Supplies and Materials			
21. Marketing and Promotion			
22. Production/Exhibit Costs			
23. Other			
24. TOTAL EXPENSES (Add Lines 13-23, must equal Line 12)			

Section 6: Application Checklist

All sections of the application form must be completed and signed by the appropriate representatives. Check the boxes below to ensure all sections have been completed. **You must submit one original application and three copies (totaling 4) of the application and all of the required attachments. Three total copies of the documentation must also be submitted.**

Application Form

- Section 1 Summary Information
- Section 2 Applicant Information
- Section 3 Organizational Budget History
- Section 4 COA Funding History
- Section 5 Proposed Budget Information
- Section 6 Application Checklist
- Section 7 Assurances (signed by Authorized Official)

Attachments:

Please indicate which attachments are enclosed with the application by checking the corresponding box. Each page of attachments must be labeled with the attachment number and name of the organization.

Required Attachments

- Attachment 1 Narrative (all programs)
- Attachment 2 Budget Itemization (all programs)
- Attachment 3 Organizational History (all programs)
- Attachment 4 Proof of Tax Exempt Status (all programs)
- Attachment 5 Board List (all programs)
- Attachment 6 990 Forms (all programs)
- Attachment 7 Résumés/Bios (all programs)
- Attachment 8 Letters of Support (all programs)
- Attachment 9 Total Projected Operational Budget
(Organizational & Project Support ONLY)
- Attachment 10 Independent Audit/Financial Review
(Organizational Support ONLY/1 copy only)
- Attachment 11 Documentation (all programs)

Section 6: Application Checklist continued...

PACKAGING

Indicate that all application materials have been correctly packaged and labeled by checking the boxes below. Application materials should be placed in envelopes and labeled as follows.

<input type="checkbox"/> Envelope #1 "Original"	<input type="checkbox"/> Envelope #2 "Copy 1"	<input type="checkbox"/> Envelope #3 "Copy 2"	<input type="checkbox"/> Envelope #4 "Copy 3"	<input type="checkbox"/> Envelope #5 Documentation Attachment #11
Application Form	Application Form	Application Form	Application Form	
Attachment #1	Attachment #1	Attachment #1	Attachment #1	
Attachment #2	Attachment #2	Attachment #2	Attachment #2	
Attachment #3	Attachment #3	Attachment #3	Attachment #3	<input type="checkbox"/> Envelope #6 Documentation Attachment #11
Attachment #4	Attachment #4	Attachment #4	Attachment #4	
Attachment #5	Attachment #5	Attachment #5	Attachment #5	
Attachment #6	Attachment #6	Attachment #6	Attachment #6	
Attachment #7	Attachment #7	Attachment #7	Attachment #7	<input type="checkbox"/> Envelope #7 Documentation Attachment #11
Attachment #8	Attachment #8	Attachment #8	Attachment #8	
Attachment #9*	Attachment #9*	Attachment #9*	Attachment #9*	
Attachment #10				

**Attachment #9 required for Organizational Support & Project Support ONLY*

**Attachment #10 Only if required & 1 copy ONLY*

Section 7: Assurances

By submitting this application, the applicant hereby gives assurance to the City of Austin that:

1. The activities and services for which financial assistance is sought will be administered by the applicant organization;
2. Any funds received as a result of this application will be used solely for the project described;
3. The applicant has read, understands, and will conform to the intent outlined in the Core Cultural Arts Funding Programs Guidelines;
4. The applicant will comply with Title VI of the Civil Rights Act of 1964, with labor standards under Section 5(j) of the National Foundation of the Arts and Humanities Act of 1965, with Section 504 of the Rehabilitation Act Amendments of 1974, with Title IX of the Education Amendments of 1972, with the Americans with Disabilities Act of 1990, with the Age Discrimination Act of 1975, and with the Drug Free Workplace Act of 1988;
5. The applicant will comply with Section 10(7)(b) of the Texas Commission on the Arts' Enabling Legislation, which prohibits the TCA and its grantees from knowingly fostering, encouraging, promoting, or funding any project, production, workshop, and/or program which includes obscene material as defined in Section 43.21 Penal Code of Texas;
6. The applicant is a nonprofit entity as defined by the I.R.S.;
7. The application has been duly authorized by an authorized official for the applying organization, a principal of the organization with legal authority to certify the information contained in the application and sign contracts for the organization; he/she must read and guarantee the compliance of the organization with the requirements listed. Sponsored applications must be signed by the principal of the nonprofit umbrella organization with legal authority to certify the information contained in the application and a representative of the sponsored group/individual;
8. The applicant understands that the City of Austin actively reviews and evaluates all aspects of the programs and processes and incorporates changes which may occur at any time throughout the funding calendar. Cultural Arts Division staff will provide updates on changes as they are adopted;
9. The City of Austin reserves the right to make special stipulations on how specific cultural contract funds may be spent;
10. None of my agents, representatives, subconsultants, nor I have undertaken or will undertake any activities or actions to promote or advertise any cultural arts funding proposal to any peer review panel members, any member of any City Commission reviewing the proposals, member of the Austin City Council or City staff except in the course of City-sponsored inquiries, interviews or presentations between the date that the application is submitted and the date of award by City Council;
11. The filing of this application by the undersigned, officially authorized to represent the applicant organization, has been duly approved by the governing board of the applicant organization.

This application was approved by the applicant's board on ____

This application is scheduled to be approved by the applicant's board on ____

Note: If the application has not been approved by the governing board, you must notify the City as soon as action is taken.

Contact/Project Director:

Board Chair:

Sponsored Group/Individual:

Name (typed)

Title

Name (typed)

Title

Name (typed)

Title

Signature

Date

Signature

Date

Signature

Date