Applicant Information

Enter information for the Applicant/Fiscal Sponsor below:

Applicant/Fiscal Sponsor Name*

Character Limit: 100

Federal Tax ID Number (FEIN)*

9 digits, no space/hyphens

Character Limit: 10

Street Address*

Character Limit: 100

City*

Character Limit: 100

State*

Character Limit: 2

Zip*

Character Limit: 10

County*

Character Limit: 100

PA House District*

<u>Use this website</u> to look up PA House and Senate districts.

Character Limit: 25

PA Senate District*

Use this website to look up PA House and Senate districts.

Character Limit: 25

Web URL*

Character Limit: 2000

Contact First Name*

Character Limit: 100

Contact Last Name*

Character Limit: 100

Contact Title*

Contact Phone*

Character Limit: 25

Contact Email*

Character Limit: 254

Fiscal Sponsorship*

Is the applicant a fiscally sponsored organization?

Choices

Yes

No

Fiscally Sponsored Organization Information

Enter information for the Fiscally Sponsored Organization below, if applicable:

Fiscally Sponsored Organization Name

Character Limit: 100

Fiscally Sponsored Organization Street Address

Character Limit: 100

Fiscally Sponsored Organization City

Character Limit: 100

Fiscally Sponsored Organization State

Character Limit: 2

Fiscally Sponsored Organization Zip

Character Limit: 15

Fiscally Sponsored Organization County

Character Limit: 100

Fiscally Sponsored Organization Web URL

Character Limit: 2000

Fiscally Sponsored Organization Contact First Name

Character Limit: 100

Fiscally Sponsored Organization Contact Last Name

Fiscally Sponsored Organization Contact Title

Character Limit: 100

Fiscally Sponsored Organization Contact Phone

Character Limit: 25

Fiscally Sponsored Organization Contact Email

Character Limit: 254

Financial and Job Information

Total Revenue*

Total revenue for your **most recently completed fiscal year** as reported on your IRS Form 990 line 12 (revenue means all contributed and earned cash income, and realized income from investments, as applicable. Do not include in kind).

If your revenue is below \$50,000 and you submit a postcard 990 OR you are a non-arts organization with an arts program, you **MUST** attach Board/Committee financial statements for your most recently completed **TWO** fiscal years in the Attachments section. The program financial statement must include program revenue, including contributed and earned income and income realized from investments, as applicable, and expenses.

Character Limit: 20

Current Number of Full-Time Equivalent (FTE) Jobs*

FTE is calculated as a minimum of 35 hours per week. As applicable, include contractors or leased employees providing consistent services under your organization's direct supervision. For non-arts organizations, provide the number of FTEs working within your arts program.

Character Limit: 20

Maximum Number of Full-Time Equivalent (FTE) Jobs*

To the extent that your FTE count varies during the year due to seasonality of programming or operational needs, provide your anticipated high mark of FTE jobs through the end of the grant period. As applicable, include contractors or leased employees providing consistent services under your organization's direct supervision.

Narrative

Mission Statement*

Provide your mission statement. If you represent an arts program within a larger non-arts organization that does not have an arts-specific mission, provide an artistic statement and the goals of your arts program.

Character Limit: 1000

Community Served*

Briefly describe the community you serve and why.

Character Limit: 3000

Review Criteria

Community Value – Applicant Demonstrates:

Artistic offerings and/or services that strengthen its community culturally, educationally, and/or economically.

1. Over the past year, how did your artistic offerings and/or services support your community culturally, educationally, and/or economically? (Your response may include a description of the value provided to your community, whether adding to its cultural landscape, educational opportunities, or economic opportunities promoted directly or indirectly within your community).

Artists and artistic offerings and/or services involve and are meaningful to the community being served.

2. Over the past year, describe how artistic decisions were made and by whom. How did you know your artistic products and/or services were meaningful to your community?

Relevant arts learning opportunities for community members.

3. Over the past year, describe how you defined and determined the impact of your arts learning initiatives within your community.

<u>Diversity, Equity, and Inclusion Value - Applicant Demonstrates:</u>

Apart from being audience members or beneficiaries, community members are central to the design of the applicant's work.

4. Over the past year, describe your community's involvement in your work and its feedback related to your artistic product and/or services.

Plans and action-oriented practices toward diversity, equity, inclusion, and access in ways that are relevant to your community, including reaching new audiences.

5. Over the past year, describe your organization's plans and work to advance diversity, equity, inclusion, and/or access. How did you know that the plans and actions were relevant to your

community?

<u>Stewardship Value - Applicant Demonstrates:</u>

Planning processes appropriate to the organization, mission and goals.

6. Describe your most recently completed planning process, including who was involved. Describe the key findings and goals that followed this planning process, and how you track and measure progress.

Capacity to carry out programs and projects as planned.

7. Over the past year, how did you ensure that you were able to carry out your programs or projects? To what degree were you able to carry out programs as planned?

Appropriate financial planning and oversight practices.

8. Describe your financial planning and oversight practices, including who participates in and is accountable for financial management and organizational oversight. Describe the financial condition of your organization and key actions taken to ensure adequate resources are available to carry out your mission or arts program.

Narrative Upload*

Please upload your narrative in PDF format. Be sure to answer all review criteria questions above. Your narrative must be no longer than 35,000 characters total (with spaces), which is approximately 5 pages long.

File Size Limit: 2 MB

Required Attachments

If any of the applicable attachments are not submitted, the application <u>will not</u> be considered for funding.

IRS Determination Letter

Upload the application's IRS Determination Letter confirming nonprofit 501(c) status. <u>Does not apply to Local Governments</u>.

File Size Limit: 2 MB

990/Financial Statements

• For arts organizations: Upload your TWO most recently completed form of 990 (or 990-EZ or 990-N) IRS tax filings. If your revenue is below \$50,000 and you submit a postcard 990 (990-N), you MUST attach a Board/Committee approved financial statement for your most recently completed TWO fiscal years. The program financial statement must include program revenue, including contributed and earned income and income realized

from investments, as applicable, and expenses.

For non-arts organizations: Upload a Board/Committee approved arts-specific program
financial statement for your most recently completed TWO fiscal years. The program
financial statement must include program revenue, including contributed and earned
income and income realized from investments, as applicable, and expenses. In-kind is
not included.

• For those applicants being fiscally sponsored:

- O Upload the fiscally sponsored entity's arts-specific program financial statement for its TWO most recently completed fiscal years. The program financial statement must include program revenue, including contributed and earned income and income realized from investments, as applicable, and expenses.
- O Upload the Sponsorship Agreement between the fiscal sponsor and the entity being sponsored. This must include:
 - duties and responsibilities of each part,
 - the term of the agreement,
 - termination provisions,
 - ownership of intellectual property,
 - dispute and indemnification clauses,
 - and the method of the holding and distribution of funds.
- O LLCs **MUST** also submit a Certificate of Organization-Domestic Limited Liability Company filed with the Pennsylvania Department of State Bureau of Corporations and Charitable Organizations. <u>At least three</u> organizers must be listed in the Certificate of Organization.

Upload #1

File Size Limit: 5 MB

Upload #2

File Size Limit: 5 MB

Upload #3

File Size Limit: 5 MB

Schedule of Activities*

Provide a succinct (no more that one page) lists of arts activities for the previous two years (for example: 3 concerts; 2 workshops; 5 exhibitions). This will be shared with the panel.

File Size Limit: 2 MB

Program Highlights

You may submit up to three links (URLs) to artistic content or programmatic highlights you generated during the previous two years. Note: Links can be to file sharing sites (Google Drive, DropBox, etc.), YouTube, Vimeo, websites, Instagram accounts, etc. Please be sure to grant proper access as applicable.

Character Limit: 1000

Representations and Warranties

Representations and Warranties

The Applicants makes the following representations and warranties to Centre Foundation. Effective as of the submission of this application, the applicant hereby represents and warrants to the best of its knowledge and belief that:

- 1. The Information the Applicant presents in this application and any attachments thereto is true and correct.
- 2. The Applicant has ongoing organizational expenses.
- 3. The Applicant has not received an audit finding in respect of its status as a going concern and expects to remain a going concern through the grant term.
- 4. The Applicant expects to deliver arts-related programming or services and fulfill its obligations under the grant, whether virtually or in person, during the applicable grant term.

I hereby agree:*

Choices

Yes

No

Signing Authority

Centre Foundation has implemented an electronic contracting procedure for awarded funds using an e-signature process. Please provide the name and email address of the authorized individual who will execute a contract, if awarded.

Name*

Character Limit: 100

Email*