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NYCULTURE Online Cultural Development Fund

Instructions: Application Renewal Final Report | Text Size: a A A

Welcome to Your Cultural Affairs Account

Log in to your Cultural Affairs Account below using your email address and password. Through this account, you can access the Cultural Development Fund online forms from the NYC Department of Cultural Affairs, including:

- Grant Application(s)
- Grant Renewal(s)
- Final Report(s)

Is this your first time logging in? If so, click Register New Account to start creating a profile for you and your organization. Note: If your organization is already registered and you would like to access its online forms, you must be invited by the organization's Primary User.

PLEASE NOTE: In FY18 the deadline for Supplemental materials has changed from a "postmark" date to a "received by" deadline. This change will remain in effect this year. Hard copies of the Supplemental materials must be RECEIVED in our offices at 31 Chambers Street no later than 6:00 pm on February 12, 2018.

Log In:

Email Address: [_____]

Password: [_____]

ACCOUNT LOG IN

Register New Account | Forgot/Change Password

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NYCULTURE Online Cultural Development Fund

Instructions: Application Renewal Final Report | Text Size: A A A | Logout

Organization Name:

Cultural Affairs Account

Welcome to your NYC Department of Cultural Affairs Account

Use this page to create or edit current Cultural Development Fund forms and to access previously submitted forms. Be sure to keep your Cultural Affairs account up-to-date by editing your Account Profile below. Always contact your Program Specialist directly to notify the Agency of significant administrative changes.

ACCOUNT PROFILE

Past and Current Forms:

Use the links below to access submitted or draft forms for the organization. Submitted forms cannot be edited, but can be viewed as PDFs (or HTML if PDF is not available).

Year	Application Status	Final Report Status	Additional Documents
2019	**Start Application**		
2018	Draft (HTML)		
2017	Awarded (PDF)	Initial Draft	Budget Overview
2015	Submitted (PDF)		Budget Overview

For further information about the CDF process and to download forms, templates, and seminar schedules, visit the Programs Unit web page.

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Organization Information:
- ➤ Organization Profile ☐
- ➤ Mission & Outreach
- ➤ Facilities & Venues ☐
- ➤ Attendance/Education ☐
- ➤ Previous Activities

Staff/Board Info:
- ➤ Staff Information ☐
- ➤ Board Information ☐

Budget Information:
- ➤ Operating Budget ☐
- ➤ Budget Notes ☐
- ➤ Budget Information ☐

Proposed Services:
- ➤ Project Summary ☐

Final Steps:
- ➤ Supplemental Materials ☑
- ➤ Final Review & Submit ☐

Applicant's Name:	
AKA:	
Organization ID (EIN):	
Application ID:	
Application Status:	

Organization Profile

Please print and carefully review the Instructions document, which provides detailed instructions for completing each section. Every item of information requested is essential; all fields must be completed in order to submit the Application. If a field does not apply to your organization, type "0" or "N/A."

Portions of the online Application form will be pre-populated for organizations that submitted a CDF Application or Renewal in Fiscal 2018. These pre-populated fields are editable and must be updated to reflect current information.

Attention:

Before you fill out any other part of this Application, enter your organization's FY16 Operating Income. Based on this figure, the application will be designated for review by either a borough-specific panel for annual funding or a discipline-specific panel for multi-year funding. The figure entered below must be accurate and should match information from your FY16 IRS 990; this figure should not include in-kind support. If you plan to designate Social and/or Multi-Service, Religious, or Educational Institute as your Organizational Code below, the FY16 Operating Income should reflect the organization's cultural budget only. If you submitted an online CDF Application in Fiscal 2018, this field will be pre-populated with your FY15 Operating Income. You MUST update this to reflect your FY16 Operating Income.

(?) FY16 Operating Income: [_____]

(?) FY16 Total Expenses: [_____]

Executive Director Information:

Salutation: [- Select - ▼]

First Name: [_____]

Last Name: [_____]

Title: [_____]

Phone Number: [___][___][___]   Ext. [_____]

Email Address: [_____]

Organization Address:

Street Address:

City:

Borough: - Select -

(?) Council District: -Select-

(?) Community Board: -Select-

Neighborhood: -Select-

State: NY

ZIP Code:

Mailing Address:

Same as Organization Address? ⦿ Yes ○ No

Street Address:

City:

State: NY

ZIP Code:

Organization Contact Information:

Phone Number:

Alternate Telephone Number:

Fax Number:

Website:

General Information:

(?) Organizational Code: - Select -

Other:

(?) FY16 Organization Income:

Incorporation Year: (YYYY)

(?) Using Conduit? ○ Yes ⦿ No

(?) Conduit's Legal Name:

PRINT PREVIEW   **SAVE** **CANCEL** ➡

Organization Information:
→ Organization Profile ☐
→ Mission & Engagement ☐
→ Facilities & Venues ☐
→ Attendance/Education ☐
→ Previous Activities ☐

Staff/Board Info:
→ Staff Information ☐
→ Board Information ☐

Budget Information:
→ Operating Budget ☐
→ Budget Notes ☐
→ Budget Information ✓

Proposed Services:
→ Project Summary ☐

Final Steps:
→ Supplemental Materials ☐
→ Final Review & Submit ☐

Mission & Engagement

Please provide responses in the space provided. If you completed an online CDF Application for Fiscal 2018, the mission statement will be pre-populated with the previous year's information. Review all the information in this section carefully and update as appropriate.

Mission, History, and Principal Activities:
Briefly describe the **mission, history, and principal activities** of your organization (2000 character limit):

Audience Engagement and Marketing:
Describe your organization's target audience(s) and how the proposed programs will be accessible to those audiences. If you have or plan to undertake specific initiatives to diversify your organization's audience (e.g., race/ethnicity, gender, age, disability), describe those here as well. Quantify any engagement, marketing, and audience development efforts for the proposed services. Address the values of equity, access, and inclusion as they apply to your organization's mission and programs. (2000 character limit) ⑦

PRINT PREVIEW   **SAVE** **CANCEL** ← →

Facilities & Venues

Please provide the following information regarding specific locations relevant to your organization, so we may better serve the field and advocate on its behalf. **Note: information from this section is not distributed to panelists, so relevant venue information must be included in your project description(s) as well.**

Facility Information:

Hours open to the public (600 character limit): (e.g., M-F, 9am-5pm)

Primary Physical Facility: - Select -

If shared, with whom:

% of annual budget spent on space:

Primary Locations/Venues:

Please identify the primary locations/venues where your organization's principal activities take place. Please note capacity of each location/venue (500 character limit):

Relocations/Expansions/Renovations:

Please explain any relocations, expansions, renovations or major improvements recently completed or planned for the coming year(s) (500 character limit):

Organization Information:
- Organization Profile
- Mission & Outreach
- Facilities & Venues
- Attendance/Education
- Previous Activities

Staff/Board Info:
- Staff Information
- Board Information

Budget Information:
- Operating Budget
- Budget Notes
- Budget Information

Proposed Services:
- Project Summary

Final Steps:
- Supplemental Materials ✓
- Final Review & Submit

PRINT PREVIEW   SAVE   CANCEL   ← →

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- ➤ Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
- Board Information ☐

Budget Information:
- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ☑
- Final Review & Submit ☐

Attendance/Education

In the applicable categories below, provide actual attendance figures for activities that took place within the five boroughs in your organization's Fiscal 2017. Include all cultural activities, not only those for which you requested Department of Cultural Affairs support. Note: Web-based programming refers to activities that use the internet to deliver services, **not merely visits to your organization's website.**

FY17 Attendance:

Public Attendance:	
Education Programs:	
Web-based Programming:	
Other:	
Total:	**0**

Ethnicity:

This section is optional; the following information is being asked for research purposes only and will not be considered in the grant-making process. Please provide a percentage breakdown of the ethnicities represented within the total attendance figure provided above. Your percentage breakdown must total 100%. Any blank fields will be automatically filled with "0." Percentages may be estimates.

Native American/Alaskan (%):	0
Asian (%):	0
African American/Black (%):	0
Hispanic/Latino (%):	0
Native Hawaii/Pacific Islander (%):	0
White (%):	0
Other (%):	0
Total (%):	**0**

Individuals with Disabilities:

How does your organization inform the public about its access for individuals with disabilities (e.g., wheelchair access or services for the visually or learning impaired)?

FY17 Educational Programs:

This section refers to educational services benefiting children in grades Pre-K through 12.

Does your organization provide educational services?	◉ Yes ○ No
Does your organization provide direct service to public school students?	○ Yes ◉ No
Does your organization provide arts in education professional development?	○ Yes ◉ No
Total cost to provide educational programs:	[_____]

Indicate what percentage of the cost of providing educational services came from the following sources in FY17. Sources must total 100%.

DoE (%):	0
DYCD (%):	0
DCA (%):	0
State Education (%):	0
NYSCA (%):	0
FED (%):	0
Corporation (%):	0
Foundation (%):	0
Recipient (%):	0
Other (%):	0
Total (%):	**0**
Do your teaching artists model their lessons/curriculum using the NYC DoE's Blueprint for teaching and learning?	○ Yes ◉ No

PRINT PREVIEW   **SAVE** **CANCEL** ← →

Organization Information:

- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- ➡ Previous Activities ☐

Staff/Board Info:

- Staff Information ☐
- Board Information ☐

Budget Information:

- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:

- Project Summary ☐

Final Steps:

- Supplemental Materials ☑
- Final Review & Submit ☐

Previous Activities

Enter your organization's activities that have taken place between July 1, 2016 and now. You may include up to eight (8) activities, so group events that are related or which occur within the same season and/or fiscal year (e.g., 2017 Mainstage Season). Please consider the projects for which you are requesting support in the current Fiscal Year as you complete this section. At least one activity is required to complete this section.

Click the BLUE Save Activity button located at the bottom of the page to add an activity to the list below.

Previous Activities: Set Priority

Click the Set Priority link to select an activity and use arrows to indicate its priority. The activity at the top of the list will be considered your organization's highest priority.

Activity Description	Date(s)	Location	# of People
No Activities Found			

Activity Description (250 character limit):	
Date(s): (e.g., 10/01/2017, 05/01/2017-05/15/2017)	
Location:	
(?) Number of Direct Recipients:	

Save Activity | Clear Fields

PRINT PREVIEW   SAVE   CANCEL   ← →

Organization Information:
- Organization Profile ✓
- Mission & Outreach ✓
- Facilities & Venues ✓
- Attendance/Education ✓
- Previous Activities ✓

Staff/Board Info:
- ➡ Staff Information ☐
- Board Information ✓

Budget Information:
- Operating Budget ✓
- Budget Notes ✓
- Budget Information ✓

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ✓
- Final Review & Submit ☐

Staff Information

Enter the total number of staff working for your organization below. Please note employees are considered full time if they are permanent staff members working 35 hours a week or more, whether paid or unpaid. NOTE: If arts and culture are only one component of a larger mission, provide only information about members of your staff involved in arts and culture programming.

General Staffing Information:

(?) Total Number of Staff: [____]

Total Number Paid: [____]

Total Number Full-time: [____]

Organizational Staff, Leadership, and Stewardship:

Describe the efforts your organization is making to reflect diverse representation in your organization's staff (at all employment levels), leadership, and board. Please address the values of equity, access, and inclusion as they apply to your organization's workforce, as well as your organization's investment in the development of voices currently underrepresented in the broader cultural workforce. (800 character limit)

[text box]

Principal Administrative/Artistic Staff:

Enter up to ten (10) individuals you consider principal administrative and artistic staff members. Use the drop-down menus to indicate full- or part-time status and salary range. At least one staff member must be entered for this section to be complete.

Click the BLUE Save Staff Member button located at the bottom of the page to add a staff member to the list below.

Name of Staff Member	Title	FT/PT	Code

There are currently no staff members specified for this application.

First Name: [____]

Last Name: [____]

Title of Staff Member: [____]

Full Time or Part Time? - Select - ▾

(?) Salary Code: - Select - ▾

[Save Staff Member] [Clear Fields]

[PRINT PREVIEW]   [SAVE] [CANCEL] ← →

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
- ➡ Board Information ☐

Budget Information:
- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ✓
- Final Review & Submit ☐

Board Information

Under General Board Members Information, tell us about the activities of your full governing board. Then enter up to six (6) Board Members indicating his/her name, officer title if applicable, profession/affiliation, and the year s/he joined the board. If your board has more than six members, enter just the officers here (your full Board list will be submitted as part of the required supplemental materials). At least three Board Members must be entered for this section to be complete.

Click the BLUE Save Board Member button located at the bottom of the page to add a Board Member to the below list.

General Board Information:

of members on full board: [   ]

Do members have term limits? ○ Yes ⦿ No

How often does the board meet? [- Select -   ▾]

Other: [   ]

Does your board have an active committee structure? ○ Yes ⦿ No

(?) Does your board have an audit/finance committee? ○ Yes ⦿ No

(?) Board gifts as a % of current Operating Income: [   ]

Expected level of "give or get" ($): [   ]

Board Members/Trustees:

Name of Board Member	Title	Prof/Aff	Year
There are currently no board members specified for this application.			

First Name: [   ]

Last Name: [   ]

Board Member Title: [   ]

Profession/Affiliation: [   ]

Appointment Year: [   ] (YYYY)

[Save Board Member] [Clear Fields]

[PRINT PREVIEW]   [SAVE] [CANCEL] ⬅ ➡

Operating Budget

BUDGET OVERVIEW

In this section, please enter your organization's annual operating budgets for the most recently completed Fiscal Year, projections for the current Fiscal Year, and projected Fiscal Year. Begin by telling us when your Fiscal Year starts for each period. Then enter budget figures according to your organization's Fiscal Year for each category requested. **Do not include in-kind or capital support in any of the figures provided.** Make sure that you refer to the corresponding help section for definitions of each income and expense category.

If you submitted an online CDF Application or Renewal for Fiscal 2018, the fields in this section will be pre-populated with the previous Application's information. For most applications, these figures were projected at the time of submission and must be updated. If you have designated Social and/or Multi-Service, Educational, or Religious as your Organizational Code, these figures should reflect the organization's cultural budget only. Please make sure to review <u>all</u> of the information in this section carefully and **update as appropriate.**

Use the Budget Overview feature at the top of the "Final Review & Submit" page to review both organizational and project budgets on one page.

Fiscal Years:

FY17 Start Date:	☐ ☐	(MM/YYYY)
FY18 Start Date:	☐ ☐	(MM/YYYY)
FY19 Start Date:	☐ ☐	(MM/YYYY)

Earned Income:

	FY17 (Completed)	FY18 (Current)	FY19 (Projected)
(?) Admissions/Box Office:	☐	☐	☐
(?) Contracted Services:	☐	☐	☐
(?) Tuition, Class/Workshop Fees:	☐	☐	☐
(?) Publications:	☐	☐	☐
(?) Fundraising (Gross):	☐	☐	☐
(?) Other Earned Income:	☐	☐	☐
Total Earned Income:	$0	$0	$0

Unearned/Non-government Income:

	FY17 (Completed)	FY18 (Current)	FY19 (Projected)
(?) Corporate Contributions:	☐	☐	☐
(?) Foundation Grants:	☐	☐	☐
(?) Individual Contributions:	☐	☐	☐
(?) Other Unearned:	☐	☐	☐
Subtotal:	$0	$0	$0

Unearned/Government Income:

	FY17 (Completed)	FY18 (Current)	FY19 (Projected)
(?) NEA:			
(?) NYSCA:			
(?) Other Federal/State:			
(?) DCA/Program Services:			
(?) DCA/Other:			
(?) Other City:			
(?) Local Arts Councils:			
Subtotal:	$0	$0	$0
Total Unearned Income:	$0	$0	$0
Total Income:	$0	$0	$0

Expenses:

	FY17 (Completed)	FY18 (Current)	FY19 (Projected)
(?) Personnel - Administrative:			
(?) Personnel - Artistic:			
(?) Personnel - Technical/Production:			
(?) Outside Professional Services:			
(?) Space Rentals/Utilities:			
(?) Equipment Rental/Supplies:			
(?) Travel/Transportation:			
(?) Advertising/Promotion /Marketing:			
(?) Other Expenses:			
Total Expenses:	$0	$0	$0
Surplus/Deficit:	$0	$0	$0

PRINT PREVIEW   SAVE   CANCEL   ← →

Budget Information

The following information provides a budget history and projection for your organization. Please ensure that all actual and projected amounts for all budget categories are correct.

	Annual Operating Budgets:			Project Budgets:
	FY17 (Completed)	FY18 (Current)	FY19 (Projected)	TOTAL (all projects)
Earned Income				
Admissions/Box Office	$0	$0	$0	$0
Contracted Services	$0	$0	$0	$0
Tuition, Class/Workshop Fees	$0	$0	$0	$0
Publications	$0	$0	$0	$0
Fundraising (Gross)	$0	$0	$0	$0
Other Earned Income	$0	$0	$0	$0
Total Earned Income	$0	$0	$0	$0
Unearned Income				
Non Government				
Corporate Contributions	$0	$0	$0	$0
Foundation Grants	$0	$0	$0	$0
Individual Contributions	$0	$0	$0	$0
Other Unearned Income	$0	$0	$0	$0
SUBTOTAL	$0	$0	$0	$0
Government				
NEA	$0	$0	$0	$0
NYSCA	$0	$0	$0	$0
Other Fed/State	$0	$0	$0	$0
Department of Cultural Affairs/Program Services	$0	$0	$0	$0
Department of Cultural Affairs/Other	$0	$0	$0	$0
Other City	$0	$0	$0	$0
Local Arts Councils	$0	$0	$0	$0
SUBTOTAL	$0	$0	$0	$0
Total Unearned Income	$0	$0	$0	$0
TOTAL INCOME	$0	$0	$0	$0

	Annual Operating Budgets:			Project Budgets:
	FY17 (Completed)	FY18 (Current)	FY19 (Projected)	TOTAL (all projects)
Expenses				
Personnel - Administrative	$0	$0	$0	$0
Personnel - Artistic	$0	$0	$0	$0
Personnel - Technical/Production	$0	$0	$0	$0
Outside Prof. Services	$0	$0	$0	$0
Space Rentals/Utilities	$0	$0	$0	$0
Equipment Rentals/Supplies	$0	$0	$0	$0
Travel/Transportation	$0	$0	$0	$0
Advertising/Promotion/Marketing	$0	$0	$0	$0
Other Expenses	$0	$0	$0	$0
TOTAL EXPENSES	$0	$0	$0	$0

	Annual Operating Budgets:			Project Budgets:
	FY17 (Completed)	FY18 (Current)	FY19 (Projected)	TOTAL (all projects)
SURPLUS/(DEFICIT)	$0	$0	$0	$0

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
- Board Information ☐

Budget Information:
- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ☑
- Final Review & Submit ☐

Budget Notes

Please answer each of the following budget questions related to the figures entered in the Operating Budget section. Provide as much detail as you can in the space provided, and do not leave any section blank.

Fiscal Year Variation:

For figures entered for the three Operating Budgets, please explain every item that varies by 20% between any of the three fiscal years (1000 character limit):

Other Sources of Income and Expenses:

For FY19 figures, please detail other sources of income and expenses for the following fields: Contracted Services, Other Earned Income, Other Unearned Income, Other Federal and State Income, DCA/Other Income, Other City Income, Local Arts Councils, Outside Professional Services, and Other Expenses.

Surplus/Deficit:

Provide an explanation of each surplus and/or deficit listed in any of the three fiscal years in the Operating Budget. Explain the origin of the surplus or deficit, and give details about the impact of the surplus and/or plans to address the deficit moving forward. (1000 character limit):

In-kind Support:

In-kind Support for FY18:

(?) Specify the sources for the amount shown as In-kind Support (800 character limit):

Further Explanation:

Account for any other anomalies or items in the figures entered for the Operating Budgets that may require further explanation (1000 character limit):

PRINT PREVIEW   SAVE   CANCEL   ←   →

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
- Board Information ☐

Budget Information:
- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ☑
- Final Review & Submit ☐

Budget Information

If your organization has any Special Funds such as endowments or cash reserves, select 'Yes.' If Special Funds are not applicable to your organization, select 'No.'

Select the Fund Type and Restrictions from the drop-down menus. Click the BLUE Save Fund button located at the bottom of the page to save your entry and add it to your list of funds. Enter up to four Special Funds. If you need to delete a fund as you are entering the information, click the BLUE Clear Fields button.

Major Operating Budget Increase/Decrease:

If you anticipate any major (more than 10%) increases or decreases in your operating budget in FY20 and/or FY21, please explain (800 character limit):

Special Funds:

Does your organization have any special funds?   ○ Yes   ○ No

Type of Fund	Res./UnRes.	Amt.17	Amt.18	Purpose
No Special Funds Found				

Fund Type: - Select -

Restricted/Unrestricted: - Select -

Amount as of 07/01/17 ($):

Projected Amt for 07/01/18 ($):

Purpose (if restricted):

[Save Fund] [Clear Fields]

[PRINT PREVIEW]   [SAVE] [CANCEL] ← →

Organization Information:
→ Organization Profile ☐
→ Mission & Outreach ☐
→ Facilities & Venues ☐
→ Attendance/Education ☐
→ Previous Activities ☐

Staff/Board Info:
→ Staff Information ☐
→ Board Information ☐

Budget Information:
→ Operating Budget ☐
→ Budget Notes ☐
→ Budget Information ☐

Proposed Services:
→ Project Summary ☐

Final Steps:
→ Supplemental Materials ☑
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Project Summary

Click NEW PROJECT to begin entering information about the project for which you are requesting support. If you have begun drafting project information and want to edit or change information, click on the title of the project below. You may request support for up to five (5) projects.

Projects appear in priority order; the project at the top of the list will be considered your organization's highest priority.

Once projects are entered, you may change the priority of each project using the "Set Priority" link.

Projects: Set Priority

Project Title	Status
No Projects Found	

New Project

Amount Totals:
Total cost and request amounts will be tallied automatically based on the information provided in the budget of each project for which you are requesting support. Be sure to include project expenses in your organizational budget.

The minimum award is $5,000 for organizations with FY16 operating incomes of $250,000 or less, and $15,000 for organizations with FY16 operating incomes greater than $250,000. In order for your application to be considered for funding, ensure your DCA project requests add up to at least the minimum award in your budget category.

Total Project Cost ($): 0

Total Request Amount ($): 0

Designation:
Select **one** borough and **one** discipline to describe your overall Application, based on the information entered about the proposed projects. Consider your project priorities when making this designation; your selection will determine the panel in which your application is reviewed.

Discipline: - Select -

Borough: - Select -

PRINT PREVIEW   SAVE   CANCEL ← →

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- → Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
- Board Information ☐

Budget Information:
- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ✓
- Final Review & Submit ☐

Projects

Sample Project

| Overview | Details | Budget |

We encourage you to apply only for projects that you can realistically complete in the upcoming Fiscal Year. Remember that Department of Cultural Affairs funding cannot support more than 50% of the total project costs and that if your application is funded, all projects must be completed as proposed, **regardless of the level of funding.** Refer to the Instructions for information on completing a competitive Application. Remember to type "0" or "N/A" for fields that are not applicable. Please enter your Project Title first.

General Information:

Multiple values can be selected for some questions. (PC users may select more than one item by holding the CONTROL key while clicking on the selections. Mac users should click the Command key (the ⌘ key) while clicking on multiple selections.) The "Project Cost Amount" automatically populates based on the "Total Expenses" field on the Project Budget page. The "Project Request Amount" automatically populates based on the "Project Request Amount" entered on the Project Budget page. The requested amount cannot exceed 50% of the project expenses.

(?) Project Title:	Sample Project
Project Cost ($):	0
Request Amount ($):	0
Discipline Code:	- Select -
Borough(s):	Bronx / Brooklyn / Manhattan / Queens / Staten Island
(?) Council District(s):	

Synopsis:

Please summarize the project, based on the full project description provided in the Details section (480 character limit):

Proposed Services Beyond FY19:

If the project for which you are requesting funding is a multi-year project, please detail how it will evolve/change in FY20 and FY21 (800 character limit): ⑦

If the project for which you are requesting funding is not a multi-year project, please provide information regarding projects that will occur in FY20 and FY21 (800 character limit): ⑦

PRINT PREVIEW   **SAVE**   **CANCEL PROJECT**   ➡

Projects

Sample Project

Overview	**Details**	Budget

Remember that all proposed activities **must** occur within the City's upcoming fiscal year (July 1, 2018 - June 30, 2019) and within the five boroughs. This section requires a high level of detail and cannot be completed correctly without referring to the Instructions.

Project Description:
Please describe the services you will provide with a high level of detail, including **who, what, when, where, why, how, how many, and how often.** Please consider the readability of the project narrative and format your description accordingly; carriage returns count as a single character (3500 character limit):

Project Details:
Multiple values can be selected for "Specific Audience." PC users may select more than one item by holding the CONTROL key while clicking on the selections. Mac users should click the Command key (the ⌘ key) while clicking on multiple selections.

Start Date of Activity:	(MM/DD/YYYY)
End Date of Activity:	(MM/DD/YYYY)
(?) Number of Direct Recipients:	
(?) Specific Audience:	Adults / General / Grades 6-8 / Grades 9-12
Will you charge for this service?	○ Yes ● No
If yes, describe pricing and who pays:	
Do you provide discounts?	○ Yes ● No
If yes, please describe discount program:	

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
- Board Information ☐

Budget Information:
- Operating Budget ☐
- Budget Notes ☐
- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- Supplemental Materials ☑
- Final Review & Submit ☐

Artist Compensation:

Are artists compensated? ○ Yes ◉ No

Provide detailed explanation of compensation:

Do artists pay to participate? ○ Yes ◉ No

Provide detailed explanation of cost structure:

Education Program:

(?) Is this an education program that benefits children in grades Pre-K through 12? ○ Yes ◉ No

Category of education program: – Select –

Describe how your organization evaluates the success of the education program. If applicable, describe how your teaching artists collaborate with teachers at the school to design and implement the project. (500 character limit):

[PRINT PREVIEW]   [SAVE] [CANCEL PROJECT] [←] [→]

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- Previous Activities ☐

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Projects

BUDGET OVERVIEW

Sample Project

Overview	Details	Budget

In this section, please enter project budget figures for each category. **Do not include in-kind or capital support.** Refer to the Instructions or help buttons for definitions of each income and expense category. Enter only whole dollars with no decimals.

Earned Income:

(?) Admissions/Box Office:	_____
(?) Contracted Services:	_____
(?) Tuition, Class/Workshop Fees:	_____
(?) Publications:	_____
(?) Fundraising (Gross):	_____
(?) Other Earned Income:	_____
Total Earned Income:	$0

Unearned/Non-government Income:

(?) Corporate Contributions:	_____
(?) Foundation Grants:	_____
(?) Individual Contributions:	_____
(?) Other Unearned Income:	_____
Subtotal:	$0

Unearned/Government Income:

(?) DCA Project Request:	_____
(?) NEA:	_____
(?) NYSCA:	_____
(?) Other Federal/State:	_____
(?) DCA/Other:	$0
(?) Other City:	_____
(?) Local Arts Councils:	_____
Subtotal:	$0
Total Unearned Income:	$0
Total Income:	$0

Anticipated Funding:

Itemize any anticipated direct or indirect funding sources for the project by name and amount. **Indicate received or committed funds with an asterisk** (e.g., ABC Foundation: $10,000*). (800 character limit):

Expenses:

(?) Personnel - Administrative:

Personnel - Artistic:

Personnel - Technical/Production:

(?) Outside Professional Services:

(?) Space Rentals/Utilities:

(?) Equipment Rental/Supplies:

(?) Travel/Transportation:

(?) Advertising/Promotion /Marketing:

(?) Other Expenses:

Total Expenses: $0

Surplus/Deficit: $0

Other Sources of Income and Expenses:

For FY19 figures, please detail other sources of income and expenses for the following fields: Contracted Services, Other Earned Income, Other Unearned Income, Other Federal and State Income, Other City Income, Local Arts Councils, Outside Professional Services, and Other Expenses (800 character limit):

PRINT PREVIEW

SAVE CANCEL PROJECT ←

PROJECT SUMMARY →

Organization Information:
- Organization Profile ☐
- Mission & Outreach ☐
- Facilities & Venues ☐
- Attendance/Education ☐
- Previous Activities ☐

Staff/Board Info:
- Staff Information ☐
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Budget Information:
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- Budget Information ☐

Proposed Services:
- Project Summary ☐

Final Steps:
- ➡ Supplemental Materials ☑
- Final Review & Submit ☐

Supplemental Materials

Please provide the following information on your organization's tax-exempt status and insurance information:

Tax-exempt status and insurance information:

(?) Is this organization tax-exempt?   ○ Yes   ◉ No

(?) Will the services described in this application be covered by Comprehensive General Liability insurance?   ○ Yes   ◉ No

Amount of bodily injury: [   ]

Amount for property damage: [   ]

Supplemental Materials:
ATTENTION: The required Supplemental materials must be received by February 12, 2018 in order for your Application to be considered complete and eligible for funding. There will be no exceptions to this deadline.

Supplemental materials must either be:

HAND DELIVERED to the Department of Cultural Affairs offices at 31 Chambers Street during business hours on any day prior to the deadline, but no later than 6:00 p.m. on February 12, 2018.

--OR--

RECEIVED no later than February 12, 2018.
PLEASE NOTE: In FY18 the deadline for the Supplemental materials changed from a "postmarked by" date to a "received by" deadline. This change will remain in effect this year. Hard copies of the Supplemental materials must be RECEIVED in our offices by 6:00 p.m. on February 12, 2018, whether delivered via mail carrier or hand-delivery. Organizations that fail to meet either the online deadline or received-by deadline for Supplemental materials will be ineligible for funding in FY19.

Based on your organization's budget size and tax-exempt status, paper copies of the following Supplemental materials are required:

- Two copies of recent, relevant background material (see Instructions for suggestions)
- One copy of each of the applicable FY16 financial documents based on your organization's FY16 operating income:

Under $50,000:	IRS 990-N (postcard) **AND** Signed DataArts Annual Report
$50,000 or over but less than $250,000:	IRS 990
$250,000 or over but less than $500,000:	IRS 990 **AND** Independent Accountant's Review (IAR) (An **IAR** is a financial review by an outside accountant of your organization's budgets.)
$500,000 or over:	IRS 990 **AND** Audited Statement (An **Audited Financial Statement** is an official audit by an outside accountant.)

- ONE copy of IRS 501(c)(3) determination letter (see requirements below for organizations using a fiscal sponsor/conduit)
- ONE copy of the DCA CDF Funder Report for DataArts (formerly known as the Cultural Data Project) with complete FY16 information
- ONE copy of organization's Funding Plan on the template provided by DCA
- ONE copy of the full Board List on the template provided by DCA

For organizations selecting Social and/or Multi-Service, Educational, or Religious as an Organizational Code:
- ONE copy of the full organizational budget completed on the budget template provided by DCA

For organizations using a fiscal sponsor/conduit:
- ONE copy of proof of incorporation in New York State. Acceptable forms of documentation include NYS Incorporation Certificate and Board of Regents Charter under 216 of the State Education Law
- ONE copy of a letter from the fiscal sponsor indicating that it has agreed to act as a fiscal sponsor for DCA's Fiscal 2019 CDF Application. This letter must be dated January 1, 2018 or later
- ONE copy of the fiscal sponsor's IRS 501(c)(3) determination letter (in lieu of the applicant organization's IRS 501 (c)(3) letter)

By checking the box below, you certify that the above materials must be submitted separately in order to complete your Application in full.

☑ **Yes**, *I understand that the above documentation must be submitted separately from the online portion of the Application to be considered complete.*

PRINT PREVIEW   SAVE   CANCEL   ←   →

Final Review & Submit

You are required to review your Application thoroughly for accuracy and completeness before submission. Review each field and all information carefully. Be sure to save a copy of the final version for your records.

The deadline for all material related to the Fiscal 2019 Application is **February 12, 2018**. The Application form, which is the online portion, must be submitted no later than midnight on Monday, February 12, 2018. **In FY18 the deadline for Supplemental materials changed from a "postmark" date to a "received by" deadline. This change will remain in effect this year.** Hard copies of the Supplemental materials must be RECEIVED in our offices at 31 Chambers Street no later than 6:00 pm on February 12, 2018, whether delivered via mail carrier, messenger, or hand-delivery. Organizations that fail to meet either the online deadline or received-by deadline for Supplemental materials will be ineligible for funding in FY19.

Use the buttons at the top for a comprehensive view of your operating and project budgets, or to print a copy of this preview. You can click on links within the index below to skip to certain sections but be sure to review all sections. You will be asked to certify the Application form before you hit SUBMIT. Every required field in the online form must be filled out in order for your Application form to be accepted electronically.

Index:

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Supplemental Materials
Required