

ARTS COUNCIL OF CALVERT COUNTY GRANT

Under the Maryland State Arts Council Community Arts Development Program

GENERAL OPERATING GRANT REQUIREMENTS

- The Arts Council of Calvert County (ACCC) has General Operating Grants available to support arts organization's operating budgets between July 1, 2008 and June 30, 2009. These grants will be available as described in the following criteria.
- Applications must be submitted on the official Arts Council of Calvert County application form, available from the Arts Council office, 410.257.7005, and at the Arts Council website, www.calvertarts.org
- **Completed applications (original and three copies) must be received in the Arts Council offices by Wednesday, April 30, 2008. Applications will not be accepted after April 30, 2008.**
- Applications are reviewed by the three-member Grants Review Committee. The Committee's recommendations are presented to the Arts Council of Calvert County's Board of Directors for a final decision. Applicants will be notified of results by mail no later than June 30th, 2008.
- Grant requests may not exceed 10% of applicant's operating budget or \$4,000, whichever is the lesser amount. The applicant is required to provide a one-to-one (1:1) dollar match to the amount requested.
- A Final Report must be completed and filed with the Arts Council by June 30. Failure to file a Final Report may jeopardize approval of future requests.
- Grantees must give credit to the Arts Council of Calvert County, the Maryland State Arts Council, and the National Endowment for the Arts in brochures, programs, news releases, publications, and other publicity materials. When no printed information is used, verbal credit must be given. Failure to acknowledge the above organizations as sources of funding will jeopardize the approval of future requests.

ARTS COUNCIL OF CALVERT COUNTY

P.O. Box 2569
PRINCE FREDERICK, MD 20678
410.257.7005
FAX: 410.535.0302
WWW.CALVERTARTS.ORG

DATE RECEIVED:
AMT. REQUESTED: \$
AMT AWARDED: \$

**GENERAL OPERATING GRANT APPLICATION
FY 2009
(JULY 1, 2008 THRU JUNE 30, 2009)**

ORGANIZATION IDENTIFICATION

Name of Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ County: _____

Contact Person: _____

Mailing Address: _____

E-Mail: _____

Home Telephone: _____ Business Telephone: _____

Has your Organization been granted tax-exempt status by the Internal Revenue Service? _____

If Yes, Designation/Type: _____

If No, have you applied for tax-exempt status? _____

Is a copy of your letter of exemption from the Internal Revenue Service on file with the ACCC? Yes No

If no, please attach or explain.

NOTE: "No" answers may not disqualify your organization for grant funding.

FINANCIAL STATEMENTS

The following additional information **MUST** be attached to this application. (Note: If you are a new organization please provide as much complete information as possible.)

1. A detailed financial statement of your organization's last completed fiscal year, including income and expenditures.

Identify fiscal year.

2. A detailed budget of your organization's current fiscal year, including income and expenditures.

I CERTIFY THAT THE INFORMATION AND FINANCIAL FIGURES CONTAINED IN THIS APPLICATION AND ATTACHMENTS ARE TRUE AND ACCURATE, TO THE BEST OF MY KNOWLEDGE.

Signature: _____
(Organization's Authorized Official)

Printed Name: _____

Title: _____

Telephone: _____

ORGANIZATION DESCRIPTION

Date your organization was founded and a brief history of your organization.

What is your organization's purpose? Please furnish your Mission Statement.

Has there been a lapse of service/activity by your organization? Yes No

If yes, please explain.

Are you a membership organization? Yes No If yes, how many members? _____

What are your organization's sources of funding?

Source/Contributor Name:

Amount:

_____	_____
_____	_____
_____	_____
_____	_____

Describe your organizational structure. (Example, Are you governed by a board of directors?)

Please identify the key people who will be involved in the administrative, artistic, and technical aspects of this organization.

Please attach any available background information (i.e., professional experience, highlights).

Name:

Role & Project:

Salary:

_____	_____	_____
_____	_____	_____
_____	_____	_____

Please provide a sampling of your organization's past cultural arts-related activities.

Please include, if available, a copy of your organization's current and/or upcoming calendar of events.

Have you received a grant from the Arts Council in the past? _____

If yes, please list date and amount awarded.

How many artists will directly benefit from your organization? _____

What is your organization's contribution to the community?

What are your organization's long-range goals?

What is the economic impact of your organization?

Describe your evaluation process.

BUDGET

Applicant's Cash Contribution: _____
 Project Admissions: _____
 Fund-raising: _____
 Grant funding (list): _____
 (not ACCC request): _____

County funds: _____
 Corporate Support (list): _____

Cash Income: _____

Private Contributions: _____
 Project Contracted Services: _____
 Project Workshop Fees: _____
 Other: _____

ACCC grant request
 (not to exceed 10% of operating budget)

TOTAL CASH INCOME _____ = **TOTAL CASH EXPENDITURES** _____

Salaries: _____
 Administrative: _____
 Artistic: _____
 Technical: _____
 Supplies and Materials:
 Equipment: _____
 Marketing and Publicity: _____
 Travel: _____
 Rent and Utilities: _____
 Other (Itemize): _____

Cash Expenditures: _____

IN-KIND SERVICES: In-kind services, normally not matched by funds from the Arts Council of Calvert County, are services which ordinarily would be paid for by your organization but are being voluntarily contributed to help carry out this project. Volunteer services by a professional person may be claimed at his/her regular rate so long as the services rendered are of a professional nature and are within the professional's field.

SALARIES	\$	_____
MARKETING/PUBLICITY	\$	_____
EQUIPMENT	\$	_____
FEES	\$	_____
SUPPLIES/MATERIALS	\$	_____
TRAVEL	\$	_____
RENTAL	\$	_____
OTHER (itemize)	\$	_____
TOTAL - IN KIND	\$	_____

Submit by WEDNESDAY, APRIL 30, 2008