FY21-22 Letter of Intent for *GOS II* Template

You can find a PDF of the FY21 *GOS II* Guidelines [here](http://creativemoco.com/grant/gos2/).

**This template is for your reference only. All letters of intent, applications, and materials must be submitted online through FluidReview. AHCMC cannot accepted applications submitted by mail or email.**

# PLEASE READ BEFORE YOU START WORKING ON YOUR LETTER OF INTENT:

You must submit a Letter of Intent in order to be eligible to apply for an FY21 *GOS II* grant. If you are not sure whether your organization is a Core, Affiliate, or Associate organization, please contact Karen Judson, Grants Program Manager at (301) 565-3805 ext. 28 or Karen.Judson@creativemoco.com.

First-time applicants are highly encouraged to contact Grants Program staff.Once your Letter of Intent is approved, you will receive an email notification inviting you to fill out the grant application. The financial information required here is considered an estimate and all applicants will be required to submit financial statements with their grant application. **Please also note that the applicant must meet all eligibility requirements in both FY21 and FY22.**

**Basic Information**

**\*Organization Name:**

**Website:**

**\*Contact First Name:**

**\*Contact Last Name:**

**\*Title:**

**\*Phone:**

**\*Email:**

**\*What months does your fiscal year begin and end?**

**\*What fiscal year are you currently in?**

**\*990 Requirement**All applicants will be required to submit an FY19 990 by **June 1, 2020**. Please indicate whether your organization can meet this requirement.

* Yes
* No

**\*Audit Requirement**:
Applicants must submit an FY19 audit by June 1, 2020. Please indicate whether your organization can meet this requirement.

* Yes
* No

# \*Please select your organization type below:

* Core
* Affiliate
* Associate

# Eligibility for Core (Affiliate is on page 5, Associate is on page 8)

By the application deadline, the applicant MUST have met all criteria listed below for three-consecutive fiscal years and continue to do so in FY21 and FY22:

**1. \*Mission Statement as approved by the Board (500 characters maximum)**

Applicant must have in its primary mission the exhibition, presentation, production or performance of, and/or education in, an arts and/or humanities discipline, and/or provides support services for artists and/or scholars and/or for arts and/or humanities organizations.

# 2. \*Non-Profit Status

|  |  |
| --- | --- |
|  | The applicant has 501(c)(3) status, as evidenced by their IRS Letter of Determination |
|  | The applicant operates as a specific arts and/or humanities entity or division within a larger 501 (c)(3) organization whose primary mission is not arts or humanities based |
|  | The applicant does not have 501(c)(3) status or operate as a non-profit |

Applicant demonstrates 501(c)(3) status by one of the following options below (applicant checks one):

# \*IRS Letter: Upload your organization’s IRS Letter of Determination if the applicant organization did not apply for an AHCMC grant in FY20 OR if there have been any changes.

**3. \*Office Location**

Applicant has its primary office in Montgomery County. Provide the full address of the applicant’s primary office.

\*Address:

\*City:

\*State: MD

\*Zip:

**4. \*Personnel**

Applicant has a full-time (35-hours or more) paid executive director, CEO, managing director, or comparable position, who reports directly to the organization’s Board of Directors. This position has to have been filled for at least six months, prior to submitting the application.

\*Name:

\*Title:

\*Date of Hire:

\*Number of hours per week:

**5. \*Board Members**

Provide the percentage of Board Members who reside and/or work in Montgomery County. Applicants must have a **minimum of 40%** of the organization’s Board members residing and/or working in Montgomery County at the application deadline.

**\*Upload a list of Board Members including their home / work city and zip code. Please indicate which Board members meet the minimum requirement.**

# 6. \*Operating Budget

Applicant has both eligible cash operating expenses and eligible cash operating income of **no less than $150,000**. See definition of cash operating expenses/income in the Eligible Budget Requirement section on page 6 of the grant guidelines.

Non-allowable cash operating expenses include, but are not limited to:

• Investment Fees

• Interest Expenses

• Re-granting

• Capital improvements/other related costs

• Depreciation

• Loan principal payments

• In-kind donations

• Bad debt

Non-allowable as cash operating income include, but are not limited to:

• Unrealized gains or losses

• Investment revenues (interest and dividends)

• In-kind donations

• Revenue raised for capital

• Funds intended for re-granting

**This list is not exhaustive. There may be additional non-allowable expenses/income. Grants program staff will review all financial data and may contact applicants for additional information.**

**\*FY17 expenses/income:**

**\*FY18 expenses/income:**

**\*FY19 expenses/income:**

**FOR FIRST TIME APPLICANTS ONLY. Upload financial statements for the three most recently completed fiscal years.**

**7. \*Program Eligibility**

Applicant offers **no less than 51%** of its programs and services in Montgomery County and these programs and services are open to the public, with or without an admission fee.

**\*Program Activities Inside of Montgomery County**

Program Description FY19 # of Activities FY19 # of Audience members/participants

**\*Program Activities Inside of Montgomery County**

Program Description FY19 # of Activities FY19 # of Audience members/participants

**\*First Name:**

**\*Last Name:**

**\*Title:**

**\*Date:**

**\*Signature**By submitting this Letter of Intent, I certify that I am an authorized officer for this organization and that to the best of my knowledge the information contained in this Letter of Intent is accurate and will continue to be through FY22. Click and drag mouse to sign.

# Eligibility for Affiliate

By the application deadline, the applicant MUST have met all criteria listed below for three-consecutive fiscal years and continue to do so in FY21 and FY22:

**1. \*Mission Statement as approved by the Board (500 characters maximum)**

Applicant must have in its primary mission the exhibition, presentation, production or performance of, and/or education in, an arts and/or humanities discipline, and/or provides support services for artists and/or scholars and/or for arts and/or humanities organizations.

# 2. \*Non-Profit Status

|  |  |
| --- | --- |
|  | The applicant has 501(c)(3) status, as evidenced by their IRS Letter of Determination |
|  | The applicant operates as a specific arts and/or humanities entity or division within a larger 501 (c)(3) organization whose primary mission is not arts or humanities based |
|  | The applicant does not have 501(c)(3) status or operate as a non-profit |

Applicant demonstrates 501(c)(3) status by one of the following options below:

# \*IRS Letter: Upload your organization’s IRS Letter of Determination if the applicant organization did not apply for an AHCMC grant in FY20 OR if there have been any changes.

**4. \*Office Location**

Applicant has its primary office outside Montgomery County but has a local telephone number (such as 301 or 240) and has staff present on the premises of a Core arts or humanities organizations at least 1,000 hours a year distributed over no fewer than 40-weeks during the year. \***Provide the full address of the applicant’s primary office.**

Address:

City:

State: MD

Zip:

**\*Provide the full address of the applicant’s Montgomery County office/location.**

Address:

City:

State: MD

Zip:

**4. \*Personnel**

Applicant has a full-time (35-hours or more) paid executive director, CEO, managing director, or comparable position, who reports directly to the organization’s Board of Directors. This position has been filled for at least six months, prior to submitting the application.

\*Name:

\*Title:

\*Date of Hire:

\*Number of hours per week:

**5. \*Board Members**

Provide the percentage of Board Members who reside and/or work in Montgomery County. Applicants must have a **minimum of 15%** of the organization’s Board members residing and/or working in Montgomery County at the application deadline.

**\*Upload a list of Board Members including their home / work city and zip code. Please indicate which Board members meet the minimum requirement.**

# 6. \*Operating Budget

Applicant has both eligible cash operating expenses and eligible cash operating income of **no less than $150,000**. See definition of cash operating expenses/income in the Eligible Budget Requirement section on page 6 of the grant guidelines.

Non-allowable cash operating expenses include, but are not limited to:

• Investment Fees

• Interest Expenses

• Re-granting

• Capital improvements/other related costs

• Depreciation

• Loan principal payments

• In-kind donations

• Bad debt

Non-allowable as cash operating income include, but are not limited to:

• Unrealized gains or losses

• Investment revenues (interest and dividends)

• In-kind donations

• Revenue raised for capital

• Funds intended for re-granting

**This list is not exhaustive. There may be additional non-allowable expenses/income. Grants program staff will review all financial data and may contact applicants for additional information.**

**\*FY17 expenses/income:**

**\*FY18 expenses/income:**

**\*FY19 expenses/income:**

**FOR FIRST TIME APPLICANTS ONLY. Upload financial statements for the three most recently completed fiscal years.**

**7. \*Program Eligibility Verification**

Applicant has an agreement with a Core Arts or Humanities Organization to provide a regular season of programming and/or educational services at the facility of the Core Arts or Humanities Organization.

**\*Upload the agreement with the Core Organization**

**\*Program Activities Inside of Montgomery County**

Program Description FY19 # of Activities FY19 # of Audience members/participants

**\*Program Activities Inside of Montgomery County**

Program Description FY19 # of Activities FY19 # of Audience members/participants

**\*First Name:**

**\*Last Name:**

**\*Title:**

**\*Date:**

**\*Signature**By submitting this Letter of Intent, I certify that I am an authorized officer for this organization and that to the best of my knowledge the information contained in this Letter of Intent is accurate and will continue to be through FY22. Click and drag mouse to sign.

# Eligibility for Associate

By the application deadline, the applicant MUST have met all criteria listed below for three-consecutive fiscal years and continue to do so in FY21 and FY22:

**1. \*Mission Statement as approved by the Board (500 characters maximum)**

Applicant must have in its primary mission the exhibition, presentation, production or performance of, and/or education in, an arts and/or humanities discipline, and/or provides support services for artists and/or scholars and/or for arts and/or humanities organizations.

# 2. \*Non-Profit Status

|  |  |
| --- | --- |
|  | The applicant has 501(c)(3) status, as evidenced by their IRS Letter of Determination |
|  | The applicant operates as a specific arts and/or humanities entity or division within a larger 501 (c)(3) organization whose primary mission is not arts or humanities based |
|  | The applicant does not have 501(c)(3) status or operate as a non-profit |

Applicant demonstrates 501(c)(3) status by one of the following options below (applicant checks one):

# \*IRS Letter: Upload your organization’s IRS Letter of Determination if the applicant organization did not apply for an AHCMC grant in FY20 OR if there have been any changes.

**4. \*Office Location**

Applicant has its primary office in Montgomery County. Provide the full address of the applicant’s primary office.

Address:

City:

State: MD

Zip:

**4. \*Personnel**

Applicant has a full-time (35-hours or more) paid executive director, CEO, managing director, or comparable position, who reports directly to the organization’s Board of Directors. This position has been filled for at least six months, prior to submitting the application.

\*Name:

\*Title:

\*Date of Hire:

\*Number of hours per week:

**5. \*Board Members**

Provide the percentage of Board Members who reside and/or work in Montgomery County. Applicants must have a **minimum of 40%** of the organization’s Board members residing and/or working in Montgomery County at the application deadline.

**\*Upload a list of Board Members including their home / work city and zip code. Please indicate which Board members meet the minimum requirement.**

# 6. \*Operating Budget

Applicant has both eligible cash operating expenses and eligible cash operating income of **no less than $150,000**. See definition of cash operating expenses/income in the Eligible Budget Requirement section on page 6 of the grant guidelines.

Non-allowable cash operating expenses include, but are not limited to:

• Investment Fees

• Interest Expenses

• Re-granting

• Capital improvements/other related costs

• Depreciation

• Loan principal payments

• In-kind donations

• Bad debt

Non-allowable as cash operating income include, but are not limited to:

• Unrealized gains or losses

• Investment revenues (interest and dividends)

• In-kind donations

• Revenue raised for capital

• Funds intended for re-granting

**This list is not exhaustive. There may be additional non-allowable expenses/income. Grants program staff will review all financial data and may contact applicants for additional information.**

**\*FY17 expenses/income:**

**\*FY18 expenses/income:**

**\*FY19 expenses/income:**

**FOR FIRST TIME APPLICANTS ONLY. Upload financial statements for the three most recently completed fiscal years.**

**7. \*Program Eligibility Verification**

Applicant offers **25% to 51%** of its programs and services in Montgomery County and these programs and services are open to the public, with or without an admission fee.

**\*Program Activities Inside of Montgomery County**

Program Description FY19 # of Activities FY19 # of Audience members/participants

**\*Program Activities Inside of Montgomery County**

Program Description FY19 # of Activities FY19 # of Audience members/participants

**\*First Name:**

**\*Last Name:**

**\*Title:**

**\*Date:**

**\*Signature**By submitting this Letter of Intent, I certify that I am an authorized officer for this organization and that to the best of my knowledge the information contained in this Letter of Intent is accurate and will continue to be through FY22. Click and drag mouse to sign.