FY22 *Wheaton Cultural Project Grants* (WCPG) Narrative Template for Organizations/Groups

This template is for your reference only. All applications, work samples, and supplement materials must be submitted online through SurveyMonkey Apply (SM Apply). AHCMC cannot accept anything by mail or email.

Please note that there may be formatting differences on the SM Apply grants portal, however the content of the questions will remain as seen on this template.

All required questions are marked with an asterisk (*). All text responses have a character count that <u>includes spaces</u>.

Submit this application no later than **Friday, October 15, 2021 at 11:59 p.m.**

Basic Information

*Are you applying as an individual artist/scholar or on behalf of an organization or group? For the purposes of this grant, organizations, as opposed to groups, are recognized by the U.S. Internal Revenue Service (IRS) as a public charity or otherwise officially established as a tax-exempt 501(c)(3) institution.

- o Individual artist/scholar
- o Organization
- o Group

*Organization/Group Legal Name (name provided to the IRS):
DBA (doing business as), if different:
*Organization/Group Address:
*Organization/Group City:
*Organization/Group State:
*Organization/Group ZIP Code:
Website:

*Contact Name:
*Contact Title (i.e., Director of Development):
*Contact Phone Number:
*Contact Email:
*Name of Executive Director, CEO, Managing Director, or comparable position:
*Title:
*Phone Number:
*Email:
*What months does your organization's/group's fiscal year begin and end?
*What fiscal year is your organization/group currently in?

*Select your organization's/group's primary discipline. Refer to pages 4-5 of the FY22 WCPG guidelines or the AHCMC website for a detailed explanation of each of the disciplines. ([Click here to access descriptions of the disciplines on the AHCMC website](#).)

- o Dance
- o Folk & Traditional Arts
- o History and/or Social Sciences
- o Languages, Linguistics, and/or Literary Arts

- o Media
- o Music
- o Philosophy, Ethics, and/or Comparative Religion
- o Storytelling
- o Theatre

- o Writing
- o Visual Arts
- o Design
- o Presenting and/or Multidisciplinary
- o Other (please specify):

*Is the project in a discipline other than your organization's/group's primary discipline?
- o Yes
- o No

*If yes, select the discipline of the project below.

- o Dance
- o Folk & Traditional Arts
- o History and/or Social Sciences
- o Languages, Linguistics, and/or Literary Arts

- o Media
- o Music
- o Philosophy, Ethics, and/or Comparative Religion
- o Storytelling
- o Theatre

- o Writing
- o Visual Arts
- o Design
- o Presenting and/or Multidisciplinary
- o Other (please specify):

Eligibility Questions

*Does your organization/group have an arts and/or humanities-based mission?
- o Yes
- o No

*Describe the mission of the organization/group. (1000 characters maximum with spaces)

*Has your organization/group had its primary location and/or verifiable mailing address in Montgomery County, MD for at least 12 consecutive months prior to the application deadline?
- o Yes
- o No

*Does your organization/group operate as a non-profit?
- o Yes
- o No

*Does your organization/group have an annual operating budget of $500,000 or less for the most recently completed fiscal year?
- o Yes
- o No

Project Overview

*Project Title (150 characters maximum with spaces):

*Give a short summary of the project. (750 characters maximum with spaces) **This summary will be used in public materials. AHCMC reserves the right to edit the summary for clarity.*

*AHCMC Grant Request:
(Must be at least $1,000 and no more than $10,000.)

*Total Project Cost:
(May exceed $10,000 and should include in-kind costs, if applicable.)

*Project Date start and end dates:
(Must be between 1/1/2022 and 12/31/2022)

Project Location Details

All applicants must clearly articulate how the project will benefit Wheaton, MD. In-person events must take place in Wheaton, MD.

Programs funded by an AHCMC grant must be open to the public with or without an admission fee, in person or virtually. If in person, activities should follow current COVID-19 guidelines for in-person events as required by the Montgomery County Health Department. ([Click here for additional information](.))

- [Click here for a Google Maps outline of Wheaton](#)
- [Click here for a map of Wheaton's Urban District](#)
- [Click here for a map of Wheaton's Arts & Entertainment District](#)

*Do you anticipate that project activities will be in-person, virtual, or a hybrid involving both virtual and in-person activities? *Select all that apply.*
- ❑ In person
- ❑ Virtual

*If the project involves an in-person event, please provide the venue name and address.
- Venue Name:
- Venue Address:
- Venue City:
- Venue State:
- Venue Zip Code:

*Is the venue reserved or tentative?
- o Reserved
- o Tentative

*Describe the venue/project location. Include details such as the number of seats, technical capacity, whether it is an indoor or outdoor venue, etc. **If the project consists of virtual programming, please**

explain the medium that will be used to present the program(s) (i.e., YouTube, Facebook Live, Zoom, Instagram Live, etc.) and why you have chosen that specific virtual medium. (750 characters maximum with spaces)

Quality of Project (15 points)

- Clear commitment to cultural expression through artistic and/or scholarly disciplines; and
- Clarity and appropriateness of artistic, scholarly, and/or cultural project proposal and alignment with the grant purpose.

*Provide a detailed description of the project. Specify whether the project represents new programming, a repeat of an earlier project, and/or a part of a series. (2,500 characters maximum with spaces)

*Describe how your organization/group demonstrates innovation and creativity in performing, presenting, and/or production of the arts and/or humanities discipline. (2,500 characters maximum with spaces)

Project Impact (35 points)

- Potential of the project to have a positive impact on the Arts & Entertainment district in Wheaton;
- Potential of the project to have a positive impact on under-resourced and/or marginalized communities in Wheaton; and
- Potential of the project to have a positive impact on the applicant.

*What are the anticipated outcomes that will result from the completion of this project and how will your organization/group evaluate whether the objectives have been met? (2,500 characters maximum with spaces).

*How will the project impact the Wheaton Arts & Entertainment District? Specify how the project will support artists/scholars currently living or working in Wheaton and elevate the district as a whole. **Please note that if the project will consist solely of virtual programming, applicants are still required to clearly articulate how the project will specifically benefit the Wheaton, MD community**. (2,500 character maximum with spaces)

*How will the project positively impact under-resourced and/or marginalized communities present in Wheaton? (2,500 characters maximum with spaces)

*How does the project align with your organization's/group's mission? Address how the project will positively impact your organization/group. (2,500 characters maximum with spaces)

Community Impact (35 points)

- Clear commitment to being accessible to, collaborating with, and engaging under-resourced and marginalized communities in Wheaton and empowering local participation;
- Uses data and demographics to clearly define audience and demonstrates an understanding of the community to be served; and
- Includes the community in project planning and evaluation, and is responsive to community feedback.

*Identify and describe the intended audience for the project. A reminder that this funding opportunity is focused on the Wheaton community. Be as specific as possible by including characteristics such as, but not limited to, age, race/ethnicity, gender, sexual orientation, geographic location, economic status, disability, and whether community is underserved and/or a special interest group. (2,500 characters maximum with spaces)

*Describe how your organization/group will reach, engage, and collaborate with the project's intended audience, both in terms of project planning and outreach. (2,500 characters maximum with spaces)

*Describe how the project will benefit and resonate with the intended audience. Include how feedback is solicited and used to inform programming. (2,500 characters maximum with spaces)

*How will your organization/group ensure that programs, services, facilities, and online media are accessible to the public and ADA compliant? Include barriers to participation your organization/group has identified and will address. (2,500 characters maximum with spaces)

Administrative Oversight (15 points)

- Evidence of administrative skills required to meet proposal objectives, based on completeness and clarity of the proposal and timeline; and
- Well-researched, clear, realistic, and complete budget and budget notes.

*Describe the professional qualifications and diversity of key staff and volunteers and/or contractors involved in bringing the project to fruition. If a key position is not filled, please describe the recruitment plan that will be executed. When addressing diversity, be as specific as possible by including characteristics such as, but not limited to age, race/ethnicity, gender, sexual orientation, economic status, disability, and whether individuals identify as coming from an underserved community. (2,500 character maximum with spaces)

*Provide a timeline for the project. Include approximate dates/months/timeframes for specific administrative, marketing, publicity, fundraising and programmatic activities, project milestones, and/or other significant events scheduled to occur to bring the project to fruition. The full project timeline should be outlined; however, grant funds can only be allocated for activities occurring **between January 1, 2022 and December 31, 2022.** (2,500 characters maximum with spaces)

*Describe efforts to seek other sources of support such as in-kind contributions, other grants, sponsors, cash donations, fundraising, earned income, etc. (2,500 characters maximum with spaces)

*Will the organization/group undertake the project if the AHCMC grant is not awarded, or if the award is lower than the original request? Explain potential scope reductions (programmatic, staff, budget reductions, etc.) that may occur if the grant award is lower than anticipated. (2,500 characters maximum with spaces)

Project Budget

SurveyMonkey Apply will have a fillable chart for this section.
- **Your budget must be balanced: total expenses MUST equal total income.**
- Do not use the dollar sign or symbols such as a comma in the amount column.
    - o Ex: If you'd like to enter one thousand dollars, type 1000 rather than $1000 or $1,000.
- If you need more space, you may combine items budgeted under $1,000 into one line item and explain in the budget notes.

*Cash Expenses
- List all project expenses, including expenses that may be paid for from sources other than the AHCMC grant award. (Review page 6 of the FY22 WCPG guidelines for a detailed description of allowable project expenses that can be paid for by AHCMC.)
- **Use an asterisk (*) to mark expenses that will be paid for by the AHCMC grant. Asterisked expenses should clearly indicate how the entire AHCMC grant will be allocated.**
- **Do not** include "miscellaneous" or "contingency" expenses.

Line Item	Description	Amount
1.		$
2.		$
3.		$
4.		$
5.		$
6.		$
7.		$
8.		$
9.		$
10.		$
Total Cash Expenses		**$** (Will automatically calculate)

*In-Kind Expenses
- If items are donated, i.e., supplies or services, please list those items below. In-kind expenses are non-cash expenses.

Line Item	Description	Amount
1.		$
2.		$
3.		$
4.		$
Total In-Kind Expenses		**$** (Will automatically calculate)

*Cash Income
- **The first line item must be "AHCMC Grant" with the requested grant amount of**: *Will autofill*
- Please include any other sources of income for this project.

Line Item	Description	Amount
1. AHCMC Grant	Amount requesting for project	$
2.		$
3.		$
4.		$
5.		$
6.		$
7.		$
8.		$
9.		$
10.		$
Total Cash Income		**$** (Will automatically calculate)

*In-Kind Income
- If you entered in-kind items in the "In-Kind Expenses" section above, please re-enter those same items in the chart below.

Line Item	Description	Amount
1.		$
2.		$
3.		$
4.		$
Total In-Kind Income		**$** Will automatically calculate)

Total expenses MUST EQUAL total income, as well as the total project cost entered at the beginning of the application.
- **Total Project Expenses:** *Will automatically calculate*
- **Total Project Income:** *Will automatically calculate*
- **Total Project Cost:** *Will autofill from applicant's response on page 3*

Project Budget Notes

*Provide additional information about how the project expenses are calculated. For example, if "Performer Fees $1,500" is listed in the budget, provide additional detail about this line item here. (1,500 characters maximum with spaces)

*Please provide additional information about how the project income was calculated and information on income sources beyond the AHCMC grant request, if applicable. For example, if ticket revenue is listed as income, explain how the total for ticket revenue was calculated (i.e., the number of performances, the price of tickets, the estimated number of tickets that will be sold). If "Other Grants $1,500" is listed, provide information about that source of income. (1,500 characters maximum with spaces)

*Describe the in-kind contributions (donated goods, services, or discounts) allocated for the project. If not applicable, indicate N/A. (1,500 characters maximum with spaces)

Work Sample(s) Description

This is a separate task from the application narrative.

*Explain what the work sample(s) is (i.e., a performance from 2020) and why the work sample(s) was selected. Address how the sample(s) relates to the project and fulfilling the mission of the organization/group. (1,500 character maximum with spaces)

Required Uploads

All documents except for work samples must be submitted as PDFs. (Please see the work sample directions below for information about acceptable file formats.) Contact AHCMC grants staff if you need help converting your documents to PDFs.

IMPORTANT! Staff will remove Programming Support Materials and Work Samples that exceed the limits stated below.

A completed application includes:

ALL APPLICANTS

1. **Completed Narrative**

2. **Programming Support Materials**
   - Include materials that will assist the panel in evaluating the applicant's programming, presenting, and/or producing activities. (i.e., newspaper clippings, program booklets, photos, brochures, flyers, and/or examples of successful activities that took place in the recent past.)
   - **Individuals: One PDF no more than 3 pages**

3. **Work sample(s)**
   - Upload a **maximum of 10 work samples, no more than 10 files or 10 pages total,** that demonstrate the applicant's abilities and achievements.
     - Applicants should submit their strongest work samples – quality work samples are critical to the evaluation of an application.
   - Applicants will be asked to provide a brief description of the work sample(s) in the application and an explanation for how the sample(s) relates to the proposed project.
   - **Work samples may be submitted in any one or combination of the file formats below. Applicants may upload up to 10 files, no more than 10 pages total.**
     - Images: Maximum 10 images, up to 4 MB per file, which can be uploaded individually or formatted as one PDF.
     - Video: Maximum 2 videos, up to 100 MB per file, no more than five minutes combined.
     - Audio: Maximum 2 files, up to 10 MB per file, no more than five minutes combined.
       - Live video or audio hyperlinks can also be placed within a PDF (i.e., a live hyperlink to YouTube within a PDF).
       - If the submitted video and/or audio is more than five minutes combined, applicants will be provided with a space to include instructions for which segments the panel should pay attention to. (Ex: Please click on the YouTube hyperlink to watch the video from 0:47 to 4:10)
     - Written Work:
       - Maximum 10 pages, double-spaced with at least 11-point font and 1-inch margins.
       - If the work submitted is a portion of a larger work, include a synopsis of the chapters and an outline of the complete work. Clearly explain how and where the piece submitted fits into the whole.

- Applicants are encouraged to submit samples reflecting recently completed work. Samples must adhere to the following guidelines for the discipline of the work in which the applicant is engaged.
  - For Presenting and/or Multidisciplinary: Work sample(s) must convey more than one arts and/or humanities discipline.
  - For Performing Arts: **Applicants are highly encouraged to submit video or audio work samples, instead of stills or photos.** If the applicant's work includes audience interaction, a live performance recording is helpful.
  - For History or Social Sciences, Historical, Critical, or Theoretical Approaches to the Arts, Linguistics, Literary Analysis, Philosophy, Writing, Ethics or Comparative Religion: Follow the format for written work.
  - For Design, Media, and Visual Arts: Follow the format for video and image files.

GROUPS[1]

4. **Group Support Materials**
   - List of Group Members with affiliation, including residency and work address (city and ZIP Code accepted) with those who reside and/or work in Montgomery County, MD highlighted;
   - Bios of Key Group Members and/or Volunteers, including the individual's role in the project;
   - Current Strategic Plan, if available; and
   - Organizational Chart, if available.

5. **Financial Support Materials**
   - Previous Fiscal Year's End-of-Year Revenue and Expenses (Profit & Loss Statement);
   - Current Fiscal Year's Operating Budget with Actuals Year-to-Date; and
   - Current Balance Sheet (if available).

ORGANIZATIONS

4. **Organization Support Materials**
   - IRS Letter of Determination;
     - If the organization applied for an FY21 AHCMC grant and if there have been no changes to their non-profit status, the IRS Letter of Determination is not needed
   - List of Board of Directors with affiliation, including residency and work address (city and ZIP Code accepted) with those who reside and/or work in Montgomery County, MD highlighted;
   - Bios of Key Staff and/or Volunteers, including the individual's role in the project;
   - Current Strategic Plan, if available; and
   - Organizational Chart, if available.

5. **Financial Support Materials**
   - FY20 990, 990-EZ, or 990-N, or if the FY20 990, 990-EZ, or 990-N is not yet available, the letter of extension;
   - Financial Statements (Profit & Loss and Balance Sheet) for the most recently completed fiscal year; and
   - Current Fiscal Year Operating Budget with Actuals Year-to-Date.

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[1] Groups that have any questions about the required materials are highly encouraged to contact AHCMC grants staff.

AHCMC Reporting Data

The questions below correspond with AHCMC's reporting obligations. Responses to the questions below will not be seen by panelists or factored into the application evaluation and scoring.

*Is your organization/group a current FY22 AHCMC grantee?
- o   Yes
- o   No

*If yes, do you have data updates that are not reflected in the most recent FY22 application submittal?
- o   Yes
- o   No

Use the links below to answer the following questions about your organization's/group's districts:
- o   https://maryland.maps.arcgis.com/apps/webappviewer/index.html?id=177afa87a67746a4ac5496b2d0897fb7
- o   https://www2.montgomerycountymd.gov/mccouncildistrict/

*Federal House District:
*State Senate District:
*State Delegate District:
*County Council District:

The numbers below should reflect your organization's/group's allowable revenue and expenses for Montgomery County, MD.

Non-allowable cash operating revenue includes, but is not limited to:
- Unrealized gains or losses
- Investment revenues (interest and dividends)
- In-kind donations
- Revenue raised for capital
- Funds intended for re-granting

Non-allowable cash operating expenses include, but are not limited to:
- Investment Fees
- Interest Expenses
- Re-granting[2]
- Capital improvements expenses/other related costs[3]
- Depreciation
- Loan principal payments
- In-kind donations
- Bad debt

If any of the line items are not applicable, write "0" and please explain why in the comment box below.

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[2] Scholarships, awards, and tuition assistance are considered forms of re-granting.
[3] Costs related to improving or expanding the organization's physical structure must be counted as capital improvement expenses, not as operating expenses.

Revenue & Contributions	Most Recently Completed Fiscal Year	Previous Fiscal Year	Three Fiscal Years Prior
City Revenue/Contributions			
County Revenue/Contributions			
State Revenue/Contributions			
Federal Revenue/Contributions			
Foundation Revenue/Contributions			
Corporate Revenue/Contributions			
Individual (non-Board) Giving Revenue/Contributions			
Board Giving Revenue/Contributions			
Other Contributed Revenue			
In-Kind Revenue			
Earned Revenue			
Investment Revenue			
Total Revenue	Auto-Calculated	Auto-Calculated	Auto-Calculated

Expenses	Most Recently Completed Fiscal Year	Previous Fiscal Year	Three Fiscal Years Prior
In-Kind Expenses			
Depreciation			
Expenses (all other expenses)			
Total Expenses	Auto-Calculated	Auto-Calculated	Auto-Calculated

*FTE is based on hours worked rather than number of employees. To calculate FTE, divide the number of total hours worked by the total hours for a full-time work week. For example, if an employer has a 40-hour workweek, employees who are scheduled to work 40 hours per week are 1.0 FTEs. Employees scheduled to work 20 hours per week are 0.5 FTEs. An employer with a 35-hour workweek would divide the employee's scheduled hours by 35 to determine the FTE.

Staff and Volunteers	Most Recently Completed Fiscal Year	Previous Fiscal Year	Three Fiscal Years Prior
Employee Salaries and Fringe Benefits (Full-time staff)			
Employee Salaries and Fringe Benefits (Part-time staff)			
Employee Salaries and Fringe Benefits (Contracted staff)			
Number of Full-Time Equivalent (FTE) Employees (Includes full-time, part-time, and contracted staff) *			
Volunteer Hours (Youth under 18)			
Volunteer Hours (Over 18)			

Activity Attendance	Most Recently Completed Fiscal Year	Previous Fiscal Year	Three Fiscal Years Prior
Program Attendance (Youth under 18)			
Program Attendance (Over 18)			
Paid Program Attendance			
Free Program Attendance			

Please explain if any of the line items above do not apply. (1,500 characters maximum with spaces)

Demographic Information

This information is collected for reporting purposes only, will only be shared in the aggregate, and is for our own reporting purposes. This information will not be factored into the application evaluation or be seen by panelists.

The Organization's/Group's Executive Director, CEO, Managing Director, or comparable position

*Please indicate what race/ethnicity the Executive Director, CEO, Managing Director, or comparable position publicly self-identifies as.
- o Asian/Asian American/Pacific Islander
- o Arab/Middle Eastern
- o Black/African America/African
- o Hispanic/Latino/Latina/Latinx
- o Native American/American Indian/Indigenous
- o White/Caucasian/European
- o Multi-Racial or Multi-Ethnic (2 or more races or ethnicities)
- o Decline to state

*Please indicate which gender the Executive Director, CEO, Managing Director, or comparable position publicly self-identifies with. *Two drop-down lists.*
- o Female
- o Male
- o Non-binary
- o Two-Spirit
- o Decline to state

- o Transgender
- o Non-transgender (cisgender)
- o Decline to state

*Please indicate what sexual orientation the Executive Director, CEO, Managing Director, or comparable position publicly self-identifies with.
- o Gay, Lesbian, Bisexual
- o Heterosexual or Straight
- o Asexual
- o Decline to state

*Please indicate whether the Executive Director, CEO, Managing Director, or comparable position publicly self-identifies as a person with a disability.
- o Yes
- o No
- o Decline to state

The Organization's/Group's Board

*Unknown indicates the number of people for whom you have no demographic information.
*If the applicant is a group without a Board, please write '0' (zero) for all responses and select "Not applicable" for questions in this section.

How many Board members publicly self-identify as:
__Asian/Asian American/Pacific Islander
__Arab/Middle Eastern
__Black/African America/African
__Hispanic/Latino/Latina/Latinx
__Native American/American Indian/Indigenous
__White/Caucasian/European
__Multi-Racial or Multi-Ethnic (2 or more races or ethnicities)
__Decline to state
__Unknown*
__Not applicable*

* How many Board members publicly self-identify as (*two separate responses*)**:**

__Female	
__Male	__Transgender
__Non-binary	__Non-transgender (cisgender)
__Two-Spirit	__Decline to state
__Decline to state	__Unknown*
__Unknown*	__Not applicable*
__Not applicable*	

How many Board members publicly self-identify as:
__Gay, Lesbian, Bisexual
__Heterosexual or Straight
__Asexual
__Decline to state
__Unknown*
__Not applicable*

How many Board members publicly self-identify as a:
__Person with a disability
__Person without a disability
__Decline to state
__Unknown*
__Not applicable*

The Organization's/Group's Paid Staff

*Unknown indicates the number of people for whom you have no demographic information.
*If the applicant has no paid staff please, please write '0' (zero) for all responses and select "Not applicable" for all the following questions.

*How many paid staff publicly self-identify as:
     __Asian/Asian American/Pacific Islander
     __Arab/Middle Eastern
     __Black/African America/African
     __Hispanic/Latino/Latina/Latinx
     __Native American/American Indian/Indigenous
     __White/Caucasian/European
     __Multi-Racial or Multi-Ethnic (2 or more races or ethnicities)
     __Decline to state
     __Unknown*
     __Not applicable*

* How many paid staff publicly self-identify as (*two separate responses*)**:**
     __Female
     __Male
     __Non-binary   __Transgender
     __Two-Spirit   __Non-transgender (cisgender)
     __Decline to state   __Decline to state
     __Unknown*   __Unknown*
     __Not applicable*   __Not applicable*

*How many paid staff publicly self-identify as:
     __Gay, Lesbian, Bisexual
     __Heterosexual or Straight
     __Asexual
     __Decline to state
     __Unknown*
     __Not applicable*

*How many paid staff publicly self-identify as:
     __Person with a disability
     __Person without a disability
     __Decline to state
     __Unknown*
     __Not applicable*

The Organization's/Group's Volunteers

*Unknown indicates the number of people for whom you have no demographic information.
*If the applicant has no volunteers please, please write '0' (zero) for all responses and select "Not applicable" for all the following questions.

*How many volunteers publicly self-identify as:
    __Asian/Asian American/Pacific Islander
    __Arab/Middle Eastern
    __Black/African America/African
    __Hispanic/Latino/Latina/Latinx
    __Native American/American Indian/Indigenous
    __White/Caucasian/European
    __Multi-Racial or Multi-Ethnic (2 or more races or ethnicities)
    __Decline to state
    __Unknown*
    __Not applicable*

* How many volunteers publicly self-identify as (*two separate responses*)**:**
    __Female
    __Male   __Transgender
    __Non-binary   __Non-transgender (cisgender)
    __Two-Spirit   __Decline to state
    __Decline to state   __Unknown*
    __Unknown*   __Not applicable*
    __Not applicable*

*How many volunteers publicly self-identify as:
    __Gay, Lesbian, Bisexual
    __Heterosexual or Straight
    __Asexual
    __Decline to state
    __Unknown*
    __Not applicable*

*How many volunteers publicly self-identify as:
    __Person with a disability
    __Person without a disability
    __Decline to state
    __Unknown*
    __Not applicable*