FY23 *General Operating Support I Grants* (GOS I Grants) Narrative Template

This template is for your reference only. All applications, work samples, and supplemental 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 includes spaces.

Submit this application no later than Friday, March 25, 2022 at 11:59 p.m.

Organization Legal Name: Pulled from LOI, will not be able to edit DBA, if different: Pulled from LOI, will not be able to edit Website: Pulled from LOI, will not be able to edit Fiscal Year Months: Pulled from LOI, will not be able to edit Most Recently Completed Fiscal Year: Pulled from LOI, will not be able to edit Organization's Primary Discipline: Pulled from LOI, will not be able to edit AHCMC Grant Request: Pulled from LOI, will not be able to edit Mission statement as approved by the organization's Board: Pulled from LOI, will not be able to edit

Organizational Capacity (25 points)

- Sustains an organizational structure appropriate for the size and scope of the organization;
- Retains qualified, experienced artistic/scholarly staff and managerial staff;
- Has achieved or is making demonstrated, intentional progress towards recruiting staff that is diverse and reflective of the community;
- Has an effective governing Board that provides active and appropriate leadership, operates in accordance with acknowledged best practices in the non-profit sector, and has achieved or is making demonstrated, intentional progress towards Board diversity reflective of the community;
- Encourages the involvement of volunteers (non-Board) who can help the organization achieve its mission; and
- Demonstrates evidence of both short- and long-term planning, with Board and staff setting strategic goals for the organization and measuring progress against clearly established benchmarks.

*Describe the vision, goals, and/or values of your organization. If this application is on behalf of an arts or humanities division within a larger organization, describe the larger organization's mission and explain the relationship to the larger organization. (2,500 characters maximum with spaces)

*Describe the organization's structure and the responsibilities of the Board, staff, and volunteers. Address any significant changes in staffing or management that recently occurred or are planned over the next 12 months. (2,500 characters maximum with spaces)

*Describe diversity within the organization, including Board, staff, and volunteers. Be as specific as possible by including characteristics such as, but not limited to, age, race/ethnicity, gender, sexual orientation, geographic location, economic status, and/or disability. Include any efforts, goals, or planned future actions to increase internal diversity. (2,500 characters maximum with spaces)

***What is your organization's short-term planning process?** Identify specific, short-term organizational goals and provide a clear timeframe for implementation, including how progress will be measured. Address any short-term objectives that are in response to financial, personnel, Diversity, Equity, Inclusion and Access (DEIA), and/or programming challenges the organization has faced over the last 12 months. (2,500 characters maximum with spaces)

***What is your organization's approach to long-term planning?** If the organization has a Strategic Plan or Business Plan, explain how the organization uses the plan to set goals and measure progress against benchmarks, and how often the plan is re-evaluated. Identify specific, long-term organizational goals, provide a clear timeframe for implementation, and describe the role of Board, staff, and other stakeholders in this process. (2,500 characters maximum with spaces)

*If your organization received an FY22 General Operating Support I Grant, explain how your organization has addressed the issues and concerns noted in the panel comments. Provide an explanation if your organization has struggled to address panelists' concerns due to the on-going COVID-19 pandemic. If the organization did not receive a grant in FY22, please indicate N/A. (2,500 characters maximum with spaces)

Programming Quality (15 points)

- Develops programs that are aligned with the organization's mission;
- Demonstrates a commitment to quality and creativity, including a willingness to experiment and innovate within the stated mission, as well as a willingness to expand and diversify programming to build participation/audiences;
- Conducts program evaluation involving all stakeholders to measure impact and demonstrates that feedback is utilized in planning; and

• Demonstrates success of prior programming (i.e., internal evaluation data and external community recognition).

*Provide an overview of significant organizational programmatic achievements over the last 12 months. Highlight your organization's most impactful activities and achievements; a full list may be uploaded as Programming Support Materials in SM Apply. If your organization's programming was adversely impacted and/or significantly reduced due to the pandemic, provide an explanation below. (2,500 characters maximum with spaces)

*Provide a brief overview of anticipated FY23 programming. Where possible, provide an estimated timeline, likely location(s), estimated audience/participants, and key change(s) from previous year(s), if any. Your response should focus on Montgomery County, even if your organization serves other jurisdictions. (2,500 characters maximum with spaces)

*How does your organization's programming demonstrate a commitment to quality and creativity, including a willingness to experiment and innovate within the stated mission? Describe efforts to expand or diversify programming to build audience participation. (2,500 characters maximum with spaces)

*Describe the organization's internal and external program evaluation process, including types of data collected, who participates in the evaluation process, and how feedback is utilized. Describe results, including testimonials and any media or peer reviews, along with quantitative data (i.e., survey results, box office data, etc.) collected within the last 12 months. Additional information, testimonials, media, and/or peer reviews may be uploaded as Programming Support Materials in SM Apply. (2,500 characters maximum with spaces)

Community Impact (35 points)

- Uses data and demographics to clearly define audience and demonstrates an understanding of the community to be served;
- Conducts outreach to engage diverse communities, including underserved and marginalized populations;
- Includes the community in program planning and evaluation and is responsive to community feedback;
- Collaborates and forms meaningful partnerships with other stakeholders to achieve the organization's mission;

- Ensures that programs, services, facilities, and online media are accessible to the public by identifying and removing barriers to participation; and
- Achieves results indicating that programs are relevant and inspiring to the people, organizations, and communities for whom they are intended.

*Identify and describe the organization's intended audience. 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. Are there differences between your organization's current audience and your organization's intended audience? (4,000 characters maximum with spaces)

*Describe specific outreach efforts to engage diverse individuals and/or communities who may be underrepresented within the organization's audience. How are these initiatives evaluated? What has been the outcome? (4,000 characters maximum with spaces)

*How does your organization include, or plan to include, the intended audience in the creative process, program planning, and evaluation of activities? (4,000 characters maximum with spaces)

*Describe the nature of collaborations with community groups and/or other stakeholders and how they advance your organization's mission. Collaborations may include ongoing partnerships or partnerships around specific events or other activities. (2,500 characters maximum with spaces)

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

Financial Stability (25 points)

- Utilizes sound financial controls and reporting procedures;
- Has a clear plan for addressing any deficits or other financial challenges and operates with transparency;
- Maintains diversity of funding sources, including earned and contributed income;
- Employs fundraising strategies appropriate for the size of the organization and the community served to ensure sustainability; and
- Operates with ratio of current assets to current liabilities and liquid net assets appropriate for achieving organizational goals.

*Describe your organization's financial management structure and how oversight is provided. Include any recent changes to your financial controls/policies and the impact of those changes. (2,500 characters maximum with spaces)

*Describe your organization's overall financial health and any activities undertaken to fund an endowment, build a cash reserve, overcome a deficit, and/or repay debt. If your organization experienced any financial challenges in the most recently completed fiscal year, how were those challenges addressed and how will your organization address those challenges in the future? (2,500 characters maximum with spaces)

*Explain any significant changes to this year's operating budget as compared to last year's operating budget, including any significant increases or decreases anticipated in income and/or expenses. (2,500 characters maximum with spaces)

*Describe your organization's fundraising goals, including whether your organization was able to meet fundraising goals for the most recently completed fiscal year and whether your organization is on track to accomplish the current fiscal year's fundraising goals. List specific benchmarks against which progress is being measured and describe any fundraising plans in place for FY23. (2,500 characters maximum with spaces)

*How will your organization meet the match requirement? (1,500 character maximum with spaces)

Work Sample(s) Description

This is a separate task from the application narrative.

*Give a brief description of the work sample(s) (i.e., a performance from 2021) and why the work sample(s) was selected. Briefly address how the sample(s) are mission aligned. (1,000 character maximum without spaces)

Required Uploads

All documents except for work samples must be submitted as PDFs. Contact AHCMC grants staff for assistance in converting documents to PDFs.

*Organizational Support Materials

- Bios of Key Staff and/or Volunteers, indicating paid full-time staff, paid part-time staff, and unpaid volunteers;
- Current Strategic Plan, if available; and
- Organizational Chart, if available.

*Financial Support Materials

- FY21 990, or if the FY21 990 is not yet available, the letter of extension;
 - If the FY21 990 is not received by June 1, 2022, the organization will be disqualified.
- FY21 audit and/or financial review, or if not yet available, the letter of extension, if applicable;
 - If the FY21 audit and/or review is not submitted by June 1, 2022, the organization will be disqualified. Refer to pages 5-6 of the FY23 GOS I Grant guidelines for more information about the audit/financial review requirements.
- Profit & Loss Statement for the most recently completed fiscal year;
- Balance Sheet for the most recently completed fiscal year;
- Current fiscal year operating budget with actuals year-to-date; and
- Projected FY23 operating budget, if available.

*Programming Support Materials

- One PDF no more than 5 pages including a cover page, if applicable.
- No more than 5 hyperlinks embedded in Programming Support Materials.
- Include materials that will assist the panel in evaluating the applicant's programming, presenting, and/or producing activities. (i.e., evaluation results of previous programming, testimonials, newspaper clippings, program booklets, photos, brochures, flyers, etc.)

*Work Sample(s)

- Upload <u>a maximum of 10 work samples</u> that demonstrate the applicant's abilities and achievements. Work samples must be no more than 10 files or 10 pages total (including both images and written work).
- Applicants are encouraged to submit recently completed, high-quality work samples.
- Space will be provided in the application for a brief description of the work sample(s) 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.
 - <u>Images</u>: Maximum 10 images, up to 4 MB per file, which can be uploaded individually or formatted as one PDF.
 - <u>Video</u>: Maximum 2 videos, up to 100 MB per file, no more than five minutes combined.
 - <u>Audio</u>: 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 must 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)
 - o <u>Written Work</u>:
 - 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.
- Work samples should reflect the primary discipline of the applicant.
 - For Presenting and/or Multidisciplinary: work sample(s) should convey more than one arts and/or humanities discipline.
 - For Performing and Media Arts: applicants should submit video or audio work samples instead of stills or photos.

AHCMC Reporting Data

Please fill out the charts below. 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.

Use the link below to answer the questions about your organization's U.S. Representative, State Senate, and State Delegate districts:

• <u>https://maryland.maps.arcgis.com/apps/webappviewer/index.html?id=177afa87a67746</u> a4ac5496b2d0897fb7

Use the link below to answer the question about your organization's County Council district:

o https://www2.montgomerycountymd.gov/mccouncildistrict/

*U.S. Representative District:

*State Senate District:

*State Delegate District:

*County Council District:

The numbers below should reflect your organization's allowable revenue and expenses for Montgomery County, MD. If any of the line items are not applicable, write "0" and explain why in the comment box below. If you have questions, contact <u>AHCMC grants staff</u>.

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

- Investment Fees
- Interest Expenses
- Re-granting¹
- Capital improvement expenses/other related costs²
- Depreciation
- Loan principal payments
- In-kind donations
- Bad debt

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

¹ Scholarships, awards, and tuition assistance are considered forms of re-granting.

² 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	Will auto-calculate	Will auto-calculate	Will auto-calculate

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

*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
Full-time Staff Salaries and Fringe Benefits			
Part-Time Salaries and Fringe Benefits			
Contracted Staff Compensation			
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
Event & Program Attendance (Youth under 18)			
Event & Program Attendance (Over 18)			
Paid Event & Program Attendance			
Free Event & Program Attendance			

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

Demographic Information

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. Please answer the following questions for the organization's Board, senior staff, staff, and volunteers. This survey and definitions are sourced from Candid.

Definitions

- **Publicly self-identify:** The information you are providing is how you would identify in each category to the public.
- **Transgender:** An umbrella term people may use to describe their gender identity and/or gender expression as different from the sex they were assigned at birth. People who identify as transgender might describe themselves using one or more of a wide variety of terms including genderqueer, non-binary, and transgender. Transgender people may claim/affirm their gender identity through hormones and/or surgery. Transgender identity is not dependent on surgery. Transgender identity is not a sexual orientation.
- **Cisgender:** A term used to describe a person whose gender identity is the same as the sex assigned to them at birth.
- Nonbinary (also non-binary): Preferred umbrella term for all genders other than female/male or woman/man, used as an adjective (e.g., Jesse is a nonbinary person). Not all nonbinary people identify as trans and not all trans people identify as nonbinary.
- **Disability:** A disability can be physical, learning, cognitive, sensory, mental or chronic health or other disability that is a barrier to everyday living.

*How many senior staff are in your organization? Senior staff includes the leader and is defined as people with authority over budget (typically VP, C-Suite, Director, etc.)

Race & Ethnicity

*How many senior staff publicly self-identify as the following:

- ___Asian/Asian American/Pacific Islander
- ___Arab/Middle Eastern
- __Black/African America/African
- ___Hispanic/Latino/Latina/Latinx/Chicanx
- ___Native American/American Indian/Indigenous
- ___White/Caucasian/European
- ___Multi-racial or Multi-ethnic (2 or more races or ethnicities)
- ___Different identity (please specify)
- Decline to state
- __Unknown³
- o We do not collect race & ethnicity information about senior staff

³ Unknown indicates the number of people for whom you have no demographic information.

Gender Identity

*How many senior staff publicly self-identify as the following:

- ___Female
- __Male
- __Gender nonbinary/Genderqueer/Gender non-conforming
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect gender identity information about senior staff

*How many senior staff publicly self-identify as the following:

- ____Transgender
- ___Non-transgender (cisgender)
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect gender identity information about senior staff

Sexual Orientation

*How many senior staff publicly self-identify as the following:

- ____Gay, lesbian, bisexual (or other sexual orientations within the LGBTQIA2S+ community)
- ___Heterosexual or straight
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- \circ $\$ We do not collect sexual orientation information about senior staff

Disability

*How many senior staff publicly self-identify as the following:

- ___A person with a disability
- ___A person without a disability
- ___Decline to state
- ___Unknown
- o We do not collect disability information about senior staff

*How many Board members are in your organization?

Race & Ethnicity

*How many Board members publicly self-identify as the following:

___Asian/Asian American/Pacific Islander

- ___Arab/Middle Eastern
- __Black/African America/African
- ___Hispanic/Latino/Latina/Latinx/Chicanx
- ___Native American/American Indian/Indigenous
- ___White/Caucasian/European
- ___Multi-racial or Multi-ethnic (2 or more races or ethnicities)
- ___Decline to state
- ___Different identity (please specify)
- ___Unknown⁴
- o We do not collect race & ethnicity information about Board members

Gender Identity

*How many Board members publicly self-identify as the following:

- ___Female
- __Male
- ___Gender nonbinary/Genderqueer/Gender non-conforming
- ___Different identity (please specify)
- __Decline to state
- ___Unknown
- o We do not collect gender identity information about Board members

*How many Board members publicly self-identify as the following:

- ___Transgender
- ___Non-transgender (cisgender)
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect gender identity information about Board members

Sexual Orientation

*How many Board members publicly self-identify as the following:

- ____Gay, lesbian, bisexual (or other sexual orientations within the LGBTQIA2S+ community)
- ___Heterosexual or straight
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- We do not collect gender identity information about Board members

⁴ Unknown indicates the number of people for whom you have no demographic information.

Disability

*How many Board members publicly self-identify as the following:

- ___A person with a disability
- ____A person without a disability
- ____Decline to state
- ___Unknown
- We do not collect disability information about Board members

*How many staff are in your organization?

Race & Ethnicity

*How many staff publicly self-identify as the following:

- ___Asian/Asian American/Pacific Islander
- ___Arab/Middle Eastern
- Black/African America/African
- ___Hispanic/Latino/Latina/Latinx/Chicanx
- ___Native American/American Indian/Indigenous
- ___White/Caucasian/European
- ___Multi-racial or Multi-ethnic (2 or more races or ethnicities)
- ___Decline to state
- ___Different identity (please specify)
- __Unknown⁵
- o We do not collect race & ethnicity information about staff

Gender Identity

*How many staff publicly self-identify as the following:

- ___Female
- __Male
- __Gender nonbinary/Genderqueer/Gender non-conforming
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect gender identity information about staff

*How many staff publicly self-identify as the following:

- ___Transgender
- ___Non-transgender (cisgender)
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect gender identity information about staff

Sexual Orientation

*How many staff publicly self-identify as the following:

- ____Gay, lesbian, bisexual (or other sexual orientations within the LGBTQIA2S+ community)
- ___Heterosexual or straight
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect sexual orientation information about staff

⁵ Unknown indicates the number of people for whom you have no demographic information.

Disability

*How many staff publicly self-identify as the following:

- ___A person with a disability
- ____A person without a disability
- ____Decline to state
- ___Unknown
- We do not collect disability information about staff

*How many volunteers are in your organization?

o We do not have volunteers

Race & Ethnicity

*How many volunteers publicly self-identify as the following:

- ___Asian/Asian American/Pacific Islander
- ___Arab/Middle Eastern
- __Black/African America/African
- ___Hispanic/Latino/Latina/Latinx/Chicanx
- ___Native American/American Indian/Indigenous
- ___White/Caucasian/European
- ___Multi-racial or Multi-ethnic (2 or more races or ethnicities)
- ___Decline to state
- ___Different identity (please specify)
- ___Unknown⁶
- We do not collect race & ethnicity information about volunteers

Gender Identity

* How many volunteers publicly self-identify as the following:

- ___Female
- __Male
- ___Gender nonbinary/Genderqueer/Gender non-confirming
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect gender identity information about volunteers

* How many volunteers publicly self-identify as the following:

- ___Transgender
- ___Non-transgender (cisgender)
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- We do not collect gender identity information about volunteers

Sexual Orientation

*How many volunteers publicly self-identify as the following:

- ____Gay, lesbian, bisexual (or other sexual orientations within the LGBTQIA2S+ community)
- ___Heterosexual or straight
- ___Different identity (please specify)
- ___Decline to state
- ___Unknown
- o We do not collect sexual orientation information about volunteers

⁶ Unknown indicates the number of people for whom you have no demographic information.

Disability

*How many volunteers publicly self-identify as the following:

- ___A person with a disability
- ____A person without a disability
- ____Decline to state
- ___Unknown
- We do not collect disability information about volunteers