

Applicant Information

Organization Name

FEIN Number

DUNS

Mailing Address

Phone

Fax

Website

Physical Address

State House District

State Senate District

Congressional District

Primary Contact

Title

Phone

Email

Mission Statement

Applicant Status

Applicant Institution

Applicant Discipline

A. Additional Applicant Information

1. Popular Name, Department, Art Program or Doing Business As

2. Are you a new or returning MAC applicant?

New Applicant<>Returning Applicant

3. Grant Program

Arts Council Project (formerly Community Arts Project)

Electronic Media Arts

Festivals

Folk Arts

Literature

Multidiscipline

Music Instrumental

Music Vocal & Music Presenters

4. Secondary Contact Name

4a. Secondary Contact Title or Position in Organization

4b. Secondary Contact Phone

4c. Secondary Contact Email

5. What is the ending date of your organization's most recently completed fiscal year?

6a. Organization's Operating Income

6b. Organization's Operating Expenses

6c. Dept./Program Operating Income

6d. Dept./Program Operating Expenses

B. Demographics

Demographics

	Current Staff	Current Board	Current Volunteers
Asian			
African American			
Hispanic			
American Indian/Alaska Native			
White			
Pacific Islander			
Total	0	0	0

C. Project Description

1. Proposed Project Title

2. What is the proposed project for MAC funding? What are the artistic components, project date(s) and location(s)?

3. What is the purpose of the project? How does the project fit into the scope of the organization's mission and long range plans?

4. Exhibition Support Applicants Only. What are the viewing hours?

D. Artistic Quality

1. What are the artistic criteria for choosing the project?

2. What makes the project creative and innovative in your community? How does the project challenge and develop your audience artistically?

3. Folk Arts Program Applicants Only.

How does the project support living traditional arts and the artists who practice them? Describe the cultural significance of the art form(s) and the cultural heritage of the artists.

4. Arts Council Project Applicants Only.

What services do you provide to artists and arts organizations.

E. Community Involvement

1. How does the project meet community needs?

2. How does the community show support for the project? This may include funding, in kind donations, volunteers, planning, execution, and evaluation.

3. How does the project contribute to the education of the community?

4. Who are the target audiences for the project? Include efforts you are making to reach new and diverse audiences. How will the project be marketed?

5. How will the project be accessible for persons with disabilities?

6. If this project or a similar project has been previously conducted, how many individuals participated? How did you determine the number? When did the project occur?

7. How many individuals do you expect to participate in the proposed project? How did you determine this number?

8. College or University Applicants Only.

What percentage of the audience is affiliated with the college or university (students, staff, or faculty) and what percentage is from the general community?

9. Arts Council Project Applicants Only.

How do you support the long-term cultural development of the community?

F. Management Ability

- 1. How has your organization maintained, diversified, and expanded funding?**
- 2. How will you evaluate the proposed project? How have you responded to previous evaluations?**
- 3. If your operating figures for last fiscal year reflected a deficit, how did this deficit occur? How did your organization handle this deficit? How will your organization prevent deficits in the future? If not, type N/A.**

G. Summary Budget

CASH EXPENSES

1. Personnel - Administrative	
2. Personnel - Artistic	
3. Personnel - Technical/Production	
4. Outside Artistic Fees and Services	
5. Outside Other Fees and Services	
6. Space Rental	
7. Travel	
8. Marketing	
9. Remaining Operating Expenses See Help for what MAC CAN and CANNOT FUND.	
10. Capital Expenditures - Acquisitions MAC does NOT FUND Capital Expenditures.	
11. Capital Expenditures - Other MAC does NOT FUND Capital Expenditures.	
Total Expenses	0

CASH INCOME

1. Admissions	
2. Contracted Services Revenue	
3. Corporate Support	
4. Foundation Support	
5. Other Private Support	
6. Government Support - Federal	
7. Government Support - State/Regional	
8. Government Support - Local	
9. Other Revenue	
10. Applicant Cash (used for this request) (Do NOT include MAC request in this line.)	
11. Missouri Arts Council Request (Request amount cannot exceed 50% of total project expenses.)	
Total Income	0

H. Attachments and Support Material

Budget Detail	Attached
Summary of Key Artistic	Attached
Summary of Key Administrators	Attached
Board List	Attached
Financial Statement - Statement of Financial Position	Attached
Financial Statement - Statement of Revenues, Expenses and Fund Balance	Attached

If Applicable Documents Checklist

Additional Board List
IRS Tax Exempt Status Letter
Missouri Annual or Biennial Registration Report
Authorizing Official Letter
Audit
Recommendations / Stipulations
Long Range Strategic Plan
Festivals Only: Budget Detail
Festivals Only: Financial Statement
Festivals Only: Schedule of Events

UPLOAD HERE

Compliance Statement

Authorizing Official's First and Last Name

Authorizing Official's Title

Submitting Person's First and Last Name

Submitting Person's Title