

# **Springfield Area Arts Council**

## **CITY ARTS**

### **Rental Subsidy**

### **Fiscal Year 2018**

### **Grant Application**

### **Guidelines and Forms**

# Springfield Area Arts Council

420 South Sixth Street Springfield IL 62701

Phone: 217-753-3519 Fax: 217-753-8018

director@springfieldartsco.org

## City Arts Program 2017 - 2018

### Rental Subsidy Guidelines

#### General Guidelines

This program is designed to provide area arts organizations with matching grants for rehearsal, performance or exhibit rental. Eligible applicant organizations must serve residents of Sangamon or Menard counties, be registered as a not-for-profit organization with the Illinois Secretary of State, and have been in existence for at least one year prior to application.

Current funding is available for rental subsidies from October 1, 2017, through July 31, 2018.

Exact grant amount is contingent upon the number of applications submitted and available funds. *The grant request may not exceed 75% of total rent cost or a maximum of \$2500, whichever is less.*

#### How to Apply

Complete the Application Form and Project Budget, and answer the following Narrative questions. (Limit narrative to *one* page.)

1. Describe your organization and its history. What is your purpose and mission (i.e. to present original plays; to organize visual arts exhibits; etc.)? Explain your current programming and how it fits your organization's mission.
2. Describe your organization's need for space rental subsidy. How are your organization's programs limited by lack of your "own" space? How will this grant, if awarded, help alleviate these limitations?
3. Indicate if applicant organization has previously received City Arts Rental Subsidy funds and when.

#### Review Procedures

A City Arts Panel representing the community, arts organization, and city government will review all applications and recommend the amounts to be awarded. The Board of Directors of the Springfield Area Arts Council will ratify the recommendations of the City Arts Panel. Applicant organizations will be informed of the decision of the Panel and Board after September 14, 2017.

**In lieu of the former workshops, all agencies who are first-time applicants in this category are required to schedule an appointment to discuss application details in order to be eligible for funding. Please call 217-753-3519 to schedule.**

The Springfield Area Arts Council offers rental subsidies as a component of the City Arts Program. The Arts Council should be credited on all promotional materials with the following statement: "This project is funded in part by a grant from the Springfield Area Arts Council and the City of Springfield."

#### Application Deadline

**Tuesday, August 1, 2017**

Hand-delivered by 5:00 PM to the  
Springfield Area Arts Council office  
(Hoogland Center for the Arts, basement)

OR

Postmarked on or before August 1, 2017

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## CITY ARTS GRANT PROGRAM 2017 - 2018

### Rental Subsidy Application

\_\_\_\_\_ Check here if applying for a City Arts Grant *for the first time*.

Name of Applicant Organization	Year Founded	Year Incorporated	FY Year End (Month)
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Address of Organization (Street or PO Box)	Phone (office)	City Ward #
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City	Zip code	E-mail (organization)
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Official to whom notification should be sent	Title
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Project Director	Home or Office Phone	Cell Phone
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Address	City	Zip	E-mail
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Estimated number of artists providing services specifically identified with this project \_\_\_\_\_

Estimated number of adults who will benefit from this project \_\_\_\_\_

Estimated number of youth (under 18) who will benefit from this project: \_\_\_\_\_

#### SUMMARY OF PROJECT BUDGET

- |    |   |          |
|----|---|----------|
| A. | <b>Grant Amount Requested</b> (same as # 1 on project budget) | \$ _____ |
| B. | Total Anticipated Cash Income (same as # 4)                   | \$ _____ |
| C. | Total Anticipated Cash Expenses (same as # 9)                 | \$ _____ |
| D. | Total In-Kind Contribution (same as # 10)                     | \$ _____ |

**STATEMENT OF ASSURANCES:** The applicant organization agrees that all figures, facts and representations in this application are true and correct to the best of its knowledge and belief. It further agrees that activities and services will be administered under the supervision of the organization and the funds received will be expended solely on the described project.

\_\_\_\_\_  
Signature of official of applicant organization      Date

\_\_\_\_\_  
Signature of person completing this application      Date

\_\_\_\_\_  
Typed name and title of official of applicant organization

\_\_\_\_\_  
Typed name and title of person completing this application

*Submit to the Springfield Area Arts Council, 420 South Sixth Street, Springfield, IL 62701 by August 1, 2017.*

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## City Arts Program

2017 - 2018

## Rental Subsidy

### PROJECT BUDGET

Applicant Organization \_\_\_\_\_

Facility to be rented \_\_\_\_\_

Project \_\_\_\_\_

#### CASH INCOME

1. Springfield Area Arts Council Grant Amount \$ \_\_\_\_\_  
Note: Request may be no greater than 75% of total rental cost or \$2500 maximum, whichever is less.
2. Support/Admission Fees/Contributions \$ \_\_\_\_\_  
(other grants, corporate/business or private donations)
3. Applicant Organization's Cash Support \$ \_\_\_\_\_
4. **TOTAL CASH INCOME** \$ \_\_\_\_\_

#### CASH EXPENSES

- |  | Expenses | In-kind  |
|--|----------|----------|
| 5. Fees and Services:                  |          |          |
| Administrative                         | \$ _____ | \$ _____ |
| Technical                              | \$ _____ | \$ _____ |
| Artistic                               | \$ _____ | \$ _____ |
| 6. Supplies and Materials              | \$ _____ | \$ _____ |
| 7. Space Rental (Location: _____)      | \$ _____ | \$ _____ |
| 8. Marketing (ads, posters, etc.)      | \$ _____ | \$ _____ |
| 9. <b>TOTAL CASH EXPENSES</b>          | \$ _____ |          |
| 10. <b>Total In-Kind Contributions</b> |          | \$ _____ |

Note: Line #4 INCOME should be equal to or greater than Line #9 EXPENSES.

6/2017

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## City Arts Grant 2017 - 2018

### Rental Subsidy Application Cover Page

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Springfield Area Arts Council office  
(Hoogland Center for the Arts, basement)

OR

Postmarked by August 1, 2017

Organization \_\_\_\_\_

1. Please submit one (1) "original signature" set that includes the following:

\_\_\_\_\_ Application Form (signed with blue ink)

\_\_\_\_\_ Narrative Proposal

\_\_\_\_\_ Project Budget

\_\_\_\_\_ The organization's current Illinois not-for-profit status  
(annual report to Secretary of State or copy of canceled check to the Secretary of State  
or on-line proof from [www.CyberDriveIllinois.com](http://www.CyberDriveIllinois.com), NOT the 501(c)(3) Tax Exempt  
Form or the 990 Form to the Attorney General)

\_\_\_\_\_ A current list of your Board of Directors with mailing addresses

\_\_\_\_\_ Your FY17 Operating Budget, FY16 year-end statement, and the proposed FY18  
Operating Budget

2. \_\_\_\_\_ Five (5) copies of only the Application Form, Narrative Proposal, and Project Budget

\_\_\_\_\_ met and discussed the Grant details on \_\_\_\_\_.  
Name \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Jon Austin, Executive Director, SAAC

6/2017

► PLEASE ATTACH THIS PAGE TO YOUR "ORIGINAL SIGNATURE" SET ◀