

Community Accelerator Grant Application Overview

ABOUT THE FUND:

ArtsFund is happy to announce a new grantmaking program, the Community Accelerator Grant, a historic investment in Washington's arts and culture sector.

Funded by the Paul G. Allen Family Foundation, the Community Accelerator Grant program will provide unrestricted grants for cultural nonprofit organizations across Washington state in amounts of \$2,500 to \$25,000. Funding will provide essential capital to Washington's cultural organizations, including fiscally sponsored and tribal organizations, whose primary mission is to produce or support arts and cultural activities.

Awards will be unrestricted, allowing recipient organizations to utilize funding in ways that they determine and prioritize for highest impact. Learn more on the [Community Accelerator Grant webpage](#).

HOW TO APPLY:

The application link will be posted on the [Community Accelerator Grant web page](#) at **12:00 noon on January 4**. The deadline to apply is **5:00 p.m. on January 31**.

This PDF version of the application is available in advance for your information.

Please review our [Community Accelerator Grant FAQs](#) before completing this application. If you have any questions regarding the content of this application, or if you need assistance completing the application, please email accelerator@artsfund.org.

Please click **"+Create an Eligibility to Get Started"** to begin. You can always edit your Eligibility Form by clicking "Edit."

You cannot move forward until you have completed your Eligibility Form. If your organization does not meet the eligibility requirements, your application will not progress past this form.



ELIGIBILITY FORM

For questions about eligibility, please refer to FAQ #1-11.

1. Is your organization based in Washington state?

Responses: Y/N

2. Does one of the following statements apply to your organization?

- My organization has 501(c)3 status.
- My organization is fiscally sponsored by another organization with 501(c)3 status.
- My organization is a tribal organization and not required to hold 501(c)3 status.

Responses: Y/N

3. Over the last three years, does your organization have an average annual budget greater than \$25,000?

Responses: Y/N

4. Is the primary focus of your organization producing or supporting arts and cultural activities?

Responses: Y/N

Please use the text box below if you would like to describe how your organization meets the above criteria. Note - this field is optional and intended only for organizations who wish to provide more context on how their work should be considered eligible for the Community Accelerator Grant. (50 words)

Note: if an organization answers no to any of the above questions, they are considered ineligible.

If ineligible, you will see the following text displayed:

“Thank you for your interest. Your organization is not eligible to apply for the Community Accelerator Grant.”



GENERAL INFORMATION FORM

- **General Information**

- Name of Organization
- Please select the statement that applies to your organization:
 - My organization has 501(c)3 status.
 - My organization is fiscally sponsored by another organization with 501(c)3 status.
 - My organization is a tribal organization and not required to hold 501(c)3 status.
- EIN (Employer Identification Number):
- For tribal organizations that do not have 501(c)3 status: Please upload your organization's resolution or charter in PDF format.
- For organizations fiscally sponsored by a 501(c)3: Please upload your organization's fiscal sponsorship agreement in PDF format.
- Name of fiscal sponsor 501(c)(3) organization (if applicable)
- EIN of Fiscal sponsor, if applicable:
- Date organization established: (Calendar tool)
- Fiscal year end (MM/DD):
- Most recently completed fiscal year:
- Organization mailing address:
 - City
 - State
 - ZIP
 - County:
 - Website:
 - Mission statement:

For questions about fiscal sponsorship, please refer to FAQ #2.

- **Contact Information**

Primary contact

- Name
- Title
- Contact email:
- Contact phone:

Secondary contact (optional):

- Name
- Title
- Contact email:
- Contact phone:



Please select your organization's primary focus area:

- Cultural Heritage
- Dance
- Film & Media
- Literary Arts
- Multidisciplinary
- Music
- Musical Theatre
- Opera
- Theatre
- Visual Arts
- Arts Service (orgs that provide support to artists or cultural orgs)
- Other

If "Other," please describe (25 words):

Please select your organization's secondary focus area (optional):

- Cultural Heritage
- Dance
- Film & Media
- Literary Arts
- Multidisciplinary
- Music
- Musical Theatre
- Opera
- Theatre
- Visual Arts
- Arts Service (orgs that provide support to artists or cultural orgs)
- Other

If "Other," please describe (25 words):

FINANCIAL INFORMATION FORM

For questions about financial information, please refer to FAQ #12-14.

Financial Information (Expenses/revenue)

- Please upload a PDF file of your organization's most recent Form 990, 990EZ, or 990N. If you are not able to provide a 990, please upload your most recent financial documents. These should include an income statement, a balance sheet, and a statement of cash flow, if available.
- Please select the document type uploaded:
 - 2020 Form 990, 990EZ, or 990N
 - 2021 Form 990, 990EZ, or 990N
 - FY21 Financial Documents (including an income statement, a balance sheet, and a statement of cash flow, if available)
 - FY22 Financial Documents (including an income statement, a balance sheet, and a statement of cash flow, if available)
 - FY23 Financial Documents (including an income statement, a balance sheet, and a statement of cash flow, if available)

Please fill out the table below with your organization's information to the best of your ability. Note - if your organization is fiscally sponsored, this information should be for your organization, not your fiscal sponsor.

Definitions:

Earned revenue is any funds received that are in direct exchange for goods, programs, or services; these include fees paid for programming, contract income, ticket sales, concessions, membership dues, and gift shop items.

Contributed revenue is any funds received that are not in direct exchange for goods, programs, or services; these include grant funding, individual donations, government funding, foundation support, and sponsorships. For the purposes of this application, any COVID-related relief funds should be included in the organization's contributed revenue.

Operating expenses are all expenses associated with running your organization. In addition to personnel expenses, other common expense categories are supplies, equipment, rent/mortgage, utilities, insurance, and program stipends.

Personnel expenses are only those related to costs associated with payroll; these include salaries, wages, payroll insurance, and employee benefits. Stipends and contracted services do not fall under personnel. Please note that personnel expenses should be included in your total amount for operating expenses. We ask for this number separately for research and advocacy purposes. If your organization has no paid staff, please enter 0.

	FY2021	FY2022	FY2023 (Budgeted)
Total Operating Expenses			
Total Earned Revenue			
Total Contributed Revenue			
Total Personnel Expenses			

Amount of funds requested:

- \$2,500 to \$4,999
- \$5,000 to \$7,499
- \$7,500 to \$9,999
- \$10,000 to \$12,499
- \$12,500 to \$14,999
- \$15,000 to \$17,499
- \$17,500 to \$19,999
- \$20,000 to \$22,499
- \$22,500 to \$25,000

What expense categories would the awarded funds cover? Please rank your top categories with 1 being the highest priority. If you believe you will use funds for other expense categories, please use the “other” category and use the text box to describe the expenses for which the funds will be used.

For questions about use of funding, please refer to FAQ #15-17.

- Salaries and Labor
- Programming
- Rents/Mortgage/Facility Upgrades
- Personal Protective Equipment (PPE)/COVID Preparedness
- Communications/Marketing
- Other

If you marked “other,” please describe (25 words or less).



- How would this funding help your organization's ability to attract other funding (grants, major donor gifts, etc.)?
 - 1- Not at all
 - 2 - slightly helpful
 - 3 - fairly helpful
 - 4 - very helpful
 - 5 - extremely helpful

- By how much do you expect receiving this grant, if awarded, would improve your revenue? In other words, how much additional funding, not including the amount of this grant, do you believe you will be able to raise as a result of receiving a grant? (Please enter a number. Note that your answer to this question will have no impact on your award.)

PROGRAMS AND DEMOGRAPHICS FORM

Note - this data is being collected so that we can ensure that grant funds are equitably distributed across Washington State's arts and culture sector, particularly those who center the voices of people who identify as BIPOC, as LGBTQ+, as people with disabilities, and those who live in rural communities.

Please respond to each of the following statements.

Note - this should display a Likert scale for each question with five radio buttons for responses. User will only be able to select one response for each question:

- 1 - Strongly Disagree
 - 2 - Disagree
 - 3 - Neutral
 - 4 - Agree
 - 5 - Strongly Agree
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- Our organization creates and/or provides programming centering LGBTQIA+ communities.
 - Our organization creates and/or provides programming centering Black, Indigenous, and other People of Color (BIPOC) communities.
 - Our organization creates and/or provides programming centering people with disabilities.



Demographic Information

Please provide the number of people that identify in each category, to the best of your ability. Groups are encouraged to answer as accurately as they can, but you may choose not to include demographic information by answering “do not know/prefer not to answer/not applicable” for all members of your board and staff.

For questions about the demographic survey, please refer to FAQ #18-19.

We will use this information to ensure that funding is distributed equitably to groups, including those who center the voices of people who identify as BIPOC, as LGBTQ+, and as people with disabilities. This demographic information will be taken into account when calculating final awards, meaning that groups who do not provide complete demographic information will not have that information considered when calculating awards.

	BOARD		STAFF	
	Previous Year	Current Year	Previous Year	Current Year
% Asian/Asian American/Asian diasporic				
% Black/African American/African diasporic				
%Hispanic/Latino/a/x diasporic				
% Middle Eastern/North African diasporic				
% Native/Alaskan Native/Indigenous				
% Pasifika/Native Hawaiian/Pacific Islander				
% Some other race alone				
% Two or more races				
% White				
% Do not know/prefer not to answer/not applicable				



Please provide the number of people that identify in each category, to the best of your ability.

	BOARD		STAFF	
	Previous Year	Current Year	Previous Year	Current Year
% LGBTQ+				
% Not LGBTQ+				
% Do not know/prefer not to answer/not applicable				

Please provide the number of people that identify in each category, to the best of your ability.

	BOARD		STAFF	
	Previous Year	Current Year	Previous Year	Current Year
% Have a disability				
% Do not have a disability				
% Do not know/prefer not to answer/not applicable				

