

## **2022 DENVER ARTS & VENUES RECOVERY FUND**

for

## **NON-PROFIT ARTS ORGANIZATIONS**

## A partnership with the National Endowment for the Arts (NEA) to distribute American Rescue Plan Act (ARPA) funds

\*Please note, you must fill out the online application on Submittable to apply for this fund. This document is for draft purposes only. Only one application per location will be considered.

# **ORGANIZATION PROFILE**

Primary	Contact	

First:

Last:

Title:

Email:

Phone:

### Organization (you must be a non-profit 501(c)3 to apply for this grant)

Legal business name:

If different from above, the Doing Business As (DBA) name is:

UEI # /SAM.GOV Number:

City Council District:

Street Address:

City:

State:

Postal / Zip Code: Email: Phone Number: Website:

# **ORGANIZATION MISSION**

What artistic disciplines does your organization support? (select all that apply):

Visual Arts Music Film Dance Comedy Theater Design Fashion Literature

Other \_\_\_\_\_

Please provide your organization's mission or purpose (details of artistic fields, artists, audience, and/or community served) (200 words)

### How long has the organization been in operation?

- 0 2 years
- 3 5 years
- 6 10 years
- 11 15 vears
- 16 20 vears
- More than 20 years

Average number of days that arts and cultural related performances or activities are facilitated by the organization annually, in a typical year? Activities could include all classes available to the public, all public performances, and/or days your organization is open for

public visitation and engagement.

0-25 days 25-50 days 50-100 days 100-200 days Over 200 days Year-round

#### **ARTISTIC MERIT & EXCELLENCE**

Describe ways in which your organization has added to the culture in which your work is grounded, and how your organization and programs have had a positive impact on the community you serve (150 words). Please note: You will also have an option to provide up to three (3) examples of your organization's work which can include accolades/awards, web links, videos, visuals/photos in the uploading section of the application.

## **ORGANIZATION OPERATIONS & BUDGET**

Does your organization run programs out of a physical venue where its primary focus and

programming is related to visual or performing arts?

Yes

No

### If your organization runs out of a venue, is it owned or rented?

Owned

Rented

If your organization runs out of a venue, what is the maximum occupancy/capacity?

## If renting, when does the organization's lease of the space expire?

0-1 years

- 1-3 years
- 3-5 years
- 5-7 years
- 7-10 years

over 10 years

Please choose which amount best represents the organization's total MONTHLY recurring expenses for operations (including rent, mortgage, utilities, phone charges, payroll costs, insurance, employee benefits, state and local taxes, equipment, etc.):

\$0 - \$500

- \$500 \$1,500
- \$1,500 \$2,500
- \$2,500 \$5,000
- \$5,000 \$7,500
- \$7,500 \$10,000
- \$10,000 \$15,000
- \$15,000 \$30,000
- \$30,000 \$50,000
- \$50,000 \$100,000
- \$100,000-\$250,000
- \$250,000-\$500,000

More than \$500,000

## EQUITY, DIVERSITY, INCLUSION AND ACCESSIBILITY

Is the organization or business entity owned or directed by, in whole or in part by persons who identify as (select all that apply):

American Indian/Alaskan Native Asian/Asian American Black/African American Latino/Latina/x/e Native Hawaiian/ Other Pacific Islander White/Caucasian Person with a Disability LGBTQIA+ Female I prefer not to respond

Describe ways in which your organization is equitable, diverse, inclusive, accessible, and has engaged with communities that have been historically marginalized such as Black, Indigenous, Latino/x/e, or People of Color (BILPOC), people with disabilities, or LGBTQIA+? (200 words)

How is equity, diversity, inclusion, and accessibility demonstrated in your internal planning and operations (e.g., leadership, board and staff development, contracting/hiring, outreach strategy, goals or plans, evaluation of practices, etc.)? (200 words)

NEA Accessibility form – download, fill out and attach

Is your staff and board representative of the communities you serve? YES NO

Please describe (100 words)

# **ORGANIZATIONAL RECOVERY**

STATEMENT OF NEED: Please provide a brief description of the circumstances that led to the organization's current financial state due to COVID-19 including any immediate, short-term, or long-term financial impact, the current and emergent challenges, amount requested, proposed use of funding to mitigate the impacts on the organization that may be leveraged to support longevity. (300 words)

## Has the organization received or accessed any of the following sources of funding to support the organization since March 1, 2020 due to COVID-19? (select all that apply)

Rent/mortgage relief Paycheck Protection Program/Economic Injury Disaster Loan (EIDL) Shuttered Venues Operations Funding (SVOG) funding Private Loan (SBA loans, etc.) Commercial Loan Sponsorships Business Savings / Reserve Funds Personal Savings Fundraising Additional grants from Federal, State, Local or private sources

What is the total amount of COVID-19 related economic relief funding you have received since March 1, 2020?

0

0-\$3,000

\$3,000 -\$5,000

\$5,000 - \$10,000

\$10,000 - \$20,000

\$20,000 - \$50,000

\$50,000 - \$75,000

\$75,000 - \$100,000

\$100,000 - \$150,000

\$150,000 - \$200,000

\$200,000 - \$300,000

\$300,000 - \$500,000

Over \$500,000

What is the minimum amount of current operating capital the organization is requesting for necessary and immediate expenses through December 31, 2022?

\$1,000 - \$2,500 \$2,500 - \$5,000 \$5,000 - \$10,000 \$10,000 - \$15,000

# To better understand the organization's level of financial need, please choose the one category that best describes the organization's current level of financial strain:

- Level 1 Some financial strain (access to 9-12 months of operating funds)
- Level 2 Financial Distress (access to 6-9 months of operating funds)
- Level 3 Crucial Financial Distress (access to 3-6 months of operating funds)
- Level 4 Severe Financial Distress (access to 0-3 months of operating funds)

#### **REQUIRED DOCUMENTATION**

In addition to completing the application, applicants must provide the following documentation to qualify for this fund:

- Current Certificate of Good Standing with the Colorado Secretary of State
- **W-9 Form** which identifies applicant's current business address, EIN number with a signature of an authorized representative
- **ONE current proof of being physically located in the City & County of Denver** MUST BE ONE OF THE FOLLOWING FROM 2022: organization's utility bill, phone bill, pay stub, renter's or mortgage bill, lease, insurance policy
- ONE document of the proposed budget for award including:
  - Date funds will be utilized
  - o What the funds will be utilized for
  - o Amount planned to be spent on each qualified expenditure
  - o Documentation of proposed expenses
- **Prior twelve (12) months operating income statement and/or cash flow statement** The organization's actual month-by-month financial activities for the prior twelve months. This includes all cash inflows (Revenues) and cash outflows (Expenses).
- Six (6) months financial projections A best estimate of the organization's month-bymonth financial projections for six months out from the time of application. This should be in the same format as the prior six-month actuals submitted above.

## Up-to three (3) additional documents including accolades/awards, web links, videos, photos

#### or other examples *can* be included here:

#### APPLICANT CERTIFICATION

By submitting this application, I acknowledge the following on behalf of the Applicant:

- All information is accurate and truthful. Applicant understands that this application and information is self-reported and self-certified but is subject to verification and that inaccurate information, misrepresentation and/or fraud will result in the organization's repayment of all amounts distributed to it upon written demand from the City of Denver. The applicant and organization agrees to promptly reimburse the City and County of Denver should it request repayment of distributed funds in connection with the foregoing or non-compliance with any aspect of the NEA ARPA Federal Funding.
- Incomplete or inaccurate applications may be disqualified.
- If selected, the applicant and organization understand that it is legally responsible and accepts full responsibility for federal, state, and local tax implications associated with receiving grant funds.
- The applicant and organization understands that all information submitted is subject to open records requests and will be included in reporting for the City and County of Denver. The organization will retain all documents concerning its application and expenditure of grant funds for five years from the date of any award.
- Funding MUST BE SPENT by the organization by no later than December 31, 2022
- Funded applicants will be required to provide Denver Arts & Venues a final report, on or before January 31, 2023, demonstrating that it has expended all grant monies in a manner compliant with NEA ARPA funding requirements. Denver Arts & Venues will provide each granted organization a reporting template that includes:
  - Date funds were spent
  - What the funds were utilized for
  - Amount expended on each qualified expenditure
  - Documentation of expenses (could include invoices, cancelled checks, payroll, etc.)

I have legal authority to submit this application and certify the foregoing on behalf of the Applicant, and Applicant hereby expressly consents to, and agrees with the foregoing certification as a condition to applying for grant funding.

Yes

No