



FY20 General Operating Support Application ARTS
New Applicant

Organization Name:

Organization Description:

Current GFTA Grant:

Amount of Request:

Section 2a Program Narrative: New Applicant

1. What is your organization's mission?
2. Briefly describe the history of your organization and summarize your program activities and events for the past three years. Highlight any notable successes or challenges.
3. Please describe your overall marketing strategy.
4. Describe the function of your organization's board of directors or governing body.
5. Please describe your community engagement activities or strategy.
6. Please describe how you evaluate the success of your programs.
7. If you have previously applied to GFTA, please discuss how your organization's programming and/or budget has changed and improved since your last application. If you have not previously applied, please state "This is our first application."

Section 2b Site Visit Planning

Please list an event you'd prefer to have GFTA staff attend.

Event:

Date(s):

Venue:

Section 2c Events Overview

Summarize all of your San Francisco public activity for fiscal year 2016:

SAN FRANCISCO TICKETED EVENTS 2016

Number of self-produced events:

Number of other ticketed events:

Total attendance at ticketed events:

Average percentage of house capacity filled:

SAN FRANCISCO FREE EVENTS 2016

Total number of free public events:

Total attendance at free public events:

Summarize all of your San Francisco public activity for fiscal year 2017:

SAN FRANCISCO TICKETED EVENTS 2017

Number of self-produced events:

Number of other ticketed events:

Total attendance at ticketed events:

Average percentage of house capacity filled:

SAN FRANCISCO FREE EVENTS 2017

Total number of free public events:

Total attendance at free public events:

Section 2d Events Detail

TICKETED EVENTS (list all SF events)

Date **Name of Event** **Venue** **Attendance**

FREE EVENTS (list all SF events)

Date **Name of Event** **Venue** **Attendance**

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FINANCIAL INFORMATION

Please enter the requested financial information for fiscal year 2015

Total revenue:

Total expenses:

Section 3a REVENUE (Totals will be calculated in the application form)

Item	2016	2017
1. Membership Revenue		
2. Performance Subscriptions Full		
3. Performance Subscriptions Partial		
4. Single ticket sales		
5. Group ticket sales		
6. Touring Fees		
7. Media Subscriptions		
8. Broadcast Subscriptions		
9. Publication sales		
10. Royalties, Rights and Reproductions		
11. Admissions		
12. Guided or Group tours		
13. Gallery Sales		
14. Contracted Services		
15. Fiscal Sponsorship Administration Fees		
16. Tuitions and Registration Fees		
17. Other Program Revenue		
Total Earned – Program		
18. Food and Concessions		
19. Gift Shop and Merchandise Fees		
20. Parking Fees		
21. Advertising Revenue		
22. Sponsorship Revenue		
23. Space Rentals		
24. Other Rentals		
25. Loan Interest		
26. Application Fees		
27. Other Earned Revenue		
Total Earned-Non-Program		
Total Earned Revenue		
28. Trustee & Board		
29. Individual		
30. Corporate		

31. Foundation		
32. City Government		
33. County Government		
34. State Government		
35. Federal Government		
36. Tribal Contributions		
37. Parent Organization Support		
38. In-kind Operating Contributions		
39. Other Contributions		
Total Contributed Revenue		
40. Operating Investment Revenue		
41. Total Non-Operating Revenue		
42. Total Restricted Revenue		
43. Total Unrestricted Revenue Less Unrestricted in-kind		

Section 3b CONTRIBUTED REVENUE DETAILS

Foundations (list all)

Contributor Name	Status	This year's amount	Last Year's amount
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Corporate (list all)

Contributor Name	Status	This year's amount	Last Year's amount
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Government (list all)

Contributor Name	Status	This year's amount	Last Year's amount
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City Support

Contributor Name	Status	This year's amount	Last Year's amount
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Section 3c EXPENSES (Totals will be calculated in the application form)

ITEM	2016	2017
1. W2 Employees		
2. Independent Contractors		
3. Professional Fees		
Total Personnel Expenses		
4. Advertising and Promotion		
5. Conferences and Meetings		
6. Dues and Subscriptions		
7. Grant Awards and Similar Amounts Paid		
8. Insurance		
9. Occupancy Costs		
10. Office and Administration		
11. Printing, Postage and Shipping		
12. Travel		
13. Recording and Broadcasting Expenses		
14. Royalties, Rights and Reproductions		
15. Exhibition Costs		
16. Collections Management		
17. Productions and Events Costs		
18. Interest Expense		
19. Depreciation		
20. Other Operating Expenses		
Total Non-Personnel Expenses		
21. Non-Operating Expenses		
22. Non-Operating Non-Personnel Expenses		
Total Expenses		
Total Expenses Less In-Kind		
Change:		

Section 4 PERSONNEL DATA

Number of Full-time Employees	
Number of Part-time Employees	
Number of Full-time Volunteers	
Number of Part-time Volunteers	
Number of Interns and Apprentices	
Number of Independent Contractors	
Of those reported above, what is the number of paid artists?	

Number of Board Members	
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Section 5 CHECKLIST AND ATTACHMENTS

The following attachments are required for ALL APPLICANTS and must be included with the application at the time of submission.

For each item listed, please upload the document and mark "Yes" to certify that you have uploaded a PDF of that item. If an item is not applicable to your organization, please indicate "n/a".

Please note that if any required item is not submitted, your application will not be reviewed.

If you have a Fiscal Sponsor or are a New Applicant, there are additional items following this first list.

1. Financial Statement for your most recently completed fiscal year, including a Revenue and Expense statement and Balance Sheet (if not included in an attached audit or financial review).

- Yes
- N/A
- No

2. Budget Notes. Please explain any variances of 20% or more for both Revenue and Expense items.

- Yes
- N/A
- No

3. Current list of Board of Directors or Advisory Committee, identifying members by title and affiliation outside of your organization.

- Yes
- N/A
- No

4. Letter of authorization signed by the president of your board of directors (or the board of your Fiscal Sponsor organization) stating endorsement of this funding request.

- Yes
- N/A
- No

5. Signed copy of your most recently submitted IRS Form 990 or 990-N Postcard. This should be dated within the last two years.

- Yes
- N/A
- No

6. Copy of IRS Form 941 for most recently completed quarter as proof of payment of payroll taxes. This is applicable only if you report full or part-time employees.

- Yes
- N/A
- No

7. Resumes of paid and/or volunteer senior administrative or artistic staff members hired since **November 2016**. e.g., executive director, artistic director, program director, development director, marketing director, etc.

- Yes
- N/A
- No

8. For organizations with budgets up to \$2 million **and** receive a grant of \$50,000 or more from Grants for the Arts: **Financial Review** for your most recently completed fiscal year.

--OR--

For organizations with budgets of \$2 million or more -- **Financial Audit**

- Yes
- N/A
- No

9. Program Samples. These can include programs, brochures, flyers, press clippings, etc. in a PDF. Please include your best/favorite samples and not every item produced in the past year.

NEW APPLICANTS: must include at least one dated program sample from each of the three previous years.

ONGOING APPLICANTS: samples from the past year only are fine.

- Yes
- N/A
- No

10. List of planned 2019 San Francisco activities. Please include San Francisco activities only.

- Yes
- N/A
- No

11. Proof of good standing with the IRS. Visit <https://apps.irs.gov/app/eos/pub78Search.do> and select the search to organizations that "are eligible to receive tax-deductible charitable contributions." Please create a PDF of the page that shows your organization listed and attach it below.

- Yes
- N/A
- No

PLEASE CHECK YOUR CHECKLIST AGAINST THE UPLOADED FILES LISTED IN THE UPLOADS SECTION OF THE APPLICATION OVERVIEW PAGE

Section 6 CERTIFICATION AND RELEASE

Organization Name [data field]

Name of person making this representation on behalf of the organization: [response]

This certification and release must be signed by the individual applicant or principal officer of the organization with the knowledge of the matters contained herein and with legal authority to obligate the organization. The undersigned certifies: That all information contained herein is accurate or represents a reasonable estimate of future operations based on data available at the time of application and that there are no misstatements or misrepresentations contained herein or in the attachments. The individual applicant or organization will comply with the federal laws that regulate Fair Labor, Civil Rights, Accessibility, and other regulations and City requirements in this grant application.

The undersigned hereby releases the City & County of San Francisco, Grants for the Arts, and their respective officers, employees & agents, from any and all liability and/or responsibility concerning damage to or loss of materials submitted to Salesforce, whether or not such damage or loss is caused by the negligence or intentional acts or omissions of Salesforce, its respective officers, employees & or agents.

I acknowledge and agree to the terms stated above

- Yes
- No

Please enter the date you are submitting this application.

This date constitutes a signature
[response field]

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