

Iowa Arts Council Iowa Arts Jobs Preservation Grant Application Instructions



Last Updated: 3/31/2009

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Online Resources

In addition to these instructions please note the following additional resources on the Iowa Arts Council's website that may be helpful in your application preparation.

[IAJPG Guidelines](#)

[IAC Policies](#): General policies that apply to all IAC grants and programs including information about Open Records, Equal Opportunity and Accessibility, Appeals, and more.

[Grant Writing Tips](#)

<http://www.recovery.gov>: The federal Web site to track how money from the American Recovery and Reinvestment Act (ARRA) how it is being spent.

<http://recovery.iowa.gov>: Similar to the federal site, for tracking how ARRA money is being spent in Iowa.

Part A: Applicant

Applicant Name: Enter the name of the organization that will be conducting the grant activity. Enter the name by which the Internal Revenue Service knows your organization. If you are unsure of the name you should use, check the entry for your organization on the IRS Publication 78 Web site (<http://apps.irs.gov/app/pub78>).

Address, Address cont, City, State, Zip: Enter the mailing address of the applicant organization. Be sure this address is correct - this address will be used by the IAC to mail the funding notification letter and grant award check.

Website: This information is for IAC use only and will not be forwarded to the grant review panel..

Federal Identification Number: Enter the Federal Identification Number for the organization entered in the "Applicant Name" field. The Federal Employer ID Number is also known as the Taxpayer ID Number (TIN) or Federal Employer Identification Number (FEIN). This is the nine-digit number that was assigned by the IRS. Do not use a Social Security Number.

DUNS Number: If the applicant does not have a DUNS Number, see this guide from the Federal government on how to obtain one: http://www.whitehouse.gov/omb/grants/duns_num_guide.pdf. The National Endowment for the Arts (NEA) now requires the IAC to collect this information from all applicants who are not individuals.

Contact Person of Applicant: Enter the name of the person primarily responsible for managing the grant activity. Please list the name of the person the IAC can contact if they have any questions regarding this application. This person may or may not be able to legally obligate the applicant, but should be knowledgeable about the project.

Note: The Contact Person of the Applicant may or may not be the person who should sign the grant contract. The contract must be signed by a person who can legally obligate the applicant.

Title of Contact Person: Enter the job title of the contact person.

E-mail Address: Enter an e-mail address for the contact person. E-mail is the IAC's primary means of communication with applicants so please double check that you have entered this address correctly.

Telephone (daytime): Enter the primary phone number to reach the contact person. Use the format xxx-xxx-xxxx.

Part B: Eligibility, Assurances

Check the [guidelines](#) for eligibility requirements for applicants.

Confirm compliance: Applicant must be able to confirm that it meets the following eligibility requirements by checking the corresponding boxes on the application:

- Applicant Organization is located in Iowa.
- Applicant has operated in Iowa as an arts organization or an arts presenting organization for the last three (3) years
- Applicant has submitted all final reports for previous grants received from the IAC, DCA, and Arts Midwest in a timely fashion.

Applicant is one of the following: Check the box next to the correct description of the type of organization. Note: Nonprofit organizations must have 501(c)(3) tax exempt status and be registered as a nonprofit with the Secretary of State in the State of Iowa. All entities must be located in Iowa.

EITHER...OR...: Check the box for either **Arts Organization** or for **Arts Presenting Organization**. See the [guidelines](#) for clarification between these two applicant types.

Part C: Narratives

Application Title: Provide a simple, descriptive title for your request.

Application Summary: Summarize your proposal in two or three sentences. Include names of artists or a brief description of the position and dates contractors will be hired or position will be filled. This summary will be used to describe your project in various funding reports and news releases by the Iowa Arts Council.

Organizational Background, In Jeopardy, Proposal: Follow the instructions accompanying each narrative field on the application. Responses are limited to the space provided in the application.

Part D: Financial and Budget Information

All expenses must be incurred and paid during the funding period.

Past Operational Budgets:

For each of the applicant organization's past three completed fiscal years, list the year, and total revenues and total expenses for that year in the space provided. List the most currently completed year first. If applicable, use the information on your IRS 990 (Total Revenue: line 12 on 990, line 9 on 990-EZ; Total Expenses: line 17 on 990-EZ and 990 before 2008, line 18 on 2008 990).

Current Situation:

List the year, and estimated total revenues and expenses for the current year.

Full-Time Employees: Enter the number of employees that work at your organization, year-round, at least 30 hours per week.

Part-Time Employees: Enter the number of employees that work at your organization, fewer than 30 hours per week and/or on a seasonal basis. (If seasonal workers are hired by contract rather than on a salaried basis, include them under Contractors instead.)

Contractors: Enter the number of contractors, including artists and non-artists, working for your organization at the time of the grant deadline, June 1, 2009.

Note: Use the [IRS's definitions for employees and contractors](#).

Application Budget:

List each position for which funding is requested.

Position: Enter the job title, artist name, or artist group name. If artist group, put the number of artists in the group in parenthesis after the group name. (ie. "XYZ Band (4)")

Full-Time, Part-Time, Contractor: Check one of these boxes to indicate the type of employment.

Annual Salary/Wages: Enter the amount the person will be paid during the funding period: July 1, 2009 through June 30, 2010.

Salary/Wages Requested: Enter the amount requested for this position in this grant proposal.

Weeks of Employment: Enter the number of weeks of employment the requested grant funds would pay to employ this position.

Subtotals and Totals: These fields will auto-calculate.

Grant Amount Requested: This field will auto-calculate from the amounts you enter in the "Salary/Wages Requested" column. Requests are limited to \$25,000. If after filling in the positions your request is greater than \$25,000, you will need to adjust the amount you are requesting for a position.

Buttons:

Add a Position: The budget form starts with only one row for a position. Use this button to add a new row for an additional position. Each position should be on a separate row. Rows are added to the bottom of the section.

Delete: Each row has its own delete button so you can remove a row you have entered mistakenly.

Clear: Each row has its own clear button so you can remove information from a row without removing the row itself.

Part E: Quality of the Applicant

This section of the application will be reviewed by staff reviewers during the application pre-screening process. See Review Process section of the [guidelines](#) for more details.

Three (3) Letters of Support: Three letters of support must be included with the paper submission of your application.

Letters of support do not need to be included in the e-mailed version of the application. Check this box to indicate that the letters have been included in the application.

For each letter of support list the Supporter and the relationship of that supporter to the applicant in the space provided in the application.

Supporter: The author of the letter of support or organization that the author represents.

Relationship to Applicant: Indicate the relationship of this supporter to the applicant organization. Examples: member, past or current project partner, program attendee, service recipient, board member, community leader, etc.)

List of Current Organization Board Members

List each member currently serving on the applicant organization's board.

Name: Enter the first and last name of the board member.

Status on Board: Select one of the following from the drop down menu that corresponds to this board member's status: Board Officer, Board Member, Ex Officio.

Position in the Community: Enter a brief description of this board member's role in the community. (ie. business owner, arts supporter, accountant, lawyer, etc.)

Buttons:

Add a Board Member: The form starts with only one row for a board member. Use this button to add a new row for each additional board member. Each board member should be on a separate row. Rows are added to the bottom of the section.

Delete: Each row has its own delete button so you can remove a row you have entered mistakenly.

Clear: Each row has its own clear button so you can remove information from a row without removing the row itself.

Organization Description: Describe your organization: type of organization, mission and purpose, primary service area and constituents served, number of members, etc. Give examples of arts programming or services provided in the past two years that clearly reflect the quality of the applicant's work within the community and show that applicant's arts programming is highly valued and supported by the community. Provide more detail than is included in the Narrative Section question "Organizational Background."

F. Service Contract

All applicants are asked to read, sign, and return the Service Contract as part of the application for these funds. If a grant is awarded by the Iowa Arts Council, this Service Contract will be in effect. If a grant is awarded by Arts Midwest, the grantee will be asked to sign a separate (but similar) contract. If no grant is awarded, this contract is void. The stipulations of the Service Contract are not in effect until a grant is awarded and the contract is fully signed.

Note to previous grantees of the Iowa Arts Council: this service contract includes some information that is different from previous IAC Service Contracts. Please review carefully.

Applicant Name & Address: These fields are calculated from the information entered in the Applicant of the application.

Authorizing Official of the Applicant: Enter the name of an individual who has the authority to legally obligate the applicant to the conditions of the grant program and Service Contract (ie. organization's director, board chair).

Applicant Signature: The individual named as the Authorizing Official of the Applicant must sign on this line. Please sign in **BLUE INK**. This allows state auditors to confirm that the signature is not a photocopy.

G. Substitute W-9 Form

The Substitute W-9 Form provides the IAC's accounting department with necessary information to process a grant award check should your application be approved for funding.

Nonprofit Organizations: Complete BOX B (the right side of the form). Check "Yes" for Corporation. Do not fill in the "Doing Business As" field unless you are using a pseudonym. Fill in all the other fields in BOX B appropriately.

Public Entities: Complete BOX B (the right side of the form). Check "Yes" for Government. Do not fill in the "Doing Business As" field unless you are using a pseudonym. Fill in all the other fields in BOX B appropriately.

Signature and Date: After printing the form, obtain the signature of the Authorizing Official indicated on the Service Contract, and date the form

H. Minority Impact Statement

The Minority Impact Statement is a new requirement for all grant applications submitted to Iowa's state agencies beginning in 2009.

Check the box next to the statement regarding the impact that the proposed grant program will have on minorities.

If the project proposed in your grant application could have a disproportionate or unique *positive* impact on a minority group:

- o Check the first check box.
- o Briefly describe the positive impact.
- o Check the boxes next to the minority groups your project could positively impact.

If the project proposed in your grant application could have a disproportionate or unique *negative* impact on a minority group:

- o Check the second main box.
- o Briefly describe the negative impact.
- o Briefly provide the rationale for the project.
- o Provide evidence that you have consulted with representatives of the minority groups impacted.

If the project proposed in your grant application would not have a disproportionate or unique impact on a minority group:

- o Check the third main box.
- o Briefly provide the rationale for determining that this project had no disproportionate or unique impact on a minority group.

At the bottom of the form, the Name field should be filled with the Name of the Contact person for the Applicant listed on the grant application. The title field should be filled with that person's title.

Submitting the Application

Application form must be completed, printed, assembled with Letters of Support (see section G) and delivered to the Iowa Arts Council by 4:30pm June 1, 2009. Submission address is:

Iowa Arts Jobs Preservation Grant
Department of Cultural Affairs
600 East Locust St.
Des Moines, IA 50319-0290

Additionally, please e-mail the application form to the Iowa Arts Council by clicking on the "E-mail Application" button on the application form. If you are experiencing difficulty with the email button on the form, simply attach the form to an email to iac.egrant@iowa.gov with a subject line of "Iowa Arts Jobs Preservation Grant." There is no need to email the letters of support to us.