

June 2023

Dear Applicant Organizations,

Arts Council of Midland (ACM) has, since 1989, collaborated with the City of Midland, through their City Development, Hotel/Motel, and Non-Departmental Funding, to make available our Subgrant program to area non-profit organizations presenting arts projects to Midland residents, visitors, and tourists. In those 34 years, ACM has granted over $2.6 million dollars.

ACM provides an informational meeting in the summer of each year prior to the August deadline to detail our application process, paperwork, answer questions, and to discuss requirements, old or new, of the Subgrant application. That meeting will take place via Zoom on **Wednesday, June 14th at 10:30 am CST**. Please contact our office to register for this Zoom meeting.

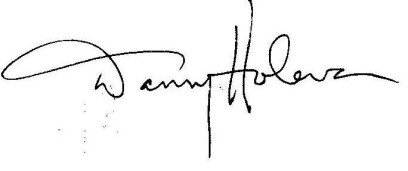
Anyone is welcome to contact the ACM office at 432-687-1149 for consultation or to set up an appointment to discuss your organization’s Subgrant application. You may also email me at [danny@acmidland.org](mailto:danny@acmidland.org)

Deadline for application submissions is **Monday, August 14th at 5:00 pm CST**. You may mail your applications to the ACM P.O. Box 3494, Midland, Texas, 79701 or hand-deliver them to 1506 W. Illinois Avenue. For afterhours, drop your paperwork into our locked mailbox by our front door.

Public activities and services must occur within the City **or** County of Midland related to approved Subgrant projects. All projects must be open and advertised to the general public for the benefit of residents, visitors, and tourists. Any project status that changes must have prior permission from ACM to ensure funding.

We look forward to your application, and please see all the necessary Subgrant paperwork on our website.

Sincerely,



Daniel H. Holeva

Executive Director



ARTS COUNCIL OF MIDLAND

*Enriching lives with the arts through community-wide advocacy, education, outreach, and promotion!*

***SUBGRANT APPLICATION***

*“Project” as described will be used to refer to the project, program, event, exhibition, performance, or activity for which you are submitting a Subgrant Application. \* Required fields.*

**I.** \* **Applicant:**

**A. Organization Name**

**B. Address**

**C. Telephone**

**D. Contact Person(s) responsible for grant application**

**E. E-mail**

*It is the organization’s responsibility to update contact information with the ACM office should changes occur during the year.*

**II.** \* **Mission Statement of Applicant Organization:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**III.** \* **Applicant history**:

**A. What year was your organization founded? \_\_\_\_\_\_\_\_\_**

**B. Has your organization or project applied to Arts Council for funding in the past? \_\_\_\_\_\_YES \_\_\_\_\_\_NO**

**If yes, please identify the year(s), purpose of the request(s), whether funded and amount funded. If more than three (3) applications have been made, you may limit your response to the most recent three applications.**

Year Purpose of request Funded? Amount Funded

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Is your current request for a new project or is it an expansion of an existing project within your organization?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IV. \* Name/Title of project:**

**V. \* Anticipated attendance of project:**

**VI. \* Description of project:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**VII. \* Objectives of Project:** *(Please include as a part of your response information regarding community involvement, outreach or other public components, and accessibility for minorities, physically challenged persons and low-income community members.)*

1. **Please describe the qualifications/expertise of performers, demonstrators, exhibitors, or other participants in this project. You may attach/include resumes.**

\_\_\_\_\_

**IX. \* Please summarize your marketing plan for this project.**

\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**X. \* Identify the total number of overnight hotel stays anticipated for this project** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**XI. \* Please describe your plan for tracking out-of-town attendance and hotel stays.**

\_\_\_\_\_

**XII.** \* **Applicant’s *Total* *Annual* Budget for the year of the project: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**XIII.** \* **Total Budget for this project: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**XIV. \* Amount requested from ACM for project: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Percentage of request compared to total project cost\_\_\_\_\_\_\_%, not to exceed 50%.**

*(NOTE: Arts Council of Midland will not pay more than 50% of total project costs*)

**XV.** \* **Date of project: (day, month, year)**

**(End date)**

**XVI. \* Physical location of project: XVII. \* Project Budget Information:** *Please fill in all applicable columns and categories.*

**1 2**

|  |  |  |  |
| --- | --- | --- | --- |
| **Projected Expenditures:** | Paid by  ACM Funds | Paid by Applicant | **TOTAL**  **(Col. 1 + 2)** |
| 1) Staff salaries– 20% maximum |  |  |  |
| 2) Professional services |  |  |  |
| 3) Facilities rental- 20% maximum |  |  |  |
| 4) Travel & transportation |  |  |  |
| 5) Lodging/rental (except facilities) |  |  |  |
| 6) Supplies & materials |  |  |  |
| 7) Advertising *(Indicate what media)* |  |  |  |
| 8) Printing *(Indicate kind)* |  |  |  |
| 9) Postage |  |  |  |
| 10) Other |  |  |  |
| **TOTAL EXPENDITURES** |  |  |  |

**1 2**

|  |  |  |  |
| --- | --- | --- | --- |
| **Projected Revenues:** |  |  | **TOTAL**  **(Col. 1 + 2)** |
| 1. ***ACM funds***   (Amount Requested) |  | N/A |  |
| 2) Admissions | N/A |  |  |
| 3) Individual donations | N/A |  |  |
| 4) Corporate donations | N/A |  |  |
| 5) Foundation support **\*** | N/A |  |  |
| 6) State funds | N/A |  |  |
| 7) From Organization’s operating budget | N/A |  |  |
| 8) Other | N/A |  |  |
| **TOTAL REVENUES** |  |  |  |

|  |
| --- |
| **\* Name of Sources Amount Requested Amount Received Pending** |

Is the applicant seeking other sources of funding for this event? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, do these funding sources include *City of Midland Hotel/Motel* funds? **\***  \_\_\_\_\_\_\_\_\_\_\_\_\_

*Visit Midland Sports and Entertainment* (VMSE)? **\*** \_\_\_\_\_\_\_\_\_\_

***NOTE: ACM will not issue Subgrants to applicants receiving City of Midland Hotel/Motel funds or VMSE funds.***

**XVIII. \* Required checklist - Sub Grant Support Materials:**

* + Cover letter
  + List of organization's Board of Directors and staff
  + Federal tax exemption letter or letter of government affiliation
  + Copy of **first page** of most recently filed 990 and copy of financial statement for most recently completed fiscal year
  + Résumés/Information about performers, demonstrators and exhibitors participating in this project
  + Marketing materials for this project. **In marketing your project, you are required to use the ACM logo. The ACM logo must be recognized in print and electronically on any project receiving Subgrant funding. Examples of these documents must be attached to the grant application.**
  + Letters of support for project

**XIX.** **Certification:**

**We certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge.**

Authorizing officials:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**President of the Board**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Typed or printed name)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervising Staff**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Typed or printed name)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Director (if different from above)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Typed or printed name)*

***Please submit one (1) Flash Drive OR one (1) digital version via email AND one (1) paper copy of application along with one (1) set of all project support materials no later than 5:00 p.m. on August 14, 2023, at the ACM offices (1506 W. Illinois Ave 79701/ P.O. Box 3494, Midland, Texas 79702.)***

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**Arts Council of Midland Subgrant Guidelines**

The Arts Council of Midland’s (ACM) goal is to coordinate and encourage cultural endeavors and to promote knowledge and appreciation of the arts in Midland, Texas.

Each August ACM will accept grant applications; what we call Subgrants. These applications are given to eligible organizations seeking funding to provide arts projects and programs in the Midland area. Funds for our Subgrants program come from City of Midland Hotel/Motel Tax Revenue. Requests for assistance will be reviewed and evaluated through the Arts Council of Midland Subgrant review process. Available funds then will be assigned to the projects which best advance the aim of this program.

***PLEASE NOTE:***

***(1) Organizations that receive funding from the City of Midland Hotel/Motel Tax Fund or Visit Midland Sports and Entertainment (VMSE) are not eligible to receive funding from Arts Council of Midland’s Subgrant program and should not apply.***

**(2) The City of Midland, at their request, is requiring all Subgrant dollars to report to ACM the number of hotel rooms-overnight stays, resulting from this program funding. Failure to report this to the ACM with your final grant report will result in future funding being impossible for at least a three-year period from the year the grant was made. No balances can be paid until this overnight stay reporting is submitted.**

**HOW TO APPLY:**

Applications are available online at the ACM website [www.acmidland.org](http://www.acmidland.org) at the menu, select “Our Programs”. Next select “Subgrants” and scroll to the bottom of the page and “Download ACM Subgrant Application Packet”. You may also contact the ACM office at 432-687-1149 or by email to info@acmidland.org.

Completed applications may be mailed or delivered to the following address **no** later than **5:00 p.m. August 14, 2023.** NO LATE OR INCOMPLETE APPLICATIONS WILL BE ACCEPTED

Mailing to:

**Arts Council of Midland**

**Attn: Daniel H. Holeva, Executive Director**

**P.O. Box 3494**

**Midland, TX 79702**

Hand-deliver to:

**Arts Council of Midland**

**1506 West Illinois Avenue**

**Midland, TX 79701**

(432) 687-1149

Inquiries: [info@acmidland.org](mailto:info@acmidland.org)

**MEMBERSHIP REQUIREMENT**

Subgrant recipient organizations are required to become members of ACM. Membership, for Non-Profit Organization with the Arts Council of Midland is $35 per year.

**APPLICATION FORMAT**

Please submit one (1) Flash Drive OR one (1) digital version via email AND one (1) paper copy of application along with one (1) set of all support materials by the above deadline as further described in the application form.

**PROJECT TIMELINE**

Projects must occur between January 1st and December 31st of the grant year.

**TYPES OF FUNDING**

Arts Council Financial Assistance Program awards funds for project assistance only, that is, funding for a particular project, program, or performance.

**RESTRICTION OF THE USE OF FUNDS**

Arts Council of Midland Subgrants may not be utilized for debt reduction, operating support, out of state travel, in-school curriculum-based projects, fundraisers, receptions, or social functions. All events for which grant funds are awarded must be open to the public. *Arts Council of Midland welcomes tickets for any public program or project awarded a Subgrant to review your program.*

Arts organizations need to check with ACM prior to scheduling any program or project in order to minimize scheduling of events on the same dates. Any arts organization receiving funds from ACM cannot schedule their program or project on the dates during Celebration of the Arts (July 12-14, 2024) or ACM’s Artist Community Market (Saturday, November 2, 2024).

**PROMOTION OF THE ARTS**

Public activities and services must occur within the City **or** County of Midland, Texas. All programs must be open and advertised to the general public for the benefit of residents, visitors and tourists. This does not mean the program must be ‘free’, just not a private program.

To assist grantees in fulfilling the promotion of the arts requirement of Hotel Occupancy Tax (HOT) funds, Arts Council of Midland provides online arts calendar at [www.acmidland.org](http://www.acmidland.org)  All Grantees that offer ACM funded events must submit them for publication in the calendar two weeks prior to their program.

**ELIGIBILITY**

An organization which qualifies as not-for-profit, tax-exempt, as defined by IRS Code 501 c (3), as amended, or which is public and tax supported, is eligible to become an applicant.

**MATCHING REQUIREMENTS**

All Subgrants require that the applicant match Subgrant funds awarded. In other words, the proposed budget must indicate that the applicant will furnish at least 50 percent of the total project expenses. Matching funds must be cash contributions, which pertain *directly* to the project. If money passes hands in the providing of any services, it should be listed as a cash contribution.

**RECOGNITION REQUIREMENTS**

**Arts Council of Midland** and most current **Logo** must be acknowledged in all printed programs and promotional materials (including brochures, flyers, handbills, newspaper, radio, television, website, or magazine advertisements [print or electronic] and all other mailed pieces) related to a project receiving support through this program.

Acknowledgement of **Arts Council of Midland** must be incorporated into all press releases prepared by the funded organization regarding this project.

“This project is supported in part by a grant from Arts Council of Midland.”

**CELEBRATION OF THE ARTS**

All Subgrant recipients are encouraged to participate at Celebration of the Arts each spring. Groups may provide a workshop or demonstration during COA. In addition, arts organizations may have a display booth or activity center at COA to promote their organization, projects, and programming, distribute printed materials about their organization or group and sell tickets, memberships, or other approved items.

**SUBGRANTS REVIEW PANEL AND CRITERIA**

The review panel consists of members representing various segments of the Midland population, with the ACM Board President and Executive Director serving as ex-officio, non-voting members. Members may include visual or performing artists, a representative of the City of Midland, the Midland Chamber of Commerce, the Midland Hispanic Chamber, and individuals involved in the arts community. The committee represents a cross-section of the Midland community to name just a few examples.

The Subgrants review process uses the following criteria to evaluate Subgrant applications:

1. Quality of programming
2. Demonstration of community involvement and outreach
3. Administrative and fiscal responsibility
4. Distribution of funds among various art disciplines
5. Accessibility of programs and facilities to minorities, low income, culturally disadvantaged and disabled people
6. Amount of ACM grant funds available
7. Project-generated overnight hotel stays

Arts Council’s staff reviews all Subgrant requests. Special attention is paid to checking Subgrants for completeness, required documentation and signatures. Should we find an issue with an application, the contact person on the Subgrant will be contacted as soon as possible.

**ASSISTANCE TERMS AND CONDITIONS**

1. Acceptance of a Subgrant award constitutes a service **contract** between the organization and ACM. Contracts must be signed and returned immediately. *NO CHANGES THAT MATERIALLY ALTER THE BUDGET OR AFFECT THE PROJECT OR CHANGES IN THE APPROVED AND FUNDED PROJECT ITSELF CAN BE MADE WITHOUT PRIOR AUTHORIZATION OF ACM.*
2. Recipients of a Subgrant may request 50% of a grant award as an advance. Requests for an advance must be made at least sixty (60) days prior to the project. Recipient must submit a completed “Request for Project Advance Funding” form. Failure to request an advance prior to sixty days will result in the grant being paid in one payment; after ACM receives a final grant evaluation. The balance will be paid only after the project is completed and an evaluation report filed with and approved by Arts Council of Midland.
3. An evaluation report MUST be filed within ***60 days*** following **project completion** for the balance of the grant award to be paid. Failure to meet these reporting dates may result in future financial assistance being denied.
4. ACM may request access to accounting records relevant to funds expended under terms of grants, and ACM shall be granted indemnity for all costs associated with audit, examination, excerpting, and transcription incurred by the Applicant.
5. ACM representatives will make every effort to attend and support funded programs and projects in order to provide support and oversight. Please consider providing ACM with tickets to grant programs, in advance, so that staff or Board of ACM may attend.

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**ARTS COUNCIL OF MIDLAND**

**CRITERIA FOR SUBGRANT COMMITTEE REVIEW**

Each Subgrant Committee member shall review every application using the following criteria. (*The word “project” is used to refer to the project, program or activity, which is the subject of an application.)*

**A. Quality of Project and Application**

1. Does the project directly involve the creation and presentation of artistically enriching educational programs, exhibits or productions? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Is there demonstrated quality in the credentials of performers, demonstrators or exhibitors participating in this project? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Does the plan for presentation of the project make you believe attendees will exit the project believing they had a rewarding, enriching experience? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Does the proposed project support the applicant organization’s mission statement? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Is the application well written, accurate, complete and representative of good stewardship of grant funds? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Community Involvement and Outreach**

1. Has this applicant identified its target audience? \_\_\_\_ Does the project’s plan include outreach to this identified audience? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Does this application reflect an effort by the organization to maximize audience attendance/involvement by reaching out to all possible audiences? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Will ACM’s financial support of this project help the applicant reach all possible attendees? \_\_\_\_\_\_\_\_\_\_\_
4. Does the project offer accessibility to minorities, low income and the physically challenged? \_\_\_\_\_\_\_\_\_\_
5. Does it have a public component? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Does the project offer the opportunity for members of the community to be involved in the planning/production phase or the presentation of the project as a volunteer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. Fiscal Responsibility**

1. Has the applicant demonstrated fiscal responsibility with previous grant funds? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Does the applicant’s project budget show evidence of seeking other public and private financial support for the project beyond the Arts Council of Midland? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Is the project’s budget aligned with the project’s objectives and projected outreach? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Does the plan presented for this project exhibit opportunity for growth and vision in the future of the project? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Do the financial statements and 990 indicate appropriate management and use of organization funds? \_\_\_\_\_\_\_\_\_\_\_\_\_

**D. Contribution to Local Economy**

1. Is the project planned in a way that will encourage out-of-town attendance? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Does the project’s plan identify a method for tracking out-of-town attendance? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Is the project a multi-day event with the likelihood of generating overnight hotel stays? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Does the project’s plan identify a method for tracking overnight hotel stays by attendees or performers? \_\_\_\_\_\_\_\_\_\_\_
5. Will this project potentially result in an impact on the Midland economy (i.e. restaurants, shopping, etc.?) \_\_\_\_\_\_\_\_\_\_\_



Arts Council of Midland

***REQUEST FOR PROJECT ADVANCE FUNDING***

Requests for an amount of up to **50%** of the Subgrant award may be made to ACM on or following **January 1** of each grant year. Arts Council must have a signed contract and Membership Fee as a Non-Profit Organization with the Arts Council of Midland paid, before any requests will be granted. For more information, see Arts Council of Midland Subgrant Guidelines. All terms of the contract must be met.

**MAKE CHECK PAYABLE TO:**

(Name of Service Provider requesting funds)

Amount requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( Up to 50% of total Subgrant)

Check should be mailed to:

Name:

Address: \_

Phone:

Email:

Signature and title of organizational representative requesting funds: (Board President or Executive Director)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**For ACM use only:**

Total amount granted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of advance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funds remaining after advance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Signature:

CODE: 5960-90 Subgrant Advance Pay: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Memo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



Arts Council of Midland

**GRANT EVALUATION REPORT FORM**

This form and attachments must be received **within 60 days** following the conclusion of the project. Failure to submit this evaluation will terminate the contract between ACM and Applicant and may prevent the Applicant from receiving future grants. Mail evaluation to: Arts Council of Midland, Attn: Daniel H. Holeva, Executive Director, P.O. Box 3494, Midland, TX 79702 or deliver to: Arts Council of Midland, 1506 West Illinois Avenue, Midland, Texas 79701.

Organization:

Mailing address:

Evaluation reported by (Project Director/Authorizing Official):

Mailing Address:

Telephone: (Work) \_\_\_\_\_\_\_\_\_\_\_\_\_ (Cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Reported:

E-mail:

Project Date: (**Start**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to (**End**)

1. Category of Assistance:

(Please indicate the exact number of productions, performances or events related this project.)

2. Was this a pilot project? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Continuing program? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Is there a possibility of expansion of this program?

If yes, what changes or modifications would you make in the present program? \_\_\_\_\_\_\_\_\_\_\_

4. Please compare the outcome of the project with the objectives stated in the application form. Were they successfully met? \_\_\_\_\_\_\_\_\_\_\_ If not, why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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5. Describe your marketing activities for this project. Describe any specific publicity outreach to ethnic communities or special constituencies. Attach copies of all publicity, such as news releases, invitations, programs, advertisements, and any press reviews received. How was Arts Council acknowledged in accordance with the contract? \_\_\_\_ Attach photos, brochures, copies of group’s website listings, programs, etc. substantiating Arts Council and credit.

6. \* Describe any methods of evaluation that your board, staff, or others may have conducted for this project, such as audience surveys, evaluation reports, etc. Zip codes gathered from surveys that include overnight stay information for visitors to Midland during project ensures our continued support of City of Midland Hotel/Motel Funds.

* Total Overnight Hotel Stays: \_\_\_\_\_\_\_\_\_

7. Other comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT EVALUATION FORM**

(Include one Project Evaluation Form for each performance/ exhibit/ program of the funded project.)

Total attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special interest groups served by this project: (minority, senior citizens, students K-12, college students, etc.)

Groups Attendance

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%

Special interest groups’ total attendance: \_\_\_\_\_\_\_\_\_\_\_ (100%)

Age of audience:

Under 18:\_\_\_\_\_\_\_\_% 19-35:\_\_\_\_\_\_\_\_% 36-65:\_\_\_\_\_\_\_\_% Over 65:\_\_\_\_\_\_\_%

Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facility Used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ # of Performances: \_\_\_\_\_\_\_\_\_

Capacity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gross Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unsold Seats: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comps: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of volunteers involved: \_\_\_\_\_\_\_\_\_\_\_\_

Full-time paid staff: \_\_\_\_\_\_\_\_\_\_\_ Part-time paid staff: \_\_\_\_\_\_\_\_\_\_\_

Numeric count of out-of-town attendee’s/ zip codes are appreciated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT EVALUATION FORM (Cont.)**

**1** **2**

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenditures:** | Paid by  ACM Funds | Paid by  Applicant | TOTAL  (Col. 1 + Col. 2) |
| 1) Staff Salaries – 20% maximum |  |  |  |
| 2) Professional Services |  |  |  |
| 3) Facilities Rental – 20% maximum |  |  |  |
| 4) Travel and Transportation |  |  |  |
| 5) Lodging/Rentals (except facilities) |  |  |  |
| 6) Supplies and Materials |  |  |  |
| 7) Advertising (all media) |  |  |  |
| 8) Printing (program and tickets) |  |  |  |
| 9) Postage and telephone |  |  |  |
| 10) Other (list in-kind) |  |  |  |
| **TOTAL EXPENDITURES** |  |  |  |
| **Revenues:** | **1** | **2** |  |
| **1) Arts Council Funds (received)** |  |  |  |
| 2) Admissions | ---------------------- |  |  |
| 3) Individual Donations | ---------------------- |  |  |
| 4) Corporate Contributions | ---------------------- |  |  |
| 5) Foundation Support | ---------------------- |  |  |
| 6) State Funds | ---------------------- |  |  |
| 7) Organization Funds | ---------------------- |  |  |
| 8) Others (list in-kind) | ---------------------- |  |  |
| \*Total Revenue (Column 2 only) | ---------------------- | **\*** |  |
| **\*TOTAL REVENUE (Col. 1 & 2)** | ---------------------- | ----------------------- | \* |

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**Arts Council of Midland**

**REQUEST FOR SUBGRANT BALANCE**

In order to receive the balance of this grant, submit the following to ACM office **within 60 days** of project completion date:

* 1. The fully completed Evaluation Report Form and required attachments.
  2. Invoices and/or cancelled checks which equal or exceed the amount of the grant, for expenses indicated in Column 1 on the approved grant application.
  3. Photos or other documentation of event, including marketing materials crediting Arts Council of Midland. Many times, these can be sent to ACM in an electronic file to [danny@acmidland.org](mailto:danny@acmidland.org)
  4. Provide to ACM one copy of all contracts negotiated specifically for this project.

**MAKE CHECK PAYABLE TO:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Applicant)

Signature and title of organizational representative requesting funds:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Amount of balance requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SEND CHECK TO:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For ACM use only:**

Total amount granted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of advance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Check: \_\_\_\_\_\_\_\_\_\_\_\_

Funds remaining: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

CODE: 5960-90 Subgrant Balance Pay: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Memo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_