



# **Richardson Cultural Arts Grant FY 2024-2025 Application**

**Deadline: Friday, July 26, 2024 at 5:00 p.m.  
Late applications will not be accepted.**

For additional information contact:  
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972-744-4207

**Deadline: Friday, July 26, 2024, at 5:00 p.m. No exceptions will be made.**

**Richardson Cultural Arts Commission  
Cultural Arts Grant Application  
FY 2024-2025**

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Organization \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date organization founded \_\_\_\_\_

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Name of representative completing application \_\_\_\_\_

Title \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

e-mail address \_\_\_\_\_

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Contact name \_\_\_\_\_

Title \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

e-mail address \_\_\_\_\_

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Organization's website address \_\_\_\_\_

Amount of funds requested \_\_\_\_\_

Did a member of your organization attend the Fall 2023 workshop?  Yes  No

Did a member of your organization attend the Spring 2024 workshop?  Yes  No

Season start date: \_\_\_\_\_ Season completion date \_\_\_\_\_

Fiscal year begins: \_\_\_\_\_ Fiscal year ends \_\_\_\_\_

	Richardson only current season	Richardson only proposed season	all locations current season	all locations proposed season
# of events				
tickets sold				
comp tickets				
non-ticketed attendees				
total season attendance				

**Proposed season events schedule for Richardson and all other areas**

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<b>Date</b>	<b>Time</b>	<b>Event</b>	<b>Location</b>

**Board of Directors Meeting Schedule**

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<b>Date</b>	<b>Time</b>	<b>Location</b>



### Total Season Expenditures and Revenues Estimation

	Expenditures
<b>Expenditures:</b>	
staff salaries (not in-kind)	
professional services (not in-kind)	
facilities rental	
travel & transportation	
rentals (except facilities)	
supplies & materials	
publicity & promotion	
printing	
postage	
in-kind services (itemize on separate sheet)	
other:	
other:	
other:	
<b>Total expenditures</b>	
	Funds by source
<b>Revenues:</b>	
CAC funds	
admissions	
sales	
membership	
individual donations	
board member donations	
corporate donations	
foundation support	
state funds	
in-kind services	
other:	
other:	
other:	
<b>Total revenues</b>	

**Expenditures and Revenues Estimation (Richardson events only)**

There is no need to complete this worksheet if all performances occur in Richardson. If all performances occur within Richardson – please check this box.

	<b>Expenditures</b>
<b>Expenditures:</b>	
staff salaries (not in-kind)	
professional services (not in-kind)	
facilities rental	
travel & transportation	
rentals (except facilities)	
supplies & materials	
publicity & promotion	
printing	
postage	
in-kind services (itemize on separate sheet)	
other:	
other:	
<b>Total expenditures</b>	
	<b>Funds by source</b>
<b>Revenues:</b>	
CAC funds	
admissions	
sales	
membership	
individual donations	
board member donations	
corporate donations	
foundation support	
state funds	
in-kind services	
other:	
other:	
<b>Total revenues</b>	

## Key Contributors

### Top 10 Individual Financial Contributions

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Name	Amount

### Top 10 Corporate Donations or Sponsorships

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Corporation	Amount

**Foundation Support**

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<b>Foundation</b>	<b>Amount</b>



## Questionnaire

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### ORGANIZATION

1. What is your organization's strategy for financial stability? Please be specific.

2. Who is your target audience and what new audiences are you trying to reach?

3. What proactive marketing strategies are you using?

4. How does your organization measure the effectiveness and success of the experience (event, exhibit, performance, etc.) produced by your organization?

5. Without this grant from the City of Richardson, what impact would the loss of revenue have on your organization and how would you organization compensate?

6. What efforts is your organization taking to strengthen the effectiveness of your governing board?

7. What efforts have you taken; if any, for DEI?

**IMPACT ON RICHARDSON**

1. What was the biggest contribution your arts organization made to the Richardson community in 2023-2024?

2. What are your organization's efforts to promote and educate the community on your organization's art form and increase audiences?

3. In addition to performances, how is your organization currently connected to Richardson?



3. What is your uniqueness within your genre?

## Attachments

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**Please submit all attachments in electronic format to [artsgroups@cor.gov](mailto:artsgroups@cor.gov) by the deadline of 5:00 pm, Friday, July 26, 2024.**

Following is the list of materials to be submitted with an application:

- Attachment 1: Completed Application
- Attachment 2: FY24-25 upcoming season budget for all events/activities of the organization
- Attachment 3: FY23 Balance Sheet
- Attachment 4: FY23 Income Statement
- Attachment 5: FY23 Balance Sheet
- Attachment 6: FY23 Income Statement
- Attachment 7: 2022 IRS Form 990, unless not required to file including all required schedules (Form 990, Form 990-EZ and proof that a Form 990-N has been filed are all acceptable). If your organization has requested an extension in filing taxes, please submit this request as well as the most current IRS Form 990 that has been submitted to the IRS.
- Attachment 8: Applicant organization's Internal Revenue Service Letter of Determination on 501(c)(3) status.
- Attachment 9: A copy of the organization's strategic plan. The strategic plan must be current and reviewed annually. Please list the date last reviewed.
- Attachment 10: FY24 Funding Final Report



## Assurances

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If the grant is awarded, the applicant gives assurances to the Richardson Cultural Arts Commission that:

- The season for which financial assistance is sought will be administered by or under the supervision of the applicant organization.
- All funds received will be used solely for the season described herein.
- The officials signing the application form have been authorized by the applicant organization to submit this application.
- The applicant shall retain a copy of the Richardson Cultural Arts Commission Arts Grant Guidelines and shall execute the grant by the rules stated therein.

We hereby certify that all figures, facts, and representation made in this report, including any attachments, are true and correct to the best of our knowledge.

**Chief Administrative Officer:**

**Representative completing application:**

\_\_\_\_\_  
signature

\_\_\_\_\_  
signature

\_\_\_\_\_  
typed name

\_\_\_\_\_  
typed name

\_\_\_\_\_  
date

\_\_\_\_\_  
date