

**FY 2017 Sponsored Organization Information Form**

**- New York State Council on the Arts -**

**Basic Organizational Information**

Organization Name \_\_\_\_\_

AKA \_\_\_\_\_

Federal Employer ID# \_\_\_\_\_

Year Founded \_\_\_\_\_

Web Site(URL) \_\_\_\_\_

Organization's Phone \_\_\_\_\_

Address1 \_\_\_\_\_

Address2 \_\_\_\_\_

City \_\_\_\_\_

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

Applicant County \_\_\_\_\_

## Project Contact

Name

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Title

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Phone

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Fax

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Email Address

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### **Organization Mission**

(1000 character limit)

### **Organization Activities**

(1000 character limit)

Activities: Give a brief summary of your organization's activities that provides a general overview of what you do as an organization. Please relate these activities to your mission statement in the previous question.

### **Organization Constituency**

(1000 character limit)

Given your mission to the community you serve, how does your organization address diversity and inclusiveness?

What actions has your organization taken to make your facilities, programs, and/or communications systems accessible and usable by all?

Briefly describe your facilities, if any. Explain any relocations, expansions, renovations, or major improvements undertaken in the recent past or planned for the future.

**Organization Facilities (if applicable)**

Organization's facilities/real estate are:  Owned  Rented  Donated  Shared

If rented, date current lease expires?

Days/Hours/Season of Operation

Please indicate the number of each event your organizations hosts annually. Enter zero if your organization does not host a particular event:

Productions

Exhibitions

Classes

Tours

Films

Lectures

Performances



**FY2017 Sponsored Organization Budget Form  
- New York State Council on the Arts -**

	Prior completed fiscal year	Last completed fiscal year	Current fiscal year (actual plus projected)
<b>EARNED INCOME</b>			
Admissions			
Contracted Services			
Tuition and Workshop Fees			
Fundraising Events			
Other Earned Revenue			
<b>Total Earned Income</b>			

<b>CONTRIBUTED INCOME</b>			
Corporate Support			
Foundation Support			
Private Support			
NEA Support			
Federal Support			
State Support (non-NYSCA)			
County Support			
Municipal Support			
<b>Total Contributed Income</b>			
Other Revenue			
<b>TOTAL INCOME</b>			

<b>EXPENSES</b>			
Personnel - Administrative			
Personnel - Artistic			
Personnel - Technical/Production			
Fringe Benefits			
Outside Artistic Fees and Services			
Other Outside Fees and Services			
Regrants			
Space			
Travel			
Marketing/Advertising			
Remaining Operating Expenses			
<b>TOTAL EXPENSES</b>			

	Prior completed fiscal year	Last completed fiscal year	Current fiscal year (actual plus projected)
<b>Surplus (Deficit) Before NYSCA</b>			
NYSCA Grants Received/Requested			
<b>Surplus (Deficit) After NYSCA</b>			

<b>IN-KIND CONTRIBUTIONS</b>			
In-Kind Contributions			

<b>ORGANIZATION ASSETS</b>			
Savings / Checking Accounts			
Endowment Funds			
Capital Property / Real Estate			

**FY2017 Sponsored Project Budget Form  
- New York State Council on the Arts -**

	<b>Project Budget</b>
<b>EARNED INCOME</b>	
Admissions	
Contracted Services	
Tuition and Workshop Fees	
Fundraising Events	
Other Earned Revenue	
<b>Total Earned Income</b>	

<b>CONTRIBUTED INCOME</b>	
Corporate Support	
Foundation Support	
Private Support	
NEA Support	
Federal Support	
State Support (non-NYSCA)	
County Support	
Municipal Support	
<b>Total Contributed Income</b>	
Other Revenue	
<b>TOTAL INCOME</b>	

<b>EXPENSES</b>	
Personnel - Administrative	
Personnel - Artistic	
Personnel - Technical/Production	
Fringe Benefits	
Outside Artistic Fees and Services	
Other Outside Fees and Services	
Regrants	
Space	
Travel	
Marketing/Advertising	
Remaining Operating Expenses	
<b>TOTAL EXPENSES</b>	

<b>Surplus (Deficit) Before NYSCA</b>	
NYSCA Grants Received/Requested	
<b>Surplus (Deficit) After NYSCA</b>	

**Budget Notes**  
(2000 character limit)

## **Sponsored Request Form Theatre**

Answer all questions below on this form, including the Organization Profile, Organization Budget, and Project Budget and return to your Fiscal Sponsor along with your support materials. A completed Sponsored Request Form is required from all sponsored organizations and individuals. In the event that an applicant fails to submit the completed Sponsored Request Form, the application will not be eligible for review. Please review the [program guidelines](#) carefully for program prerequisites and eligibility requirements.

(2000 character limit per question)

### **Professional Performances Questions:**

Artist Name

Project ID

### ***Artistic/Programmatic***

#### 1. Background and Artistic/Cultural Vision

Describe the growth and development of the organization. Note the organization's artistic vision and key individuals involved in the work.

2. Program Overview

Describe the activity planned for the request year. Detail how the artistic work supports the organizational mission. For first-time applicants to this category: discuss the production activity over the last two seasons.

3. Development/Challenges

Describe any recent programmatic changes, developments and/or challenges. Indicate how challenges will be addressed.

4. Facilities/Collaborations/Touring

Describe office and performance facilities. Has the organization engaged in any recent collaborations or co-productions? Are there plans for this type of activity? If touring is involved, please describe that activity.

5. Artist Fees

Describe the policy regarding payment of artists' fees. Explain changes or improvements planned.

## ***Service to the Public***

### 6. Constituency

Describe the audiences and communities served by the organization. Detail efforts being undertaken to cultivate and broaden its constituency. Are there members or subscribers?

### 7. Marketing/Online Resources

Describe all marketing efforts, both organizational and programmatic. Have there been any recent changes in the approach to marketing? Describe the use of online resources and social networking sites in the marketing plan.

8. Evaluation

How does the organization evaluate its programs, services and/or initiatives?

9. Development and Outreach

Describe outreach activities, including education programs, discount ticketing, talk-backs, newsletters, etc. Describe any outreach to under-served populations, community-based organizations, or social service agencies.

***Managerial/Fiscal***

10. Staff

Identify the key administrative and artistic staff members responsible for this program. Detail any recent significant changes in key staff positions.

11. Governance

Describe the board and/or governing body in detail, including committee structure, diversity, meeting schedule, and approach to staff and fiscal oversight.

## 12. Finances

Detail plans for meeting current and future expenses. Include sources of earned and unearned income. Explain any current and/or recurring surplus or deficits.

## **Professional Performances Support Materials:**

**Please send the required support materials below to your Fiscal Sponsors.**

Acceptable file types: Adobe Acrobat PDFs, Microsoft Word DOC or DOCX, Microsoft PowerPoint PPT or PPTX. To submit URLs, please create a Word or PDF file with a list of URLs with any notes or description. URLs cannot be password protected and must remain live until December 31, 2016. NYSCA is not responsible for any broken, inactive or password protected links.

**In the event that an applicant fails to submit one or more of the following required materials, the application will not be eligible for review.** For a more detailed description of how to submit your support materials for this application, please click [here](#) for more information.

1. *Résumés or biographical statements* of up to 3 key staff, maximum of 1 page each
2. *Organizational Chart*
3. *Up to 5 representative marketing materials* (sample programs, brochures, show announcements or flyers) that reflect activity from two recent productions. Do not include press coverage, reviews or notices.
4. *Website, Facebook, Twitter, YouTube, and other social media links.* NYSCA reserves the right to review any/all of these online sources as part of your application.
5. *Sample playbills from 2 recent productions*
6. *Additional materials* – if applicable, label the additional material as “Additional Support Material #1, #2, etc.”
7. *Producing organizations must upload a supplemental form with information for the current season and the previous season* that includes: name of play/production; author; director; number of performances; AEA contract (if applicable); range of artists’ fees for actors, designers and director; and range of ticket prices.