



**FISCAL YEAR 2025 GRANT APPLICATION
GENERAL OPERATING SUPPORT**

Organization Information

1. Organization: _____

Physical Address: _____

City: _____ Zip: _____

Mailing Address (if different from above): _____

City: _____ Zip: _____

Primary Phone Number: _____ FAX: _____

E-mail: _____ Website: _____
2. Federal tax ID number: _____
3. Name, title, telephone number, e-mail of contact person for more information about this application:

Name: _____ Title: _____

Email: _____ Telephone Number: _____
4. Organization or project director (if different from contact person)

Name: _____ Title: _____
5. Amount requested from this commission: \$ _____



a. What is your total estimated operational budget? \$ _____

b. Amount requested is what percentage of estimated operational budget? _____ %

6. In 2-3 sentences, briefly summarize the proposed general operations.

7. Statement of organization's mission:

a. When was your organization founded? _____

b. When was your organization incorporated? _____

8. Please describe your organization's top 3 programs that support the mission statement (Examples – classes, exhibits, presentations, workshops).

9. Who is your primary audience?



10. List specific ways through which the citizens of Newport News will benefit from the activities of your organization (admission taxes, venues used, etc.).

11. Summarize your organization's accomplishments during the past twelve months.

12. List the anticipated size of audience/number of participants - show estimates for each type of program and totals (i.e., education, outreach, main stage productions, exhibits, workshops, etc.):

Type of activity	# of Attendees
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Total

13. Has your organization ever received other funding from the City of Newport News (excluding an NNAC Grant)? If yes, when and how much?



14. How will you modify your plans if you receive partial or no funding rather than full funding? What other funding will you use?

15. Does your organization currently receive funding from any other local municipality? If yes, how much?

16. Has your organization received funding from any other local municipality in the past? If yes, when and how much?

Marketing & Outreach

17. Describe your marketing and outreach efforts, including both advertising and publicity efforts.

Evaluation

18. Describe how the effectiveness and impact of the project/programs will be evaluated and measured.

19. How many people are currently employed and/or volunteering their efforts to your organization?

a. Estimate the number of volunteer hours annually _____

20. Please indicate the number of performances your organization will provide within the City of Newport News.

Total # of performances: _____

List Venues:



“I hereby certify that to the best of my knowledge, all information, including the budgetary information, in this application is true and correct and that the governing body of the applicant has duly authorized the filing of this application. I certify that the applying organization is in compliance with Title VI (42 USC Section 2000D) and VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973 (29 USC Section 794), Title IX of the Education Amendment of 1972, the Age Discrimination in Employment Act of 1967, the Immigration and Control Act of 1986 and all other applicable state and federal acts.”

Below this statement please type the name and title of the person applying, and provide an original signature.

Signature	Name	Title
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ADDITIONAL REQUIRED DOCUMENT CHECKLIST

Proof of tax-exempt status (Letter of Determination from the IRS for (501)(c)(3) status), ONLY if not previously submitted or pending application. If there has been any change to your tax-exempt status since previously submitted to the Commission, then you must include a copy of your updated status.

Current bylaws (required for new organizations or if revisions were made to those submitted in previous grant years)

List of Board of Directors.

List of paid staff or key volunteer staff with titles, phone numbers and extensions, and addresses (for mailing purposes).

Strategic Plan or Business Plan (a multi-year organizational plan that shows organizational goals and the plan to achieve them).

Up to three (3) supporting documents to include any of the following: letters of support, documentation of project quality, resumes of key personnel, brochures, flyers, press clippings, reviews, etc. that highlight your organization's service(s) or project(s). If your organization is a previous grantee, please highlight appropriate recognition.

Last year's audited financial statement. If an audited financial statement is not available, then attach a copy of the Form 990 submitted to the IRS and an unaudited financial statement or treasurer's report.

Summary Financial Statement Form



SUBMISSION INSTRUCTIONS

For the FY 25 grant year, organizations are required to submit one (1) electronic application packet. The entire application packet is due no later than 4:00 p.m. on Friday, May 3, 2024.

Electronic Submission (Required)

- Submit an electronic copy of the Grant Application Packet to include the completed grant application and the additional documents.
- The electronic copy should be sent as a single PDF document and emailed to: nnarts@nnva.gov
- If your organization is applying for both Project and Operational Support, please submit one (1) grant application packet file per support type.
- The file name should be in the following format:
OrganizationName_GrantSupportType_FY25