

Application ID
2024-5181 Cultural Sustainability
Application Type
Cultural Sustainability
Organization Information
Fake Organization 3033 Excelsior Blvd Minneapolis, MN 55416-4688 Phone: 612-238-0000
Eligibility question
Can the applicant organization certify that at least two of the following statements are true? If the answer is no, the applicant will not be eligible for this program and may not complete or submit an application.  1) The applicant organization is led by a person(s) of color, artistically and/or administratively.  2) The applicant organization predominantly serves Indigenous/Native American, Black, Latine, Asian, Pacific Islander, and/or Caribbean communities, or another community of color.  3) The applicant organization was founded by and for a community of color.
○ Yes
○ No
Are you acting as a fiscal sponsor?
If you are fiscally sponsoring a group for this application, please select 'yes', otherwise select 'no' if you are applying directly.
○ Yes
○ No
Sponsored organization name
What is the name of the group or organization you are sponsoring? Enter "None" if you are not applying as a fiscal sponsor.



### Year 1 expenses

The last three years of operating expenses are required. Please enter your first year's expenses here. If you are a fiscally sponsoring a group, enter the group's expenses. This number should be \$500,000 or less to be eligible to complete and submit the rest of the application.

#### Year 2 expenses

The last three years of operating expenses are required. Please enter your second year's expenses here. If you are a fiscally sponsoring a group, enter the group's expenses. This number should be \$500,000 or less to be eligible to complete and submit the rest of the application.

### Year 3 expenses

The last three years of operating expenses are required. Please enter your most recent year's expenses here. If you are a fiscally sponsoring a group, enter the group's expenses. This number should be \$500,000 or less to be eligible to complete and submit the rest of the application.

### **Organization leadership**

Is the applicant organization led by a person(s) of color, artistically and/or administratively?	
○ Yes	

# Service audience(s)

Is the applicant organization predominantly in service of Indigenous/Native American, Black, Latine, Asian, Pacific Islander, and/or Caribbean communities, or another community of color?

$\bigcirc$	Yes
	No

No



# Founded by

Is the applicant organization founded by and for a community of color?

- Yes
- No



## **Organization values**

Tell us about the applicant organization and any values that drive their work.

### **Community service**

Describe the community the applicant organization serves. How are they addressing the communities' needs and interests through its work, and how has community support directly contributed to the applicant organization's success?

### **Impact**

How will this grant impact the applicant organization's work and the well-being of the community it serves?

## **Support**

What could the pilot program and cohort provide the applicant organization with to support its work, unique expertise, and knowledge?