

Eligibility

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Please provide the following information.

1. Is your organization classified by the Internal Revenue Service as a tax-exempt, charitable organization under one of the following sections of the United States Internal Revenue Code: 501(c)(3), 501(c)(4), or 501(c)(6)?
2. Does your organization receive Hillsborough County funding other than this program you are applying for today?
3. Is the primary purpose of your event to fundraise for a nonprofit organization?

Documentation

☐ IRS Letter of Determination ***Required**

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A. Organization Information

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Please provide the following information.

A.1. Legal Name of Applicant Organization:

A.2. Federal ID Number:

A.3. Grant Contact Person:

A.4. Grant Contact Title:

A.5. Address:

A.6. Daytime Phone:

A.7. Email:

A.8. Organization Website:

A.9. Mission Statement:

A.10. Briefly describe your organization:

B. Event Information

B. Event Information

Please provide the following information.

ABILITY TO STRENGTHEN AND PROMOTE CULTURAL ASSETS

B.1. Event Name:

B.2. Event Date(s):

B.3. Location/Address of Event:

B.4. Number of Expected Attendees:

B.5. Number of Expected Vendors:

B.6. Please provide a detailed description of the event for which you are requesting funding.

Attach an Event Plan to help clarify the event's objectives, activities, and logistics.

☐ **Event Plan *Required**

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B.7. Select which cultural asset is being highlighted.

- ☐ Fine Arts
- ☐ Historic
- ☐ Natural and/or Recreational
- ☐ Lifestyle, Culinary, and/or Creative Industries

Explain how your event will engage the community with and raise awareness of this asset.

B.8. Is this a new event?

B.9. Is this or will this be a recurring event?

- How often does/will the event occur?
- If recurring, when did the initial event occur?
- If this is a recurring event, provide details on past occurrences of the event for up to five years. Create a separate chart for each year of your event.

B.10. Do you plan to continue the event in the future?

B.11. How will this event show growth and have a greater impact on the community compared to previous events?

B.12. Does this event require a permit from your local government?

B.12a. Explain what permit is needed and its current status.

B.13. What are the anticipated costs for the purchase of tickets? If the event is free, indicate that there is no charge.

B.14.

Upload a safety plan indicating how you will establish security for this event. Examples of what this may include:

- Event details, including a map or site plan of the event
- Risks associated with the event
- Crowd management planning
- An emergency plan detailing actions to be taken and by who in case of a major incident
- Fire precautions to be taken
- First aid procedures
- An indication of any safety personnel present at the event, such as police or paramedics
- Additional factors not listed here which may impact safety of attendees at the event
- Plan may also include safety features or safety-related plans from the venue where the event is taking place

☐ Logistics and Safety Plan ***Required**

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B.15. Upload a marketing or advertising plan for the event.

☐ Marketing Plan ***Required**

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B.16. What percentage of the event budget is allocated to marketing?

0.00%

B.17. As part of the evaluation criteria, we aim to 'Promote the County as a destination.'

Please provide a percentage breakdown of your marketing efforts, indicating how much will be targeted in-region versus out-of-region to drive tourism.

B.18. If you do not have out-of-region marketing planned in your budget, how else is your event promoting the County as a destination?

B.19. As part of the evaluation criteria, we aim to 'Attract Visitors – increase tourism revenue.'

How will your event attract non-county residents and contribute to increased tourism revenue?

B.20. What benefits does the event provide to County residents? Is the event designed to appeal to all residents, or to a specific segment or interest group?

B.21. Do you have any plans for post-event marketing or media outreach?

C. Fiscal Management

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Please provide the following information.

FISCAL MANAGEMENT

C.1. Provide details about your full event budget.

- Enter a zero "0" if there is no amount
- Round amounts to the dollar

EXPENSES

Expenditure	Details	Total Budgeted Amount	Amount of Grant Funds Requested	Source of Matching Funds (Cash, Tickets, Sponsors, etc.)
TOTAL		\$0.00	\$0.00	

C.2. Explain how you will pay for this project:

REVENUE

SOURCE OF REVENUE (Tickets, Sponsorships, Other Grants, etc.)	Date Requested	Secured Y/N	Amount
Total			\$0.00

C.3. Most recently filed IRS Form 990

☐ Most Recently Filed IRS Form 990 ***Required**

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C.4.

Please provide a detailed response addressing the following points from the evaluation criteria:

- The degree to which your funding request is reasonable.
- How you plan to demonstrate a broad base of financial support, including noting any contingency plans you may have if any revenue source becomes unavailable.
- Your ability to raise private support and build sustainable partnerships.
- The accuracy and prudence of your proposed budgets.

C.5. If your project will use funds from other grant programs (other than the one you're currently applying for), please specify the source and the total amount of the grant.

Grant Funding Source	Date Received	Amount
		\$0.00

C.6. Please attach documentation that supports the estimated value of any in-kind contributions (e.g., donated services or materials).

Note that in-kind contributions do not count toward the required matching funding for this program.

☐ In-Kind Contributions

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C.7. Past performance: For repeat applicants or grantees, please provide the following details for each past event: event name, amount of grant received, year received, and the current status of the event.

Event Name	Amount of Award Received	Year Received	Status (completed, forfeited, in progress, etc)
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C.8. If grant funds were not fully expended, please explain why.

D. Additional Evaluation Criteria

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Please provide the following information.

ABILITY TO STRENGTHEN AND PROMOTE CULTURAL ASSETS

The extent to which the event:

- Is consistent with the program objectives
- Fosters a vibrant community
- Creates a sense of community
- Contributes positively to place-making
- Catalyzes the evaluation of cultural engagement and civic pride
- Promotes the rich history, heritage, amenities, natural environment, and authentic characteristics that make the County special
- Supports the programming and use of local parks, public spaces, and amenities
- Encourages partnerships between organizations, members of the community, and businesses – creates positive entanglements that drive greater collaboration among cultural assets

Briefly describe how your organization's event meets the criteria above.

ECONOMIC IMPACT AND COMMUNITY BENEFIT

D.1. Will the event feature local talent and entertainment from Hillsborough County?

- If yes, please describe how you plan to recruit and utilize local talent and entertainment for the event:

D.2. Will the event involve Hillsborough County-based vendors and small businesses to support event activities, such as printing materials, event planning, or sales of goods and services?

- If yes, please describe the types of vendors and small businesses you plan to use for the event:

D.3. Define clear and measurable outcomes of the following event impacts:

- Economic impact of event to local vendors
- Return-on-investment to the community for the public investment

Quality of Team

- Experience as successful event delivery agents
- Ability to produce a well-planned and safe event, including the ability to effectively manage costs, attract event attendees, and obtain necessary permits, clearances, insurances, and event authorizations in a timely manner
- Past event success and reliability
- No evidence of any sustained complaints relative to past events from residents, vendors, attendees or staff
- Financial stability of the applicant organization

Please describe how your organization meets the criteria above. List up to five key personnel involved in the project, including a brief description of their roles. Additionally, provide the number of paid staff and volunteers who will be involved in executing the event, along with a brief description of their roles on the event day.

Sample

E. Required Documents

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Please provide the following information.

Documentation

☐ **Event Plan *Required**

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☐ **Marketing Plan *Required**

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☐ **Permit/Permit Application**

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☐ **Safety Plan *Required**

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☐ **Most Recently Filed IRS Form 990 *Required**

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☐ **IRS Determination Letter *Required**

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☐ **Two Letters of Support (Letters should be for your organization/event) *Required**

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Certification

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Certification

Once an application is submitted, it can only be "Re-opened" by an Administrator.

☐ By submitting this application, I certify the information contained herein, including all attachments and support materials, is true and accurate to the best of my knowledge. I understand that if I am awarded and accept a Special Event Partnership Grant, my acceptance of the award implies a commitment to complete the proposal as stated in the application and to abide by the administrative requirements established by the Arts Council of Hillsborough County.

☐ I hereby certify that I am authorized to submit this application and that the information contained in this application, all accompanying documents and support materials, is true and correct to the best of my knowledge. I acknowledge that my electronic signature below shall have the same legal effect as my written signature.

Signature:

***Not signed*