

# Application: CIAG26-27-0000000007

2026-27 Community Impact Arts Grant (CIAG)

## 501c3 Verification

Incomplete

Company: None

Country: None

Ein: None

State: None

## CIAG Eligibility

Incomplete

## CIAG Eligibility

## Eligibility Questionnaire

Please review the CIAG Guidelines and Application Instructions prior to beginning this application. If you have questions on any of these eligibility requirements, please contact CIAG grants staff at [CIAG@arts.lacounty.gov](mailto:CIAG@arts.lacounty.gov)

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## Which of the following are you?

(No response)

## CIAG Main Page

Incomplete

## CIAG MAIN PAGE

[Main Page](#)

## Organizational Account Information

Please note: Several fields in this application contain information that is auto-filling from your User Setup form. If any auto-filled info is not current, follow the steps below to update your User Setup.

- [Click on your name in the top menu \(upper right corner\)](#)
- [Click on my account](#)
- [On left side, click eligibility](#)
- [Update your eligibility profile as needed](#)

Organization Legal Name	(No response)
Popular Name or DBA (if different from legal name)	(No response)
Organization Type	(No response)
Main Address 1	(No response)
Main Address 2	(No response)
City	(No response)
State	(No response)
Zip Code	(No response)
Main Phone (Format: ###-###-####)	(No response)
Website	(No response)

## LA County Vendor Number

NOTE: Not required during the application. However, to receive a grant you must be a registered LA County Vendor with an active vendor number and enrolled in direct deposit. Visit this website and register today: <http://camisvr.co.la.ca.us/webven/>

(No response)

## Primary Organizational Contact Information

The individual at your organization with the responsibility and authority to make decisions about your grant and use of funds, with the responsibility of managing and completing your grant application, including making corrections to the application. Do not provide generic phone numbers or email addresses.

Should you be awarded a grant, this contact information will be used for all communication with important and time sensitive information, e.g. award announcements, grant contracting and reporting requirements.

Primary Organizational Contact First Name:	(No response)
Primary Organizational Contact Last Name:	(No response)
Primary Organizational Contact Title:	(No response)
Primary Organizational Contact Phone: (This field must be a 10 digit phone number in ###-###-#### format.)	(No response)
Primary Organizational Contact Email:	(No response)

## Executive Director/Organizational Leadership

Executive Director/Leadership First Name:	(No response)
Executive Director/Leadership Last Name:	(No response)
Executive Director/Leadership Title:	(No response)
Executive Director/Leadership Phone: (Format: ###-###-####.)	(No response)
Executive Director/Leadership Email:	(No response)

## Primary Arts and Culture Programming Contact Information

The individual at your organization with the responsibility of managing and completing your arts and culture projects and programs. Do not provide generic phone numbers or email addresses.

Primary Arts and Culture Programming Contact First Name:	(No response)
Primary Arts and Culture Programming Contact Last Name:	(No response)
Primary Arts and Culture Programming Contact Title:	(No response)
Primary Arts and Culture Programming Contact Phone: (This field must be a 10-digit phone number in ###-###-#### format.)	(No response)
Primary Arts and Culture Programming Contact Email:	(No response)

## What LA County Supervisorial District(s) do you serve?

Link to County of LA Supervisorial District Lookup

<https://lavote.net/apps/precinctsmaps>

District where Main (Administrative/Office) is located:	(No response)
District where most of your programming takes place:	(No response)

## District(s) organization serves (check all that apply):

No Responses Selected

## California Secretary of State Entity #

If the applicant is awarded funding, the organization must be listed on the California Secretary of State website and the organization's status must be "active" at the time of contracting. ([Look up HERE](#))

California Secretary of State Entity #:	(No response)
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**Attach a screenshot from the California Secretary of State showing “ACTIVE” status. Applicants may find and download a certificate or take a screenshot at the California Secretary of State website. ([Look up HERE](#))**

**Is your organization a first-time applicant to the Community Impact Arts Grant program?**

No Responses Selected

**Has your organization previously been awarded a CIAG grant?  
If yes, how many years?**

No Responses Selected

**Does your organization currently offer sports programming?  
This question is for informational purposes only.**

(No response)

## **CIAG Project Request & Organizational Budget Size**

Incomplete

### **Project Request and Organizational Budget Size**

FORMATTING NOTE: Please enter plain non-formatted numbers into the fields below. This form will not accept dollar signs (\$), commas (,) or cents (i.e."0.50"). Please round figures to the nearest whole dollar.

## Organizational Budget Size

The Department of Arts and Culture defines budget size as total operating revenue less in-kind for the most recently completed fiscal year. This number must correspond with the organization's submitted Federal Form 990 (Total Revenue line 12). For organizations with budgets over \$2M, this must correspond with the submitted audit. Budget size should not include any revenue dedicated to a cash reserve, endowment and/or capital project.

If applicant is a Model A Fiscal Sponsor, please list the organizational budget of the fiscal sponsor/applicant of record.

(No response)

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**If applicant is a Model A Fiscal Sponsor, please list the annual operating budget for the fiscally sponsored project/organization:**

Model A Fiscal Sponsors may apply on behalf of sponsored projects/organizations that otherwise meet all eligibility requirements. Fiscally sponsored projects/organizations must have an annual operating budget of \$25,000 or more. Note: The fiscal sponsor is the applicant of record.

(No response)

## Annual Arts and Culture Programming Budget Size

Provide the dollar amount of the arts programming budget for the most recently completed fiscal year. This information is required and is an indication of your organization's investments to arts and culture.

If applicant is a Model A Fiscal Sponsor, please list the arts programming budget of the fiscally sponsored project/organization.

(No response)

## Arts and Culture Programming Experience

Years of arts and culture programming experience. If applicant is a Model A Fiscal Sponsor, please list the years of arts and culture programming experience of the fiscally sponsored project/organization.

(No response)

## Total Grant Amount Requested

(Request can be between \$5,000 and \$20,000)

(No response)

## Primary Discipline (check all that apply):

No Responses Selected



## Arts and Culture Project/Program Reach (check all that apply):

Check all descriptions of the specific communities targeted for service in this project.

No Responses Selected

If other, please describe:

(No response)

## Brief Project Description

Please complete the following sentence: "To support..."

(No response)

## CIAG Narrative Part 1 - Organizational Information

Incomplete

## CIAG Narrative Part 1 - Organizational Information

**A. Mission/Purpose of the Applicant: [Criteria 2, 5] \*500 Character Limit\***

**Provide the applicant's mission statement.**

(No response)

**B. Organizational History/Core Programming: [Criteria 2, 5]  
\*2,000 Character Limit\***

**Briefly describe the history of current core programs and services.**

**Note any significant administrative changes and/or major accomplishments and initiatives that took place over the past two years.**

(No response)

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**C. How many arts and culture-related classes/workshops/events did your organization produce virtually or in person in the last two years? Reminder: a minimum of 8 activities are required to be eligible to apply.**

Enter a numerical value only.

(No response)

**D. Arts and Culture History/Programming: [Criteria 1, 5] \*1,500 Character Limit\***

**Please describe organizational history of arts and culture programming as part of the broader services the organization provides.**

**How does arts and culture programming support the applicant's mission?**

**Describe the types of programming the applicant is engaged in.**

**How are artists selected to work with the program? Describe the applicant's practice of payment to artists.**

(No response)

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**E. Community/Core Constituency: [Criterion 5] \*1,500 Character Limit\***

**Describe the applicant's community and core constituency in terms of geography, age, cultural, economic or other characteristics, as applicable or that are important to your organization. Please include demographic information.**

(No response)

## F. Cultural Equity and Inclusion: [Criterion 5] \*2,000 Character Limit\*

Describe how the applicant addresses and is taking steps to integrate and reflect the values of cultural equity and inclusion both internally and externally. Provide specific details highlighting progress or efforts made in the last two or more years. Please reference the CEI definitions listed on our website: [CEI Definitions](#)

(No response)

### CIAG Project Budget

Incomplete

#### PROJECT BUDGET

To update the "CIAG Request" number shown below, go back to the CIAG Project Request & Organizational Budget Size task and update there. If no number is appearing below, please complete the CIAG Project Request & Organizational Budget task, and then return here.

Click "Next" to Start.

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### CIAG Request

(No response)

Complete the questions below related to the proposed arts project budget during the grant period: July 1, 2026 - June 30, 2027.

**ERROR MESSAGE:** *If your request amount is not auto-filling and you've already COMPLETED the Project Request task, click the PREVIOUS button at the bottom of this page and then the NEXT button on the opening page and your request figures will populate. Reach out to [ciag@arts.lacounty.gov](mailto:ciag@arts.lacounty.gov) if the error persists.*

To answer the following questions, use the projected budget for proposed arts project during the grant period. Only include income and expenses that are specific to the arts project; do not enter your organization's total annual budget.

**IMPORTANT NOTE:** CIAG funds cannot be used for catering and hospitality, lodging, meals or travel outside of LA County. These types of expenses, however, can be included as part of the matching funds. Please see [CIAG Guidelines](#) for a full list of unqualified expenses.

**FORMATTING NOTE:** Please enter plain non-formatted numbers below. This form will not accept dollar signs (\$), commas (,) or cents (i.e."0.50"). Please round figures to the nearest dollar.

CIAG Project Budget Expense Detail		
	CIAG Fund Request	CIAG Required Match
Request/Match Amount		

How do you plan to use CIAG grant funds? Check all that apply.

Payroll costs for employees	X
Fringe benefits for employees	X
Artist fees - non salary	X
Fees paid to partner organization	X
Consulting fees	X
Advertising, marketing, PR	X
Rent and facility fees	X
Insurance	X
Honoraria	X
Printing	X
Production and exhibition costs	X
Project materials	X
Other (please explain)	X

Budget Expense Explanations - REQUIRED

Use this space to explain the budget expenses.

(No response)

## Partner Expenses - OPTIONAL

If project partner is independently paying for a portion of the project, please describe. If not applicable, enter N/A.

(No response)

## CIAG Project Budget Income Detail

Identify income sources of Matching Funds. Matching Funds total must be equal to or exceed the total amount of CIAG Fund Request.

## LACDAC Grant Request Amount:

Government (Federal, State, City)	(No response)
Foundation Contributions	(No response)
Corporate Contributions	(No response)
Trustee/Board Contributions	(No response)
Other Individual Contributions	(No response)
Earned Income	(No response)
Other**	(No response)

## Total Project Match

(No response)

## Verification of Budget

**Do not edit this section.** This field is auto-calculated to ensure that your budget meets CIAG minimum requirements. If this reads "False" your match amount is wrong or you have added formatting that prevents validation.

### ***Meets or Exceeds Matching Fund Requirements:***

(No response)

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## Budget Income Explanations - REQUIRED

Use this space to provide details about the sources of the stated income budget.

If there are multiple sources of income in the Government (City, County, State, Federal), Foundation or Corporate categories, provide a detailed list naming the sources along with the amount of each contribution.

Provide a detailed list of "Other" income sources.

(No response)

## CIAG Narrative Part 2 - Proposed Arts and Culture Project

Incomplete

## CIAG Narrative Part 2 - Proposed Arts Project



## **A. Project Overview: [Criteria 1, 3] \*1,500 Character Limit\***

**Describe the arts and culture project for which funds are requested. Is this a new initiative or an expansion of a current program?**

**If applicable, how does this arts and culture project relate to any previous initiatives?**

(No response)

## **B. Project Timeline and Arts and Culture Program Participants: [Criteria 3, 5] \*750 Character Limit\***

**Do you certify that your proposed project will take place between July 1, 2026 and June 30, 2027?**

(No response)

**Include the start and end date of the proposed project/program within the eligible grant period (July 1, 2026 - June 30, 2027).**

**Where will it take place?**

**Describe *in detail* the target participants for your arts and culture project/program.**

**How will participants be selected for participation?**

**What is the total number of participants the organization expects to serve with this project/program?**

(No response)

**C. PROJECT ACTIVITIES: [Criteria 1, 3] \*1,500 Character Limit\***

**Describe what happens/will happen during project planning and implementation. If applicable, what happens during a workshop, class or presentation?**

**NOTE: We *HIGHLY* recommend attaching a sample lesson plan/curriculum/agenda in the Supporting Documentation section if applying with a workshop/class-based program.**

(No response)

**D. If applicable, briefly describe your approach to developing curriculum and content for arts and culture program/project – particularly if serving youth. Consider providing 1-2 concrete examples. [Criteria 1, 3] \*1,500 Character Limit\***

(No response)

**E. Project Partners/Artists/Staff/Volunteers: [Criteria 1, 3, 5]**

**\*1,500 Character Limit\***

**Describe the planning process of working with the partner organization(s) or artist(s).**

**How are partner organizations, artists, staff, volunteers selected for this project? If not yet selected, what are the selection criteria?**

**What is the compensation rate for project/program partners?**

**If you are working with a partner organization(s) or artist(s), please describe what role and title each will be filling.**

**If utilizing temporarily employed individuals or volunteers, how are they trained?**

(No response)

**F. Project Fees: Is there a fee constituents/clients must pay to participate in the project/program?**

(No response)

**If yes, please describe rate to participate. If applicable, describe sliding scale and how sliding scale rates are determined.**

(No response)

## **G. Project Goals and Objectives: [Criteria 3, 4] \*1,000 Character Limit\***

**What are the goals and objectives of this arts and culture project/program?**

**How does this project/program serve the applicant's overall mission?**

**How does it meet community, constituent and/or client needs?**

(No response)

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## **H. Project Evaluation: [Criterion 4] \*750 Character Limit\***

**How will you monitor, measure and track the success of this arts and culture project?**

**What qualitative (narrative) and/or quantitative (numbers/data) information will you use to demonstrate how well you are achieving the arts and culture project/program goals and objectives, as described above?**

(No response)

## **I. Project Outreach: [Criterion 5] \*1,000 Character Limit\***

**What kind of outreach/marketing strategy do you have for this arts and culture project/program? How are you reaching new participants?**

**How is information about community, constituent and/or client needs gathered?**

**How are culminating events promoted, if applicable?**

(No response)

## **CIAG Project Implementation Information**

Incomplete

## **CIAG Project Implementation Information**

**Is your organization working with a partner arts organization(s) or artist(s) for this project?**

(No response)

**[CRITERIA 1,2] Provide short biographies of key organizational staff. Begin with the applicant's leadership (e.g. Executive Director, Managing Director) and follow with key project staff, emphasizing their experience in areas of direct relevance to the proposal, e.g. professional, educational or community-based experience in arts and culture including years of experience. NOTE: All volunteer organizations should provide the biographies of key volunteers who are accomplishing the work on the proposed project.**

**If beneficial, an attachment may be uploaded listing additional staff to support/carry out the proposed project and highlight organizational capacity.**

**Staff Member Information #1**

Full Name	(No response)
Title	(No response)
Bio	(No response)
Project Role	(No response)
Email	(No response)

## **Staff Member Information #2**

Full Name	(No response)
Title	(No response)
Bio	(No response)
Project Role	(No response)
Email	(No response)

## **Staff Member Information #3**

Full Name	(No response)
Title	(No response)
Bio	(No response)
Project Role	(No response)
Email	(No response)

## **Staff Member Information #4**

Full Name	(No response)
Title	(No response)
Bio	(No response)
Project Role	(No response)
Email	(No response)

**Optional - To add Additional Project Staff, upload document(s)**

**CIAG - Board of Directors**

Incomplete

**Board of Directors**

Provide a list of the applicant organization's board of directors **beginning with board officers (President/Chair, Vice President/Co-Chair, Secretary, Treasurer)** listed in first four rows. You may upload an attachment to accommodate additional board members.

NOTE: Professional affiliation is intended to provide insight about the board member's area of expertise and experience.

\*Please scroll to the right to access full table and columns.

	Full Name	Board Position Title	Professional Affiliation (Organization)	Professional Affiliation (Title)	City and State of Residence (e.g. LA, CA)	Years Served on Board

Optional - Additional Board Documentation Upload

Please describe the ways your board members provide leadership and support to the organization in ways other than monetarily:

(No response)

CIAG Artistic Documentation & Financial Support Materials

Incomplete

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TIPS FOR UPDATING OR EDITING YOUR APPLICATION TASKS:

- TO MAKE AN EDIT TO YOUR APPLICATION, VIEW THE APPLICATION,
- CLICK ON THE THREE DOTS IN THE TOP RIGHT CORNER OF THE TASK THAT NEEDS TO BE CORRECTED



- CLICK *EDIT* TO REOPEN AND EDIT THE APPLICATION.

## **CIAG Artistic Documentation and Support Materials**

### **Artistic Documentation and Support Materials - REQUIRED**

**NOTE - After upload, test your samples to ensure they work correctly.**

## A. Artistic Documentation (minimum one required)

Artistic documentation is crucial for evaluating the artistic quality of the applicant and project. REMINDER: Provide the context of the submission in the Artistic Description section. This includes, as applicable, title, location, artist(s), date(s) and participant impact.

A minimum of one (1) and maximum of two (2) artistic samples must be included with the application. We recommend using recent samples.

Review [CIAG Guidelines](#) for requirements and recommendations.

REMINDER: All materials must remain active and viewable until July 2026.

PASSWORDS: If applicable, include passwords for artistic documentation in the Artistic Description text section for the corresponding sample.

DISCLAIMER: All submitted application materials are documents of public record upon submission to the Los Angeles County Department of Arts and Culture and subject to public records requests.

How many artistic samples are you including:

(No response)

## A. Artistic Documentation (one required)

Briefly describe the artistic sample and explain the relationship of the artistic sample to the application. Description of materials should include type of file, title of piece, artist(s) name(s), date the work was completed and running time (for audio and video).

(No response)

**Please denote what type of artistic sample for Sample A:**

(No response)

**Link - Sample A**

format: <http://www.URL.com>

(No response)

**Upload Attachment - Sample A**

**Please denote what type of artistic samples you are submitting under Sample A and Sample B:**

(No response)

## Sample A

Briefly describe the artistic sample and explain the relationship of the artistic sample to the application. Description of materials should include type of file, title of piece, artist(s) name(s), date the work was completed and running time (for audio and video).

(No response)

## Link - Sample A

format: <http://www.URL.com>

(No response)

## Upload Attachment - Sample A

## Sample B

**Briefly describe the artistic sample and explain the relationship of the artistic sample to the application. Description of materials should include type of file, title of piece, artist(s) name(s), date the work was completed and running time (for audio and video).**

(No response)

## Link - Sample B

format: <http://www.URL.com>

(No response)

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## Upload Attachment - Sample B

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### **B. Reviews/Letters of Recommendation (optional)**

A maximum of two (2) letters of recommendation and/or reviews written within the past 12 months that speak to your arts programming are **STRONGLY ENCOURAGED**.

Compile Reviews/Letters of Recommendation into one pdf.

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### **C. Sample Lesson Plan (optional)**

For all Applicants proposing workshop or class-based arts programs, please provide a sample lesson plan/agenda outlining the activities/work planned and scheduled during a workshop or class session.

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### **D. Promotional Materials (optional)**

Up to three (3) pieces of promotional materials (i.e. Season brochures, flyers, postcards, newsletters, reviews, etc.) may be uploaded as one PDF document.

## E. Financial Information (required)

One or more financial documents will be required to upload below, depending on your organization type.

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### **NOTE: Mailed Materials Not Accepted**

All documentation **must be submitted online** as attachments with the application.

#### **Levine Act Compliance (CIAG)**

Incomplete

#### **"Levine Act Compliance" (CIAG)**

### **Contribution and Agent Declaration Form**

#### **Applicants to Department of Arts and Culture Grant Programs**

This digital form must be completed by applicants for a grant award from the County of Los Angeles ("County") through the Department of Arts and Culture's Organizational Grant Program ("OGP"), Community Impact Arts Grant ("CIAG") and Arts Internship Program ("AIP") (collectively, "Grant").

Effective January 1, 2023, the Levine Act (SB1439) prohibits certain appointed and elected local officers, including members of the County Board of Supervisors, from taking part in decisions about awarding contracts, grants, licenses, or permits if the officer received a political contribution of more than \$250 in the last 12 months from a bidder, proposer, or applicant (or the bidder, proposer, or applicant's paid representative/agent).

California State law requires you to disclose information about contributions made by certain individuals (such as paid employees, paid agents, or paid board members) that represent your organization/agency. Please answer the questions below and take reasonable steps to ensure your responses are complete and accurate. Information is being collected for transparency and compliance purposes only. Reporting contributions will not disqualify you from the grant program. However, incomplete or false answers may lead to disqualification.

**Failure to complete this form in its entirety will result in immediate disqualification of your application to the grant program without exception. No grace period will be provided to complete this requirement.**

**Additional information and resources can be found [here](#).**

**Check the box that describes your organization type:**

(No response)

**CIAG Finalizing and Certifying your Application**

Incomplete

**FINALIZING AND CERTIFYING YOUR APPLICATION**

DISCLAIMER: All submitted application materials are documents of public record upon submission to the Los Angeles County Department of Arts and Culture and subject to public records requests.

### Certification Instructions:

Provide the Name and Title of the authorized official submitting this application.

This individual must be a representative of the applicant organization with authority to submit this application on behalf of the applicant organization.

By entering their name below, the authorized individual certifies that they have reviewed the content of this application and certifies that the information contained in this application is true and correct to the best of their knowledge.

**Once this section is complete, please click the green “Submit” button on the left to finalize and submit your CIAG application. YOUR APPLICATION IS NOT SUBMITTED UNTIL THIS IS DONE.**

Full Name:	(No response)
Title:	(No response)
Telephone #:	(No response)
Email Address:	(No response)
I certify:	(No response)