LMCC
Creative Engagement

LMCC
UMEZ Arts Engagement

2027 CREATIVE ENGAGEMENT & UMEZ ARTS ENGAGEMENT FULL APPLICATION QUESTIONS

SECTION I: PROJECT INFORMATION

This section has four parts:

- *A: Project Goals and Creative Team*
- *B: Artistic Work Samples*
- *C: Community, Audience, or Public*
- *D: Project Budget*

A. PROJECT GOALS AND CREATIVE TEAM

***Project Title**

***Project Summary** (*suggested max: 10 words)*

Please provide a one sentence description of your project.
Example: "Visions" is a two-week exhibition by six Washington Heights-based artists.

***Project Description** *(suggested max: 750 words)*

Please provide important details about your project (who, what, when, where, and how). Help panelists understand your artistic goals and envision what you want the public to experience.

If this project includes the finished works of many artists (i.e. a music festival, film screenings, a group exhibition, etc.), please include a description of your process for selecting the participating artists.

***I want this application to be evaluated by panelists with experience in:**

- *Dance*
- *Music*
- *Theatre*
- *Multidisciplinary performance-based work*
- *Film / Digital Arts / New Media*
- *Literary Arts / Writing*
- *Visual Arts*
- *Multidisciplinary media, text, and image-based work*

***Planning Timeline**

Format your list accordingly:

- *Activity description, Month Year*
- *Activity description, Month Year*
- *Activity description, Month Year*

*Please include any key milestones in the project's develo*pment, *marketing and promotion, fundraising, and public events.*

***Creative Team**

Format your list accordingly:

- *Name, Title or Role in the Project, confirmed*
- *Name, Title or Role in the Project, confirmed*
- *Name, Title or Role in the Project, pending*

Please list the names and contributions of artists, collaborators, and administrators that you would like to credit here as responsible for the creation, promotion, and presentation of the project.

Use "confirmed" if there's a verbal or written agreement to participate in the project. Use "pending" if you haven't asked the person to participate yet, or they haven't provided an answer.

***Estimate: Total number of artists contributing to the project**

Enter one whole number not a range.

Please count everyone on the creative team (pending and confirmed) who will make an artistic contribution. This may include designers, performers, fabricators, creative producers, choreographers, etc.

***Estimate: Total number of artists contributing to the project**

Enter one whole number not a range.

Please count everyone on the creative team (pending and confirmed) who will make an artistic contribution. This may include designers, performers, fabricators, creative producers, choreographers, etc.

***Lead Artist First and Last Name**

You must have at least one artist confirmed as a creative leader or significant contributor to the project.

***Describe the lead artist's experience with this type of project.**

(suggested max: 500 words)

Please highlight aspects of the artist's biography that connect to this project. While accolades and awards are wonderful, it's more important that the panel has insight into their passion and readiness for this project.

Please also include a brief list of their participation in or production of public-facing arts programs in two of the last five calendar years (i.e. 2022–2026).

B: ARTISTIC WORK SAMPLES *(one required, one optional)*

You must include one sample (audio, video, images, or text). If you choose to add a second sample, it can be the same type (i.e. two video recordings) or a different type (i.e. one video recording and one text sample).

It's a good idea to add a second work sample if the project has more than one lead artist, or if you'd like to share past work for another project or artistic discipline.

You may also use the second work sample to share a rendering or work-in-progress if it helps clarify what you wrote about in the project description.

***Work sample type: Audio or Video Recording**	***Work sample type: Images or Text**
Description* *Suggested max: 150 words* *Please provide context for the panel about what they are experiencing and how it may connect to the proposed project.* **URL option* *Acceptable hosting sites: YouTube, Vimeo, Dropbox, Google Drive, Bandcamp, SoundCloud, Artist or Organization webpages.* ***Please do not submit links that require panelists to be platform users: Instagram, Facebook, TikTok, etc.* **Upload option* *You may add one file.*	**Description* *Suggest max: 150 words* *Please provide context to the panel about what they are experiencing and how it may connect to the proposed project.* **URL option* *Acceptable hosting sites: Dropbox, Google Drive, Artist or Organization webpages.* ***Please do not** submit links that require panelists to be platform users: Instagram, Facebook, TikTok, etc.* **Upload option* *You may combine 10 images or 10 pages of text into one file, or add up to ten individual files.*

Accepted file types for Audio: .aac, .aiff, .flac, .m4a, .mp3, .ogg, .wav, .wma *Accepted file types for Video: .3gp, .avi, .flv, .m4v, .mkv, .mov, .mp4, .mpg, .webm, .wmv* **Password (if applicable)* *The password must remain the same until April 2027.* **Cue point (0:00:00) (if applicable)* *Panelists are required to review at least 2.5 minutes of material.* *If you do not provide a specific cue point, they will play the sample from the beginning.* *If you need technical assistance, please email us **before November 6, 2026**. We need at least 48 hours before the deadline to help troubleshoot the task.*	*Accepted file types for Images: .gif, .jpg, .png, .svg, .tif* *Accepted file types for Text: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf* **Password (if applicable)* *The password must remain the same until April 2027.* **Page Range (X-XX) (if applicable)* *Panelists are required to review at least 10 images or 10 pages of text.* *If you do not provide a specific page range, they will review the material from the beginning.* *If you need technical assistance, please email us **before November 6, 2026**. We need at least 48 hours before the deadline to help troubleshoot the task.*

C. COMMUNITY, AUDIENCE, OR PUBLIC

***Community, Audience, or Public** *(suggested max: 500 words)*

Who do you hope will experience this project, and why is it important to share your work with this audience? How do you plan to reach and engage them? If applicable, please describe any existing relationship you have with this community.

*For applicants eligible for **UMEZ Arts Engagement**, consider how your project responds to, reflects, or engages Upper Manhattan communities.*

***Start Date: Public Presentation of the Project** *(mm/dd/yyyy)*

***End Date: Public Presentation of the Project** *(mm/dd/yyyy)*

***These dates are:**

- *Confirmed (verbal or written agreement in place)*
- *Pending (in conversation but not secured)*
- *Aspirational (hoping for them, but unsure at this point)*

***ESTIMATE: Total number of opportunities to experience the work**

Option 1: *Count the number of days the event is available to the public.*
This option is best for festivals, exhibitions, or other formats in which the public can experience the work throughout a day.

Option 2: *Count the number of presentations available to the public.*
This option is best for performing arts and other events in which the public needs to attend within a specific time to experience the work.

***ESTIMATE: Total number of direct recipients or attendees**

Enter a whole number not a range.

Please estimate the number of people you expect to directly attend or participate in your project (e.g., ticket holders, RSVPs, registered participants, workshop attendees, or other audiences that can be reasonably counted).

***ESTIMATE: Total number of older adults served**

Enter a whole number not a range.

Please estimate the number of older adults (ages 65+) who will directly experience and engage with the project. Enter "0" if not applicable to your project.

***ESTIMATE: Total number of children and youth served**

Enter a whole number not a range.

Please estimate the number of children and youth (ages 3-24) who will directly experience the project. Enter "0" if not applicable to your project.

***ESTIMATE: If your project takes place in a public space, please estimate the number of additional people who may encounter or experience the work.**

Enter a whole number not a range.

Please enter "0" if not applicable to your project.

***Name: Public Presentation Location or Venue in Manhattan**

Example: Marcus Garvey Park, Nuyorican Poets Cafe, etc.

UMEZ Arts Engagement *is a place-based investment designed to strengthen Upper Manhattan's cultural vitality and support the artists, organizations, and communities that contribute to it. To be considered for the program, you must enter a location or venue within Upper Manhattan defined here as:*

- *North of 98th Street on the east side of Fifth Avenue*
- *North of 110th Street on the west side of Fifth Avenue*

***Community District: Public Presentation Location or Venue in Manhattan**

To locate the Community District number, visit: https://boundaries.beta.nyc/?
Type the address in the search bar.
Community District will be listed first in the left panel.

***IMPORTANT*: UMEZ Arts Engagement** *is a place-based investment in Upper Manhattan's artists, cultural organizations, and communities. To be considered for the program, you must have an address within Community District 9, 10, 11, or 12.*

***City Council District: Public Presentation Location or Venue in Manhattan**

To locate the City Council District number, visit: https://boundaries.beta.nyc/?
Type the address in the search bar.
City Council District will be listed second in the left panel.

***The public presentation location or venue in Manhattan is:**

- *Confirmed (verbal or written agreement in place)*
- *Pending (in conversation but not secured)*
- *Aspirational (hoping for it, but unsure at this point)*

C. PROJECT BUDGET

***Project Budget**

A grid table with columns and rows is provided in the application.

*When entering numbers, **please do not add "$" into any cells.** It makes the calculations incorrect.*

*For **expenses**, you may use estimates for any numbers you're not sure about. The only expense you must include is a fee to pay the Artistic Personnel. You may enter "0" for any other category that doesn't make sense for your project.*

*For **income**, please include secured or confirmed sources only. For example, if you've received another grant for this project or individual donations, please enter those. If you don't have any confirmed income yet, that's ok. Please leave the section empty. It will not be counted against you.*

We recognize that tables and grids can be challenging for some applicants to complete. Please email us if you could use support with completing the Project Budget.

***What is the grant amount that you need to make this project happen?**

The budget table above will automatically show the balance between your expenses and secured income. Please choose a grant request amount as close to that number as possible.
Dropdown: $1,000–$20,000 in increments of $1,000

SECTION II: GRANT RECIPIENT INFORMATION

The "grant recipient" signs the contract with LMCC, receives the funds, and holds responsibility for final reporting. They must have proof of address or residency in Manhattan and any additional documents required by LMCC's funding partners.

***IMPORTANT:** **You cannot change the grant recipient later** because the application is vetted for funding partner eligibility based on what you choose.*

ORGANIZATIONAL GRANT RECIPIENT OPTIONS (#1-3 in the box below):
The organization must be primarily responsible for creating, promoting, and sharing the project. While they may use the funds to pay artist fees or program costs, they are not serving as a pass-through or fiscal sponsor for artists to access the grant.

INDIVIDUAL GRANT RECIPIENT OPTIONS (#4-7 in the box below):
Individual artists may apply on behalf of themselves or other artists (i.e. as a member of a group, ensemble, or collective). This person may be unincorporated, a sole proprietor, an LLC, an S-Corps, or have a fiscal sponsor. Eligibility is based on this individual's information.

*Individuals and collectives who have an address within Community District 9, 10, 11, or 12, and would like LMCC to serve as their fiscal sponsor to access **UMEZ Arts Engagement** funding, **must** pick option #5. You will be prompted to indicate this choice after entering your Community District number.*

***(Select one) In the event of an award, the grant recipient would be:**

1. *Nonprofit Organization (see pages 8-9)*
2. *NY State Chartered Educational Institution (see pages 9-11)*
3. *Government or Quasi-Governmental Entity (see pages 11-12)*
4. *Individual (see pages 12-13)*
5. *Individual with a Fiscal Sponsor in Manhattan (see page 13-15)*
6. *Individual with a Fiscal Sponsor in The Bronx, Brooklyn, Queens, or Staten Island (see pages 15-16)*
7. *Individual Tribal Nation member present within NY State (see pages 17)*

The following questions will appear based on which grant recipient you chose.

NONPROFIT ORGANIZATION QUESTIONS
***Legal Name of the Nonprofit Organization**
***Mission Statement, Vision, and Brief History** (*suggested max: 500 words*)

NONPROFIT ORGANIZATION QUESTIONS

***Summarize your organization's programs and activities.** (*suggested max: 500 words)*

Please include the following:

- *A brief description of your current programs and activities.*
- *Include any notable achievements that relate to this proposal.*
- *List your participation in or production of public-facing arts programs in two of the last five calendar years (i.e. 2022–2026).*

***EIN of the Nonprofit Organization**

***Year of Incorporation**

***Nonprofit Organization Address**

Nonprofit organizations must be legally registered in Manhattan.

IMPORTANT: ***UMEZ Arts Engagement*** *is a place-based investment in Upper Manhattan's artists, cultural organizations, and communities. To be considered for the program, you must enter an address within Upper Manhattan defined here as:*

- *North of 98th Street on the east side of Fifth Avenue*
- *North of 110th Street on the west side of Fifth Avenue*

***UPLOAD: 501(c)(3) IRS Determination Letter**

The address on the document must match the one entered above.

***UPLOAD: Proof of NYS Charities Bureau Filing (Email) Receipt**

Please upload a copy of the Filing Receipt dated within the last 24 months.

***NY State Organization Code**

Select the organization code that best describes you as an applicant.

***Manhattan Community District**

To locate the Community District number, visit: https://boundaries.beta.nyc/?
Type your address in the search bar.
Community District will be listed first in the left panel.

IMPORTANT: ***UMEZ Arts Engagement*** *is a place-based investment in Upper Manhattan's artists, cultural organizations, and communities. To be considered for the program, you must have an address within Community District 9, 10, 11, or 12.*

***NYC Council District Number**

To locate the City Council District number, visit: https://boundaries.beta.nyc/?
Type your address in the search bar.
City Council District will be listed second in the left panel.

NONPROFIT ORGANIZATION QUESTIONS
***UPLOAD: Nonprofit Organization's Financial Statement** *Please upload the most recently filed IRS Form 990 available. If the organization filed a 990N, submit an itemized financial statement of income and expenses for the most recently completed fiscal year.*
***Between FY2024-FY2026, your total operating expenses each year fell within the following range:** ● *Under $100K* ● *Between $100-250K →* ● *Between $250-750K →* ● *Above $750K →*
***FY2026: Total Operating Expenses** *Enter a whole number not a range. It can be an estimate.*
***FY2025: Total Operating Expenses** *Enter a whole number not a range. It can be an estimate.*
***FY2024: Total Operating Expenses** *Enter a whole number not a range. It can be an estimate.*
→ ***Upload: Projected Organizational Budget** *Upload the projected organizational budget for the fiscal year in which the project will take place (FY26 or FY27).*
→ ***Board of Directors and Staff List** *Format your list accordingly:* *Name, Title or Role in the organization* *Name, Title or Role in the organization*
***Nonprofit Organization Signatory's Name and Email** *This is the name of the individual authorized to sign contracts.*
***Nonprofit Organization Signatory's Title**
***Nonprofit Organization Signatory's Phone Number**

CHARTERED EDUCATIONAL INSTITUTION
***Legal Name of the Chartered Educational Institution**
***EIN of the Chartered Educational Institution**
***Address of the Chartered Educational Institution**

CHARTERED EDUCATIONAL INSTITUTION
Chartered educational institutions must have an address in Manhattan.
***UPLOAD: documentation of NYS charter by the Board of Regents under section 216 of the NY State Education Law** *The address on the document must match the one entered above*
***NY State Organization Code** *Select the organization code that best describes you as an applicant.*
***Manhattan Community District** *To locate the Community District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *Community District will be listed first in the left panel.*
***NYC Council District Number** *To locate the City Council District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *City Council District will be listed second in the left panel.*
***UPLOAD: Chartered Educational Institution's Financial Statement** *Upload the most recently filed IRS Form 990 if available or submit an itemized financial statement of income and expenses for the most recently completed fiscal year.*
***Between FY2024-FY2026, your total operating expenses each year fell within the following range:** ● *Under $100K* ● *Above $100K →*
***FY2026: Total Operating Expenses** *Enter a whole number not a range. It can be an estimate.*
***FY2025: Total Operating Expenses** *Enter a whole number not a range. It can be an estimate.*
***FY2024: Total Operating Expenses** *Enter a whole number not a range. It can be an estimate.*
→ *Upload: Projected Organizational Budget *Upload the projected organizational budget for the fiscal year in which the project will take place (FY26 or FY27).*
→ *Board of Directors and Staff List

CHARTERED EDUCATIONAL INSTITUTION
Format your list accordingly: *Name, Title or Role in the organization* *Name, Title or Role in the organization*
***Chartered Educational Institution Signatory's Name and Email** *This is the name of the individual authorized to sign contracts.*
***Chartered Educational Institution Signatory's Title**
***Chartered Educational Institution Signatory's Phone Number**

GOVERNMENT OR QUASI-GOVERNMENTAL ENTITY QUESTIONS
***Legal Name of the Governmental Entity**
***EIN of the Governmental Entity**
***Address of the Governmental Entity** *Government and quasi-government agencies must have an address in Manhattan.*
***UPLOAD: Proof of authorization, in the form of a formal letter on official stationery, signed by the appropriate county, city, town or village executive, dated within the last 12 months.** *The address on the document must match the one entered above.*
***NY State Organization Code** *Select the organization code that best describes you as an applicant.*
***Manhattan Community District** *To locate the Community District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *Community District will be listed first in the left panel.*
***NYC Council District Number** *To locate the City Council District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *City Council District will be listed second in the left panel.*
***UPLOAD: Governmental Entity's Financial Statement** *Upload the most recently filed IRS Form 990 available. If the organization filed a 990N, submit an itemized financial statement of income and expenses for the most recently completed fiscal year.*

GOVERNMENT OR QUASI-GOVERNMENTAL ENTITY QUESTIONS

***Between FY2024-FY2026, your total operating expenses each year fell within the following range:**

- *Under $100K*
- *Above $100K →*

***FY2026: Total Operating Expenses**

Enter a whole number not a range. It can be an estimate.

***FY2025: Total Operating Expenses**

Enter a whole number not a range. It can be an estimate.

***FY2024: Total Operating Expenses**

Enter a whole number not a range. It can be an estimate.

→ *Upload: Projected Organizational Budget

Upload the projected organizational budget for the fiscal year in which the project will take place (FY26 or FY27).

→ *Board of Directors and Staff List

Format your list accordingly:
Name, Title or Role in the organization
Name, Title or Role in the organization

***Governmental Entity Signatory's Name and Email**

This is the name of the individual authorized to sign contracts.

***Governmental Entity Signatory's Title**

***Governmental Entity Signatory's Phone Number**

INDIVIDUAL LOCATED IN MANHATTAN

***Signatory Name and Email**

Please enter the name as it would need to appear on a contract.

If you are acting on behalf of a collective or group, you still need to enter a single individual's name who will be responsible for the paperwork and receipt of funds.

(Optional) If you're applying on behalf of a group, ensemble, or collective, please enter its name here.

If the group, ensemble, or collective doesn't have a formal name that you work under, please enter the names of each member.

INDIVIDUAL LOCATED IN MANHATTAN

***Signatory's Phone Number**

***Signatory's Manhattan Address**

This address must match the proof you provide in the next field.

***Signatory's Proof of Address**

The address on the document must be the same as the address entered above.

P.O. Boxes cannot be accepted.

Upload one (1) copy of one (1) of the following:

- *Utility bill (e.g. electricity, cable, gas, etc.)*
- *Bank or credit card statement. Please redact any sensitive information*
- *Valid Driver's license or IDNYC*
- *Current lease agreement*
- *Voter Registration Card*

***NOTE**: Proof of address document must demonstrate the individual's physical address in Manhattan with a clear date within the last three (3) months.*

***Signatory's Manhattan Community District**

To locate the Community District number, visit: https://boundaries.beta.nyc/?
Type your address in the search bar.
Community District will be listed first in the left panel.

***Signatory's NYC Council District Number**

To locate the City Council District number, visit: https://boundaries.beta.nyc/?
Type your address in the search bar.
City Council District will be listed second in the left panel.

INDIVIDUAL LOCATED IN MANHATTAN + FISCAL SPONSOR IN MANHATTAN

***Sponsee's Name and Email**

Please enter the name as it would need to appear on a contract.

If you are acting on behalf of a collective or group, you still need to enter a single individual's name who will be responsible for the paperwork and receipt of funds.

(Optional) If you are applying on behalf of a group, ensemble, or collective, please enter its name here.

If the group, ensemble, or collective doesn't have a formal name that you work under, please enter the names of each member.

The name of the collective or its individual member names will need to be in the fiscal sponsorship agreement.

INDIVIDUAL LOCATED IN MANHATTAN + FISCAL SPONSOR IN MANHATTAN
***Sponsee's Phone Number**
Sponsee's Manhattan Address** *This address must match the proof you provide in the next field.* ***Addresses in other NYC boroughs are not eligible. ***IMPORTANT:* UMEZ Arts Engagement** *is a place-based investment in Upper Manhattan's artists, cultural organizations, and communities. To be considered for the program, you must enter an address within Upper Manhattan defined here as:* ● *North of 98th Street on the east side of Fifth Avenue* ● *North of 110th Street on the west side of Fifth Avenue*
Sponsee's Proof of Address** *The address on the document must be the same as the address entered above.* ***P.O. Boxes cannot be accepted. *Upload one (1) copy of one (1) of the following:* ● *Utility bill (e.g. electricity, cable, gas, etc.)* ● *Bank or credit card statement. Please redact any sensitive information* ● *Valid Driver's license or IDNYC* ● *Current lease agreement* ● *Voter Registration Card* ***NOTE**: Proof of address document must demonstrate the individual's physical address in Manhattan with a clear date within the last three (3) months.*
***Sponsee's NYC Council District Number** *To locate the City Council District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *City Council District will be listed second in the left panel.*
***Sponsee's Manhattan Community District** *To locate the Community District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *Community District will be listed first in the left panel.* ***IMPORTANT:* UMEZ Arts Engagement** *is a place-based investment in Upper Manhattan's artists, cultural organizations, and communities. To be considered for the program, you must have an address within Community District 9, 10, 11, or 12.*
***Legal Name of Fiscal Sponsor**
***EIN number of Fiscal Sponsor**
***Fiscal Sponsor's Manhattan Address**

INDIVIDUAL LOCATED IN MANHATTAN + FISCAL SPONSOR IN MANHATTAN
This address must match the proof you provide in the next field. ***Addresses in other NYC boroughs are not eligible.***
***UPLOAD: Fiscal Sponsor's 501(c)(3) IRS Determination Letter**
***UPLOAD: Fiscal Sponsor's Proof of NYS Charities Bureau Filing (Email) Receipt** *Please upload a copy of the Filing Receipt dated within the last 24 months.*
***UPLOAD: Fiscal Sponsorship Agreement** *The Agreement must include the fiscal sponsor's role and responsibilities.*
***Fiscal Sponsor Signatory's Name and Email**
***Fiscal Sponsor Signatory's Title**
***Fiscal Sponsor Signatory's Phone Number**

INDIVIDUAL LOCATED IN MANHATTAN + FISCAL SPONSOR IN THE BRONX, BROOKLYN, QUEENS, OR STATEN ISLAND
***Sponsee's Name and Email** *Please enter the name as it would need to appear on a contract.* *If you are acting on behalf of a collective or group, you still need to enter a single individual's name who will be responsible for the paperwork and receipt of funds.*
(Optional) If you are applying on behalf of a group, ensemble, or collective, please enter its name here. *If the group, ensemble, or collective doesn't have a formal name that you work under, please enter the names of each member.* *The name of the collective or its individual member names will need to be in the fiscal sponsorship agreement.*
***Sponsee's Phone Number**
Sponsee's Manhattan Address** *This address must match the proof you provide in the next field.* ***Addresses in other NYC boroughs are not eligible.
Sponsee's Proof of Address** *The address on the document must be the same as the address entered above.* ***P.O. Boxes cannot be accepted.

INDIVIDUAL LOCATED IN MANHATTAN + FISCAL SPONSOR IN THE BRONX, BROOKLYN, QUEENS, OR STATEN ISLAND
Upload one (1) copy of one (1) of the following: ● *Utility bill (e.g. electricity, cable, gas, etc.)* ● *Bank or credit card statement. Please redact any sensitive information* ● *Valid Driver's license or IDNYC* ● *Current lease agreement* ● *Voter Registration Card* ***NOTE**: Proof of address document must demonstrate the individual's physical address in Manhattan with a clear date within the last three (3) months.*
***Sponsee's NYC Council District Number** *To locate the City Council District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *City Council District will be listed second in the left panel.*
***Sponsee's Manhattan Community District** *To locate the Community District number, visit: https://boundaries.beta.nyc/?* *Type your address in the search bar.* *Community District will be listed first in the left panel.*
***Legal Name of Fiscal Sponsor**
***EIN number of Fiscal Sponsor**
***Fiscal Sponsor's Address** *This address must match the proof you provide in the next field.*
***UPLOAD: Fiscal Sponsor's 501(c)(3) IRS Determination Letter**
***UPLOAD: Fiscal Sponsor's Proof of NYS Charities Bureau Filing (Email) Receipt** *Please upload a copy of the Filing Receipt dated within the last 24 months.*
***UPLOAD: Fiscal Sponsorship Agreement** *The Agreement must include the fiscal sponsor's role and responsibilities.*
***Fiscal Sponsor Signatory's Name and Email**
***Fiscal Sponsor Signatory's Title**
***Fiscal Sponsor Signatory's Phone Number**

INDIVIDUAL TRIBAL NATION MEMBER PRESENT WITHIN NEW YORK STATE
***Signatory's Name and Email** *Please enter the name as it would need to appear on a contract.* *If you are acting on behalf of a collective or group, you still need to enter a single individual's name who will be responsible for the paperwork and receipt of funds.*
(Optional) If you are applying on behalf of a group, ensemble, or collective, please enter its name here. *If the group, ensemble, or collective doesn't have a formal name that you work under, please enter the names of each member.* *The name of the collective or its individual member names will need to be in the fiscal sponsorship agreement.*
***Signatory's Phone Number**
***Signatory's Address** *We can accept applications from Tribal Nations located anywhere in NYS, regardless of the county.*
Signatory's Proof of Address** *The address on the document must be the same as the address entered above.* ***P.O. Boxes cannot be accepted. *Upload one (1) copy of one (1) of the following:* ● *Utility bill (e.g. electricity, cable, gas, etc.)* ● *Bank or credit card statement. Please redact any sensitive information* ● *Valid Driver's license or IDNYC* ● *Current lease agreement* ● *Voter Registration Card* ***NOTE**: Proof of address document must demonstrate the individual's physical address in Manhattan with a clear date within the last three (3) months.*
***Name of the Tribal Nation**
***Proof of Association** *Please provide any documentation available to you that shows association with the Tribal Nation.*

SECTION III: DEMOGRAPHIC SURVEY

This section is internal for LMCC staff only. Panelists cannot access it.

We request this information to learn about our community, improve our work, and report anonymized, aggregated information to our funding partners.

To the best of your ability, please complete the following questions about the lead artist named in Section 1. If you are the lead artist, please respond accordingly.

If you are completing the application on behalf of another person, please confirm their consent to disclose the information, or simply choose "prefer not to answer".

***I am completing this section:**
- *as the lead artist listed in Section 1.*
- *on behalf of the lead artist in Section 1.*

***With which of the following do you most closely identify?**
- *African American or Black or Caribbean*
- *Asian or Asian American*
- *Hispanic or Latine*
- *Middle Eastern or North African*
- *Native American or Alaskan Native or Indigenous*
- *Native Hawaiian or Pacific Islander or Samoan*
- *White*
- *Multi-Racial or no single group*
- *Prefer to describe*
- *Prefer not to answer*

***With which of the following do you most closely identify?**
- *Agender*
- *Genderqueer*
- *Man*
- *Non-binary*
- *Transgender Man*
- *Transgender Woman*
- *Woman*
- *Prefer to describe*
- *Prefer not to answer*

***Do you identify as a person with a disability?**
- *Yes*
- *No*
- *Prefer to describe*
- *Prefer not to answer*

***What is your age?**
- *18-24*

- *25-34*
- *35-44*
- *45-54*
- *55-64*
- *65-74*
- *75 and older*
- *Prefer not to answer*

***What is your highest level of educational attainment?**

- *Less than high school*
- *High school graduate or equivalent*
- *Associate's degree*
- *Bachelor's degree*
- *Master's degree*
- *Doctorate*
- *Prefer not to answer*