

#### **FY25 COCA Grant Programs Application**

### How to Complete this Application

This application is connected to the account that started the application. You have the option to invite collaborators (see instructions here

(https://submittable.help/en/articles/3654810-inviting-collaborators-on-submissions-and-additional-forms)). However, only the account that started the application can submit.

If you scroll to the bottom of the page, you will see a "Save Draft" button that you can use to save your work (see instructions here

(https://submittable.help/en/articles/904868-how-can-i-return-to-a-saved-draft)). However, COCA staff **strongly recommends** saving a copy of your work outside of the Submittable system.

COCA staff cannot view your application until your application is submitted. COCA staff also cannot make changes to your application on your behalf.

# Overview of FY25 COCA Grant Programs

This application will cover all grant programs offered by COCA in FY25: the Cultural Grant, Cultural Tourism Marketing Grant and the Local Community Grant. Applicants can apply to one, two or all three grant opportunities. Here is a quick summary of the different grant programs.

### **Cultural Grant**

The Cultural Grant funds programming expenses. Applicant programming must meet at least one of the following goals:

- 1. Offer arts, history, or cultural programs with exemplary standards and objectives.
- 2. Provide educational opportunities in arts, culture, and/or history for young people or adults.
- 3. Serve a special or diverse population or need, fill a unique niche or engage the community in the creative or artistic process.

Funds for the Cultural Grant come from Leon County's Tourist Development Tax (TDT) revenue. Therefore, applicants must also meet all of the following expectations:

- 1. In addition to arts and culture, the applicant must have as one of its main purposes the attraction of tourists, as evidenced by the promotion of the activity, service, venue, or event to tourists.
- 2. Applicant must clearly identify public relations/promotional/marketing tactics used to reach visitors outside of Leon County.
- 3. Applicant must have a marketing plan that clearly indicates out-of-market advertising or promotion.
- 4. Applicant must track and report the number of out-of-county visitors served by the grant-funded programs.

In this grant program, an organization's maximum allowable request will depend on their type (non-profit versus state entity) and their allowable operating income from the previous fiscal year. (See pages 13-15 in the Guidelines to calculate your request.)

### **Cultural Tourism Marketing Grant**

Applicants who meet all the Cultural Grant requirements may request an additional \$3,500 to support out-of-county marketing and promotion of arts and cultural programs. Funds for this grant also come from Leon County's Tourist Development Tax revenue.

### **Local Community Grant**

The Local Community Grant funds programming expenses. Applicant programming must meet at least one of the following goals:

- 1. Offer arts, history, or cultural programs with exemplary standards and objectives.
- 2. Provide educational opportunities in arts, culture, and/or history for young people or adults.
- 3. Serve a special or diverse population or need, fill a unique niche or engage the community in the creative or artistic process.

Unlike the Cultural Grant and the Cultural Tourism Marketing Grant, funds for the Local Community Grant come from the City of Tallahassee's General Revenue fund.

Therefore, applicants must also meet the following expectations:

- 1. Applicants must track and report the number of Leon County and/or Tallahassee residents served by programs.
- 2. Applicant programming should align with one or more of the following City of Tallahassee priorities (see pages 12-13 of the Guidelines): economic development; impact on poverty; public safety, and; quality of life.

An organization can request up to \$10,000 to support local arts programs. Funding for this grant depends on the City budget. The City budget may not be determined until after the panel meeting.

|                            | se select the grant programs from which you would like to   |
|----------------------------|---|
| requ                       | est funding.  |
|                            | Cultural Grant  |
|                            | Cultural Tourism Marketing Grant  |
|                            | Local Community Grant   |
| •                          | select all three options, you will be requesting: An amount from the Cultural Grant that depends on your allowable operating income from your last completed fiscal year; Up to \$3,500 from the Cultural Tourism Marketing Grant; and Up to \$10,000 from the Local Community Grant. |
| •                          | ded, your award for each grant will depend on:  The score your application receives at the panel;  Availability of each type of funding (TDT and General Revenue, respectively)   |
| Ba                         | sic Information   |
|                            | sic Information  anization Name (official IRS name) *   |
|                            |   |
|                            |   |
|                            | anization Name (official IRS name) *  |
| Org                        | anization Name (official IRS name) *  |
| Org                        | anization Name (official IRS name) *  Limit: 300 characte   |
| Org                        | anization Name (official IRS name) *  Limit: 300 characte   |
| Org<br>DB <i>A</i><br>Only | Anization Name (official IRS name) *  Limit: 300 characte  or Department/Program Name   |
| Org<br>DB <i>A</i><br>Only | Limit: 300 characte  or Department/Program Name  state partners are required to have a department or program name.  ress *  |
| Org  DBA  Only  Add  Cour  | Limit: 300 characte  or Department/Program Name  state partners are required to have a department or program name.  ress *  |

| Address Line 2 (optional)  City  State, Province, or Region Zip or Postal Code  Your organization must be registered in Leon County/City of Tallahassee to be elig for COCA grant programs. If applicable, this address must match your registration is Sunbiz.  Organization website *  example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name  Last Name | ddress                                       |                           |       |
|--|--|---------------------------|-------|
| City  State, Province, or Region Zip or Postal Code  Your organization must be registered in Leon County/City of Tallahassee to be elig for COCA grant programs. If applicable, this address must match your registration i Sunbiz.  Organization website *  example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name  |  |                           |       |
| State, Province, or Region Zip or Postal Code  Your organization must be registered in Leon County/City of Tallahassee to be elig for COCA grant programs. If applicable, this address must match your registration is Sunbiz.  Organization website *  example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name   | ddress Line 2 (optional)                     |                           |       |
| State, Province, or Region Zip or Postal Code  Your organization must be registered in Leon County/City of Tallahassee to be elig for COCA grant programs. If applicable, this address must match your registration is Sunbiz.  Organization website *  example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name   |  |                           |       |
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| for COCA grant programs. If applicable, this address must match your registration i Sunbiz.  Organization website *  example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name  | ate, Province, or Region Zip                 | or Postal Code            |       |
| for COCA grant programs. If applicable, this address must match your registration is Sunbiz.  Organization website *  example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name   |  |                           |       |
| example.com  If you do not have a website, please include your social media page.  Grant Contact *  First Name   | r COCA grant programs. If applicat<br>unbiz. |                           |       |
| Grant Contact * First Name   |  |                           |       |
| First Name   | you do not have a website, please            | include your social media | page. |
| First Name   |  |                           |       |
|  | rant Contact *                               |                           |       |
| Last Name  | rst Name                                     |                           |       |
| Last Name  |  |                           |       |
|  | ast Name                                     |                           |       |
|  |  |                           |       |
|  |  |                           |       |
| Grant Contact Email *  | rant Contact Email *                         |                           |       |
| email@example.com  | email@example.com                            |                           |       |

| Authorizing Official *  First Name  Last Name  Authorizing Official Email *  email@example.com | Grant Contact Phone Number * |   |  |
|--|------------------------------|---|--|
| First Name  Last Name  Authorizing Official Email *  | <b>***</b>                   |   |  |
| Last Name  Authorizing Official Email *  | Authorizing Official *       |   |  |
| Authorizing Official Email *   | First Name                   |   |  |
| Authorizing Official Email *   | Last Nama                    |   |  |
| -  | Last Name                    |   |  |
| -  |                              |   |  |
| email@example.com  | Authorizing Official Email * |   |  |
|  | email@example.com            |   |  |
|  |                              |   |  |
| Authorized Official Phone Number *   |                              | k |  |

# **Basic Eligibility**

All applicants to COCA programs must meet the following criteria. The Cultural Grant and Cultural Tourism Marketing Grant have additional tourist requirements. The Local Community Grant has additional community requirements. You will be prompted to answer questions related to these additional requirements later in the application.

- 1. Applicants must be either:
  - a not-for-profit Florida corporation with at least 60% of operating cash budget originating from earned income and classified by the IRS as a 501(c)3, subclass "public charity," or;
  - a department, museum, or other organization working under the FEID number of a part of the State of Florida, Florida State University, Florida A&M University or Tallahassee Community College.
- 2. Applicant's mission must be to produce or promote arts and/or history programming.

- 3. Applicant must have completed at least one fiscal year of programming in their discipline.
- 4. Applicant must present or produce programs/activities/events in Tallahassee/Leon County.
- 5. Applicant must have a professional staff. (Staff can be paid or volunteer, but should be regularly available during normal business hours.)
- 6. Applicant must have a governing Board of Directors that meets regularly and operates under a set of by-laws.
- 7. Applicant must be able to demonstrate the receipt of community support through subscriptions, memberships, earned income, foundation grants, and/or other private fundraising (including in-kind support).
- 8. Applicant must produce arts or cultural programs that are regularly available to the public throughout the year. These programs should:
  - Offer arts, history, or cultural programs with exemplary standards and objectives.
  - Provide educational opportunities in arts, culture, and/or history for young people or adults.
  - Serve a special or diverse population or need, fill a unique niche or engage the community in the creative or artistic process.
- 9. Applicant must have documented statistics on attendance and participation for your programs and/or facility (paid or free) that represent a broad community impact.
- 10. Applicant must be committed to and have a plan in place to provide for accessibility for people with disabilities, including compliance with the Americans with Disabilities Act (ADA).

#### 1. Is your organization:

| A not-for-profit Florida corporation with at least 60% of your operating cash budget originating from earned income and classified by the IRS as a 501(c)3, subclass "public charity?"           |
|--|
| A department, museum, or other organization working under the FEID number of a part of the State of Florida, Florida State University, Florida A&M University, or Tallahassee Community College? |
| Neither.   |

For more information on "60% of your operating cash budget originating from earned income," see page 9-10 of the Guidelines.

If you proceed with the application, the "Operating Revenue" section will automatically calculate whether at least 60% of your operating cash originates from earned income.

2. What is the mission and purpose of your organization? \*



Limit: 100 words

This should be based on your organization's written mission statement.

3.a. Date of Incorporation/Founding \*



3.b. Number of years doing business in Leon County as a cultural organization \*

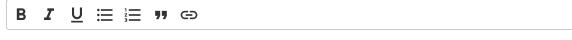


4. Does your organization present or produce programs/activities/events in Tallahassee/Leon County?





5. Identify your organization's key personnel (paid or volunteer). Include titles, bios, and briefly describe responsibilities for each position. Participating artists may be included. \*



Limit: 500 words

# 6. List your organization's board of directors and summarize their responsibilities to your organization. \*



Limit: 500 words

- A description of your board type (policy, governing, etc.) and meeting schedule
- Professional affiliations of each member
- By-law requirements for any member

# 7. Describe the sources, types, and levels of community support received by your organization. \*



Limit: 500 words

Include collaborative partnerships, revenue, and efforts to sustain or increase this support.

# 8. Provide an overview of your organization's year-round cultural programming. \*



Limit: 1500 words

Applicant must produce arts or cultural programs that are regularly available to the public throughout the year. An organization whose mission is to produce seasonal or otherwise individual events or festivals does not qualify to apply for these grants.

8.a. Describe your organization's efforts to inclusively serve a special population or need, fill a unique niche, or provide programming to an underserved area. \*



Include in your answer:

- How your facilities, programs, and events are accessible to persons with disabilities and other special populations
- How you engage members of the community in the creative and/or artist process
- Past and planned efforts to broaden outreach and increase involvement across ability, age, economic status, and gender
- How these efforts relte to your particular artistic/cultural discipline
- 8.b. Describe your organization's efforts to highlight cultural diversity and inclusion. Explain how these efforts provide distinctive arts, history, and cultural offerings. \*



Limit: 500 words

Include in your answer:

- How your organization serves culturally diverse constituents
- The current demographic composition of your board, staff, volunteer pool, and audience
- Past and planned efforts to broaden outreach and increase involvement across ethnicity

• How these efforts relate to your particular artistic/cultural discipline

8.c. Please provide your organization's DEI statement.



Limit: 300 words

9. Please describe your organization's methods of tracking attendance and participation for your programs and/or facility.



10. How does your organization provide for accessibility for people with disabilities, including compliance with the Americans with Disabilities Act (ADA?) \*



Limit: 1500 words

# Organization Budget

Last Completed Fiscal Year End Date \*



Each organization's fiscal year end date can be different. Some organizations use the calendar year (January 1 - December 30), the state of Florida's fiscal year (July 1 - June 30) or the federal fiscal year (October 1 - September 30).

# Please confirm the Allowable Operating Income for the Last Fiscal Year \*

| \$ | USD |
|----|-----|
|----|-----|

This will be #10, "Subtotal (Allowable operating income)" or Column B, Row 58.

# Please confirm your maximum request in the Cultural Grant Program. \*



The "Operating Revenue" form should calculate this for you automatically in Column B, Row 65. If you encounter an error, use this guide instead:

#### **Non-Profits**

- If your allowable operating income in your last completed fiscal year was less than \$75,000, you can request 50% of your allowable operating income. Your request is capped at \$30,000.
- If your allowable operating income in your last completed fiscal year was between \$75,000 and \$499,000, you can request 20% of your allowable operating income. Your request is capped at \$85,000.
- If your allowable operating income in your last completed fiscal year was between \$500,000 and \$1,499,000, you can request 10% of your allowable operating income. Your request is capped at \$150,000.
- If your allowable operating income in your last completed fiscal year was \$1,500,000 or above, you can request 10% of your allowable operating income. Your request is capped at \$325,000.

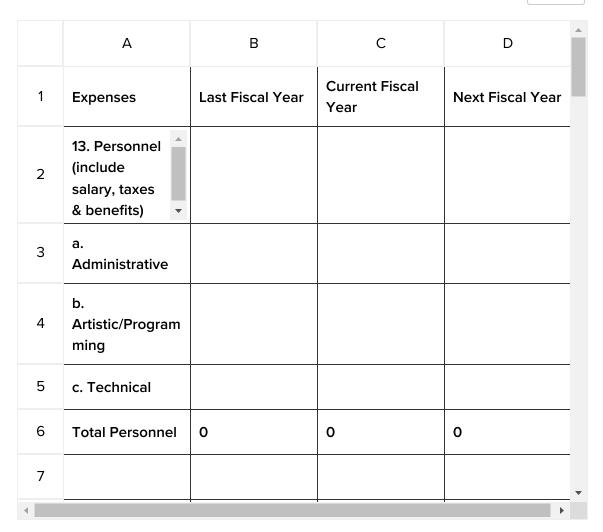
#### **State Partner (General/Educational)**

You can request up to \$30,000.

#### **State Partner (Destination)**

- If less than 60% of your operating cash comes from earned income, you may request up to \$30,000.
- If more than 60% of your operating cash comes from earned income, calculate your request as if you are a non-profit.

#### Operating Expenses \*



As with the Operating Revenue, use your organization's fiscal year. Last year will be actual numbers and should be similar to your 990. Current and Next fiscal year numbers can be budgeted. Enter numbers only, do not include \$.

# Please confirm the Total Operating Expenses for the Last Fiscal Year \*

| \$ | USD |
|----|-----|
|----|-----|

This will be #23, "Total Operating Expenses" or Column B, Row 48.

# Explain any special fiscal circumstances that may exist for your organization. \*



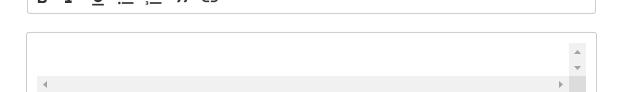
Limit: 300 words

Include any changes in annual operations, reasons for any deficits, and resolution strategies. Panelists may ask for additional information about major discrepancies between your expenses and revenue, or about discrepancies between your revenue and your 990.

# **Program Information**

# Program Name \*

#### Program Summary \*



Limit: 100 words

This information will be included in the grant awards presented to the COCA Board of Directors, the City of Tallahassee, and the Tourist Development Council.

#### Describe the program for which you are requesting funding. \*



Limit: 1500 words

If you are requesting the Cultural Grant and the Local Community Grant for different programmatic activities, note that here. Remember, the Cultural Grant programming must support tourism and the Local Community Grant must support Tallahassee residents.

Include and letter the following in your response:

- 1. Relevance to the organization's mission
- 2. Scope of program and timelines
- 3. Number of events and expected participation and/or attendance. Include participant fees and how special or diverse populations or underserved communities will be served
- 4. Goals and anticipate outcomes
- 5. Program evaluation/measurement (milestones for attendance/participation, enrollment or sales figures, independent third-party review, audience/member surveys or focus groups, etc.)
- 6. Other information for the panelists to use in evaluating your programs

## Impact Survey

Please complete this section using data from your organization's most recently completed fiscal year. When necessary, please estimate.

|                 | Organization's FTE jobs (paid positions) FTE= Full<br>(e.g. 1 full time = 2 part time = 4 quarter time |
|-----------------|--|
| Total Number of | Organization's Volunteers *  |
| Total Number of | Organization's Volunteer Hours *   |

| Tota  | al Value of Organization's In-Kind Donations *  |
|-------|---|
| \$    | USD   |
| Tota  | al of Organization's Annual Attendance *  |
| Tota  | al Visitors from Outside Leon County *  |
| Plea  | ase select one of the options below *   |
|       | My organization does have a method of tracking visitors from outside Leon County.     |
|       | My organization does not have a method of tracking visitors from outside Leon County. |
| ls aı | rts education part of your ongoing programming? *                                     |
|       | Yes   |
|       | No  |
| Sup   | plemental Materials   |
|       | Choose File   |
| Selec | ct up to 6 files to attach. No files have been attached yet. You may add 6 more       |

https://tallahasseearts.submittable.com/forms/initial/edit/2e1b39af-0a44-4014-9be8-9a6f16d3e381

files.

Acceptable file types: .doc, .docx, .pdf, .jpg, .jpeg, .png, .avi, .mov, .mp4, .mpg, .wmv, .ppt, .pptx

Supplemental material might include:

- programs, catalogs, publicity material, artist work samples, press coverage, photographs, audio-visual material, organizational chart, brief history of the organization, etc.
- Recent support letters: Correspondence from people who benefit directly from
  programs related to your proposal (participants, students, audience members,
  tourists, tourism partners, etc.) and/or letters of support from collaborating
  organizations or individuals showing evidence of support. Limited to four pages.
  Please note letters from public officials are not useful unless the officials are
  personally familiar with your organization. To avoid the appearance of a conflict
  of interest, no support correspondence should be included that is written by
  COCA staff or board members (see https://coca.tallahasseearts.org/aboutcoca/coca-staff (https://coca.tallahasseearts.org/about-coca/coca-staff) for a
  current list). If so, those letters will be removed from your application prior to
  panel review.
- List of productions, exhibitions, concerts and/or publications your organization has recently produced/presented. Consider including the total attendance/participation figures for each event (audience, artists, and volunteers). To calculate these numbers, you may use "instances of participation" each visit to your facility by a single person (i.e., multiple visits count as multiple instances of participation.)

### **Tourism Funding**

How does your program attract tourists and/or lengthen tourist stays in Leon County \*



Limit: 500 words

Include the following:

- Partnerships with other organizations
- Promotional efforts designed specifically to impact tourism
- Projected tourist participation and attendance
- Impact on tourism and how your organization raises the overall awareness of Leon County as a desirable place to visit

# Please indicate the out of County geographic markets you will be targeting \*

|      | Surrounding Areas (100-mile radius – includes NW Florida, South Alabama, and South Georgia) |
|------|---|
|      | Miami – Ft. Lauderdale  |
|      | Atlanta   |
|      | Orlando   |
|      | Jacksonville  |
|      | Tampa Bay Area  |
|      | Panama City – Destin  |
|      | Pensacola – Mobile  |
|      | Other   |
|      | Other   |
| Plea | ase indicate the marketing tactics you will employ *  |
| Plea |   |
| Plea | ase indicate the marketing tactics you will employ *  |
| Plea | ase indicate the marketing tactics you will employ *  Audio/Visual Communications - TV      |
| Plea | Audio/Visual Communications - Radio   |
| Plea | Audio/Visual Communications - Radio  Audio/Visual Communications - Streaming Services       |

|               | Print Publications - Newspapers/Magazines  |
|---------------|--|
|               | Print Publications - Catalogs/Pamphlets/ Brochures   |
|               | Print Publications - Postcards/Flyers/Posters/Playbills/Announcements  |
|               | Print Publications - Other   |
|               | Staff implemented Marketing/PR/Promotional Plan  |
|               | Visual Displays - Banners/Flags  |
|               | Visual Displays - Kiosk/Marquee/Lobby Displays   |
|               | Visual Displays -Billboards  |
|               | Visual Displays - Other  |
| Plea          | ase upload a copy of your marketing plan.  |
| Uplo          | Choose File  ad a file. No files have been attached yet.  ptable file types: .doc, .docx, .pdf   |
| Uplo:<br>Acce | Choose File  ad a file. No files have been attached yet.  ptable file types: .doc, .docx, .pdf  ase describe your method(s) for tracking out of county visitors. * |
| Uplo          | Choose File  ad a file. No files have been attached yet.  ptable file types: .doc, .docx, .pdf   |
| Uplo:<br>Acce | Choose File  ad a file. No files have been attached yet.  ptable file types: .doc, .docx, .pdf  ase describe your method(s) for tracking out of county visitors. * |

# Community

| Please check all that apply to your organization. *  |  |  |
|--|--|--|
|  | BIPOC-Centered Organization  |  |
|  | My total earned income in my last completed fiscal year is less than \$150,000   |  |
|  | I am ineligible to receive TDT funds (i.e., my organization does not have the attraction of tourists as its main purpose, in addition to arts and culture) |  |
|  | None of the above  |  |
|  | ty funding will be given to BIPOC and underserved organizations, and nizations ineligible to receive TDT funds.  |  |
| To qualify as a BIPOC organization, your organization should be composed of at least 51% persons who identify as Black, Native American, Native Hawaiian, Alaskan Native, Desi, Asian, Pacific Islander, Chicanx or Latinx. Your answers in the "Basic Eligibility" section should reflect your answer here. |  |  |
| Please select the following city priorities that align with your   |  |  |
| prog   | gramming (Check all that apply) *  |  |
|  | Economic Development - To advance the City of Tallahassee as a competitive, innovative, and sustainable regional economic hub.                             |  |
|  | Impact on Poverty - To be a leading community partner that actively connects residents to resources that remove economic and social barriers.              |  |
|  | Public Safety - To be a safe, resilient, and inclusive community.  |  |
|  | Quality of Life - To be a creative and inclusive community with beautiful public spaces that protect and promote resources and culture.                    |  |
|  |  |  |

# **Funding Request**

#### **Grant Request Detail**

| 2 |  |
|---|--|
|   |  |

| 29 | v. Print <sup>A</sup><br>marketing | В | С | D |
|----|------------------------------------|---|---|---|
| 30 | vi. Public relations               |   |   |   |
| 31 | vii. Social media                  |   |   |   |
| 32 | viii. TV/Radio                     |   |   |   |
| 33 | iv. Website                        |   |   |   |
| 34 | x. Other                           |   |   |   |
| 35 |                                    |   |   |   |
| 36 | 8. Remaining Expenses              |   |   |   |
| 37 | a. Postage                         |   |   |   |
| 4  | b. Equipment                       |   |   | • |

Please fill out this table to request funding in all relevant grant programs. Please give a brief description of the expenses for each fund requested; COCA staff needs to determine that each expense is allowable and panelists need to determine that each expense is competitive. For Cultural Tourism Marketing Grant expenses only, please indicate the specific out-of-county geographic area targeted by each marketing expense.

Only include expenses related to your grant-funded programming and promotion. See pages 15-17 of the Guidelines for examples of allowable expenses.

Non-allowable expenses include:

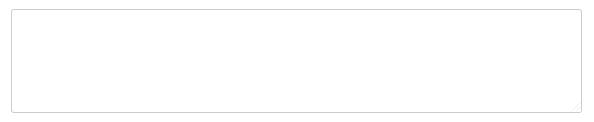
- Expenses incurred or obligated outside of the grant period.
- Any costs not directly related to programming and promotion

- Bad debts, contingencies, fines and penalties, interest, and other financial costs
- Mortgage payments
- Operation of privately-owned facilities (i.e., studios, homes)
- Private or exclusive entertainment (i.e., parties, receptions or benefits that are not open and accessible to the public)
- Food and beverages (including alcohol)
- Cash reserves
- Contributions and donations
- Endowment
- Fellowships/scholarships
- Fundraising
- Re-granting
- Third-party grant administration (indirect costs)
- Attendance at conferences and seminars
- Staff Travel
- Plaques and awards
- Religious programs
- Lobbying or attempting to influence federal, state, or local legislation or any other expenditure not authorized by Chapter 112 of the Florida Statutes

| Please confirm your Cultural Grant request.  |
|--|
|  |
| This should equal Column B, Row 44 of the "Grant Funds Request Detail" table. If you do not wish to request the Cultural Grant, please enter "0."                    |
| Please confirm your Cultural Tourism Marketing Grant request.  |
| This should equal Column C, Row 44 of the "Grant Funds Request Detail" table.  If you do not wish to request the Cultural Tourism Marketing Grant, please enter "0." |
| Please confirm your Local Community Grant request.   |
| This should equal Column D, Row 44 of the "Grant Funds Request Detail" table.  If you do not wish to request the Local Community Grant, please enter "0."            |

### **Bicentennial**

The City of Tallahassee and Leon County will celebrate its Bicentennial in 2024. This provides an opportunity to engage the community in the rich history of Tallahassee and Leon County over the past 200 years and the vision of the community in years to come. The Bicentennial is envisioned to be a community-wide celebration that not only engages all segments of the community but shares residents' experiences and stories of Tallahassee and Leon County from their unique perspective. If you are planning to incorporate the Bicentennial into your programs in 2024, please explain how.



Participation in the Tallahassee Bicentennial is not required. This question will not be scored by panelists.

### Certification

I hereby attest that all information in this application is factual, including all attachments and supporting materials. I also attest that my organization meets the eligibility criteria and will abide by all legal, financial, and reporting requirements, including interim and final reports, for all grants received from COCA on behalf of Leon County and/or the City of Tallahassee. (See grant guidelines for details on non-discrimination, intellectual property rights, funding recognition, changes to programs, and grant reporting.) By applying for a COCA Cultural Grant, my organization consents to examine and audit our financial records by Leon County, the City of Tallahassee, and/or COCA. My organization understands and agrees to the payment schedule for grant awards. To the best of my knowledge, I certify that my organization's facilities and programs are accessible to persons with disabilities as required by all applicable sections of the Americans with Disabilities Act (ADA)

Please check the box if you agree to the above listed terms. \*

## What Happens Now?

• Last Day for Grantee Consultations - June 14, 2024

COCA staff is happy to meet with you and give subjective feedback on your application. Please provide a draft and/or specific questions. COCA staff cannot offer in-depth consultations in the week before the application deadline.

• Application Deadline - June 21, 2024 at 11:59 p.m.

The application is due in Submittable.

• COCA staff review - June 24 - June 28, 2024

Your application will be reviewed by COCA staff. COCA staff will confirm that your application meets the basic eligibility criteria for the relevant grant programs, that your request amount(s) are appropriate and that your expenses are allowable. COCA staff may contact you for revision or clarification; please be available by email or phone.

Leon County TDT Eligibility Verification - July 1 - July 12, 2024

Applications to the Cultural Grant and the Cultural Tourism Marketing Grant will be provided to the Director of Tourism. The Director of Tourism will review these applications for compliance with the Tourism Statute 125.0104 F.S. ("If tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event shall have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists.")

Applications to the Local Community Grant are not impacted.

Applicant Revision Deadline - July 19, 2024

If your Cultural Grant or Cultural Tourism Marketing Grant is determined to be ineligible by Leon County, you will have the chance to revise your application. If you choose to revise your application, that revision will be due July 19. You may also choose to withdraw your application or apply only to the Local Community Grant. COCA staff will assist you in revising and resubmitting.

If your Cultural Grant or Cultural Tourism Marketing Grant is not found ineligible, you are not required to submit anything at this stage.

Applications to the Local Community Grant are not impacted.

• Secondary Leon County Eligibility Verification Results - July 24, 2024

Leon County will review revisions to ineligible Cultural and Cultural Tourism Marketing Grant applications. If your revision is still found ineligible based on the Tourism Statute 125.0104 F.S., your application cannot proceed to panel review.

If your Cultural Grant or Cultural Tourism Marketing Grant applications were not found ineligible, or if you choose not to revise your application, this date does not impact you.

Applications to the Local Community Grant are not impacted.

Panel Review Meeting - August 28, 2024

The panel meeting is a public meeting held over Zoom. Panelists are allowed to ask questions of applicants, so applicants are strongly encouraged to attend. Your scores at the panel determine your funding amount. For more information, see page 18-19 of the Guidelines.

At the panel meeting, COCA staff will present a ranked list. The City of Tallahassee budget may not be finalized as of the panel meeting. All awards are subject to funds availability.

• Grant year begins - October 1, 2024

If you did not receive grant funding for FY24, your FY25 contract can be executed for the period October 1.

FY24 Final Reports are due - October 31, 2024

If you received grant funding in FY24, your FY24 final report must be submitted and approved by COCA staff before your contract for FY25 can be executed.

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