COVID Relief Fund for Museums

Connecticut Humanities

Grant Eligibility

Stop! Before filling out the application, please be sure to review the following:

Grant Eligibility*
Connecticut Humanities is honored to provide rapid-response funding to larger museums and other 501c3 nonprofit organizations that are facing financial hardship resulting from COVID-19.

These grants are administered by CT Humanities, with funding provided by the Connecticut State Department of Economic and Community Development (DECD)/Connecticut Office of the Arts (COA) with funding allocated to the State of Connecticut through the CARES Act.

These are GENERAL OPERATING SUPPORT grants being made available to larger organizations with full time staff and annual operating budgets of at least $450,000, with priority given to those with annual operating budgets of $500,000 or more.

Please visit https://cthumanities.org/grants/covid-relief-grants-for-museums/ for full eligibility requirements and program details before applying.

Before proceeding, make sure your organization meets all requirements below:

Choices
Is a 501c3 nonprofit organization incorporated in CT or a CT-based federally recognized tribe
Has had its nonprofit status for at least 1 year (established prior to November 1, 2019)
Had an operating budget of at least $450,000/yr for most recently completed FY prior to 3/1/2020
Had at least one (1) full-time paid position OR FTE prior to March 1, 2020
Has a material financial need that cannot be overcome without a grant of relief funds
Is a viable business with plans to reopen and rehire any paid workers let go due to COVID-19

Narrative and Impact of COVID 19

Project Title*
Please assign a title for your funding request for our granting system and process. Name can simply be "XYZ Museum COVID Relief Fund for Museums Grant Request."

Character Limit: 150
Mission Statement*
What is your organization's mission statement?

*Character Limit: 500

Estimated Financial Loss through December 30, 2020*
What is your total estimated loss of revenue due to COVID-19 through December 30, 2020?

Please quantify your losses from the date first affected by the virus through the end of the calendar year.

*Character Limit: 20

2020 Contributed Income*
How much contributed income did your organization raise from non-governmental sources between March 1, 2020 and December 1, 2020.

*Character Limit: 20

COVID-19 Impact on Organization*
Tell us about the financial hardships caused by COVID-19 on your organization's operations, staffing, and revenue streams. Be as specific as possible.

*Character Limit: 1500

Material Financial Need*
In narrative form, tell us about your organization’s financial need. What will happen if your organization does not receive funding from the COVID Relief Fund for Museums? What other steps are you taking to ensure that your organization survives this crisis? How do you envision moving forward?

*Character Limit: 1500

Number of Employees

Indicate the number of individuals employed by your organization on March 1, 2020 and today.

Do not include contractual workers in this section.

Full time is defined as at least 30 hours per week or at least 130 hours per month.

# Full Time Employees on March 1, 2020*

*Character Limit: 20

# Part Time Employees on March 1, 2020

*Character Limit: 20
# Full Time Employees Today
*Character Limit: 20*

# Part Time Employees Today
*Character Limit: 20*

**Additional Information (Optional)**
If there is any information we have not requested, but which you feel is important for Connecticut Humanities in evaluating your application, please provide it here.
*Character Limit: 1000*

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**Use of Funds**

**Award Amounts**

Connecticut Humanities will be re-granting up to a total of $1,500,000 in State of Connecticut CARES Act funding to non-profit museums and humanities organizations across Connecticut.

Award amounts are determined by an organization’s budget size:

- At least $20,000 for organizations with budgets under $2,500,000 (approximately $750,000 in funding to be awarded)
- At least $40,000 for organizations with budgets of $2,500,000 or greater (approximately $750,000 in funding to be awarded)

**Current Year Operating Budget**

Please attach your organization’s FY2021 operating budget in pdf format (for your current fiscal year).
*File Size Limit: 3 MB*

**Previous Year's Operating Budget**

Please attach your organization’s FY2020 operating budget in pdf format (for your previous fiscal year).
*File Size Limit: 3 MB*

**Use of Funds**

CT Humanities COVID Relief Fund for Museums grants may be used to reimburse your organization for eligible expenses incurred or which will occur from March 1, 2020 - December
30, 2020. Only eligible expenses for this funding opportunity are listed below. **Note: Your organization’s award amount cannot exceed your eligible expenses documented below.**

**Eligible Expenses**
Please indicate which eligible expenses your organization incurred/ will incur from March 1, 2020 - December 30, 2020.

**Choices**
Payroll
Fees Paid to Contractual Workers
Rent/Mortgage
Utilities
Telephone & Internet
Insurance
Accounting & Legal Services
Software
Online Services
Equipment Rental & Maintenance
Costs associated to ensure compliance with Reopen Connecticut Sector Rule

**Eligible Expenses Amounts and Details**
For each eligible expense item checked above provide:
1) Amount of expense incurred (Expenses must have occurred between 3/1/2020 and 12/30/2020)
2) If any other grant/relief funds have been applied to cover this expense. (By asking we are reminding you that per federal CARES Act rules, a grant recipient cannot apply grant/relief funds toward expenses which have already been offset by other sources, referred to as Duplication of Benefits.)

Example of how to fill out this section:

Payroll: $238,420, No duplication

Fees Paid to Contractual Workers: $5,000, No duplication

Utilities: $64,756, No duplication

Telephone & Internet: $7,876, No duplication

Etc.

*Character Limit: 3500*

**Total Amount of Eligible Expenses**
Please enter the total amount of eligible expenses described and itemized above.

*Character Limit: 20*
Other Sources of Relief Funds Applied For
What other sources of financial relief have you applied for since the onset of the COVID-19 pandemic? Check all that apply.

Choices
US Small Business Association Disaster Relief Loan – Payroll Protection Program (PPP Loan)
Connecticut Small Business COVID-19 Economic Injury Disaster Grant
State of CT DECD Bridge Loan Program
Connecticut Humanities CARES Act Relief Grant
CARES Act Emergency Relief Grant from the CT Office of the Arts
National Endowment for the Humanities CARES Act funding (direct)
National Endowment for the Arts CARES Act funding (direct)
Institute of Museums and Library Services CARES Act funding (direct)
**CT CARES Small Business Grant Program (from DECD)
**COVID Relief Fund for the Arts (from CT Office of the Arts)
Other Relief Funding

Relief Funding Received
Which of the above Sources of Relief Funding has your institution received? Please indicate Source of Funding and Amount Awarded.

Example:
US Small Business Association Disaster Relief Loan – Payroll Protection Program (PPP Loan):
$10,000
CT Humanities CARES Act Relief Grant: $15,000

Character Limit: 1000

Total Amount of Relief Funds Awarded
Please enter the total amount of COVID Relief Funds awarded to date.

Character Limit: 20

Applicant Information

Authorizing Signatory First Name
Note: If funded, the Authorizing Signatory is the person authorized to sign a grant contract for your organization.

Character Limit: 100

Authorizing Signatory Last Name

Character Limit: 100
Authorizing Signatory Title*
Character Limit: 250

Authorizing Signatory Mailing Address*
Please follow this formatting example:

Connecticut Humanities, 100 Riverview Center, Suite 270, Middletown, CT 06457

Character Limit: 250

Authorizing Signatory Phone Number*
Please use the following format:
000-000-0000

Character Limit: 250

Authorizing Signatory Email Address*
Character Limit: 250

Project Director First Name*
Note: The Project Director is the person responsible for managing your project. This individual will become your organization's primary contact person with Connecticut Humanities should the grant be funded. The Project Director and the Fiscal Agent CANNOT be the same person.
Character Limit: 100

Project Director Last Name*
Character Limit: 100

Project Director Title
Character Limit: 100

Project Director Organization*
Character Limit: 150

Project Director Phone Number*
Please use the following format:
000-000-0000
Character Limit: 250

Project Director Email Address*
Character Limit: 250
Fiscal Agent First Name*
Note: The Fiscal Agent is the person responsible for managing your project's grant funds and expenditures. The Project Director and the Fiscal Agent CANNOT be the same person.

Character Limit: 100

Fiscal Agent Last Name*

Character Limit: 100

Fiscal Agent Title

Character Limit: 100

Fiscal Agent Organization*

Character Limit: 150

Fiscal Agent Phone Number*
Please use the following format:
000-000-0000

Character Limit: 250

Fiscal Agent Email Address*

Character Limit: 250

DUNS Number*
Enter your organization's 9-digit DUNS number.

Note: As required by federal guidelines, applicants must have a DUNS number in order to receive funds. Apply for this early, as a DUNS number can take up to two business days to receive. For information on how to obtain one, click HERE. Once you have a DUNS number, you may proceed with an application.

Character Limit: 9

Application Certification*
"I certify that the information presented in this application is true and accurate. I have read and understand the guidelines (https://cthumanities.org/grants/covid-relief-grants-for-museums/) relating to this application. The applicant organization is in compliance with any grants previously awarded by Connecticut Humanities."

Choices
By checking this box, I certify that I have read and understood the above statement

Certified By*
Name and Title

Character Limit: 250