Please Note: To edit a draft, respond to a revision request, or request for additional information, select the **Edit** button at the top right

Humanities New York

R-2301-08629 - Quick Grant

Amount Requested:

Apply for a Grant

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OUICK GRANTS: MATCHING FUNDS FOR PROJECT IMPLEMENTATION

Available to organizations whose total yearly operating expenses are \$250,000 or less. Funds in-person and digital public humanities projects that encourage audiences to reflect on their values, explore new ideas, and engage with others in their community.

Amount: \$1500Match: 1:1 required

- Decisions and awards: Applications are accepted on a rolling basis. At the beginning of every month, HNY reviews requests from the previous month and grantees are notified by mid-month of HNY's decisions. Provided grantees submit paperwork promptly, applicants will receive payment by ACH (or their checks will be printed) by the end of the month after their submission.
- Event Date: The earliest program date is the first of the month following the month of decision, i.e. for requests submitted in August, awardee program cannot begin before October 1; for requests submitted in September, the program cannot begin before November 1, etc.

Please note: Organizations may receive One Quick OR one Action Grant per calendar year, not both.

To browse a list of recently awarded Quick Grants, visit our website.

Questions? Make an appointment using the calendar on our homepage to discuss proposal ideas and/or eligibility.

▼ Organization Information

If awarded, the organization that appears below will be considered the "Grantee."

Please note: applicants cannot edit the Organization record. If you would like to edit the Organization name, please email grants@humanitiesny.org for assistance.

Grant Role Instructions:

- **Primary Contact:** Receives all email correspondence related to this request.
- Authorizing Official: Must be an officer of the Applying Organization who is authorized to submit this application for funding. If awarded, the Authorizing Official will receive and sign the Grant Agreement.

Project Director: The individual who is primarily responsible for the project's planning and/or implementation.
 Finance Officer (FO): Receives and administers the grant funds, if awarded. The FO should not be the same as the Project Director.
 Organization: Humanities New York

Is your Organization Operating Budget Less than 250K?

Primary Grant Contact:

Authorizing Official:

Project Director:

Finance Officer:

If the individual fulfilling one of these roles does not display in the options above, please provide their contact information in the fields below. Please include the individual's **first and last name**, **title**, **organization**, **email address**, **and phone number**. If awarded, grants staff will add them to the grant portal on your behalf. **Authorizing Official:**

Project Director:

Finance Officer:

▼ Grant Application Preparation

Did you read the Grant Guidelines before beginning the application?

Grant Guidelines Acknowledgement:

Phone appointments are not required but are encouraged, particularly for first-time applicants. You can request an appointment on our website.

Did you or a member of your Project Team have a phone appointment with HNY staff before applying?

Appointment Acknowledgement:

▼ Project Details

Provide the title you will likely use when marketing the project.

Project Title:

Provide a brief (one or two sentence) summary of your proposed project. HNY will use this description in our press releases if your request is awarded.

Project Abstract:

Describe what your project is about. Explain why the theme or topic is important to explore right now and why the humanities are central to this exploration. Be sure to describe the format of your project.

Project Description:

How many of the partners have humanities expertise?

In the field below, identify the relevant individuals and organizational partners who will contribute to the project's success. Describe each partner's roles and responsibilities. *Be sure to indicate which project team members have humanities expertise* and how this expertise will benefit the work.

Project Team and Partners:

Activity or Event Details

Enter the number of activities and/or events that will result from this grant in the field below.

Number of Activities and/or Events:

Activities and/or Events Type

Are the Activities/Events Virtual, In-Person, or Both?

Event Dates:

Venues

List all venues where your project will take place, including addresses. If one or more of your venues is not confirmed, please explain.

Do all venues for this project meet ADA accessibility standards?

ADA Accessibility Standards:

Indicate how much the public will pay to participate in your program. If there is a sliding scale or discounts are offered, include all prices.

Program Admission Fee:

Provide the total estimated number of participants for all project activities.

Estimated In-Person Attendees:

The following question is not designed to assess marketing or social media reach. Provide the estimated number of individuals who will interact with project content online, virtually, or broadcast.

Estimated Virtual Attendees:

Backup Plans

HNY recognizes that between environmental and public health crises, planning public programming can be challenging. Please describe your project's contingency plans should the initial form of your program be disrupted.

▼ Financial Information

Use the **HNY budget template** for your project budget; upload an excel or google sheet in the Request Budget field below. This should reflect the full cost of your project, nothing beyond the scope and timeline in your Project Summary. Requests can be between \$500 and \$1,500 and can be used for any expense necessary to achieve the described activities with the exception of international travel and alcohol. Example expenses include staff time, honoraria, and marketing can be found in the **HNY sample budget**.

A minimum 1:1 match is required in this budget, meaning the total amount requested of HNY must be matched by either cash and/or in-kind services provided by the applying organization (or its partners). Cash can be in-hand or anticipated at the time of grant request.

Applicants may include a *de minimis* indirect cost rate (ICR) of up to 10% of direct expenses of the total grant. In other words, [TOTAL project expenses] = [direct expenses] + [ICR, which is no more than 0.10 x direct expenses]. If your organization has a federally negotiated ICR, you may use that rate provided you upload documentation in the Request Documents section below.

(The uploaded budget attachment will display in both the Initial Project Budget and the Request Documents sections.)

Amount Requested:

\$0.00

The Total Project Expenses should reflect the full cost of your project, including the value of any in-kind contributions and the expenses that will be paid for with this grant request, if awarded.

Total Project Expenses:

\$0.00

Describe the expenses below. If you prefer, you may submit the budget by using the **Budget Template** and uploading it in the documents section below. You can view a **sample budget here**.

• If you elect to use the Budget Template, please upload it **as an Excel sheet.** Do not upload the Budget Template as a PDF.

Initial Project Budget:

▼ Documents

Please upload the following documents by selecting the + icon under Request or Organization:

Optional Request Document: You may submit the budget using the Budget Template. You can view a sample budget here.

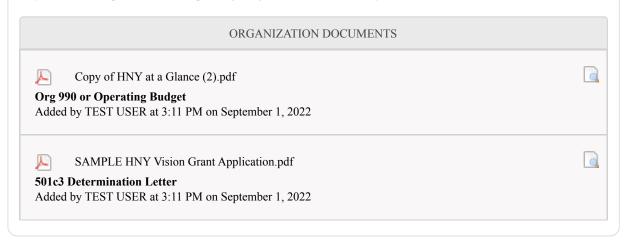
REQUEST DOCUMENTS

Required Organization Documents:

If these have not already been uploaded for your organization, please upload the following:

• **501c3 Determination Letter:** Upload the 501(c)3 Designation Letter for the Applying Organization. Municipalities and Tribal Governments may provide alternative documentation of their tax-exempt status.

• Org 990 or Operating Budget: Upload the Applying Organization's most recent 990. If the Applying Organization only files a 990-N, please attach an operating budget for the current fiscal year instead.



▼ Certification

By selecting yes below, you certify the the information in this application is complete and accurate. You certify that the applying organization has not been suspended or debarred, and that it is not delinquent on federal debt.

If granted, you will comply with NEH nondiscrimination statutes and all other NEH requirements. You will provide HNY with the organization's unique entity identifier (currently a DUNS number), if it is not already on record.

Certification

Entering the full name of the Authorizing Official below constitutes a digital signature. The signatory must be an officer of the Applying Organization who is authorized to submit this application for funding (such as the Project Director, Fiscal Officer, President, Vice President, Executive Director, or Chancellor) who agrees to the certification above.

Authorizing Official Name:

Authorizing Official Title:

Certification Date:

Please note: The portal does not autosave; therefore, you must click the **Save** button to ensure your data will not be lost. Once saved, and you are ready to submit the application or any revision requests, select **Submit** or **Re-Submit**.