



GENERAL OPERATING GRANT APPLICATION

Welcome to the NAMMM Foundation's Global Grantmaking application process.

To prepare your proposal, we recommend reviewing this PDF in its entirety prior to starting the proposal online. You may use this document as a working copy for your narrative, then copy and paste into the portal. To ensure a strong and competitive application, we recommend following all the instructions provided carefully. Proposals must be submitted through the online grant portal.

Questions regarding technical support for the portal or the grantmaking or application process can be directed to: info@nammfoundation.org.

GENERAL

Legal Name of Organization:

DBA (Doing Business As) (if applicable):

EIN (Employee Identification Number):

Year Organization Founded:

Mission Statement:

Does your organization have a strategic plan or equivalent? () Yes () No. If not, please explain why.

Geographic area(s) served by your organization:

Number of employees: () Full Time () Part Time

Using a fiscal sponsor? () Yes () No. If yes, please enter the name of the fiscal sponsor.

CONTACT INFORMATION

Name of CEO or Executive Director:

Name and title of person completing this application, if different:

Address:

City:

State:

Zip:

Country:

Email:

Phone:

Website:

Address:

DEMOGRAPHICS

For the Foundation to fully understand the communities your program will serve, please indicate which categories represent **50% or more** of your organization's beneficiaries.

Age (you may select more than one category)

0-4

5-12

13-18

19-64

65+

Unknown

Another Age (please specify):

Ethnicity

Hispanic or Latino

Not Hispanic or Latino

Unknown

Another Ethnicity (please specify):

Race (you may select more than one category)

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Unknown

Another Race (please specify):

Income Level

Live below the federal poverty threshold

Live above the federal poverty threshold

Unknown

Diverse Abilities

Beneficiaries live with disabilities

Beneficiaries do not live with disabilities

Unknown

Gender & Gender Identity (you may select more than one category)

Male

Female

Nonbinary/Gender Diverse

Transgender

Unknown

Another Gender or Gender Identity (please specify):

Veteran Status

Beneficiaries are Veterans

Beneficiaries are not Veterans

Unknown

GRANT REQUEST INFORMATION SUMMARY

Amount of Request:

Industry Segment Alignment (Select all that apply):

- Band/Orchestra (wind, strings, large/small ensembles)
- Electronic & Recording
- Fretted Instruments
- Keyboard
- Percussion
- Printed & Digital Music
- Pro Audio & Lighting
- Other Genre

FINANCIAL

Complete the following fields using data from the most recently completed audit. Do not enter current fiscal year projected amounts:

Current Fiscal Year End Date:

Total Budgeted Operating Revenue for the Current Fiscal Year:

Total Budgeting Operating Expenses for the Current Fiscal Year:

Fiscal Year-End Date of Most Recently Completed Audit:

Total Revenue:

Total Expense:

Total Assets:

Total Liabilities:

Financial Narrative: Explain any significant changes or concerns identified in the most recently completed audited financial statements. Explain if the organization has excessive liabilities, expenses exceeded revenues, and/or any legal, fiduciary, or accountability/control issues highlighted in the auditor's notes. If none, type, "none."

NARRATIVE

Organizational Experience

Describe the organization's experience in music-focused program design. Include the length of time, services and programs offered, and a summary of the successes and challenges of doing similar work.

Goals and Objectives

- Service location of the work.
- The number of individuals served.
- The demographics of individuals served.
- Frequency, and duration of interaction with proposed beneficiaries.
- Describe the organization's strategic goals and how its work during the grant period will help achieve these goals.
- Explain how your organization's beneficiaries are a historically underserved population in the music industry.
- What are the expected positive outcomes for beneficiaries because of your organization's work?
- If your work involves a partnership with other organizations, describe how the organizations will collaborate.
- What are your plans to maintain and grow your organization beyond the grant period?
- How will you diversify, and/or increase, your funding sources, or other capacity areas, to ensure long-term financial stability?
- Please describe your board's level of involvement in the organization. For example, does the board follow good governance and policy practices, commit to self-evaluation and term limits, and do 100% of board members contribute financially to the organization?

Evaluation

- Describe the organization's overall approach to evaluation.
- How will the impact be measured during the grant period?
- Summarize past evaluation results that demonstrate the program's historical effectiveness, including the time frame for the results or findings. Will your evaluation practices change during the grant period? If so, how?
- For new organizations, describe your evaluation plan.

Inclusiveness

- Describe how the organization strives to be inclusive in its programs, staff, board, and volunteers, and describe the progress to date.

ATTACHMENTS

- Budget for current fiscal year, including an itemized list of other institutions (foundations, corporations, government entities) funding this program.
- Most recently completed audited financial statements.
- IRS 501(c)(3) designation letter, or international equivalent.
- Most recently filed IRS 990.
- Board of directors list with professional affiliations.
- Strategic plan, or equivalent.
- Board governance documents such as committee structure and descriptions, board member expectations, etc.
- Supporting Documentation: Upload up to three documents that will help us understand your program better.

ADDITIONAL ATTACHMENTS FOR ORGANIZATIONS USING A FISCAL SPONSOR

- The Memorandum of Understanding (MOU) or the contract between the organization and the fiscal sponsor.
- Attach the following for the fiscal sponsor:
 - Most recently completed audited financial statement.
 - Operating budget for the current fiscal year.
 - Most recently filed IRS 990.
 - IRS 501(c)(3) designation letter.
 - Board of directors list with professional affiliation.

Document names should be short descriptive and easily identifiable by Foundation staff.

Financial statements should include the date as part of the document name (i.e., Statement of Activities 6/30/2024) for easy reference.