Minnesota Humanities Center

Minnesota Humanities Center
Legacy Funding 2025-2027
Community Identity and Heritage: Cultural Heritage (Year 2)
Organizations

Eligibility Form

Do you or your organization reside in MN?

☐ Yes ☐ No

Are you requesting more than $300,000?

☐ Yes ☐ No

Are you requesting funding for a project that works to create, celebrate, and teach the art, culture, and heritage of the many diverse cultural groups that make up Minnesota?

☐ Yes ☐ No

This funding cannot be used for the following:

- Cover costs incurred before the grant agreement is fully signed,
- Start, match, add, or complete any type of capital campaign,
- Support capital costs (such as improvements, construction, property, or equipment),
- Support benefits and fundraisers,
- Purchase promotional giveaway items such as t-shirts, keychains,
- Fund out-of-state expenses, such as out-of-state travel and lodging and contractor expenses,
- Pay for indirect costs or overhead charges not directly related to the activities outlined in the project proposal,
- Food expenses when expenses are either (i) incurred during the planning phase of the project, or (ii) are not essential to the final program,
- Wages, salary, and benefits of staff for the time that such individuals are not working on the project, and
- Cash payments,

Will the funding you are requesting be used for any of the activities listed above?

☐ Yes ☐ No

Will you be using this funding to pay for out-of-state expenses?

☐ Yes ☐ No

Will you be using this funding for new work or new additions to existing work?

☐ Yes ☐ No

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Application

Organization Contact Information

Organization

Organization Name

Legal Name (if different than above)

Address

City | State | Postal Code

Tax ID | Phone

Website

Board List

Please list your board members and their board position (if applicable) in parenthesis. For example, Tom Smith (President).

Organization Budget

Please attach a copy of your most recent budget.

Organization Chart

Please attach a copy of your organizational chart.

Authorized Representative

The Authorized Representative is defined as the person who has legal authority to sign the grant agreement, and any later amendments, on behalf of the organization.

First Name | Last Name

Title

Phone | Ext. | Mobile Phone

E-Mail

Project Manager

The Project manager is defined as the person responsible for overseeing the project and which MHC should be in regular communication with to obtain updates on the project.

Complete the following section <u>ONLY</u> if the project manager is different from the Authorized Representative.

First Name	Last Name	
Title		
Phone	Ext.	Mobile Phone
Email		

Fiscal Sponsor

You have entered into a fiscal sponsor agreement if you have agreed to use a nonprofit tax-exempt organization to accept Legacy funds on your behalf or accept legal and/or financial responsibility on your behalf.

Do you have a fiscal sponsor?

☐ Yes ☐ No

Complete this section <u>ONLY</u> if you will be using a fiscal sponsor.

Organization Name		
Address		
City	State	Postal Code
Tax ID	Website	
Contact Name		
Contact Phone	Contact Email	

Fiscal Sponsorship Agreement

Please attach a copy of your Fiscal Sponsorship agreement.

Project Overview

Project Name
The Minnesota Humanities Center will use this title when referencing this grant, including reporting on the Legacy website.

Project Start Date (mm/dd/yyyy) This date is an estimate only. The actual project start date will be when a grant agreement is fully signed.	***Project End Date*** (mm/dd/yyyy) Project activities must be completed on or before December 31, 2027. Grant reporting must be completed no later than January 31, 2028.

Priority Consideration

The Minnesota Legislature identified the following within the legislation to be given priority consideration:

- Art from the Inside
- Arts programs in the Moorhead cultural mall
- Arts programs in the Maplewood cultural mall
- Asian Economic Development Association
- Capri Theater
- Minnesota State Band
- Fight for Your Dreams
- HIRPHA International for Oromo youth programs
- Hmong Cultural Center
- Midnimo
- MN Zej Zog
- People in Action
- Phyllis Wheatley Community Center
- Safe Summer Nights
- Siengkane Lao, MN
- Stairstep Foundation
- Walker West Music Academy

Are you applying under any of the above named priority considerations?

☐ Yes ☐ No

Which priority consideration are you applying under? (Answer this question only if you answered yes to the previous question, you may select multiple):

☐ Art from the Inside
☐ Arts programs in the Moorhead cultural mall
☐ Arts programs in the Maplewood cultural mall
☐ Asian Economic Development Association
☐ Capri Theater
☐ Minnesota State Band

- ☐ Fight for Your Dreams
- ☐ HIRPHA International for Oromo youth programs
- ☐ Hmong Cultural Center
- ☐ Midnimo
- ☐ MN Zej Zog
- ☐ People in Action
- ☐ Phyllis Wheatley Community Center
- ☐ Safe Summer Nights
- ☐ Siengkane Lao, MN
- ☐ Stairstep Foundation
- ☐ Walker West Music Academy

Project Overview

Please describe your project, the specific activities that will be completed with the funding requested, and its impact upon your intended audience and the people living in Minnesota.

Max word count: 500

Project Alignment

Please identify and describe how your project aligns with one or more of the following.

☐ Preserve and honor the cultural heritage of Minnesota.

Max word count: 500

☐ Provide education and student outreach on cultural diversity.

Max word count: 500

☐ Support the development of culturally diverse humanities programming, including arts programming.

Max word count: 500

☐ Empower communities in building identity and culture, including, preserving and honoring communities whose Indigenous cultures are endangered or disappearing.

Max word count: 500

Select which community or communities your project benefits? To select multiple options, click each choice individually. This helps us track project impact across communities.

- ☐ Asian and Pacific Island communities
- ☐ Somali diaspora and other African immigrant communities
- ☐ Indigenous communities with a focus on the 11 Tribes in Minnesota
- ☐ African American community
- ☐ Latinx community
- ☐ LGBTQIA+ community
- ☐ Other underrepresented cultural groups
- ☐ Multiple communities served
- ☐ None

Does your project specifically support any of the following communities named in the legislation? This helps us to track projects in line with legislative intent.

- ☐ Indigenous organizations
- ☐ Communities whose culture and heritage have been historically underrepresented
- ☐ Recent immigrant communities
- ☐ Veterans
- ☐ None of the above

Community Involvement

Please identify the stakeholders that were involved in developing your project, how you reached out to them, how you incorporated the ideas of the stakeholders in the project, and how stakeholders will be involved going forward.

Max word count: 500

Proposed Measurable Outcomes

Please list your measurable outcomes for this project. Who or what is expected to change as a result of the grant? If you accomplish your planned activities as proposed, what outcomes are you hoping to see, that can be measured/tracked? (Note: this section will be used on the Legacy reporting website)

Max word count: 500

Evaluation & Impact

Please identify the following: 1) intended audience and impact, 2) how the success of your project will be defined and measured, and 3) who will evaluate the success of your project.

Max word count: 500

Project Management

Please describe how the project manager will ensure that the project is completed on a timely basis, that expenses and hours worked by staff are correctly reported, and the goals for the project will be achieved.

Max word count: 500

Project Compliance

Legacy funding only supports the creation of new work or new additions to existing work. Please describe how this project constitutes new work or a new addition or component to your existing work and programming.

Max word count: 500

Counties Served **(select all that apply)**

☐ All Counties	☐ Faribault	☐ Marshall	☐ Rice
☐ Aitkin	☐ Fillmore	☐ Martin	☐ Rock
☐ Anoka	☐ Freeborn	☐ McLeod	☐ Roseau
☐ Becker	☐ Goodhue	☐ Meeker	☐ Saint Louis
☐ Beltrami	☐ Grant	☐ Mille Lacs	☐ Scott
☐ Benton	☐ Hennepin	☐ Morrison	☐ Sherburne
☐ Big Stone	☐ Houston	☐ Mower	☐ Sibley
☐ Blue Earth	☐ Hubbard	☐ Murray	☐ Stearns
☐ Brown	☐ Isanti	☐ Nicollet	☐ Steele
☐ Carlton	☐ Itasca	☐ Nobles	☐ Stevens
☐ Carver	☐ Jackson	☐ Norman	☐ Swift
☐ Cass	☐ Kanabec	☐ Olmsted	☐ Todd
☐ Chippewa	☐ Kandiyohi	☐ Otter Tail	☐ Traverse
☐ Chisago	☐ Kittson	☐ Pennington	☐ Wabasha
☐ Clay	☐ Koochiching	☐ Pine	☐ Wadena
☐ Clearwater	☐ Lac Qui Parle	☐ Pipestone	☐ Waseca
☐ Cook	☐ Lake	☐ Polk	☐ Washington
☐ Cottonwood	☐ Lake Of The Woods	☐ Pope	☐ Watonwan
☐ Crow Wing	☐ Le Sueur	☐ Ramsey	☐ Wilkin
☐ Dakota	☐ Lincoln	☐ Red Lake	☐ Winona
☐ Dodge	☐ Lyon	☐ Redwood	☐ Wright
☐ Douglas	☐ Mahnomen	☐ Renville	☐ Yellow Medicine

Subject

Please check the subject(s) below that best describes your project. This information will be reported on the Legacy reporting website

☐ Archeology	☐ Education/Outreach
☐ Arts	☐ Historic Preservation
☐ Arts Access	☐ History
☐ Cultural Heritage Preservation	

Activity

Please select the activity type that best describes your project. This information will be reported on the Legacy reporting website.

☐ Analysis/Interpretation	☐ Education/Outreach/ Engagement
☐ Assessment/Evaluation	☐ Planning
☐ Demonstration/Pilot Project	☐ Preservation
☐ Digitization/Online Information Access	☐ Research

Budget

Budget Template

Please complete and attach MHC's budget template. Budgets will only be accepted using MHC's budget template. The budget template can be found on MHC's website where you accessed this application. If you have questions, please feel free to contact MHC staff.

As a reminder, Legacy prohibits funds from being used to:

- Cover costs incurred before the grant agreement is fully signed,
- Start, match, add, or complete any type of capital campaign,
- Support capital costs (such as improvements, construction, property, or equipment),
- Support benefits and fundraisers,
- Purchase promotional giveaway items such as t-shirts, keychains,
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- project proposal,
- Food expenses when expenses are either (i) incurred during the planning phase of the project,
- or (ii) are not essential to the final program,
- Wages, salary, and benefits of staff for the time that such individuals are not working on the
- project, and
- Cash payments.

Payment to vendors must be paid by electronic fund transfer or check with payee noted.

Provide the budget totals for the following categories:	
Personnel/ Staff	Contractors
Print, Media, and Promotional Materials	Supplies and Equipment - Purchased
Rental Costs (non-overhead)	Food/ Meals
Transportation and Lodging	Administrative and Support costs
Total Amount Requested	Other Funding Sources

Full Time Equivalents

How many FTEs (Full Time Equivalents) will be funded with this grant? The number of FTEs and Independent Contractors working on the grant project will be reported on the Legacy website.

For example: 0.5 (50%) of one staff person, and 0.35 (35%) of another = 0.85 total FTEs

Grant Payments

Minnesota law, as enforced by the Department of Administration, provides the manner in which MHC may issue payments to grantees. You may select between Reimbursement or Advanced Payment models.

Reimbursement

Reimbursement is the preferred and default method of payment under state guidelines. Under the Reimbursement model, upon the grantee providing information that expenses have been incurred, MHC will forward funding reimbursement to the Grantee for the total amount spent per payment request.

Advance

Grantees may also receive a partial advance under Minnesota law. Under the Advance model, the grantee may receive the following partial advance depending on the amount of the grant:

- If grant is $10,000 or less, the maximum that can be advanced is 75%
- If the grant is more than $10,000 but less than $50,000, the maximum that can be advanced is 50%
- If the grant is more than $50,000, the maximum that can be advanced is 25%

Those who choose the advanced payment model will receive advanced payments at a fixed amount. For example, if a Grantee is on a 20% advance payment model and receives a grant award of $1,000 then they will receive $200 per each payment request. Grantees will not receive any additional funding under their grant until a financial reconciliation has occurred. Advances may only be

provided under Minnesota law to Grantees who do not have a history of late reports, poor performance, or financial risk.
Upon completion of a grant, MHC conducts a financial review of the expenses incurred by the grantee. Minnesota law requires MHC to conduct a more in-depth financial review of the expenses of grantees that obtain an advance.

Please select your preferred payment model below.

☐ Reimbursement	☐ Advanced

Complete the following question ONLY if you wish to pursue obtaining an advance.

Please identify the amount of advance funding that you wish to request and provide a brief explanation as to the need for the advanced payment. As there is no guarantee that you will be eligible to receive an advance, please also indicate in your request whether you will be able to pursue the project if you are denied an advance.

Max word count: 500

Financial Review

Complete this section ONLY if you are requesting funds $50,000 or more.
Please check the box below to indicate your organization's annual income and provide the corresponding financial document to MHC.

- ☐ Board Approved Financial Statement (Organization annual income under $50,000 and no IRS Form 990)
- ☐ IRS Form 990 (Organization annual income under $750,000)
- ☐ Certified Financial Audit (Organization annual income over $750,000)

Financial Information

Please attach the financial document you identified above. (If you have a Fiscal Sponsor, please include their financial documents).

Certifications & Acknowledgement

I certify that the money for this grant will be spent as indicated within this grant application and consistent with Minnesota law.

☐ I agree ☐ I do not agree

I certify that these grant funds will be used to supplement and not substitute traditional sources of funding.

☐ I agree ☐ I do not agree

I certify that funds will not be spent on: activities unless they are directly related to and necessary for the project; indirect costs or other institutional overhead charges that are not directly related and proportional to, and necessary for, the activities outlined in the project proposal; fundraising; lobbyists and/or political contributions; bad debts, late payment fees, finance charges, or contingency funds; parking or traffic violations; promotional giveaway items; or out of state transportation.

☐ I agree ☐ I do not agree

I certify that that if awarded, none of the applicant's current principals have been convicted of a felony financial crime in the past 10 years. Principal is defined as a public official, board member, or staff with authority to access grant funds or determine how funds are used.

☐ I agree ☐ I do not agree

I certify that if awarded funding, the applicant is in good standing with the Minnesota Secretary of State as required by MN statutes, Chapter 317A.

☐ I agree ☐ I do not agree

I certify that if awarded, contact information will be clearly posted on the applicant's website for the applicants leadership and the employee or other person who directly manages and oversees the grant for the applicant. "Contact Information" means a telephone number, email address, or business address. "Leadership" means the applicants top administrative person, such as an Executive Director, President, or CEO.

☐ I agree ☐ I do not agree

I certify that if awarded, all grant documentation will be saved and archived for at least six years from the end date of the project.

☐ I agree ☐ I do not agree

Did you attend or watch a recording of an information session for this grant opportunity?

☐ Yes ☐ No

Enter your full name, business title, and the date of submission.
(e.g., Emi Sakura, Executive Director, December 1, 2020)

Full Name	Business Title	Date of submission

By signing above and selecting "I agree" below, you certify that the statements contained in this application are true and correct to the best of your knowledge and belief.

☐ I agree ☐ I do not agree