

**ARTS COUNCIL OF HILLSBOROUGH COUNTY**  
**2019-20 CULTURAL DEVELOPMENT GRANT PROGRAM**  
**ELIGIBILITY QUIZ**

Organization Name (legal name):

Federal ID#:

Principal Office Address (no P.O. Boxes, include city, state, zip):

Mailing Address (if different):

Phone (with extension):

Website:

***Applicants must read the Program Guidelines carefully to answer the following.***

- Yes  No Our principal office address as recorded with the Florida Division of Corporations is in Hillsborough County.
- Yes  No Our programs, services and events are open to the public and benefit the residents of Hillsborough County
- Yes  No At least fifty percent of our events in the 12 months prior to application occurred in Hillsborough County (count multiple presentations of the same program or a touring production as a single event).
- Yes  No Our organization can provide a complete copy of the most recently filed (within 18 months of application date) IRS Form 990 or IRS Form 990EZ. (NOTE: 990 Postcard filings are not accepted.)
- True  False Our organization does NOT receive program funding directly from the Hillsborough County Board of County Commissioners or the Tourist Development Council (does not include capital project funds).
- Yes  No Our organization is able to provide a dollar-for-dollar match for the grant amount requested.

What is the organization revenue reported on your last IRS Form 990 (refer to Part 1, Line 12) or 990EZ (refer to Part 1, Line 9)?

- Under \$100,000 – You are Funding Level 1
- \$100,000 - \$399,999 You are Funding Level 2
- More than \$399,999 – You are Funding Level 3

## LEVEL 1 – ADDITIONAL REQUIREMENTS

- Yes  No Our organization has been registered as a nonprofit, Florida corporation with the Florida Division of Corporations for at least **one year** at the time of application.
- Yes  No Our organization has had tax-exempt status as determined by the IRS code, section 501c(3) for at least **one year** at the time of application and is **good standing**.
- Yes  No Our organization has completed at least **one** full season of programming\* in Hillsborough County in the **12** months prior to application.

## LEVELS 2 & 3 – ADDITIONAL REQUIREMENTS

- Yes  No Our organization has been registered as a nonprofit, Florida corporation with the Florida Division of Corporations for at least **two years** at the time of application.
- Yes  No Our organization has had tax-exempt status as determined by the IRS code, section 501c(3) for at least **two years** at the time of application and is good standing.
- Yes  No Our organization has completed at least **two** full seasons of programming\* in Hillsborough County in the **24** months prior to application.

\*A full season is comprised of at least three unique events with paid attendance. Museums/galleries excluded.