Staffing Recovery 2023

Massachusetts Foundation for the Humanities

Organization Staffing Information

Non-profit Status
Choose the description that best matches the organization applying for this grant.

Choices
My organization is a currently tax-exempt 501(c)(3).
My organization is a state or federally recognized tribe.
My organization is not a 501(c)(3) but it is fiscally sponsored by a currently tax-exempt 501(c)(3)
My organization does not match any of the above (it may not be eligible).

Non-profit "Other"
If your organization did not match any of the descriptions above, please tell us about it.

Character Limit: 250

Cultural Recovery Funds Awarded*
Enter the amount of funds the organization was awarded from Mass Cultural Council’s Cultural Sector Recovery Grant or from Chapter 102 of the Acts of 2021§1599-2043

If the organization was not awarded funds from MCC's Cultural Sector Recovery Grant or from Chapter 102 of the Acts of 2021§1599-2043 enter "0". This opportunity prioritizes organizations that have not received any funding from Mass Cultural Council’s Cultural Sector Recovery Grant program or other line item in Chapter 102 of the Acts of 2021§1599-2043

Organizations that were awarded more than $25,000 from Mass Cultural Council’s Cultural Sector Recovery Grant program or through Chapter 102 of the Acts of 2021 (COVID-19 recovery) are not eligible for this opportunity.

Character Limit: 20

Project Name*
Please write Staffing Recovery and the name of your organization. For Example, “Staffing Recovery - Example Organization"

Character Limit: 100

Annual Operating Expenses*

Eligible organizations have annual operating expenses no larger than $500,000.

Enter the annual operating expenses most recently reported on your IRS 990 or in your most recently completed fiscal year. If you file a 990N, enter your cash expenses for fiscal year 2022.
If your organization is fiscally sponsored, enter the expense of your program only, not including expenses of your fiscal sponsor's other operations.

Organizations that have received a single, one time capital (non-operations) grant that puts the annual budget over the $500,000 threshold are still eligible. If this applies to your organization, please describe in the Staffing Needs narrative question below.

Character Limit: 20

**Current Staffing Level***
How many Full Time Equivalent (FTE) employees does your organization currently have? Eligible organizations must have five or fewer FTE.

To calculate the FTE, take the total number of paid hours worked weekly by your staff and divide it by 40 (40 hours is considered full-time for this application). For example, if your organization has a director who works 40 hours a week and a part-time program manager who works 20 hours a week, your FTE would be 1.5. Enter your answer as #.#. Example 1.50

Organizations that employed seasonal employees that exceeded five employees for 120 days or less in 2022 are still eligible, as long as the organization had five or fewer employees for the remainder of the year and are within the operational budget threshold. If this applies to your organization please explain in the Staffing Needs narrative question below.

Character Limit: 20

**Organization Type***
Select the description that best fits your organization.
Eligible organizations include museums, historical societies and community cultural organizations with humanities programs. If you are not one of these types of organizations, you may be ineligible.

**Choices**
- Historical Society
- Education non-profit
- Community Cultural Organization
- Youth Services Organization
- Community Services Organization
- Archive
- Community Organization or Center
- Cultural Heritage Organization
- Historical Site/House
- Indigenous Tribal Organization or Community
- Media Organization
- Membership Organization or Association
- Museum – Art
- Museum – History
Museum – Other
Other - If other organization type, please explain.

**Organization Type Other**
If you select "other" type, please explain.

*Character Limit: 250*

**Organization Mission and Work**
Enter your organization’s mission statement and provide an overview of the range of things your organization does.

*Character Limit: 4000*

**Staffing Needs Statement**
1. What are your staffing needs in order to support your organizations' humanities work?
2. How was this need determined?
3. How would staffing support help your organization better meet its mission and goals?
4. How would the grant help your organization or community recover from the pandemic?

*Character Limit: 4000*

**Use of Funds**
How do you plan to use the funds if you are awarded the grant?

Please provide these details:
1) What activities will the position(s) undertake over the grant period?
2) How did you determine the wage rate for this position?

*Character Limit: 4000*

**Humanities Component**
Select the descriptions(s) that best match the humanities activities that will be supported through the proposed staffing support. Select all that apply,

**Choices**
- Cultural and/or oral-history storytelling
- Historical and/or cultural exhibitions, presentations, discussions,
- Historical and/or cultural tours
- Programs that educate about culture and traditions
- Community conversations about values, identity, and big questions about the world we live in
- Education or conversation about books, theater, music, art, media, or history
- Education or conversation about community issues and government
- Education about democracy, ethics, or philosophy
- Other public programs that feature the humanities at its core (describe below)

**Humanities Component Other**
*Character Limit: 250*
**Program(s) Description**
Describe the humanities program(s) would be supported through this grant.

Address the following:
1) What the target audience is and what participants in the program(s) do.
2) How many often are these programs are offered.
3) How are humanities subjects or methods important to the program and/or the participants' experiences.
4) What are your goals for this program? What do you hope this programing will achieve?

*Character Limit: 5000*

**Open to public beyond 4-year college students**
To be eligible the organization's humanities programs must be accessible to the public beyond 4-year college students.

**Choices**
Yes, the programs offered are open to the general public beyond 4-year college students.
No, the programs offered are not open to the public (not eligible)

**What will be the cost(s) for participants in grant supported programming?**
To be eligible, proposed programs need to be free or low-cost to participants. Please select what range the cost to participate in your humanities programs is. If you have multiple programs costs in multiple ranges, select multiple ranges.

**Choices**
Free
$0-$10
$11-$25
Over $25

**Total Anticipated Audience/Participants**
Enter the sum total of audience members/participants you think will attend your grant-related event(s) or program(s) over two years.

*Character Limit: 10*

---

**Grant Priorities**

**Priority Municipalities**
Mass Humanities is prioritizing these municipalities for this grant. If your organization is located in one of these priority municipalities please select it from the list.

**Choices**
Adams
Amherst
Athol
Becket
Bernardston
Blandford
Brockton
Buckland
Carver
Charlemont
Chelsea
Chesterfield
Chicopee
Clinton
Colrain
Cummington
Edgartown
Erving
Everett
Fall River
Fitchburg
Florida
Gardner
Gosnold
Greenfield
Hancock
Hardwick
Haverhill
Hawley
Holyoke
Huntington
Lawrence
Leominster
Leverett
Lowell
Lynn
Malden
Marion
Methuen
Middlefield
Monroe
Montague
Mt. Washington
New Ashford
New Bedford
New Salem
North Adams
Northampton
Oak Bluffs
Orange
Palmer
Peru
Petersham
Pittsfield
Plainfield
Provincetown
Quincy
Revere
Rowe
Salem
Savoy
Somerville
Southbridge
Springfield
Stockbridge
Sunderland
Taunton
Templeton
Tisbury
Truro
Ware
Wareham
Warwick
Washington
Webster
Wellfleet
Wendell
West Brookfield
West Springfield
Westfield
Worcester
Location not listed

Priority Programs: This grant prioritizes humanities programs that serve historically excluded communities and programs that involve the community that they serve in creation, implementation, or oversight of their programs.

Please use the questions below to indicate if your programming prioritizes any historically excluded communities and how that community is involved in the planning and oversight of the program.

Community Served*
Is your project or program primarily designed to serve any of the following communities? To primarily serve is to chiefly or mainly serve this community before others.

Note: We recognize that many communities identify across these categories or do not fit neatly into them. Please check no more than four categories.
**Choices**
Senior with limited access or mobility
Rural Communities with limited access to humanities institutions and programming
LGBTQIA Communities
Indigenous Communities
Latinx Communities
Asian, Asian American, Pacific Islander, or South East Asian Communities
Immigrants and/or Refugees
Members of Low-Income Communities and Families
Veterans
People who are or have been incarcerated
People without housing
People with disabilities
People living with addiction or mental illness.
Other communities vulnerable to persistent inequality (please note in your answers below)
No, it does not primarily serve any of the communities listed.

**Communities Served - Other**
If you selected "Other communities" above, please provide more detail below.
*Character Limit: 250*

**Community Involvement***
How does the organization involve the community that you serve in the creation, implementation, or oversight of your programs?
*Character Limit: 4000*

**Budget**

**Total Amount Requested***
Enter the total requested amount. Amount must be between $14,000 and $40,000. Use whole dollar amounts only.
*Character Limit: 20*

**Staffing Request Budget***
Please write out each position title, the amount you are requesting to support that position, the percent of that position’s total annual wage you are requesting funds for, and the amount of time the amount will be used. Keep in mind that the grant period is from June 2023 through June 2025.

*Example:
Program Director - $20,000 (10% of total annual wage of $100,000 for two years).*
Part-time Development Coordinator - $10,000 (100% of total annual wage for one year).
Total Request Amount = $30,000

Character Limit: 1000

Additional Income Sources
Matching funds or Additionally Raised Funds are not required for this grant opportunity, however if your organization is planning to use additional funds to supplement the cost of the positions above, please list that income and its source.

Example:
Sample Foundation Grant - $10,000
Admissions Income - $1,000
Individual Donations - $1,000
Total Additional Income = $12,000

Character Limit: 1000

Fiscal Sponsor - Only for Fiscally Sponsored Programs

Fiscal Sponsor questions below are only required for non-501c3 applicants using fiscal sponsors.

Fiscally sponsored applicants: Ad-hoc groups, and non-profit organizations without 501(c)(3) status must have an eligible 501(c)(3) organization as their fiscal sponsor. Fiscal sponsors manage the grant funds and are identified in the application. They must also provide a signed fiscal sponsor agreement.

Fiscal Sponsor
Enter the legal name of your fiscal sponsor.

Character Limit: 250

Fiscal Sponsor Mailing Address
Enter the mailing address of your fiscal sponsor (Street Address or P.O. Box, City, Zip Code).
Note: if you are awarded a grant and choose to have a check mailed instead of direct deposit, it will be sent to this fiscal sponsor address.

Character Limit: 500

Fiscal Sponsor Agreement
Upload your agreement with your fiscal sponsor.

Note that finding a fiscal sponsor can take time and you need to have a Fiscal Sponsor
Agreement signed by the application deadline. Applicants should have an existing fiscal sponsor relationship prior to applying.

File Size Limit: 1 MB

Personnel
The program contact and authorizing official can be the same person

Program Contact First and Last Name*
The Program Contact organizes the program(s) and completes online reporting.
Character Limit: 100

Program Contact Position/Title
Character Limit: 100

Program Contact Address*
Provide a mailing address that includes the city, state, and zip code.
Character Limit: 250

Program Contact's Email*
Character Limit: 254

Program Contact's Daytime Phone Number(s)*
Character Limit: 100

The Authorizing Official is the person authorized to make legal contracts for the organization.

Authorizing Official's First and Last Name*
Enter the first and last name of the authorizing official for the applicant organization, or fiscal sponsor if the applicant is fiscally sponsored.
Character Limit: 100

Authorizing Official's Position/Title*
Enter the first and last name of the authorizing official for the applicant organization, or fiscal sponsor if the applicant is fiscally sponsored.
Character Limit: 125

Authorizing Official's Email Address*
Character Limit: 254
Uploading Tips

- You will be able to see that your document has been successfully uploaded only after you save the application.
- Each field accepts only one document. You can replace a document previously uploaded simply by uploading another file (there is no delete button).
- You may need to combine multiple documents prior to uploading. If they are all of the same type, such as Word, you can combine them in Word before uploading. If they are mixed formats, you may need to turn them into PDF files and then combine them into one file before uploading.
- Creating PDF files: If you need one, you can download a recommended free PDF creator.
- Combining PDF files: Instructions can be found here if you need to combine multiple PDF files into one file for uploading.

Note: If you do not have these documents in digital form, you may use the Fax-to-File service available in the Tools menu to get your documents in PDF format.

Operating Expenses Upload*

*Eligible organizations have annual operating expenses no larger than $500,000.*

Upload the first two pages of your most recently reported IRS 990 or completed fiscal year budget.

If your organization files a 990N, or if your organization is fiscally sponsored please submit your most recently completed fiscal year budget.

File Size Limit: 1 MB

Job Description*

Upload one document with the job description(s) that the organization is proposing for this grant.

File Size Limit: 1 MB

Resumes of Personnel

(Optional) Upload one document with the combined resumes of staff that would be increasing their time with the organization or new personnel the organization is planning on hiring. Resumes should include the person's relevant credentials, skills, publications and/or experiences. Each resume should be ONLY two pages long

File Size Limit: 2 MB

Org Chart

(Optional) Upload one document with your organization chart or "org chart". A diagram that displays a reporting or relationship hierarchy.
MH Equity Analysis

The following questions on organization leadership are for Mass Humanities equity analysis purposes only and will not be part of the scoring or review of your application.

Project/Program Leadership – Historically excluded communities A*
Does the project or program for which you are seeking funds currently have leadership from people who identify as Black, Indigenous, or as a person of color (including but not limited to, of Latinx, Asian, Pacific Islander, or South Asian descent or origin) in any of the following roles? Select all that apply.

Choices
Project Director
Program Director
Humanities Advisor
Lead Curator
Lead Designer
Community Engagement
Other leadership role (please describe below)
N/A - We do not have (or do not know if we have) project leads who identify as BIPOC

Project/Program Leadership – Historically excluded communities B*
Does your project or program for which you are seeking funds currently have leadership from people who identify as being of other historically excluded community, including but not limited to LGBTQIA+ or disabled. An individual included in the previous question may also be included here. Select all that apply.

Choices
Project Director
Program Director
Humanities Advisor
Lead Curator
Lead Designer
Community Engagement
Other leadership role (please describe below)
N/A - We do not have (or do not know if we have) project who identify this way.

Other Leadership Role

Character Limit: 100
Pre-Award Agreement

Pre-Award Agreement*

By selecting "I agree" below, I certify the following:

1. The statements contained herein are true, complete, and accurate to the best of my knowledge, and I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.

2. The applicant organization assumes all responsibilities as grantee and may not operate simply as a fiscal agent (though the applicant may itself have a fiscal sponsor).

3. Any funds granted as a result of this application will be used in accordance with the plans and budget described in this request; any significant changes in activities, personnel, or budget will require prior approval by Mass Humanities.

4. The applicant organization's Authorizing Official, who is empowered to accept the terms of an award agreement if a grant is made, certifies that the applicant organization agrees to submit a final grant report, including a final budget and information about the impact of these funds.

Choices

Yes, I agree.

Choices