(To be completed by City Staff)	Account Code:	CIF #:
STAR Tracking: 22-	Round: Two	Cultural District:



## **Attachment A**

## City of Saint Paul, Minnesota 2022 Round 2 Cultural Sales Tax Revitalization Program Organizational Development / Special Project Statement of Work

Project Title: Organization: Fiscal Sponsor (if any) Address:			
City:	State: MN	Zip:	
Project Manager:			
Phone:		Fax:	
Email:			
Federal ID No.:			
City of Saint Paul Project Manager:			
Phone:	Email:		
Project Location: Please list the address(es) of all events/performances/programs related to project.			
=	se list the address(es) o	f all events/performances/programs related to	
=	se list the address(es) o  Ward(s):	f all events/performances/programs related to	
project.	. ,	f all events/performances/programs related to	
project.	. ,	f all events/performances/programs related to  \$	
project.  District Council(s):	Ward(s):		
project.  District Council(s):  STAR Funds Awarded	Ward(s):	\$	

Note: These amounts should equal the budget totals on page A3

	Imary: In the space provided, please summarize your pro	oject and <b>state</b>
public programmir	Project Timeline: In the appropriate spaces below, lising dates (if applicable), and the overall project timeline.  aibit/Performance/Program Dates (If applicable):	t both the specific
Time Period	Activities to be Completed	Person Responsible
(Month / Year)		
From:		
То:		
From:		
То:		
From:		
То:		

## 3. Cultural STAR Project Budget:

Please fill in appropriate line items:

BUDGET CATEGORY *	STAR GRANT *	MATCHING FUNDS**	TOTAL PROJECT AMOUNT
Personnel (employee or contract)			
Artistic			
Administrative			
Supplies			
Supplies (provide details)			
Printing/Postage			
Facilities / Equipment			
Transportation			
Other (provide details)			
Marketing / Promotions			
Marketing / Promotions (provide details)			
ADA-related costs (e.g., sign language interpreters, signage, printing)			
Other (provide details)			
TOTALS			

<sup>\*</sup> Food and Beverage expenses are **not allowed** to be paid for by STAR grant funds.

**New Budget categories charged to STAR Grant Funds cannot be added later**. Only expenses from these categories will be approved in the final payment request.

Exact amounts between budget categories charged to STAR Grant Funds can move between lines, but new categories/budget lines cannot be added later.

<u>NOTE:</u> Documentation of every expense charged to STAR Grant funds will be required at the end of the project, in order to receive the final 20% payment of the grant funds. Documentation must include both of the following:

- 1. Invoices, receipts, artist/vendor contracts, payroll documents, etc. that document the following:
  - Amount due/paid
  - Date (dates eligible STAR expenditures may be incurred are 1/15/23-1/14/24)
  - Reference to Project name
- 2. How expenditure was paid, such as:
  - Copy of check used to pay expense
  - Bank or credit card statement
  - Receipts and some invoices may include payment method, in which case no additional proof of expenditure document is needed

4.	Matching Funds Sources**	*: Please include	only those	funds <u>direct</u>	<u>ly</u> related f	to your
	STAR activity.					

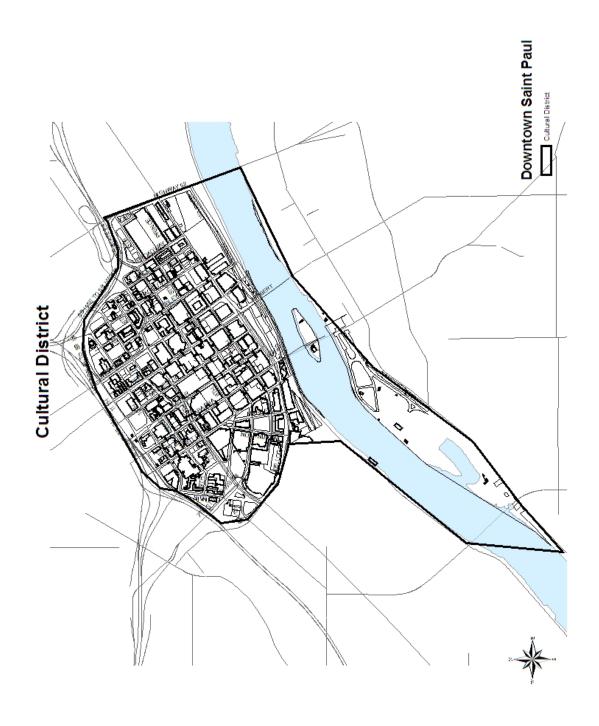
Description	Amount
Total	

<sup>\*\*</sup> Up to 30% of the required one-to-one match may be in in-kind services, and volunteer labor and sweat equity with a value of \$15.00 per hour

<u>NOTE:</u> Documentation showing receipt of income/revenue toward the project, totaling at least the one-to-one matching funds will be required at the end of the project, in order to receive the final 20% payment of the grant funds, such as:

- Copy of grant award letter(s) from other foundations or granting agencies
- Record of ticket sales
- Copy of sponsorship agreement(s)
- Statement signed by Board Chair or Treasurer showing funds restricted to project
- **5. W-9 Form\*\*\***: Submit a **signed** <u>W-9 Form</u>, and provide a contact person and their phone number and email address

<sup>\*\*\*</sup> Required only for new grantees to the City of Saint Paul, or if your organization has a new address. W-9 should be from the Fiscal Sponsor organization, if applicable.



**Project Map** (If the project is outside the Cultural District, insert a Saint Paul map showing the location of the project)