

# "HOW DO I GET MY MONEY?"

Arts Council Grants are not paid in advance. By state law, the Arts Council can only reimburse you for time that you have spent on your project.

**For Project grants:** You may submit your paperwork to receive a partial payment (up to 50%) if you have incurred project-related expenses and need to be reimbursed before finishing the project. The project must be completed before you submit paperwork for final payment.

**Fellowship Recipients:** The Arts Council will not make partial payments for fellowship recipients. Fellowships grant awardees can only receive payment after completing a community benefit and submitting paperwork and a final report.

**Payments:** Expect a processing time of 4-6 weeks from the date we receive your complete and correct materials until your check arrives. The Arts Council processes payments on a fiscal year basis. Please check the timeline with the Arts Council staff prior to submitting invoices. Processing time for materials submitted in May may take additional time due to the city's fiscal year closing on June 30th. In a similar instance, invoices sent in July may take additional time due to the reopening of a new fiscal year.

To receive a payment you must complete and submit the following. All forms are located on our website under "grants":

1. SAC LCC grant recipient award form. (Which can be found in Word on our SAC website)
2. A short (two paragraphs is fine) letter detailing what you accomplished.

Important: Please complete these two items and convert into a PDF, and email the two attachments to: hbalchunas@somervillema.gov

3. Return in the mail, to Heather Balchunas attention:

A/ Signed W-9 and;

B/ Support documentation that you publicized your project grant or community benefit project.

! RS W-9 FORM

Complete and return with materials. For whomever is getting paid, a complete W-9 is needed. Please keep in mind that the w-9 information needs to match the information submitted on the invoice.

SAC LCC GRANT RECIPIENT AWARD FORM

**PAGE ONE**

1. First page of form is about the person or organization who received the grant award.
2. Enter your grant award number.
3. Is this a request for payment to the awardee or a third party who did work toward the completion of the grant? Indicated who your payment request is for.
4. If you are an employee of the City of Somerville and your services are consistent with your job at the City (typically teachers) you will be paid through the City's payroll department. Other non-service expenses will be reimbursed to you with a check.

**PAGE TWO**

1. Page two information is specifically for the person or organization that will be paid. This can be for the grant recipient or a third party vendor. You may submit a third party vendor's invoice with your award form.

Any person getting paid MUST have a matching w-9. Please sign form and print clearly.

## FINAL REPORT LETTER

When asking for a final payment, you must include a final report. This can be brief and in the form of a letter to: Council Members. This report lets staff and Council members know how grant funds were used (i.e., what you did during the grant year).

## ACKNOWLEDGMENT OF GRANT/DOCUMENTATION OF WORK

You must acknowledge your grant publicly. This can be done through published materials or announcements related to your grant. You must use the SAC and MCC logos and/or the following credit line: "This program is supported in part by a grant from the Somerville Arts Council, a local agency supported by the Massachusetts Cultural Council."

There are a number of ways you can acknowledge your grant, including, but not limited to, press releases, flyers, posters, postcards and newsletters. We strongly encourage grant winners to announce grant-related exhibitions and performances on the Somerville Arts Council's list-serve.

The State requires that we verify the acknowledgment of funding, so you must include evidence of use of the logos and/or the credit line with your final reimbursement request (i.e.: poster, program, press clippings, book credit etc.). Please call if you have any questions.

## OTHER ITEMS

### IMPORTANT DATES

Your LCC grant period and activity follows a calendar year: January 1 to December 31. All paperwork must be submitted by January 31st the following year. If you wish to receive an extension, you must contact us in writing. Failure to adhere to these deadlines may result in the loss of your grant award.

### TAXES AND GRANT FUNDS

If you receive total payments from the City of Somerville for more than \$600 during a calendar year, you will receive a 1099 Form in February and this income is reported to the IRS. Even though there are no taxes taken out of your check, you may be responsible for taxes. Make sure you keep copies of expense receipts for your own tax records.

### QUESTIONS?

Call Heather Balchunas with specific questions. Please have your grant number and all paperwork in hand. (617) 625-6600 x2985 or [hbalchunas@somervillema.gov](mailto:hbalchunas@somervillema.gov)

# SOMERVILLE ARTS COUNCIL LCC GRANT RECEIPT AWARD FORM

**To:** Somerville Arts Council, 50 Evergreen Avenue, Somerville, MA 02145

**FROM:** (INDIVIDUAL OR ORGANIZATION WHO RECEIVED THE GRANT)

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Name

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Address

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City/State/Zip Code

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Daytime phone

**FOR:** Somerville Arts Council Grant # \_\_\_\_\_ (This # was on your award letter)

**This payment is for:**

A.  a progress payment

or

final payment

B.  for the grant award recipient above

or

for a third-party vendor

(complete name, address, service, and amount must be on next page or on invoice from vendor)

Are you a City of Somerville/School employee?  no  yes

(Which department or school) \_\_\_\_\_

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Signature of grant awardee/organizational contact

Date

**SOMERVILLE ARTS COUNCIL  
LCC GRANT INVOICE FORM**

**DATE:**

**To:** Somerville Arts Council, 50 Evergreen Avenue, Somerville, MA 02145

**FROM:** (INDIVIDUAL OR ORGANIZATION WHO WILL RECEIVE PAYMENT)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip Code

\_\_\_\_\_  
Daytime phone

**Re:** (please provide a short sentence/statement about the service provide for the grant; if a fellowship describe the community benefit)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total due:** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date