

## Opportunity Details

### Opportunity Information

Title

2022 Chief Standing Bear Film Program R2

Description

The Chief Standing Bear Film program is authorized and further described within Neb. Rev. Stat. §81-12,241. Pursuant to this statute, DED is to provide grants not to exceed \$5,000,000.00 for the purpose of producing a film on Chief Standing Bear, a portion of which is to be filmed in one or more qualified census tracts (QCT) located within the boundaries of a city of the metropolitan class.

Agency Contact Name

Gentri Shopp

Agency Contact Phone

402-471-4296

Agency Contact Email

gentri.shopp@nebraska.gov

Manager

Lydia Lassen

Additional Users

Public Link

<https://ne.amplifund.com/Public/Opportunities/Details/421411cd-3f80-491a-b36e-5052025e976c>

Is Published

Yes

### Funding Information

Opportunity Funding

\$5,000,000.00

### Award Information

Award Range

\$5,000,000.00 Ceiling

Matching Requirement

Yes

Cash Match Requirement

0.00%

Other Funding Requirement

### Submission Information

Submission Window

11/07/2022 9:00 AM - 11/14/2022 5:00 PM

Submission Timeline Type

One Time

Allow Multiple Applications

No

## Question Submission Information

Question Submission Additional Information

For program guidelines, please refer to: <https://opportunity.nebraska.gov/programs/recovery/chief-standing-bear-program/>

## Eligibility Information

## Additional Information

Additional Information URL

<https://opportunity.nebraska.gov/amplifund/>

Additional Information URL Description

Resources: General and Program specific user guides and videos can be found at <https://opportunity.nebraska.gov/amplifund/>. Statewide Relay System: Individuals, who are hearing and/or speech impaired and have a TTY, may contact the Department through the Statewide Relay System by calling (800) 833-7352 (TTY) or (800) 833-0920 (voice). The relay operator should be asked to call DED at (800) 426-6505 or (402) 471-3111.

## Project Information

### Application Information

Application Name

Award Requested

Cash Match Requirement

\$0.00

Cash Match Contributions

\$0.00

Total Award Budget

\$0.00

### Primary Contact Information

Name

Email Address

Address

Phone Number

## Project Description

### Part 01: Applicant, Contact and Preparer Information

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Primary Contact - Organization

Primary Contact - Phone Number

#### Applicant Information

***\*Please note: The Applicant Primary Contact Information is on the previous page, Project Information section. In this section, "Applicant" refers to the "Production Company".***

Name of Applicant Organization

**A UEI is required per your Program Manual. DED is aware of the delays with [SAM.gov](https://sam.gov) system as it relates to obtaining a UEI number. If Applicant's UEI number is pending, the Applicant will need to upload proof that it has applied for an UEI number. If Applicant is awarded funds, it must have a valid UEI number within 30 days of Award Date. Failure to have a valid UEI number within 30 days of the Award Date may cause the conditional award to be revoked.**

Is your UEI pending? If you already have a UEI number, choose "No". You will be asked to enter your UEI in a subsequent question.

- ☐ Yes  
☐ No

Unique Entity Identifier (UEI) (000000000000)

UPLOAD: Proof that you have applied for a UEI

Applicant - Phone Number (0000000000)

Applicant - Extension

Applicant - Address Line 1

Applicant - Address Line 2

Applicant - City

Applicant - State

Select an item... ▼

Applicant - Postal Code

Do you have a company website?

- ☐ Yes  
☐ No

Company Website

State where Incorporated or Registered

Select an item... ▼

Employer Identification Number (EIN) (000000000)

Type of Entity

- ☐ Sole Proprietorship
- ☐ LLC
- ☐ Partnership
- ☐ Corporation
- ☐ Other

Type of Entity: please specify...

Has Applicant ever been debarred, suspended, or otherwise excluded from federal assistance programs or activities?

- ☐ Yes
- ☐ No

Has Applicant been the subject of legal proceedings involving fraud, waste or misappropriation of funds within the last 10 years?

- ☐ Yes
- ☐ No

**If yes, disclose information about any and all proceedings involving the entity, its principles, or employees that are ongoing or reached final disposition within the most recent 10-years that:**

**1. Is or was in connection with the award or performance of a grant, cooperative agreement, or procurement contract from the State of Nebraska or the Federal Government; or**

**2. Is one of the following:**

- a. A criminal proceeding that resulted in a conviction under verdict or plea;**
- b. A civil proceeding that resulted in a finding of fault and liability and payment of a monetary fine, penalty, reimbursement, restitution, or damages;**
- c. An administrative proceeding that resulted in a finding of fault and liability and your payment of a fine, penalty, reimbursement, restitution, or damages;**
- d. A bankruptcy proceeding; or**
- e. Any other criminal, civil, or administrative proceeding if:**
  - (i) It could have led to an outcome described in paragraph 2(a)-(c) of this subsection;**
  - (ii) It had a different disposition arrived at by consent or compromise with or without an acknowledgment of fault on your part; and**
  - (iii) This requirement to disclose information about the proceeding does not conflict with applicable laws and regulations.**

Answer Here:

### Authorized Official

This individual is referred to as the Authorizer. They can approve decisions about the application or award, if applicable.

Authorizer First Name

Authorizer - First Name

Authorizer - Last Name

Authorizer - Title

Authorizer - Email Address

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### Preparer Information

***\*The Primary Contact Information is on the previous page, Project Information section. The Primary Contact is the main point of contact for this application.***

Is the Preparer organization different from the Applicant organization?

- ☐ Yes  
☐ No

Preparer Type

- ☐ Out State Consultant  
☐ In State Consultant  
☐ Nonprofit Organization  
☐ Economic Development District  
☐ Other

Preparer Type: please specify...

### Applicant Preparer Information

Application Preparer - Organization Name

Application Preparer - First Name

Application Preparer - Last Name

Application Preparer - Title

Application Preparer - Email Address

Application Preparer - Phone Number (0000000000)

Application Preparer - Extension

Application Preparer - Address Line 1

Application Preparer - Address Line 2

Application Preparer - City

Application Preparer - State

Select an item... ▼

Application Preparer - Postal Code



## Part 02: Production, Cast and Crew Information

### Production Information

Production Title

Please provide a brief synopsis of the production story line and explain how the figure of Chief Standing Bear is incorporated into the story:

UPLOAD: Please provide a copy of the screenplay/script.

Please specify the estimated dollar amount to be spent in in one or more qualified census tracts located within the boundaries of a city of the metropolitan class in the State of Nebraska:

Please use the Nebraska Qualified Census Tract map found here: <https://opportunity.nebraska.gov/programs/recovery/>

Zip Code	Qualified Census Tract Number	Estimated Dollar Expenditure

I have completed the table immediately above.

- ☐ The table is filled out to the best of my knowledge and ability.  
☐ I did not fill the table out and understand that at least one row is required for a complete application.

Please complete the following list of proposed Nebraska shooting locations:

City or County	State	Production Date/Range	Principal Photography Days	Notes

I have completed the table immediately above.

- ☐ The table is filled out to the best of my knowledge and ability.  
☐ I did not fill the table out and understand that at least one row is required for a complete application.



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**Please complete the following Estimated Principal Photography schedule:**

**1. Nebraska Qualified Census Tracts within the boundaries of a city of the metropolitan class in the State of Nebraska**

Principal Photography Days - Nebraska QCTs

0

% of Principal Photography - Nebraska QCTs

0.00%

**2. Other Nebraska locations**

Principal Photography Days - Other NE locations

0

% of Principal Photography - Other NE locations

0.00%

**3. Filming outside of Nebraska**

Principal Photography Days - Outside Nebraska

0

% of Principal Photography - Outside Nebraska

0.00%

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**Nebraska Cast and Crew Information**

Total Number of Crew Members

0

Number of Crew Members that are Nebraska Residents

0

Percentage of Crew Members that are Nebraska Residents

0.00%

Number of Cast Members

0

Number of Cast Members that are Nebraska Residents

0

Percentage of Cast Members that are Nebraska Residents

0.00%

Average # of NE Residents employed as cast or crew (per day) during pre-production

0

Average # of NE Residents employed as cast or crew (per day) during principal photography

0

Average # of NE Residents employed as cast or crew (per day) during post-production

0

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### Key Personnel

Director Name

Is the Director a Nebraska Resident?

- ☐ Yes  
☐ No

Executive Producer Name

Is the Executive Producer a Nebraska Resident?

- ☐ Yes  
☐ No

Producer Name

Is the Producer a Nebraska Resident?

- ☐ Yes  
☐ No

Line Producer Name

Is the Line Producer a Nebraska Resident?

- ☐ Yes  
☐ No

Location Manager Name

Is the Location Manager a Nebraska Resident

- ☐ Yes  
☐ No

Casting Director Name

Is the Casting Director a Nebraska Resident?

- ☐ Yes  
☐ No

Director of Photography Name

Is the Director of Photography a Nebraska Resident?

- ☐ Yes  
☐ No

Production Designer Name

Is the Production Designer a Nebraska Resident?

- ☐ Yes  
☐ No

Lead Actor Name(s)

Are the Lead Actor(s) Resident(s) of Nebraska?

- ☐ Yes  
☐ No

UPLOAD: Resumes for the Director(s) and Executive Producer(s)

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### Production Schedule

Pre-Production (In Nebraska) Start Date

Pre-Production (In Nebraska) End Date

Pre-Production (Total Production) Start Date

Pre-Production (Total Production) End Date

Production/Principal Photography (In Nebraska) Start Date

Production/Principal Photography (In Nebraska) End Date

Production/Principal Photography (Total Production) Start Date

Production/Principal Photography (Total Production) End Date

Additional Photography and Re-Shoots (In Nebraska) Start Date

Additional Photography and Re-Shoots (In Nebraska) End Date

Additional Photography and Re-Shoots (Total Production) Start Date

Additional Photography and Re-Shoots (Total Production) End Date

Post-Production (In Nebraska) Start Date

Post-Production (In Nebraska) End Date

Post-Production (Total Production) Start Date

Post-Production (Total Production) End Date

Projected Release / Premiere Date (Total Production) End Date

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### Distribution Plan

Have you secured a distributor for this project?

- ☐ Yes  
☐ No

If yes, please describe:

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## Financing

Total production budget

\$0.00

Percentage of production budget that will be spent in Nebraska qualified census tracts within the boundaries of a city of the metropolitan class in the State of Nebraska:

0.00%

What percentage of funding has been secured for the full budget of this project?

0.00%

Please describe the plan for securing the remaining funds:

Identify total need prior to assistance (the need of an applicant or a city/county).

\$0.00

Have federal, state, local and/or private funding sources been secured/pledged for this program?

- ☐ Yes  
☐ No

Total Amount of funding received.

\$0.00

If yes, please explain:

Are other agencies or government funds being received?

- ☐ Yes  
☐ No

Will the funds be used for a different purpose than the funds requested in this application?

What is your unmet need (Total need prior to assistance – received funding)?

\$0.00

## Duplication of Funds Review Table Instructions:

Please fill out the table below to identify your total need and the amount you have received by Budget Line Item and the source of funds.

- **Budget Line Item:** The Budget Categories are found in the 'Budget' portion of the application. You will create applicable line items under each category. Use the line items to complete this section.
- **Source:** Whom are the funds from?
- **Identify total need prior to assistance** (the need of an applicant or a city/county) by Budget Category and Source.
- **Identify the amount received by Budget Category and Source.**
- **Subtract all assistance found to be duplicative, resulting in the maximum potential award amount, or unmet need.**

## Duplication of Funds Chart

[illegible]

I have completed the table immediately above.

- ☐ The table is filled out to the best of my knowledge and ability.
- ☐ I did not fill the table out and understand that at least one row is required for a complete application.

## Policies and Procedures

Describe Applicant's internal accounting/financial procedures, including but not limited to, identification of the type of accounting system used to track federal and non-federal transactions, allocation of transactions, and system of accurate record keeping and expense tracking.

Describe Applicant's ability and history for the management of state or federal grants of equal or of similar size and complexity as the one being requested.

Describe Applicant's written policies and procedures to implement changes in laws, regulations, guidance, and funding agreements affecting federal awards and programs for both themselves, as well as any partnering entities.

Describe Applicant's policies and procedures for sound financial management. Applicant is encouraged to upload a copy of its by-laws, financial procedures handbook, or any other document that outlines the Applicant's established financial policies and procedures.

## UPLOAD: Policies and Procedures for Sound Financial Management

Please describe Applicant's experience with complying with statutory, regulatory or other requirements, with examples, as it relates to federal grants.

**UPLOAD:** A copy of most recent financial statement audit and/or single audit. Include any corrective action plans associated with the audit. If you have never had an audit, upload a statement to that effect.

UPLOAD: Federal or state program audit reports and associated reports that demonstrate minor to no findings.

## Part 03: Acknowledgements, Certification, and Authorization

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### Acknowledgments, Certification, and Authorization

Check to confirm

- ☐ I certify that by submitting this application, I, the Applicant, confirm that I will comply with all federal and state statutes, regulations, policies, guidance, and the terms and conditions of the federal award and state grant agreement.

Check to confirm

- ☐ I certify that, by submitting this application, we agree upon award to permit the state and federal regulators to have access to all records and financial statements of the entity relevant to compliance evaluation and monitoring of the grant program.

Check to confirm

- ☐ I certify that the credits of the film will include an acknowledgment that the film or a portion thereof was filmed in Nebraska including, "Good Life. Great Opportunity".

Check to confirm

- ☐ By applying for this grant, I am agreeing to register my project with the Nebraska Film Office.

Check to confirm

- ☐ I consent to allow reasonable inquiries by the Department of Economic Development (DED) for the purpose of verifying the information in my application, including but not limited to, requests for further information and inquiries submitted to third-parties. If awarded funds, I agree to provide additional reports and expenditure information upon request.

Check to confirm

- ☐ I authorize DED to use this acknowledgment and the information obtained in the application to administer and enforce rules and policies of the grant program.

Check to confirm

- ☐ Any individual or organization, including any governmental agency, may be asked to release information. Information may be requested from, but is not limited to: courts, law enforcement state or federal agencies, or social service agencies. I authorize the above persons, firms, or corporations to make available any documents or record relevant to this grant program for inspection and copying.

Check to confirm

- ☐ I authorize DED to publish aggregate information regarding the entity (individual or company) submitting the application (not including personally identifiable information) and any awards which I may receive on a searchable public website as part of its public transparency and accountability efforts.

### Please upload the following items to complete the application:

UPLOAD: A copy of your insurance policy for production, including agent, insurance company(s) and policy amounts

UPLOAD: Applicant's Organizational Overview (Preference will be given to applications that have a defined and clear organizational structure; organizational experience in federal grants; qualified and capable personnel with experience in federal grants or equivalent credentials or experience; or can otherwise demonstrate that they will be a reliable Awardee who will use all awarded funds in a manner consistent with the law and the requirements of this program)

UPLOAD: : Nebraska Secretary of State – Certificate of Good Standing Charter

Are you a 501C(3)?

- ☐ Yes  
☐ No

UPLOAD: IRS Determination Letter\*

UPLOAD: Charter or Article of Incorporation, Articles or Organization, or Partnership Agreement

UPLOAD: Bylaws, Operating Agreement, or Partnership Agreement

UPLOAD: Evidence of Board Approval for grant request

UPLOAD: Nonprofits: (2019, 2020 and 2021) IRS Form 990 as applicable

2019

2020

2021

UPLOAD: 100% proof of funding for the full production budget.

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### Terms of Acceptance

Check to confirm

- ☐ I certify that the grant funds requested in this application do not duplicate other covered assistance that has been previously received, or is reasonably expected to be received by any federal or state government, county agencies, and private or nonprofit charity organizations.

Check to confirm

- ☐ I agree to repay any assistance later received for the same purpose as the grant funds associated with this grant program.

To the best of my knowledge and belief, data, and information in this application are true and correct. The Applicant will comply with all requirements in the Standing Bear Film Program. By signing and submitting this form, I affirm that the governing body of the Applicant has duly authorized this application and I have been authorized to submit the application.

First and Last Name of Authorized Representative

Terms of Acceptance

- ☐ I understand that checking this box constitutes a legal signature confirming that I acknowledge the above Terms of Acceptance.

Date Signed

## Budget

### Proposed Budget Summary

#### Expense Budget

	Grant Funded	Non-Grant Funded	Total Budgeted
Equipment Rentals and Purchases - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Equipment Rentals and Purchases - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00
Food and Catering - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Food and Catering - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00
Location Fees - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Location Fees - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00
Lodging - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Lodging - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00
Other: Film Office Grant - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Other: Film Office Grant - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00
Post-Production - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Post-Production - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00
Props - NE			
Subtotal	\$0.00	\$0.00	\$0.00
Props - Non-Nebraska			
Subtotal	\$0.00	\$0.00	\$0.00



	Grant Funded	Non-Grant Funded	Total Budgeted
<b>Set Design, Construction, and Dressing - NE</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Set Design, Construction, and Dressing - Non-Nebraska</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Transportation - NE</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Transportation - Non-Nebraska</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Wages and Benefits - NE</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Wages and Benefits - Non-Nebraska</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Wardrobe, Makeup, and Hairdressing - NE</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Wardrobe, Makeup, and Hairdressing - Non-Nebraska</b>			
<b>Subtotal</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Total Proposed Cost</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

## Revenue Budget

	Grant Funded	Non-Grant Funded	Total Budgeted
<b>Grant Funding</b>			
Award Requested	\$0.00		\$0.00
<b>Subtotal</b>	<b>\$0.00</b>		<b>\$0.00</b>
<b>Non-Grant Funding</b>			
Cash Match		\$0.00	\$0.00
<b>Subtotal</b>		<b>\$0.00</b>	<b>\$0.00</b>
<b>Total Proposed Revenue</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

## Proposed Budget Detail

## Proposed Budget Narrative

## Equipment Rentals and Purchases - NE

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Equipment Rentals and Purchases - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Food and Catering - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Food and Catering - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Location Fees - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Location Fees - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Lodging - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Lodging - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Other: Film Office Grant - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Other: Film Office Grant - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Post-Production - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Post-Production - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Props - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Props - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Set Design, Construction, and Dressing - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Set Design, Construction, and Dressing - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Transportation - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Transportation - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Wages and Benefits - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Wages and Benefits - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Wardrobe, Makeup, and Hairdressing - NE**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.

#### **Wardrobe, Makeup, and Hairdressing - Non-Nebraska**

Eligible Projects Costs: Enter the total amount in the "Direct Cost" field. If this Line Item has Match, change "Non-Grant Funded" to "Yes". Enter in your Match Dollar Amount or Match Percentage. After saving your line item, verify that the "Grant Funded", "Non-Grant Funded" and "Total Budgeted" columns are correct. Do not enter Ineligible Project Costs in this category.