

Applicant Information

Applicant Organization Information

Review the applicant information. If you need to update the Organization Information, use the Note feature on the left to contact a Mass Cultural Council staff person for help.

Legal Name: Test Cultural Organization

Doing Business As:

Physical Address:

Address 1: 1 Western Avenue

Address 2:

City: Boston

State: MA

ZIP: 02163-1006

Mailing Address (if different):

Mailing Address 1:

Mailing Address 2:

City:

State:

ZIP:

Parent Organization: Grant Seeking Organizations

Fiscal Agent:

Please note, organizations are required to provide a Massachusetts physical address. A PO Box can be provided for the mailing address, but not the physical address. Organizations that do not have a facility or office typically provide the address of the primary person leading the organization or group, such as the board chair, staff person, or lead volunteer for the group.

If you see "Grant Seeking Organization" listed as your parent organization, this means that you do not have a parent organization and you can disregard it.

Grants Management System Legal Status

When your organization registered in our grants management system, we were provided with the below legal status. If you believe this information is not current, use the Notes feature on the left to contact a Mass Cultural Council staff person for help.

Nonprofit Organization

Primary Contact

Review the applicant information. The Primary Contact is responsible for all communications regarding the application, including questions and contracts. If you need to update the Primary Contact information you can do so in your Profile. Click Home button in upper right corner to get to My Profile button.

ORGANIZATION

617-000-0000
10 St James Ave
MA 02116

Contract Authorized Signatory Information

If awarded a grant, the **“Contract Authorized Signatory”** is the person at your organization who has the legal authority to sign contracts and submit the necessary contract documents (W-9, Electronic Funds Transfer form, etc.). The contract will be emailed directly to the person below. Please be sure to enter the name and email correctly.

Contract Signatory

First and last name of person who will sign the contract

Contract Signatory Title

Contract Signatory Phone

###-###-####

Contract Signatory Email

This is the email that will receive 3 DocuSign documents: the Commonwealth's Contract Authorized Signatory Listing (CASL) form, the Commonwealth's W-9 & Electronic Funds Transfer (EFT) document, and the Mass Cultural Council's Standard Contract Document.

Contract Authorized Officer Information

If awarded a grant, the **“Contract Authorized Officer”** is the person at your organization who has the legal authority to attest that the above person can sign contracts on your organization’s behalf. For example, a board member, president, chief executive officer, chief fiscal officer, corporate clerk or legal counsel, etc.

The same person cannot be both the Authorized Signatory and the Authorized Officer.

Contract Authorized Officer

First and last name of person who will attest the Contract Signatory can sign contracts. Please do not enter a title or any other information, just their name.

Contract Authorized Officer Email

This is the email that the Commonwealth's Contract Authorized Signatory Listing (CASL) form will go as a DocuSign document.

Does the performing arts center (the applicant organization) have a separate managing entity?

Please Select

Applicant organizations with a separate managing entity will have to answer additional questions relating to that entity.

Organization Operating Information

In the following questions when it asks for "most recently completed fiscal year," please answer with the information for the most recently completed fiscal year for which you have completed/filed taxes.

Most recently completed fiscal year (for which you have completed/filed taxes) - start date

Most recently completed fiscal year (for which you have completed/filed taxes) - end date

Total cash operating expenses

Total cash expenses from the most recently completed fiscal year for which you have completed/filed taxes.

Select all of the performing arts disciplines that the applicant presents live for audiences.

Please select the statement that best describes the applicant organization

Please Select

Applicant organizations that are multidisciplinary will have to answer additional budget questions.

Grant Components

Funding amounts are determined primarily through a formula that considers the following **bolded** factors, which have equal weight. Please report on performances and fees from calendar year 2022 (January 1, 2022 - December 31, 2022).

Percent of Performances Impacted

The percentage of performances impacted is the **total number of eligible performances** divided by the **total number of all performances**. For example, if a performing arts center presents 100 performances a year and 30 of them are open to the public and feature a touring artist/show, then 30% of the performing arts center's performances are considered impacted because they compete most directly with casinos.

The formula allocates more funds to performing arts centers that have a higher percentage of impacted performances.

Total fees paid to touring shows or artists for the eligible performances.

The formula allocates more funds to performing arts centers that spend more money on touring shows or artists because organizations whose business model relies more heavily on these types of shows/artists will be the most impacted by competition with casinos.

Total number of all performances.

To calculate the total number of performances, the organization should count the number of performances that are:

- Live presentations of performing arts for an audience: For organizations that present multidisciplinary events, they do not have to count every gallery opening, yoga workshop, and craft fair. The focus is on the number of performing arts events for live audiences.
- Presented by the organization or presented by a producer renting the organization's venue.

Total number of performances by eligible touring shows/artists.

To calculate the total number of eligible performances the organization should review the list of Total Performances already identified and should count the number of performances that meet all three of the following criteria:

- Take place in Massachusetts.

AND

- Are available to the general public by free or paid admissions. (Performances only open to university students, K-12 school groups, or other limited audiences are not considered open to the general public.)

AND

- Feature touring arts shows/artists.

Total fees paid to eligible shows/artists.

Only include fees paid directly to eligible touring shows/artists featured in eligible performances. Fees paid to shows/artists that were presented by a producer renting the applicant organization's venue are not eligible. Fees can include compensation as well as housing and travel costs if applicable.

List of Performances

In order to verify the information provided above, applicants must provide a list of their calendar year 2022 performances using the template provided here.

Using the template, list all performances presented by the applicant organization and any presentations by a producer renting the applicant organization's venue, whether or not they are open to the public or feature a touring artist/show.

For eligible touring artists/shows please include a link to two (2) of the required credentials:

- Artists Roster on which they are listed
- Established history of touring within the last five (5) years. Touring being defined as travel to different towns, cities, states, or countries in a pre-planned route for a series of live performances. and/or
- Established Artists' Representation.

Please note that this spreadsheet can be used to help total fees paid to eligible touring artists/shows, but using that feature or **disclosing amounts paid to specific artists/shows is NOT required.**

Complete the performance list following these instructions:

1. [Download the Excel template](#)
2. Complete the Excel Template
3. Save the template
4. Upload the completed template below

Upload Template

Impact Over Time

This section provides data that allows Mass Cultural Council to track impact over time and effectively advocate to maintain the gaming mitigation fund. The answers to the following questions **DO NOT** affect grant amounts, should your application be funded.

Total earned revenue from all performances

Earned revenue should include any revenue generated by the performance. This could include ticket revenue, concessions, parking, other services, and restoration or ticket handling fees that are retained by the presenter.

Total earned revenue from performances in Massachusetts by eligible touring shows/artists.

Earned revenue should include any revenue generated by the performance **ONLY** for the eligible touring shows/artists. This could include ticket revenue, concessions, parking, other services, and restoration or ticket handling fees that are retained by the presenter. This is a subset of the revenue from all performances.

Total ticket revenue from performances in Massachusetts by eligible touring shows/artists.

Revenue from ticket sales only. Do not include any revenue from handling fees.

How has the operation of resort-style casinos in Massachusetts impacted your organization in Massachusetts in terms of your ability to secure touring shows or artists?

Please be as specific as possible and consider:

- Have you lost touring/shows or artists to casinos that you have a long history of regularly booking?
- Are there touring shows or artists that became significantly more expensive to book?
- Have you been in situations where you knew you were competing with a casino for a show or artist and were not able to book them?

How has your organization been financially impacted by the operation of resort-style casinos in Massachusetts?

Please be as specific as possible and consider:

- Specific examples of impact (i.e., it cost me \$20,000 more than usual to book a specific artist, which meant I had to reduce X, Y, Z).
- Provide an estimate of the overall financial impact on your most recently completed fiscal year, if possible.
- Trends in revenue and/or tickets sales that you attribute to competition with the casinos.

What other impacts have you felt due to the operation of resort-style casinos in Massachusetts?**Optional Upload**

If you would like to upload a document that explains how you arrived at your impact data or that you feel helps demonstrate the impacts you have described on this page, you can upload it here as a word, pdf, excel file.

Acknowledgement

Ready to Submit?

Once you click "Submit" below, you will no longer have access to make changes to your application. A copy of your application will be sent via an email attachment upon submission.

Please note: You have not successfully submitted your application until you see the following message: "Congratulations - You have successfully submitted your application."

Authorized Signature: I certify that all the information contained in this application, including all supporting documents and materials, is true and correct to the best of my knowledge. I hereby release Mass Cultural Council, its members, and employees, from any liability and/or responsibility concerning the submission of materials to this program. In addition, I agree that the required public acknowledgment will be given to Mass Cultural Council if this application is approved. I understand that failure to respond to any of the items requested in this application may seriously hinder its consideration. I certify that we are committed to the completion of the proposed activities in compliance with legal requirements and granting procedures and will file the report required by the Mass Cultural Council.

Clicking "submit" below serves as an authorizing electronic signature.

Attestation
