



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Mahaffey Theater Expansion Project

2. **Senate Sponsor:** Jeff Brandes

3. **Date of Submission:** 11/20/2017

4. **Project/Program Description:**

The Florida Orchestra requests state funding to help offset the costs of building a new storage facility at the Mahaffey Theater. The 4,000 square foot facility will serve as a vital storage space for a riser system to be used during orchestral performances, for instruments, and for any of the Mahaffey Theater's storage needs.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?  
Department of State

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	1,000,000	1,000,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	2,400,000	66.9%
Other	189,554	5.3%
TOTAL	2,589,554	72.2 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 3,589,554

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? Yes

b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 2

c. What is the most recent fiscal year the project was funded? 2015-16

d. Were the funds provided in the most recent fiscal year subsequently vetoed? No

e. Complete the following Worksheet.



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<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

**10. Is future-year funding likely to be requested?**

Yes

**a. If yes, indicate non-recurring amount per year.**

Yes, a future-year one-time request of \$1,000,000 will be submitted.

**11. Program Performance:**

**a. What is the specific purpose or goal that will be achieved by the funds requested?**

A new acoustic shell was installed at the Mahaffey Theater during Summer 2015. Now that the new acoustic shell is in place, orchestra risers are recommended to improve hearing conditions for both musicians and patrons, and to improve the viewing of the orchestra by patrons seated within the orchestra level seats. The new storage facility will serve as storage for the risers when they are not in use, as well as provide vital storage space to the Mahaffey Theater.

**b. What are the activities and services that will be provided to meet the intended purpose of these funds?**

The Florida Orchestra will pay for the consultant(s), engineer(s), acoustician(s), and any construction costs and additional expenses that are part of the storage facility project.

**c. How will the funds be expended?**

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		



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<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Construction costs	1,000,000
TOTAL		1,000,000

**d. What are the direct services to be provided to citizens by the appropriations project?**

The storage facility will house supplies that are needed by both the Florida Orchestra and the Mahaffey Theater.

**e. Who is the target population served by this project? How many individuals are expected to be served?**

The Florida Orchestra performs for more than 50,000 people at the Mahaffey Theater annually.

**f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

The construction of the Mahaffey Theater Storage Facility will provide storage space for the permanent riser system to be used during orchestral performances, as well as provide vital storage space to the Mahaffey Theater.

**g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**

Penalties the contracting agency may consider in addition to its standard penalties could include requiring the grantee to return all or a portion of the provided funding.

**12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.**

The Mahaffey Theater is owned by the City of St. Petersburg, which contracts with Big 3 Entertainment for management of the facility.

**13. Requestor Contact Information:**

- a. **Name:** Michael Pastreich
- b. **Organization:** The Florida Orchestra



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- c. **Email:** [mpastreich@floridaorchestra.org](mailto:mpastreich@floridaorchestra.org)
- d. **Phone Number:** (727)362-5454

### 14. Recipient Contact Information:

- a. **Organization:** City of St. Petersburg
- b. **County:** Pinellas
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify)
- d. **Contact Name:** Clay Smith
- e. **E-mail Address:** [Clay.Smith@stpete.org](mailto:Clay.Smith@stpete.org)
- f. **Phone Number:** (727)892-5705

### 15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. **Name:** Anita Berry
- b. **Firm:** Corcoran & Johnston Government Relations
- c. **Email:** [anita@corcoranfirm.com](mailto:anita@corcoranfirm.com)
- d. **Phone Number:** (301)524-0172