



mid-america
arts alliance



Performing Arts Presenters Survey

Thank you in advance for taking the time to complete this survey! Please do not set it aside; it takes approximately 20 minutes to complete. If researching some of the questions becomes too laborious, please approximate answers. Upon completion, please print and mail to: Heartland Arts Fund, Attn: Survey, 912 Baltimore Ave., Ste. 700, Kansas City, MO 64105

ORGANIZATION

Contact Name _____ Title _____

Name of Organization _____

Street Address _____

Mailing Address (if different) _____

City, State, Zip _____

Telephone _____ Fax _____

E-mail address _____ Web site _____

County _____ U.S. Congressional District Number _____

In the primary column check the **ONE** area that primarily describes your institution. In the secondary column, check **ALL** of the secondary areas that describe your institution.

	Q1.) Primary (ONE only)	Q1a.) Secondary (ALL that apply)
Performance Facility	<input type="radio"/>	<input type="radio"/>
Cultural Series Organization	<input type="radio"/>	<input type="radio"/>
College/University	<input type="radio"/>	<input type="radio"/>
Art Museum	<input type="radio"/>	<input type="radio"/>
Other Museum	<input type="radio"/>	<input type="radio"/>
Gallery/Exhibition Space	<input type="radio"/>	<input type="radio"/>
Fair/Festival	<input type="radio"/>	<input type="radio"/>
Arts Center	<input type="radio"/>	<input type="radio"/>
Arts Council/Agency	<input type="radio"/>	<input type="radio"/>
Arts Service Organization	<input type="radio"/>	<input type="radio"/>
Union/Professional Association	<input type="radio"/>	<input type="radio"/>
School District	<input type="radio"/>	<input type="radio"/>
Parent-Teacher Organization	<input type="radio"/>	<input type="radio"/>
Elementary School	<input type="radio"/>	<input type="radio"/>
Middle School	<input type="radio"/>	<input type="radio"/>
Secondary School	<input type="radio"/>	<input type="radio"/>
Vocational/Technical School	<input type="radio"/>	<input type="radio"/>
Other School	<input type="radio"/>	<input type="radio"/>
Library	<input type="radio"/>	<input type="radio"/>
Historical Society/Commission	<input type="radio"/>	<input type="radio"/>
Humanities Council/Agency	<input type="radio"/>	<input type="radio"/>
Foundation	<input type="radio"/>	<input type="radio"/>
Corporation/Business	<input type="radio"/>	<input type="radio"/>
Community Service Organization	<input type="radio"/>	<input type="radio"/>
Health Care Facility	<input type="radio"/>	<input type="radio"/>
Religious Organization	<input type="radio"/>	<input type="radio"/>
Senior Citizen's Center	<input type="radio"/>	<input type="radio"/>
Parks and Recreation	<input type="radio"/>	<input type="radio"/>
School of the Arts	<input type="radio"/>	<input type="radio"/>
Arts Camp/Institute	<input type="radio"/>	<input type="radio"/>
Social Service Organization	<input type="radio"/>	<input type="radio"/>
Other, specify: _____		

Q2.) Check the category that best describes your organization's legal status.

- | | | |
|--------------------------------------------|---------------------------------------------|----------------------------------------------|
| <input type="radio"/> Non-Profit | <input type="radio"/> Government – State | <input type="radio"/> Government – Municipal |
| <input type="radio"/> For-Profit | <input type="radio"/> Government – Regional | <input type="radio"/> Government – Tribal |
| <input type="radio"/> Government – Federal | <input type="radio"/> Government – County | <input type="radio"/> None of the Above |

Q3.) Indicate your annual operating budget for the year **2003**. **Calendar, fiscal or presenting year is appropriate, please select ONE and use consistently throughout survey.**

- | | | |
|--------------------------------------------|-----------------------------------------------|----------------------------------------|
| <input type="radio"/> \$0 – \$10,000 | <input type="radio"/> \$100,001 – \$250,000 | <input type="radio"/> Over \$1,000,000 |
| <input type="radio"/> \$10,001 – \$50,000 | <input type="radio"/> \$250,001 – \$500,000 | |
| <input type="radio"/> \$50,001 – \$100,000 | <input type="radio"/> \$500,001 – \$1,000,000 | |

Q3a.) Has your budget increased or decreased in the last **three years**?

- Increased Decreased No Change

Q3b.) If your budget has increased or decreased, by what percentage did it increase/decrease? _____%

Q4.) Indicate the percentage of your budget **spent** in the following categories for the year **2003**. **Please note this question is regarding expenditure, not revenue. (Answers need not sum to 100%.)**

Artist Fees	_____%	Building Maintenance	_____%
Professional Development	_____%		

Q4a.) Have these expenses increased or decreased in the last **three years**?

- | | | | |
|--------------------------|---------------------------------|---------------------------------|---------------------------------|
| Artist Fees | <input type="radio"/> Increased | <input type="radio"/> Decreased | <input type="radio"/> No Change |
| Professional Development | <input type="radio"/> Increased | <input type="radio"/> Decreased | <input type="radio"/> No Change |
| Building Maintenance | <input type="radio"/> Increased | <input type="radio"/> Decreased | <input type="radio"/> No Change |

Q4b.) If these expenses have increased or decreased, by what percentage did they increase/decrease?

Artist Fees	_____%	Building Maintenance	_____%
Professional Development	_____%		

Q5.) From which sources does your organization receive income? Please check **ALL** that apply.

- | <u>Governmental</u> | <u>Non-Governmental</u> | <u>Earned Income</u> |
|-------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------|
| <input type="radio"/> City | <input type="radio"/> Individuals | <input type="radio"/> Hall Rental |
| <input type="radio"/> County | <input type="radio"/> Corporations/Businesses | <input type="radio"/> Ticket Sales |
| <input type="radio"/> State | <input type="radio"/> Local Community Foundation | <input type="radio"/> Concessions |
| <input type="radio"/> National Endowment for the Arts | <input type="radio"/> Local Nonprofit or Business Foundation | <input type="radio"/> Paid Advertising |
| <input type="radio"/> Other _____ | <input type="radio"/> Regional Nonprofit or Business Foundation | <input type="radio"/> Professional Services |
| | <input type="radio"/> Statewide Nonprofit or Business Foundation | <input type="radio"/> Other _____ |
| | <input type="radio"/> Regional Arts Organizations | |
| | <input type="radio"/> National Foundation | |
| | <input type="radio"/> Other _____ | |

Q6.) What was the total annual attendance for your performances and educational activities in **2003**?

- | | | |
|---------------------------------------|-----------------------------------------|------------------------------------|
| <input type="radio"/> 1 – 10,000 | <input type="radio"/> 50,001 – 100,000 | <input type="radio"/> Over 250,000 |
| <input type="radio"/> 10,001 – 50,000 | <input type="radio"/> 100,001 – 250,000 | |

Q7.) Indicate by percentage the composition of your audience in **2003**.

_____ % Students (K-12)	_____ % Adults
_____ % Students (University/College)	_____ % Seniors

Q8.) In a typical performance targeted for a general audience, indicate by percentage the average composition of your audience.

_____ % Season Ticket Holders
 _____ % Single Ticket Buyers

FACILITY

Q14.) Describe your performing arts facility(ies) below. Please mark **ONE** facility per column.

<u>Primary Facility</u>	<u>Facility 2 (if applicable)</u>	<u>Facility 3 (if applicable)</u>
TYPE (choose only one)	TYPE (choose only one)	TYPE (choose only one)
<input type="radio"/> Proscenium	<input type="radio"/> Proscenium	<input type="radio"/> Proscenium
<input type="radio"/> Modified Proscenium	<input type="radio"/> Modified Proscenium	<input type="radio"/> Modified Proscenium
<input type="radio"/> Thrust	<input type="radio"/> Thrust	<input type="radio"/> Thrust
<input type="radio"/> Modified Thrust	<input type="radio"/> Modified Thrust	<input type="radio"/> Modified Thrust
<input type="radio"/> Black Box	<input type="radio"/> Black Box	<input type="radio"/> Black Box
<input type="radio"/> Concert/Recital Hall	<input type="radio"/> Concert/Recital Hall	<input type="radio"/> Concert/Recital Hall
<input type="radio"/> Arena/Gymnasium	<input type="radio"/> Arena/Gymnasium	<input type="radio"/> Arena/Gymnasium
<input type="radio"/> Portable	<input type="radio"/> Portable	<input type="radio"/> Portable
<input type="radio"/> Flexible	<input type="radio"/> Flexible	<input type="radio"/> Flexible
<input type="radio"/> Other	<input type="radio"/> Other	<input type="radio"/> Other
Do you own this facility?	Do you own this facility?	Do you own this facility?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
If you own, do you rent it out?	If you own, do you rent it out?	If you own, do you rent it out?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Seating Capacity _____	Seating Capacity _____	Seating Capacity _____
What year was it built? _____	What year was it built? _____	What year was it built? _____
Is it on the National Register of Historic Places?	Is it on the National Register of Historic Places?	Is it on the National Register of Historic Places?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

TECHNOLOGY

Q15.) What percentage of staff has desktop Internet access?
 0% No Access 1-25% 26-50% 51-75% 76-100%

Q16.) Which of the following computer platforms does your organization use?
 PC Mac

Q17.) Do you use Adobe Acrobat Reader?
 Yes No

TRAINING & PROFESSIONAL DEVELOPMENT

Q18.) Please indicate the number of staff at your organization.

_____ Full-time paid (30+ hours per week)	_____ Full-time volunteer (30+ hours per week)
_____ Part-time paid	_____ Part-time volunteer

Q19.) Please check the areas in which the director or staff has received training within the last **three** years. Please check **ALL** that apply.

	<u>Director</u>	<u>Other Staff</u>
Event Management	<input type="radio"/>	<input type="radio"/>
Educational Programming (for teachers and students)	<input type="radio"/>	<input type="radio"/>
Volunteer Management	<input type="radio"/>	<input type="radio"/>
Board Management	<input type="radio"/>	<input type="radio"/>
Facility Management	<input type="radio"/>	<input type="radio"/>
Computer/Technology	<input type="radio"/>	<input type="radio"/>
Development/Fundraising	<input type="radio"/>	<input type="radio"/>
Marketing/Public Relations	<input type="radio"/>	<input type="radio"/>
Administration/Finance	<input type="radio"/>	<input type="radio"/>
Strategic or Long-range Planning	<input type="radio"/>	<input type="radio"/>
Technical Training for the Theater	<input type="radio"/>	<input type="radio"/>

COMMUNITY DEMOGRAPHICS

Q26.) What is the population of the community you serve?

- Under 10,000 50,001 – 100,000 250,001 – 500,000
 10,001 – 50,000 100,001 – 250,000 Over 500,000

Q27.) To the best of your knowledge, what are the current percentages of ethnic populations in your community?

_____% Caucasian (white) _____% Asian American _____% Native American
 _____% African American _____% Hispanic/Latino _____% Other _____

Q28.) How well does your audience reflect the ethnic population of your community?

- Extremely Well Very Well Somewhat Well Not Very Well Not At All Well
 1 2 3 4 5

Q28a.) If not "Extremely Well", please estimate the current percentages of ethnic populations of your audience.

_____% Caucasian (white) _____% Asian American _____% Native American
 _____% African American _____% Hispanic/Latino _____% Other _____

Q29.) To the best of your knowledge, in the past 10 years what percentage changes in these populations have occurred?

What are the industries in your community? Please indicate **ONE** primary industry and **ALL** others that apply.

	Q30.) Primary (ONE only)	Q30a.) Secondary (ALL that apply)
Farming and/or Ranching	<input type="radio"/>	<input type="radio"/>
Manufacturing/Factory	<input type="radio"/>	<input type="radio"/>
Business or Service	<input type="radio"/>	<input type="radio"/>
Education - College/Univ	<input type="radio"/>	<input type="radio"/>
Tourism	<input type="radio"/>	<input type="radio"/>
Government	<input type="radio"/>	<input type="radio"/>
Other, specify: _____		

Q31.) Do you have any additional comments you would like us to take into consideration?

Thank you for taking the time to complete this survey.
Please print and mail by April 9, 2004 to: Heartland Arts Fund,
Attn: Survey, 912 Baltimore Ave., Ste. 700, Kansas City, MO 64105.

If you have any questions about this survey please contact:
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