

**U.S. SMALL BUSINESS ADMINISTRATION**

**SHUTTERED VENUES GRANT APPLICATION**

**SBA Form 3515**

This application is to be completed by Live Venue Operators or Promoters, Theatrical Producers and Live Performing Arts Organization Operators, Museum Operators, Motion Picture Theatre Operators, and Talent Representatives, who are applying for a Shuttered Venue Operators (SVOG) grant. SBA is collecting the requested information to determine whether applicants meet the eligibility requirements for an SVOG grant. SBA may provide grants of up to $10,000,000 for applicants who meet certain conditions. Entities that receive a grant will not be required to repay grant funds unless the funds were used for purposes other than for authorized purposes. Your response to this application is required for SBA to make a determination regarding your eligibility.

Should you have questions about this application or problems providing the required information, please contact our Customer Service Center at 1-800-659-2955 or (TTY: 1-800-877-8339) or [SVOGrant@sba.gov](mailto:SVOGrant@sba.gov).

PRIVACY ACT:The information provided in this form is protected by the Privacy Act, 5 U.S.C 552a, which prohibits the federal government from disclosing personal information about an individual without the individual’s consent. The Privacy Act authorizes SBA to make certain routine uses of information protected by the Act as set forth in its System of Records Notices, 69 F.R. 58598. Among other things, this form or the information provided in this form may be made available to federal, state, and/or local law enforcement agencies charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations of law.

PAPERWORK REDUCTION ACT: The estimated time for completing this application, including compiling information needed to respond, is 2 hours. You are not required to respond to this or any collection of information unless it displays a currently valid OMB approval number. If you have any questions or comments concerning any aspects of this information collection, including the time estimate, please contact the Director, Records Management Division, Small Business Administration, 409 Third Street, SW, Washington, DC 20416 and/or Desk Officer for SBA, Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Washington, DC 20503.

**ELIGIBILITY QUESTIONS:**

Applicant must review and respond to all of the following questions. For certain questions, the Applicant may be required to submit supporting documentation. If Applicant does not meet the initial eligibility requirements, Applicant will not be able to proceed to the remainder of the application.

Applicant Form of Organization:

☐ Corporation

☐ Partnership

☐ Limited Liability Company

☐ Proprietorship

For Applicants that are Limited Liability Companies: Please select which form was used for the Applicant business’s 2019 tax return:

☐ Form 1040 (Schedule C, E, or F)

☐ Form 1065 (Partnership)

☐ Form 1120S (S Corporation)

☐ Form 1120 (Corporation)

1. Which of the following type of entity is the Applicant’s business?

☐ Live venue operator or promoter

☐ Theatrical producer

☐ Live performing arts organization operator

☐ Relevant museum operator

☐ Motion picture theater operator

☐ Talent representative

1. Was Applicant’s business fully operational on February 29, 2020?

☐ Yes

☐ No

If yes, please attach evidence to demonstrate operational status. Evidence may be in the form of quarterly tax filings, financial statements, payroll documents, or other supporting documentation.

1. Is Applicant’s business currently open, in operation, or is Applicant currently representing any live talent?

☐ Yes

☐ No

If yes, provide Applicant entity’s website address.

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

If no, does Applicant intend to resume operation or re-open for the same primary purpose?

☐ Yes

☐ No

1. Compared to 2019, has Applicant’s business demonstrated at least a 25% reduction in gross earned revenue during at least one quarter of 2020?

☐ Yes

☐ No

1. Does Applicant issue securities on a national securities exchange or is Applicant wholly or partly owned or operated by an entity that issues securities on a national securities exchange?

☐ Yes

☐ No

1. Does more than 10% of Applicant’s 2019 income come from Federal resources (excluding amounts received under the Stafford Disaster Relief and Emergency Assistance Act)?

☐ Yes

☐ No

1. Did Applicant receive a Paycheck Protection Plan (PPP) loan on or after December 27, 2020?

☐ Yes

☐ No

1. Does Applicant own or operate a venue in more than one country or is Applicant wholly or partly owned or operated by an entity that owns or operates a venue in more than one country?

☐ Yes

☐ No

If yes, please list the countries outside of the United States in which the Applicant has operations below.

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

1. Does Applicant own or operate venues in more than 10 states or is Applicant wholly or partly owned or operated by an entity that owns or operates venues in more than 10 states?

☐ Yes

☐ No

1. As of February 29, 2020, does Applicant have more than 500 full-time equivalent employees or is Applicant wholly or partly owned or operated by an entity that employed more than 500 full-time equivalent employees?

☐ Yes

☐ No

1. Does Applicant have affiliates? Affiliation occurs where one firm has the power to control another firm, or a single person or entity has the power to control both. Affiliation typically arises due to common ownership, management, or through contractual or other legal arrangements.

☐ Yes

☐ No

1. If yes, how many?

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

1. How many of these affiliates are applying for this grant?

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

1. Please provide an entity name and a DUNS number for each affiliate:

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

1. Is Applicant or owners of Applicant currently suspended or debarred from contracting with the Federal government or receiving Federal grants or loans?

☐ Yes

☐ No

1. Within the last five years, has any owner of the Applicant: 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; or 4) commenced any form of parole or probation (including probation before judgment) for any felony involving fraud, bribery, embezzlement, or a false statement in a loan application or an application for federal financial assistance, or within the last year, for any other felony?

☐ Yes

☐ No

1. Has the Applicant filed for bankruptcy?

☐ Yes

☐ No

If yes, please attach bankruptcy documents.

1. Does Applicant present live performances of a prurient sexual nature or derive directly or indirectly more than de minimis gross revenue through the sale of products or services, or the presentation of any depictions or displays, of a prurient sexual nature?

☐ Yes

☐ No

1. Is Applicant owned by a state, local, or municipal government entity?

☐ Yes

☐ No

1. Complete the monthly gross receipts for each year listed on the form. Gross receipts include all revenue in whatever form received or accrued, from whatever source. If there was a period with no revenues, please enter 0.

|  |  |  |  |
| --- | --- | --- | --- |
| Month | Fiscal year 2019 | Fiscal year 2020 | Current year/ to date: 2021 |
| January |  |  |  |
| February |  |  |  |
| March |  |  |  |
| April |  |  |  |
| May |  |  |  |
| June |  |  |  |
| July |  |  |  |
| August |  |  |  |
| September |  |  |  |
| October |  |  |  |
| November |  |  |  |
| December |  |  |  |

**Proposed Budget for Use of Grant Funds**

|  |  |  |
| --- | --- | --- |
| **Use** | **Amount** | **Restrictions** |
| Payroll costs |  |  |
| Rent payments |  |  |
| Utility payments |  |  |
| Scheduled mortgage payments |  | Not including prepayment of principal |
| Scheduled debt payments on any indebtedness incurred in the ordinary course of business prior to February 15, 2020 |  | Not including prepayment of principal |
| Worker protection expenditures (including in fringe) |  |  |
| Payments to independent contractors |  | Not to exceed $100k in annual compensation for an individual employee |
| Other ordinary and necessary business expenses, including maintenance costs – (may be other, supplies, or equipment) |  |  |
| Administrative costs (incl. fees and licensing) State and local taxes and fees |  |  |
| Operating leases in effect as of 2/15/20 |  |  |
| Insurance payments |  |  |
| Advertising |  |  |
| Production |  |  |
| Transportation (Travel) |  |  |
| Capital expenditures related to producing a theatrical or live performing arts production. |  | May not be the primary use of funds. |

**Questions for Live Venue Operator or Promoter, Theatrical Producer, or Live Performing Arts Organization Operator (Excluding Freelancers)**

1. Does Applicant venue have a defined performance and audience space?

☐ Yes

☐ No

If yes, Applicant must attach a floor plan of Applicant’s venue layout with submission.

1. Does Applicant business have mixing equipment, a public address system, and a lighting rig?

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of insurance documents, receipts, or other documentation.

1. Does Applicant organize, promote, produce, manage, or host the following? Check all that apply:

☐ Live concerts

☐ Comedy shows

☐ Theatrical productions

☐ Other events by performing artists

If yes, Applicant must provide evidence in the form of website URLs, copies of print advertisements, links to social media events, or other documentation.

1. Does Applicant employ or contract with one or more individuals in the following positions? Check all that apply:

☐ Sound engineer

☐ Booker

☐ Promoter

☐ Stage manager

☐ Security personnel

☐ Box office manager

If yes, Applicant must submit evidence in the form of contracts, payroll records, job descriptions, or other documentation.

1. Is there a paid ticket or cover charge to attend most performances in Applicant’s venue?

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of ledgers, income statements, or other financial documents.

1. Are performers paid by a percent of sales, guarantee or other mutually beneficial formal agreement? (Free performances or performances for tips only do not qualify.)

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of contracts, financial documentation, or other supportive evidence.

1. If Applicant is a non-profit entity, are Applicant events produced and managed by primarily by paid employees (not volunteers)?

☐ Yes

☐ No

☐ N/A

If yes, Applicant must provide evidence in the form of contracts, financial documentation, or other supportive evidence.

1. Are performances marketed through listings in printed or electronic publications, on websites, by mass email, or on social media?

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of website URLs, copies of print advertisements, links to social media events, or other documentation.

1. Does at least 70% of Applicant revenue come from ticket sales, production fees or production reimbursements, nonprofit educational initiative, or the sale of event food, beverages, or merchandise?

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of ledgers, income statements, or other financial documents.

1. Are tickets available to the public at least 60 days prior to an event?

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of website URLs, copies of print advertisements, links to social media events, or other documentation.

**Questions for Motion Picture Theater Operators**

1. Does Applicant venue have at least one auditorium with a motion picture screen and fixed audience seating?

☐ Yes

☐ No

If yes, Applicant must attach a floor plan of Applicant venue layout with submission.

1. Does Applicant venue have a projection booth or space containing a motion picture projector?

☐ Yes

☐ No

If yes, this must be evidenced on submitted floor plan.

1. Does Applicant venue charge for tickets ?

☐ Yes

☐ No

If yes, Applicant must submit evidence in the form of ledgers, income statements, or other financial documents.

1. Are motion picture exhibitions marketed through showtime listings in printed or electronic publications, on websites, by mass mail, or on social media?

☐ Yes

☐ No

If yes, Applicant must provide evidence in the form of website URLs, copies of print advertisements, links to social media events, or other documentation.

**Questions for Relevant Museum Operators**

1. Is serving as a museum the principal business activity of the applicant?

☐ Yes

☐ No

1. Is the museum a for-profit entity?

☐ Yes

☐ No

If no, submit documentation confirming nonprofit or not for profit status.

1. Does the museum have indoor exhibition spaces, that are a primary part of the principal business activity, that have been subject to pandemic-related occupancy restrictions?

☐ Yes

☐ No

If yes, Applicant must submit a floor plan and provide links to state or local ordinances documenting restrictions.

1. Does the museum have at least one auditorium, theater, or performance or lecture hall with fixed seating?

☐ Yes

☐ No

If yes, Applicant must provide a floor plan with submission.

**Questions for Talent Representatives**

1. Is at least 70% of Applicant’s operation representing or managing artists and entertainers?

☐ Yes

☐ No

If yes, Applicant must submit evidence in the form of contractual agreements, income statements, or other financial documentation.

1. Does Applicant book or represent the following performers? Check all that apply:

☐ Musicians

☐ Comedians

☐ Other performing artists

If yes, Applicant must submit evidence in the form of contractual agreements or other relevant supporting documentation.

1. Does Applicant book or represent artists to perform at live event venues or festivals?

☐ Yes

☐ No

If yes, Applicant must submit evidence in the form of contractual agreements or other relevant supporting documentation.

1. Are the Applicant’s represented performers paid based on ticket sales or a similar basis?

☐ Yes

☐ No

If yes, Applicant must submit evidence in the form of contractual agreements or other relevant supporting documentation.

**WARNING:** Any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. 645, 18 U.S.C. 1001, 18 U.S.C. 1014, 18 U.S.C. 1040, 18 U.S.C. 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

☐ **I hereby certify UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES that the above is true and correct.**

NOTE: If the applicant meets the threshold eligibility requirements for this grant, an email will be sent requesting that that the applicant log in to the customer account portal to complete and sign a Request for Transcript of Tax Return (IRS Form 4506-T) for the relevant business or organization. This form must be completed in order for the application to be considered. Submission of the form does not guarantee approval of the application or an award of grant funds.