



# RESORTTAX

— BUILDING BIG SKY SINCE 1992 —

## 2018-2019 APPLICATION FOR RESORT TAX FUNDS

Applicant's Official Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

Address: \_\_\_\_\_

Representative: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project Completion Date: \_\_\_\_\_

Total Funds Requested \$ \_\_\_\_\_

State your estimated payment request schedule for the coming year; amounts should total funds requested. Please enter dollar amounts.

	July '18	Aug '18	Sep '18	Oct '18	Nov '18	Dec '18
Payment Request \$	_____	_____	_____	_____	_____	_____
	Jan '19	Feb '19	Mar '19	Apr '19	May '19	Jun '19
Payment Request \$	_____	_____	_____	_____	_____	_____

I certify that the application and its attachments are correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title (Board Chair or Governing Officer)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

- 1) **Provide a description of the entity and the Mission Statement.**  
State the entity's tax status/legal identity and when it was initiated.  
What is the personnel makeup of your office; specifically how many are employees, how many are contractors and what are their duties? What is the full time equivalent (FTE) of each:  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$  or full time?  
Unless previously provided to the resort tax office, please include a copy of the Articles of Incorporation.  
(200 words max)

- 2) **Provide a complete description of the project(s). Include the project(s) purpose, goals and objectives. For each project provide a budget number and measurable objectives, i.e. how you will do something and in what timeframe. The information provided here should be specific regarding what the entity is requesting to be funded by resort tax. If requesting funds for operations, identify the categories and assign a dollar amount (salaries, software, etc.) If permits are required, please specify what permits are required and what projects they apply to. If requesting funds for a study (feasibility, etc.), a minimum of two bids are required. Also provide the RFP submitted for the study. Funding for a study will only be considered if the proposal has measurable outcomes. Please be succinct.**

**3) Is the project within the resort tax district? (25 words max)**

**Please note: Not every project will fulfill questions #4 through #8. Applications will not be rated on the ability to fulfill multiple questions.**

**Does the entity and/or project...**

**4) Benefit the community at large including residents, visitors and tax collectors/the business community? (50 words max)**

**5) Promote tourism development, help make Big Sky a world class resort community and increase the visitor experience and/or increase resort tax revenue? (50 words max)**

**6) Support, improve or maintain critical infrastructure, public health, safety and/or welfare in the world class community? (50 words max)**

**7) Involve collaboration among entities in the community to meet common goals? (100 words max)**

**8) Fill a community need not currently or adequately being satisfied? (50 words max)**

**9) What is your entity most proud of accomplishing? (100 words max)**

**Provide the following financial documents:**

**10) Copy of the entity's complete operating budget for the period 07/01/18 through 06/30/19.**

**If your fiscal year does not coincide with this time period, please provide complete budgets for the entity's fiscal year that covers the aforementioned time period. For example, if the entity's fiscal year corresponds with a calendar year, provide two budgets 1) 01/01/2018 through 12/31/2018 and 2) 01/01/2019 through 12/31/2019.**

**11) Organization's Profit and Loss Report, Budget vs. Actual Report and Balance Sheet from your previous completed fiscal year.**

**12) Organization's Profit and Loss Report, Budget vs. Actual Report and Balance Sheet from your current fiscal year to date.**

**13) For applicants with mill levy authority please provide the following:**

**a. A map of your district's boundaries**

**b. The current taxable value of your district**

**c. If applicable, the current mill levy rate**

**d. Using the information above, provide a detailed budgetary breakdown of the potential tax burden per \$100,000 value, for property owners within your district if mill levy authority would be used to fund this project rather than resort tax funds.**

**TOTAL ORGANIZATIONAL BUDGET FOR THE YEAR \$ \_\_\_\_\_**

*(Include all organization projects and programs, not only those requesting Resort Tax funding. This number should match the organization's Revenue from Profit and Loss Report)*

PRINCIPLE	ITEM	AMOUNT	PERCENTAGE
Revenue	Request from Resort Tax		%
	Other Public Grants		%
	Private Donor Contributions (not including In-kind)		%
	Fundraising Events		%
	Revenue Other*		%
	<b>Sub Total Revenue</b>		%
	Private Donor Contributions In-kind		%
	<b>Total Revenue</b>		100% (the revenue line items above should total)
Expenses	<b>Personnel:</b> _____ # of FTE Paid Personnel _____ # of FTE Contract Personnel  Do not include volunteer time  (in the amount column include the total expense including salary, benefits and payroll taxes)		%
	Operations		%
	Programming		%
	Expenses Other**		%
	<b>Total Expenses</b>		100% (the expenses line items above should total)
Capital Expenditures	<b>Total Capital Expenditures</b>		%
Income	<b>Net Income</b>		%

\*Revenue Other: \_\_\_\_\_

\*\*Expenses Other: \_\_\_\_\_

Clarifications you'd like to provide regarding the information on this page: \_\_\_\_\_

\_\_\_\_\_

<b>RESERVES: Capital, Programming and/or Operating</b>	<b>On Hand Restricted**</b>	
	<b>On Hand Unrestricted**</b>	
	<b>Goal (if currently no reserves)</b>	

**\*\*Purpose of Restricted and Unrestricted Capital Reserves:** \_\_\_\_\_

\_\_\_\_\_

**TOTAL CASH FLOW 3-YEAR REQUIREMENT**

*(Include all organization projects and programs, not only those requesting Resort Tax funding)*

ITEM	This Current Application's Request from Resort Tax	2020	2021	Total Cash Flow 3-Yr Requirement
Personnel: Paid and/or Contract (include salary, benefits and payroll taxes; do not include volunteer time)				
Total # of FTE Personnel				NA
Operations				
Programming				
Capital Expenditures				
Other*				
Total				

<b>RESORT TAX REQUEST</b>				
---------------------------	--	--	--	--

Describe financial increases and decreases and the projects for which resort tax funds may be requested.

2020 \_\_\_\_\_  
 \_\_\_\_\_

2021 \_\_\_\_\_  
 \_\_\_\_\_

\*Other Description \_\_\_\_\_  
 \_\_\_\_\_