# EXHIBIT "B"

# Lexington/Fayette Urban County Government

# Addendum for Services

Lyric Theatre & Cultural Arts Center

# Lexington-Fayette Urban County Government Economic Development Partner Agency Quarterly Report Fiscal Year 2015

Lyric Theatre & Cultural Arts Center
Date Date
Outcome Evaluation
Using the Addendum "A" to the Lyric Theatre & Cultural Arts Center's Purchase of Service Agreement, please demonstrate progress towards stated goals and initiatives.
NOTE: If there have been changes to your LFUCG funded program(s) necessitating amendment of your approved outcomes, please contract Kevin Atkins, Chief Development Officer, 859-258-3110 (or email at <a href="mailto:katkins@lexingtonky.gov">katkins@lexingtonky.gov</a> ) to discuss the proposed amendments.
Entertaining, Educational, Community & Arts Programs  1) Describe the community events held/hosted by the Lyric in the previous quarter and their impact on the community.  2) How many of those events were free to the public and how many were paid ticket events?  3) What was the attendance for the events?  4) What was the revenue (both gross and net) generated from the events?  PLEASE  ANSWER EACH QUESTION ABOVE AS A SEPARATE BULLET POINT NOTED BY THE NUMBER INDICATED  ABOVE
Celebration of Diverse Cultures
Describe the events held//hosted by the Lyric in the previous quarter that were to preserve, promote, present and celebrate diverse cultures with special emphasis on African-American cultural heritage.

Serving the Broader Community  What activities/events were held that served the broader community of entertainers, educators, civic leaders and citizens of the community?
Gallery & Museum  Please list the exhibits or events that were held during the previous quarter. Where possible please estimate the overall attendance at the events.
Programming  Have there been any first time performances or events during the previous quarter? What was the success of the programs? What barriers or challenges were identified with the effort?

### **Certification**

As the Chief Executive Officer (or equivalent) of this agency, I certify that the information provided in this Quarterly Report is true and complete to the best of my knowledge and belief.

I further agree that funds received from LFUCG will be used for the purposes for which they were requested and approved, and that the agency will comply with the requirements set forth in the application and the approved Purchase of Service Agreement and Addendum.

Printed Name		
Signature		
Title		
 Date	 	

#### THIS REPORT AND REQUIRED ATTACHMENT(S) ARE DUE BY:

1<sup>ST</sup> QUARTER: OCTOBER 14, 2014

2<sup>ND</sup> QUARTER: JANUARY 14, 2015

3<sup>RD</sup> QUARTER: APRIL 14, 2015

4<sup>TH</sup> QUARTER: JULY 14, 2015

THIS REPORT SHOULD BE COMPLETED AND SUBMITTED ALONG WITH QUARTERLY FUNDING REQUEST INVOICE ELECTRONICALLY TO:

KEVIN ATKINS CHIEF DEVELOPMENT OFFICER KATKINS@LEXINGTONKY.GOV