



City of Lago Vista
Charitable Contribution and Non-Profit
Funding Application

Name of Agency/Organization: LakeTravisMusicTheatre

Address: 7708 Lohmans Ford Rd, Ste. 101E4

City, State & Zip: Lago Vista, TX, 78645

Contact Person: Angela Smith Title: Treasurer

E-Mail Address: treasurer@LTMT.org

Phone: 714-932-7300 Cell: 714-932-7300

Project Title: LTMT Summer Musical Ticket Price Reduction

Amount of Funds Requested: \$7000

Project Status: (check one) [X] Existing [] Expansion [] New

Briefly describe the program:

Established in 2007, Lake Travis Music Theatre has become a jewel of Austin's north shore and hill country arts community. Over the years LTMT has developed an excellent reputation for high quality productions that entertain and delight audience members of all ages while providing an exceptional experience for cast and crew to use and develop their talents on stage and behind the scenes.

Describe the services the program provides:

Rising Stars: LTMTs Rising Stars theatre Education Program provides a theatre education for local youth, grades 1st through 12th. The program includes general theatre education, as well as instruction in singing, acting, and dancing. The Rising Stars program concludes with a performance opportunity that is junior version of a Broadway musical. In the Spring of 2026 this will be Lion King Jr.

Summer Musical: Lake Travis Music Theatre produces a summer musical each June

If organization received support from the City of Lago Vista previously, provide the following information:

Year Received: 2018-2025 Dollar Amount: 2025 - \$3300
Project Supported: LTMT Rising Stars Program and the Summer Musical

Charitable Contributions and Nonprofit Funding Request Application Questionnaire

The City strongly requests that all answers be typed.
Submission of a completed questionnaire is required for application consideration.

1. What is the agency's mission?

LTMT is dedicated to providing high-quality productions to entertain our community, an enriching and meaningful experience for cast and crew members, and an unparalleled growth opportunity for youth theatre students.

2. What are the goals of the program for which you are requesting funding?

1. Bring high-quality musical theatre to Lago Vista.
2. Create opportunities for locals to grow in the arts and perform.
3. Develop youth confidence and connection through theatre.

3. How will you know you met these goals by the end of the funding year?

We measure success by attendance, feedback, and returning participants. Oliver! drew strong crowds and positive responses.

Cast and crew found the experience meaningful, and high youth retention reflects growth in confidence and connection.

4. Describe the impact of services on the community

LTMT brings high-quality musical theatre to Lago Vista, offering locals a chance to perform, volunteer, and connect—without leaving the community.

We provide youth programs, hands-on opportunities for all ages, and partner with LVHS tech students for real-world experience.

By bringing Broadway to the north shore, we create joy and strengthen community ties.

Questionnaire Page 2

5. If the request for funding for the proposed fiscal year is an increase from the previous fiscal year, please justify such increase:

We are requesting additional funding to help cover the rising hard costs of producing high-quality musicals—licensing fees, live musicians, venue rental, costumes, sets, and more. As the cost of living increases, it's becoming harder for many in our community to afford tickets. Additional grant support will allow us to keep ticket prices accessible, ensuring more families can enjoy and participate in local theatre. Your investment helps us continue enriching the community through the arts while removing financial barriers for those we serve.

6. Provide information on the overall financial position of the organization.
Include: annual budget, sources of funding (e.g., fund raisers, charitable donations)

Annual Budget: \$150,000

Funding Sources:

Production Ticket Sales: \$76,000

Playbill Advertising: \$9,500

Concessions and Merchandise Sales: \$5,500

Charitable Contributions/Grants: \$13,300

Donations from Community Members and Businesses: \$5,100

Fundraising Gala: \$10,000

Rising Stars Program Tuition: \$33,000

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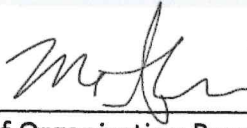
Submitted By: _____

Signature of Executive Director (if applicable)

Date

Printed Name of Executive Director (if applicable)

Approval: _____



6/24/25

Signature of Organization Representative

Date

Melanie Alanis

Printed Name Organization Representative

For Office Use Only

Date Received: _____

By: _____

Date Reviewed: _____

Reviewed By: _____

Submit for Board Review: Yes _____

Council Meeting Date: _____

Ineligible? Yes _____

Reason: _____

Council Decision: Approve \$ _____

Date: _____

Council Comments: _____

Finance Officer Reviewer: _____ Fund Distribution Date: _____