# Arts Grant Final Report

Please type responses into the document, attach additional pages as needed for longer responses.

Submit back to Saratoga Arts either by converting documents and all materials to pdf format and emailing to mhailu@saratog-arts.org or mail hard copies to: Saratoga Arts, 320 Broadway, Saratoga Springs, NY 12866 ATTN: Grants Coordinator.

|  |
| --- |
| Recipient Organization:  |
| Project Title: |
| Sponsored Artist (if applicable): |
| Organization Address:  |
| Report Prepared By:  | Title:  |
| Date:  | Phone:  | E-Mail:  |

|  |
| --- |
| *Please describe below the specific project for which funding was received, including dates and locations of performances, artists involved, etc.* |
| *Total # of events (performances, workshops, etc.)* |
| *Did you change your project (relevant facts, estimates, projections, etc.) as outlined in your application or agreement? If so, please list and explain them here. Were these changes approved by the Grants Administrator?*  |

Please estimate the number of people involved in your funded program as accurately as possible. Include everyone who participated in your program in any way, including workshop participants, the audience at performances, viewers of exhibits, virtual audience estimated numbers. For multiple events, please provide attendance figures for each event as well as totals for all events. (Please total Children, Adults and Seniors for TOTAL ATTENDEES.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Event Date | # of Artists | # of Youth | # of Audience Members | # of Ethnic/Minority | # of Special Constituencies |
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|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| TOTALS |  |  |  |  |  |

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| --- |
| *Did the audience's size and composition meet your expectations? Describe the audience's reaction or response to your program.* |
| *How did your organization publicize this event? Did you include the required funding credit on all printed materials? Attach 1 copy of all publicity and printed materials you produced for this event (flyers, press releases, advertisements, brochures, programs, news articles, etc.).* |
| *From your perspective, how has your program reflected local community needs? What benefits did your program provide for the community? Attach 1 copy of any internal evaluation you may have done with a brief note on your findings.* |
| *Have you observed any changes in organization structure, increased volunteer support, increased fundraising capability or greater ability to achieve artistic goals as a result of your Arts Grant? How has your organization benefited from an Arts Grant? Please be specific.* |
| *What kind of assistance would you like to have provided in order to help you plan and/or execute an Arts Grant project? Did you find the Arts Grant application seminars to be helpful in planning your project? If not, how can we make them more effective? Do you have any suggestions for improvement or changes in the Arts Grant / Statewide Community regrant program?* |

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The undersigned is a principal officer or director of the above-named organization and hereby certifies that, to the best of his/her knowledge, the information contained in this report and any attachments is accurate or represents a reasonable estimate based on information available at this time, and that there are no misstatements or misrepresentations in the information submitted herein or as a supplement to this report.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(PLEASE PRINT) (PLEASE PRINT)*

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete the Project Financial Statement and include attachments.

Arts Grants Final Report - Financial Statement

* Provide actual figures for income and expenses associated with your Arts Grant-funded project.
* Attach copies of receipts for the grant-funded expenses only.
* Attach a separate ITEMIZED list of expenses with specific costs for personnel, services and materials.

|  |  |  |
| --- | --- | --- |
| PROJECT INCOME |  | PROJECT EXPENSES *(attach itemized list)* |
| Earned: |  |  | Personnel  |  |
|  Admissions, Tuition Fees, etc. | $ |  |  Administrative  | $ |
|  Concessions/Sales | $ |  |  Artistic  | $ |
|  Fundraising Events | $ |  |  Technical | $ |
|  Other *(specify)*: |  |  | Other Professional Services *(specify)* |  |
|  | $ |  |  | $ |
|  |  |  |  | $ |
| TOTAL EARNED INCOME: | $ |  |  | $ |
|  |  |  |  |  |
| Unearned: |  |  | Materials/Supplies *(include on itemized list)*(e.g. art supplies, scenery materials, costumes, music scores, photographic supplies, literary materials, etc.) | $ |
|  Government support *(specify)* | $ |  |
|  |
|  | Equipment Rental | $ |
|  Business/Corporate Donations | $ |  | Space Rental | $ |
|  Membership Fees | $ |  | Travel/Transportation | $ |
|  Individual Contributions | $ |  | Promotion/Publicity *(include printing)* | $ |
| Community Arts Grant | $ |  | Other *(specify):* | $ |
| Other *(specify):* | $ |  |  | $ |
|  | $ |  |  | $ |
| TOTAL UNEARNED INCOME: | $ |  |  | $ |
|  |  |  |  |  |
| TOTAL PROJECT INCOME | $ |  | TOTAL PROJECT EXPENSES | $ |

|  |  |
| --- | --- |
| NET GAIN OR (LOSS) [e.g. Income minus Expenses] |  $ |

Please list and estimate the value of all In-Kind Donations you received for your Arts Grant-funded program. Use an additional sheet if necessary.

|  |  |
| --- | --- |
| In-Kind Donations | $ Value |
|  |  |
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FINAL REPORT ATTACHMENTS:

* Photos, DVD, CD or other similar documentation if available
* Articles and/or Reviews about the project, if available/applicable
* Copies of all Publicity produced for the funded program
* Copies of Receipts, as described above
* Itemized Expense List as described above

If you have any questions, please contact the Grants Coordinator

Mae Hailu, mhailu@saratoga-arts.org.

Or call 518-584-4132