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Final reports are due WITHIN 30 days after the ending date on the Grant Agreement. NOTE: This is a standard form. Some lines may not be applicable.

This report must show completely and accurately how the program actually occurred. This information is necessary to accomplish the statutory purposes outlined under Chapter 20 ILCS 3915. **Disclosure of information is required. Failure to provide requested information will result in this form not being processed.**

Final Reports for Arts and Foreign Language Implementation grants are filed electronically using the Salesforce system.

Please refer to the AFL instructions on the Final Report Materials page:

<https://arts.illinois.gov/Final-Report-Materials>

If you have questions regarding the filing of the final report, please contact Sandra Velazquez, Accountant Supervisor at 312/814-4993 or [Sandra.Velazquez@illinois.gov](mailto:Sandra.Velazquez@illinois.gov).

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District name and number (Grantee Organization)

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Grant Number

### Final Report Summary

\$\_\_\_\_\_ GRA (IACA Grant Amount Awarded)

\$\_\_\_\_\_ EXP (Total Cash Expenses)

\$\_\_\_\_\_ INK (Total In-Kind Contributions)

\$\_\_\_\_\_ SPE (IACA Grant Amount Spent)

\$\_\_\_\_\_ INC (Total Cash Income)

\_\_\_\_\_ IND (Individuals Benefiting from Project)

\_\_\_\_\_ YTH (Children Benefiting from Project)

\_\_\_\_\_ ART (Artists Participating in Project)

\_\_\_\_\_ VOL (Volunteers Participating in Project)

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Show **Income** and **Expenses** related to the funded planning project.

1. IACA Grant Amount Awarded \$\_\_\_\_\_ (GRA)

**Income**

2. Federal Support \$\_\_\_\_\_

3. State / Regional Support (do not include IACA grant) \$\_\_\_\_\_

4. Local / Municipal / County Support \$\_\_\_\_\_

5. Corporate Contributions / Support \$\_\_\_\_\_

6. Foundation Contributions / Support \$\_\_\_\_\_

7. Individual Contributions / Support \$\_\_\_\_\_

8. Other Revenue \$\_\_\_\_\_

9. District Cash Contributions \$\_\_\_\_\_

10. IACA Grant Amount Spent \$\_\_\_\_\_ (SPE)

11. TOTAL Cash Income (sum 2 – 10) \$\_\_\_\_\_ (INC)

**Expenses**

**Cash Expenses**

**In-Kind Contributions**

Instruction (function #1000)

12. Salaries (Object 100) \$\_\_\_\_\_ \$\_\_\_\_\_

13. Employee Benefits (Object 200) \$\_\_\_\_\_ \$\_\_\_\_\_

14. Purchased Services (Object 300) \$\_\_\_\_\_ \$\_\_\_\_\_

15. Supplies and Materials (Object 400) \$\_\_\_\_\_ \$\_\_\_\_\_

16. Capital Outlay (Object 500) \$\_\_\_\_\_ \$\_\_\_\_\_

17. Noncapitalized Equipment (Object 700) \$\_\_\_\_\_ \$\_\_\_\_\_

Improvement of Instruction Services (function #2210)

18. Salaries (Object 100) \$\_\_\_\_\_ \$\_\_\_\_\_

19. Employee Benefits (Object 200) \$\_\_\_\_\_ \$\_\_\_\_\_

20. Purchased Services (Object 300) \$\_\_\_\_\_ \$\_\_\_\_\_

21. Supplies and Materials (Object 400) \$\_\_\_\_\_ \$\_\_\_\_\_

22. Capital Outlay (Object 500) \$\_\_\_\_\_ \$\_\_\_\_\_

23. Other Objects (Object 600) \$\_\_\_\_\_ \$\_\_\_\_\_

24. Noncapitalized Equipment (Object 700) \$\_\_\_\_\_ \$\_\_\_\_\_

General Administration Capped at 5% (function #2300)

25. Salaries (Object 100) \$\_\_\_\_\_ \$\_\_\_\_\_

26. Employee Benefits (Object 200) \$\_\_\_\_\_ \$\_\_\_\_\_

27. Purchased Services (Object 300) \$\_\_\_\_\_ \$\_\_\_\_\_

28. Supplies and Materials (Object 400) \$\_\_\_\_\_ \$\_\_\_\_\_

Payments to Other Edu. and Gov. Units (function #4000)

29. Purchased Services (Object 300) \$\_\_\_\_\_ \$\_\_\_\_\_

30. Other Objects (Object 600) \$\_\_\_\_\_ \$\_\_\_\_\_

31. TOTAL Cash Expenses (sum Cash Expenses 12 – 30) \$\_\_\_\_\_ (EXP)

32. TOTAL In-Kind Contributions (sum In-Kind Contributions 12 – 30) \$\_\_\_\_\_ (INK)



Briefly summarize the results of the implementation process. Indicate any changes from the original implementation proposal.

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**Chart A: Implementation Effectiveness.** Evaluate the effectiveness of the implementation process you have completed by describing the outcome of each activity under the objectives that were in the original application. In your evaluation, describe the success or failure of each activity. Duplicate form as needed.

Objectives	Outcome of objectives	Success or failure evaluation

**Chart A: Implementation Effectiveness.** Evaluate the effectiveness of the implementation process you have completed by describing the outcome of each activity under the objectives that were in the original application. In your evaluation, describe the success or failure of each activity. Duplicate form as needed.

Objectives	Outcome of objectives	Success or failure evaluation

**Chart A: Implementation Effectiveness.** Evaluate the effectiveness of the implementation process you have completed by describing the outcome of each activity under the objectives that were in the original application. In your evaluation, describe the success or failure of each activity. Duplicate form as needed.

Objectives	Outcome of objectives	Success or failure evaluation

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**CHART B: District Personnel Report.** In the chart below, write the name, title (i.e., teacher, administrator, superintendent, student), and the role each played in the implementation process (i.e., committee member, researcher, workshop participant). Duplicate form as needed.

	Name	Title	Role
Administrators			
Faculty			
Students			
Other			

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Students			
Other			

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**CHART C: Resources Report.** In the chart below, write the names of the human resources (i.e., non district, parents, community representatives, consultants) and materials (i.e., books, program materials) that were used in the implementation process. Duplicate form as needed.

Category	Description	Cost
Human Resources		
Material Resources		
Other		

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Category	Description	Cost
Human Resources		
Material Resources		
Other		

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**Goals and Objectives:** Using your Action Plan, complete a chart for each goal and objective describing your future plans as a result of the implementation process you have concluded. Duplicate form as needed.

Goal: \_\_\_\_\_

Objective: \_\_\_\_\_

Strategy	Responsible Personnel	Timeline	Budget	Data Collected

Strategy	Responsible Personnel	Timeline	Budget	Data Collected

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