

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.**

Reports must be complete and signed by the Superintendent or Authorized Official. Complete this PDF form and save it.

The completed form should be named with your grant number (such as: 20191234).

Email the completed form to

Sandra Velazquez: Sandra.Velazquez@illinois.gov

Consult IACA staff if you have questions.

District name and number (Grantee Organization)

Grant Number

Financial Officer or Individual Completing this form

Title

Daytime Phone

Email

Program Contact

Title

Daytime Phone

Email

Title of funded project

Beginning Date

Ending Date

Certification

The undersigned, being an authorized agent on behalf of the "Grantee", hereby certifies that:

1. The information detailed on this Final Report is fairly stated and complies with the rules of the State of Illinois' Grant Recovery Act, and all the grant conditions referenced on Illinois Arts Council Agency's Grant Agreement.
2. All of the information cited herein can be verified by accounting records and other financial information of the Grantee, and will be made available to the Illinois Arts Council Agency or designated representative upon request.

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)

Authorizing Official Signature

Date

Name

Title

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)

National Endowment for the Arts Requirements

The following question is part of a data collection project that documents national trends of grants in the arts. Compliance is required by the national endowment for the arts. The Illinois Arts Council Agency will not use this information during the grantmaking process.

Population Benefited by Race / Ethnicity:

American Indian/Alaska Native

Asian

Black/African American

Hispanic/Latino

Native Hawaiian/Other Pacific Islander

White

No single racial/ethnic group made up more than 25% of the population directly benefited

Population Benefited by Age:

Children/Youth (0-18 years)

Young Adults (19-24 years)

Adults (25-64 years)

Older Adults (65+ years)

No single age group made up more than 25% of the population directly benefited

Population Benefited by Distinct Groups:

Individuals with Disabilities

Individuals in Institutions

Individuals below the Poverty Line

Individuals with Limited English Proficiency

Military Veterans/Active Duty Personnel

Youth at Risk

No single distinct group made up more than 25% of the population directly benefited

Attach a copy of the Action Plan for your project and briefly summarize the results of the implementation process. Indicate any changes from the original implementation proposal. Limit summary to two pages.

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

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			

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			

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			

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		

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		

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		

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

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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.

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