

Final Report: Link Up Initiative



1. Organization Name: _____ 2. Grant No: _____
3. Mailing Address: _____ 4. City: _____
5. Zip: _____ 6. Project Director: _____
7. Project Director's phone: _ _____ 8. e-mail: _____
9. Authorizing Official: _____
10. Project start date (month/day/year): _____ 11. End date (month/day/year): _____
12. Did you make any significant changes in your project from what was described in your original application? Yes No
13. If you made significant changes, did you submit a grant change form and get approval from MAC before you made the changes? Yes No
14. Was MAC credited in your printed materials and publicity? (include a sample copy) Yes No
15. Did you inform your local legislators about your grant? (include a sample of correspondence) Yes No
16. Project Documentation: What kinds of documentation of your project can you make available to MAC, if needed? photographs video internal written reports other
17. How did you publicize your project?

18. **Attendance Itemization:** Please refer to the Attendance Itemization submitted as part of your Project Grant application. Provide your projected figures from the application along with the actual figures from the project. Please make sure not to count participants at the same event more than once:

Project Attendance			Actual Attendance			
List the type of activities funded by the grant	Number of events you projected for this year	Number of attendees you projected for this year	Total number of events this year	Total of adults who took part in this event	Total of youths under 18 who took part this year	Total of all attendees who took part this year
Concert						
School Visits						
Visiting Artists						
Other						
Other						
Total:						

Link Up - Budget Report

Please document your expenses and income related to your Link Up program. Matching funds are not required for the grant, but please document any matching funds your organization put into the program.

Please itemize your expenses and income on a separate page, providing detail about the specific expenses under each category listed below.

19. Cash Expenses		Matching Funds	MAC Grant	Total
1. Personnel (staff):	Administrative			
	Artistic (Musicians)			
	Technical/production			
2. Outside fees (contractors):	Artistic (Guest Musicians)			
	Other			
3. Space or equipment rental:				
4. Travel:	Transportation			
	Food			
	Lodging			
5. Marketing:	Printing			
	Other			
6. Remaining expenses:	Postage			
	Supplies			
	Insurance			
	Other			
	Other			
7. Total cash expenses	(must not exceed total cash income)			

20. Cash Income		Cash	In-Kind*
1. Revenue:	Admissions		
	Earned Income		
	Other revenue		
2. Private-sector support:	Corporate contributions		
	Foundation grants		
	Other private contributions		
3. Government support:	Federal		
	State/regional (other than MAC grants)		
	County		
	Municipal		
4. Grantee cash:			
5. Portion of this grant already received:			
6. Remainder of this grant due:			
7. Total	(must equal or exceed total cash expenses)		

*Defined as the cash value of goods and services contributed by sources other than the grantee organization, such as work done by volunteers or donated office space. You must be able to produce records of in-kind contributions.

21. Narrative Review Statement

Please describe the outcomes of your Link Up program by answering the following questions in a narrative statement. Group your answers under the headings presented below. The document should be no longer than two pages. Please format it using a minimum 12 point font size and one inch margins on all sides of the pages.

A. Link Up Goals and Outcomes

- What were your goals for the program? Did you achieve them?
- What outcomes did you see happen as a result of this grant? Were there any unexpected outcomes?

B. Quality of Program Activities and Their Artistic Excellence

- Describe the main activities of the program, including who participated.
- How did you promote the program?
- What steps did you have in place to ensure high artistic quality in your activities?
- Describe how you evaluated your program.

C. Public Participation and Access

- How did you make your Link Up program accessible to all the people in your community, especially those who are traditionally underserved by the arts?
- How did you include the public in the planning and evaluation of the Link Up program?

D. Ability to Carry out the Project

- Describe your community's support or understanding of Link Up. What were the indications that the school district administrators and members of the community supported it?
- If you had partner organizations for the program, who were they and what were their roles?
- What were the main successes and challenges of the program?
- Does your organization plan to make changes in the program next year? If so, please describe.

Project Activity Location Report

Grantees must complete this form listing each location associated for Project Grants, Minigrants, and Folk Arts Apprenticeship, and Link Up Grants.

For each event location/venue associated with this grant, please list the following information:

____ Number of days on which activities occurred at this venue

_____ Venue Street Address (Not P.O. Box)

_____ Venue City, State, Zip Code

____ Number of days on which activities occurred at this venue

_____ Venue Street Address (Not P.O. Box)

_____ Venue City, State, Zip Code

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_____ Venue City, State, Zip Code

FINAL STATISTICS

22. In your best estimation - select all categories that made up 25% or more of the **population that directly benefited by race/ethnicity**, excluding broadcasts or online programming:

- 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

23. In your best estimation - select all categories that made up 25% or more of the **population that directly benefited by age group**, excluding broadcasts or online programming:

- 1 – Children/Youth (0-18 yrs.)
- 2 – Young Adults (19-24 yrs.)
- 3 – Adults (25-64 yrs.)
- 4 – Older Adults (65+ yrs.)
- 9 – No single group made up more than 25% of the population directly benefiting

24. In your best estimation, select all categories that made up 25% or more of the **population that directed benefited by distinct groups**, excluding broadcasts or online programming:

- D – Individuals with disabilities
- I – Individuals in institutions
- P – Individuals below poverty line
- E – Individuals with limited English proficiency
- M – Military veterans / Active duty personnel
- Y – Youth at Risk
- G – No single distinct group made up more than 25% of the population directly benefiting

25. How many individuals received newsletters, announcements, or other promotional materials supported by this grant? 25. _____

26. How many schools benefited from performances, demonstrations, teacher training, or other services supported by this grant? 26. _____

27. Paid personnel

a. How many people were paid for services related to the project? 27a. _____

b. Of this number, how many were artists? 27b. _____

28 Volunteer personnel

a. How many people did volunteer work on your project? 28a. _____

b. Of this number, how many were artists? 28b. _____

29. **Arts Education projects only:** How many teachers, educators, and administrators received training through this grant?

K-5 teachers:
6-12 teachers:
Arts specialists:
Administrators:

TOTAL: 29. _____

30. Did any aspect of this project, regardless of the program area, offer training for teachers? Yes No

31. If yes, briefly describe (in one to two sentences) the training that was offered:

CHECKLIST

Before you submit your Final Report, make sure that you have:

- Completed all components of the Link Up Final Report Form
- Budget Itemization detailing expenses and income listed on Budget Report
- Answered the Narrative Review questions in an attached document
- Attached appropriate supplementary materials that demonstrate completion of the project, such as concert programs, copies of local publicity, letters from teachers or parents, feedback from social media, or letters to your state legislators about the project
- Obtained electronic signatures from the Authorizing Official and Project Director (below).

CERTIFICATION

The Authorizing Official and Project Director hereby certify that the information contained in this report, including all attachments, is true and correct to the best of our knowledge.

Project Director signature _____ **Date** _____

Name: _____

Authorizing Official signature _____ **Date** _____

Name: _____

**The Authorizing Official should be the same official who signed your grant application and grant contract. If there has been a change, please document it on a MAC Grant Change Form and submit with the report.*

Submit this form and the required supporting materials to MAC within 30 days of finishing your project or by May 15th, whichever comes first. Do not bind or staple the report. Send your package to:

Mississippi Arts Commission
501 North West Street, Suite 1101A
Woolfolk Building
Jackson, MS 39201