

# 2013 Community Foundation and Howland Foundation Grants

# Final Report Guidelines

* **Interim/Final Report (due February 20, 2014) (**This form can also be found on our website at [www.cftompkins.org](http://www.cftompkins.org) )
* Submit a brief narrative describing the progress of your project. Include a comparison of expenses incurred by the date of the progress report vs. the original budget.
* Include the following 3 sections in your final report:

## SECTION A

Name of Organization:

Address:

Executive Director:

Project Name:

Grant Amount:

Contact person for grant:

Your title:

Email:

Phone:

### SECTION B

Use the attached **Financial Report** form to compare your original budget with actual figures. Explain any variations from original budget that are larger than 10%.

SECTION C

1. Review your original plans. Please include:
   1. Discuss the extent to which your original objectives were met.
   2. Explain any significant differences between your original plan and the final outcome.
2. Discuss the impact your program has had (including the number of people affected). Please include evaluated results of your program.
3. Lessons Learned: What have you learned, e.g. about effective program strategies, realistic outcomes, on-going value of the project.
4. If applicable, summarize your current plans for the project’s future. Please include programming envisioned, financial support envisioned, your ability to secure necessary support in the future.

Note: Failure to submit these reports by their due dates may affect your organization’s eligibility to receive future grants.

**Financial Report**

**Provide the following information regarding the program or project for which you received funds.**

#### SUPPORT/REVENUE BUDGETED ACTUAL

|  |  |  |
| --- | --- | --- |
|  | **Total Anticipated Support/Revenue** | **Actual Support/Revenue** |
| 1. Requested grant |  |  |
| 2. Fundraising events |  |  |
| 3. Gifts/bequests |  |  |
| 4. Miscellaneous contributions |  |  |
| 5. Foundation/corporate grant support |  |  |
| 6. United Way |  |  |
| 7. Grants/contracts: govt. agencies |  |  |
| 8. Program service fees |  |  |
| 9. Membership dues |  |  |
| 10. Investment income/transactions |  |  |
| 11. Sales: services, products, crafts |  |  |
| 12. Miscellaneous revenue |  |  |
| **13. Subtotal Direct Support/Revenue** |  |  |
| 14. General & Management Income (prorated) |  |  |
| 15. Total Support/Revenue |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Total Anticipated Expenses** | **Total Actual Expenses** |
| 16. Salaries of provider staff |  |  |
| 17. Fringe benefits |  |  |
| 18. Professional fees (contract, consultant) |  |  |
| 19. Supplies (consumable) |  |  |
| 20. Printing and postage |  |  |
| 21. Occupancy |  |  |
| 22. Phone and fax |  |  |
| 23. Travel and meetings |  |  |
| 24. Training |  |  |
| 25. Evaluation |  |  |
| 26. Equipment purchases |  |  |
| 27. Miscellaneous expenses |  |  |
| **28. Subtotal Direct Expenses** |  |  |
| 29. General & Management Expenses (prorated) |  |  |
| 30. Total Expenses |  |  |

EXPENSES BUDGETED ACTUAL

|  |  |  |
| --- | --- | --- |
| **31. Surplus (Deficit)** |  |  |

B. Please provide a brief budget narrative describing any variations.