

CHARLES COUNTY ARTS ALLIANCE, INC.

FY 2025 Community Arts Development Grants

FINAL REPORT FORM - FY 2025 GRANTS

FINAL DEADLINE and SUBMISSION REQUIREMENTS

The final deadline for CCAA Office receipt (not postmark) of all hard-copy Final Report Form packages from all CCAA Grantees for FY 2025 is **NLT Tuesday, July 22, 2025, by 12:00 noon**. This is a firm deadline, and no extensions will be given. This final deadline applies to both General Operating Grants and Special Project Grants.

Please plan accordingly, providing ample time to:

- Complete the Narrative and Financials;
- Assemble the Required Enclosures of publicity materials that demonstrate proper credit being given to the CCAA for its FY 2025 Grant support;
- Obtain the Required (3) Signatures; and
- Postal mail your completed Final Report Form package in time to meet the above-stated final deadline of July 22, 2025, for receipt (not postmark) of your package by the CCAA Office.

Please allow a full one-week period for postal mailing, to ensure your package reaches the CCAA Office by the above-stated July 22, 2025 deadline.

Failure to comply will result in: (1) ineligibility for CCAA Grant funding in the subsequent fiscal year; and/or (2) a requirement to return (refund) the full dollar amount of the CCAA Grant.

Mail your hard-copy Final Report Form package to: CCAA, PO Box 697, White Plains, MD 20695.

FY 2025 FINAL REPORT

NARRATIVE

Please complete all sections below.

1. Name of Organization	
2. CCAA Grant Amount Received, and Required "Cash-Match" with Grantee Organization Funds (1:1, 2:1, 3:1)	CCAA Grant Amount: \$ _____ Grantee Organization Cash-Match: \$ _____
Name of Artist(s):	
Program or Special Project Type / Art Form:	
Actual Date(s) of Program or Special Project:	

Stated Goals of Program or Special Project: <i>(per your original Grant Application - be specific)</i>
Number of Days for Program or Special Project:
4. Did your organization achieve the objectives set forth in your original CCAA Grant Application? If not, why not?
5. Please describe the challenges your organization faced in carrying out your program or special project.
6. Please describe the successes your organization faced in carrying out your program or special project.
7. How many individuals benefitted from your program or special project being supported with CCAA Grant funding?
Number of Artists Benefitting from this CCAA Grant:
Total Number of Individuals Benefitting from this CCAA Grant:
Number of Children / Youth Under 18 Benefitting from this CCAA Grant:
8. What are the short-term and long-term effects of receiving this CCAA Grant funding for your arts organization or special project? <i>(be specific)</i>

FINANCIALS

Please provide a final financial accounting of your **actual** cash expenses and **actual** cash income for your arts organization, or for your special project activities for FY 2025 (7/1/2024 - 6/30/2025). If needed, please provide a separate detailed budget to clarify exactly how your CCAA Grant funding was spent. Your **total cash expenses** and **total cash income** do not need to match.

<u>CASH EXPENSES</u>	<u>July 1, 2024 to June 30, 2025</u>	<u>CASH INCOME</u>	<u>July 1, 2024 to June 30, 2025</u>
<i>Personnel Salaries & Fees:</i>		<i>Earned Income:</i>	
Personnel - Administrative		Individual admissions/tickets	
Personnel - Artistic		Memberships/subscriptions	
Personnel – Educational		Tuition	
Personnel - Technical		Proceeds from fundraising	
		Interest income	
<i>Administration & Operations:</i>		<i>Contracted Services:</i>	
Rent		Facility rental	
Utilities		Advertising sales	
Office Supplies		Proceeds from goods sold	
Office equipment rental			
Office printing/copying		<i>Contributed Support:</i>	
Postal expenses		Individual donations	
Security		Corporate	
Travel		Foundation	
Insurance		Other (list)	
Legal/Accounting			
Dues/association memberships			
<i>Programming:</i>		<i>Public:</i>	
Production expenses		National Endowment for the Arts	
Educational expenses		Other Federal Agencies	
Facility/equipment rental		Maryland State Arts Council	
Printing		County or City	
Scholarships/awards		Charles County Arts Alliance	
Copyright/licensing fees			
Travel		TOTAL CASH INCOME	
<i>Fundraising/Marketing/Retail:</i>			
Paid advertising			
Direct mailing			
Fundraising events			
Cost of goods purchased for sale			
TOTAL CASH EXPENSES			

REQUIRED ENCLOSURES

In addition to this Final Report Form, please enclose copies of publicity materials, programs, and news articles that promoted arts programs, projects and events that took place with your CCAA Grant financial support. Please highlight where proper credit was given to the CCAA in your promotional materials.

REQUIRED (3) SIGNATURES

We hereby certify that all information contained in this Final Report Form is true and accurate.

Signature of Person Completing Final Report Form:	
Typed Name:	
Title:	
Date:	
Email:	
Phone: (H)	(C)
Signature of President:	
Typed Name:	
Title:	
Date:	
Email:	
Phone: (H)	(C)
Signature of Treasurer:	
Typed Name:	
Title:	
Date:	
Email:	
Phone: (H)	(C)

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