

MARTIN FOUNDATION ARTS FUNDING PROGRAM FINAL REPORT – FY 2025

Arts Council of Central Louisiana

DUE MARCH 30, 2026

Grant Number:	_____	Grant Awarded:	_____	Grant Expended:	_____
Organization Name:	_____				
Address:	_____				
City:	_____	Parish:	_____	State: Louisiana	Zip: _____
Project Director/Title:	_____				
Phone:	_____	Email:	_____		
# of Volunteers	_____				
Project Title:	_____				
Sub Applicant:	_____				

PROJECT ACTIVITY DETAILS:

Use page 1.a. if additional pages are necessary.

DATE	TYPE OF ACTIVITY	LOCATION	WHO	# INDIVIDUALS

Use this page if additional space is required.

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TOTAL ATTENDANCE:

Number of Persons Ages 18 and Under: _____
Number of Adults: _____
Total Attendance: _____

TOTAL ARTISTS/ARTISTIC FEES:

Total Number of Artists Involved: _____
Total Number of Artists Paid: _____
Total Amount Paid to Artists: _____

NARRATIVE:

Please check the appropriate boxes and answer the following questions. You may continue on additional sheets of paper if necessary.

1. Did the completed project differ from the grant agreement and/or application? ☐ Yes ☐ No If yes, how?

2. Did you experience any problems in administering the arts project? ☐ Yes ☐ No If yes, explain.

3. What was the community's response to the project?

4. On a scale of 1 to 5, how would you rate the artistic merit of the project? 1 is the lowest and 5 is the highest.

☐

5. How was the project promoted to the public? Check all that apply:

- | | | |
|---|---|---|
| <input type="checkbox"/> Direct Mail | <input type="checkbox"/> Television Ad | <input type="checkbox"/> Street Banners |
| <input type="checkbox"/> Flyers | <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Billboard |
| <input type="checkbox"/> Neighborhood Posters | <input type="checkbox"/> Radio PSA | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Meeting or Formal Presentation | <input type="checkbox"/> Other: _____ |

6. Do you plan on continuing this project in the future? ☐ Yes ☐ No If yes, how will the project be sustained or changed?

FINAL PROJECT BUDGET:

Round numbers to the nearest dollar amount. Include both grant funds and additional cash.

TOTAL PROJECT EXPENDITURES

(A) Personnel – Administrative	_____
(B) Personnel – Artistic	_____
(C) Personnel – Technical	_____
(D) Fiscal Agent Fees	_____
(E) Outside Professional Services - Artistic	_____
(F) Outside Professional Services – Other	_____
(G) Utilities	_____
(H) Space Rental	_____
(I) Travel/Per Diems	_____
(J) Marketing (promotion, publicity, print)	_____
(K) Equipment Rental	_____
(L) Supplies and Materials	_____
(M) Postage/Shipping Costs	_____
(N) Insurance	_____
(O) Other: List Below	_____

TOTAL PROJECT EXPENDITURES: \$ 0.00

TOTAL PROJECT REVENUE

Martin Foundation Arts Funding Grant	_____
Other Cash Support: List Below	_____

TOTAL PROJECT REVENUE: \$ 0.00

TOTAL IN-KIND SUPPORT (Optional)

GRANT EXPENDITURE SUMMARY:

Note: This corresponds to each of the expense lines (A, B, C, ...) but only for the grant funded component of this expense line.

A		F		K	
B		G		L	
C		H		M	
D		I		N	
E		J		O	

GRANT EXPENDITURE DOCUMENTATION:[illegible]

CHECKLIST:

- ☐ Complete Final Report Form
- ☐ Grant Expenditure Documentation – only for payments using grant funds (not the entire project expenses)
- ☐ Samples of printed materials including proper credit and appropriate logos. Statements and logos are **required** on all printed promotional material associated with the project including, but not limited to, all mailings, programs, posters, flyers, programs, etc. A copy of a public service announcement containing the statement may also be submitted.
- ☐ Images of grant sponsored activities [Photographs (digital, print or slide); video; CD, etc.]

ASSURANCES:

We, the undersigned, hereby certify that to the best of our knowledge all facts, figures and representations in this final report are true and correct; that all art programs or services were completed in accordance with terms and conditions set forth in the grant agreement and the Decentralized Arts Funding Program Guidelines.

Authorizing Official (President or Chair)

Signature _____

Typed Name/Title _____

Date _____

Project Director

Signature _____

Typed Name/Title _____

Date _____