



**ALAMEDA COUNTY ARTS COMMISSION**

1401 Lakeside Drive, Suite 603, Oakland, CA 94612

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Rachel Osajima, Executive Director | direct phone 510-271-5162

**2014 ARTSFUND Grants Program  
Grant Period: July 1, 2014 – June 30, 2016**

**FINAL REPORT FORM [DUE BY JULY 30, 2016]**

(Please type)

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Website \_\_\_\_\_

2014 ARTSFUND Grant Award Amount \$ \_\_\_\_\_

Please complete all sections of this form and **return it with supporting documents** to Alameda County Arts Commission by the **final deadline of July 30, 2016**. Please use the space provided. Supporting documents should include samples of promotional items, programs and/or brochures, and may include photographs, digital images and other relevant materials documenting your activities; all items must be labeled. **Please make sure the report is signed, and keep a copy for your files. This report should be typed.** A digital version of this form is available on the Arts Commission website at [www.acgov.org/arts](http://www.acgov.org/arts) then click on Programs and ARTSFUND.

1. Provide a brief description of approved grant-funded general operating and/or programming (include brief summary of activities, dates & sites). Briefly describe any changes in your general operating and/or program(s) since the application was submitted. (**answer in the space provided below.**)

ORGANIZATION NAME \_\_\_\_\_

## 2014 ARTSFUND Grants Program – Final Report

2. Was your organization able to achieve the goals it originally intended for this grant? If all the goals were not achieved, please explain why.

3. Approximately how many people were directly reached by this program (not including organization /program personnel)?  
(enter number) \_\_\_\_\_

4. OPTIONAL: **Audience Ethnicity** If members of the following cultural groups constituted more than 15% of your total audience for this project, please check "over 15%" and estimate the percentage of the total audience for each group over 15%:

	Under 15%	Over 15%	If over 15%, what percent?
American Indian/Alaskan Native	_____	_____	_____ %
Asian/Pacific Islander	_____	_____	_____ %
African American/Black	_____	_____	_____ %
Latino/Latina	_____	_____	_____ %
Other (specify)	_____	_____	_____ %

5. OPTIONAL: Please feel free to convey any other information about your organization and/or the ARTSFUND Grant Program.

CERTIFICATION (this must be signed by someone legally authorized to represent your organization):  
I certify that we have fulfilled the terms and conditions of this grant as stated in the ARTSFUND Terms and Conditions of Award and that the information included in this final report is correct and accurate.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
TITLE