**Final Report Form: FY2025-2026**

[include Local Arts Council logo]

Applicant Information

Name:

Mailing Address:

City: County: Zip Code:\_\_\_\_\_\_\_\_\_\_\_

Phone Number: Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Race:

**Certification**

I certify the information contained in this report, including all attachments and supporting materials, is true and correct to the best of my knowledge, and that the expenditures are for the purposes set forth in the grant award documents.

Signature of Applicant:

Date:

**Project Description Narrative (Attach separately)**

Describe your finished project. Provide details about how it met, didn't meet, or exceeded the outcomes proposed in your application. Summarize the ways in which the project was a success and describe its impact on your artistic career and goals.

Project Budget

**Expenses:**

Provide your revised budget and actual project expenses and explain any significant variations. Identify any cash or in-kind matching contributions.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Budget** | **Actual** | **Variance** | **Explanation of Variance** |
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| **Total Expenses:** |  |  |  |  |

**Income:**

Provide any project income including personal funds, additional grant funds, or other sources. List different sources separately. The **Total Income** amount should equal the **Total Expenses** amount listed above.

|  |  |
| --- | --- |
| **Description** | **Amount** |
| N.C. Arts Council Artist Support Grant  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Income:** |  |

Budget Sheet can be downloaded if needed at [ncarts.org/asg-applicant-budget-sheet](https://www.ncarts.org/asg-applicant-budget-sheet).

Attachments

* I have included the required photos, digital copies, or other audio/visual documentation of the works completed.
* I have included the applicable publicity samples and printed materials with logo and credit line.