

EXHIBIT D
FULTON COUNTY ARTS COUNCIL

141 PRYOR ST, SW; ATLANTA, GA 30303

Phone: (404) 612-5780

Fax: (404) 730-5798

Website: www.fultonarts.org

**2009/2010 CONTRACTS FOR SERVICES –
MUNICIPALITIES FINAL REPORT INSTRUCTIONS**

Deadline: Please submit the report no later than 5:00 p.m. on **July 30, 2010**.

For Assistance: Please contact Contracts for Services staff at (404) 612-5780.

Organizing the Report: Please provide the documentation in the order requested. If the report is disorganized and difficult to verify, it will be returned to the organization without processing. Please type or use word processing software; handwritten reports cannot be accepted. The Final Report is available as a Microsoft Word® document for downloading at www.fultonarts.org

Matching CASH Funds: All Arts Council awards require matching funds as outlined in the Contract. The Final Report expenses and revenues and matching funds requirements:

- a. Awards must be matched on a minimum **1:1** basis

Attachments: Please submit the appropriate documentation as listed in Section I of the Final Report.

FCAC Credit Line— Failure to include the full FCAC logo and credit line in any and all printed or broadcast material(s) may affect the final payment. The appropriate credit line is listed in the contract.

As of 6/24/09



2009/2010 CONTRACTS FOR SERVICES FINAL REPORT FORM

Contract Number: FCAC use only
Amount: _____

Check any other FCAC awards received during the 2009/10 contract cycle:	
<input type="checkbox"/> Technical Assistance (TA)	<input type="checkbox"/> Neighborhood Arts
<input type="checkbox"/> Special Projects	<input type="checkbox"/> Other

A CONTRACTOR ORGANIZATION INFORMATION

Check here for name and address correction(s)

Organization Name: _____	Org Phone: _____
Admin Office Address: _____	Fax Number: _____
Admin Office City State Zip _____	Admin Office Fulton County District _____
Mailing Address _____	_____
Mailing City State Zip _____	_____
Contact Person: _____	Day Phone: _____
Contact Title: _____	Alt Phone: _____
Website: _____	Email: _____

B CERTIFICATION

The undersigned has read the contract between Fulton County and the contractor and assures compliance with those terms. Contractor certifies that it has utilized Fulton County awarded dollars consistent with the stated requirements specified in the original contract. In addition, the organization and its agent who executes this document certify the information contained in this report to be true and correct to the best of his/her knowledge.

Date: _____

Authorizing Official Signature

Print Name: _____

Title: _____

C TYPE OF PROJECT

Check all that apply
Indicate if funds were used for:

<input type="checkbox"/> Arts PROJECT Support
<input type="checkbox"/> Arts PLANNING Support

D DEMOGRAPHICS: Please note that all questions in this section need to have an answer.

Geographic/Audience Information—Check all that apply

- a. Total Number of Persons Served Directly (this number should equal the TOTAL listed in the breakdown below): _____
 b. If carried on TV or Radio, estimate number reached: _____ (do not include this figure in b)

Breakdown of People Served – please use whole numbers, NOT percentages

	African/ American	Asian/ American	Hispanic/ Latino	Native American	Caucasian	Total
Adults (ages 19-64)	+ _____	+ _____	+ _____	+ _____	+ _____	= _____
Youth (aged 0-18)	+ _____	+ _____	+ _____	+ _____	+ _____	= _____
Seniors (ages 65+)	+ _____	+ _____	+ _____	+ _____	+ _____	= _____
TOTAL	+ _____	+ _____	+ _____	+ _____	+ _____	= _____
People with disabilities						= _____
Tourists						= _____
Fulton County Artists Engaged	+ _____	+ _____	+ _____	+ _____	+ _____	= _____
Non-Fulton County Artists Engaged	+ _____	+ _____	+ _____	+ _____	+ _____	= _____

Of the total BREAKDOWN OF PEOPLE SERVED listed above, indicated how many are:
 Male = _____
 Female = _____
 TOTAL (should equal the total listed in item c above)= _____

E PERSONNEL INFORMATION – for the project only

Full-time Personnel: _____ Artists who received a fee _____ Non-Artist Volunteers: _____
 Part-time Personnel: _____ Artists who volunteered their work _____ Other Personnel: _____

F**1. Artistic/Cultural Programming Summary** *(Add additional pages if needed.)*

Number of activities _____

- *Describe the programs/activities offered during the contract cycle.*
- **Detail any actual changes to the arts programming experienced from those presented in your contract's Scope of Services and an explanation for the changes.**
 - *Explain any challenges and/or obstacles the organization encountered in completing the Scope of Services.*
 - *Address any significant differences between the figures (budget and attendance) initially projected and the final numbers.*

2. **Support for the Arts:** Please detail the impact of the project on the arts in your city. Discuss any artists/arts organizations with which you partnered and any lessons learned. Explain how the project aligned with your city's short- and long-term plans for the arts. (Add additional pages if needed.)

3. **Marketing/Public Relations:** Please list the specific ways that the organization notified the public of events that are open to the general public (free and ticketed events). For example, if you advertise in print or on broadcast media, please list the specific publications or broadcast outlets. If the organization advertises through flyers, please describe the locations or types of places where flyers are placed. If tickets were distributed through partnering organizations, please list. (Add additional pages if needed.)

4. Summary of Outreach and Inreach Programs* (attach an additional sheet if necessary)

A. Did you offer free or discounted programs?

Yes No

If yes, please explain (be sure to include amount of any discounts) :

In which District(s) did your programs take place? _____

B. Did you offer outreach or inreach programs for youth (ages 0-18)?

Yes No

If yes, please explain:

In which District(s) did your programs take place? _____

C. Did you offer outreach or inreach programs for seniors (ages 65+)?

Yes No

If yes, please explain:

In which District(s) did your programs take place? _____

D. Did you offer outreach or inreach programs specifically designed to diversify your audiences?

Yes No

If yes, please explain:

In which District(s) did your programs take place? _____

E. Did you offer programs specifically designed to serve men/boys or women/girls?

Yes No

If yes, please explain:

In which District(s) will your programs take place? _____

F. Did you reach new audiences and/or underserved communities through your outreach and inreach programs?

Yes No

If yes, please explain and be sure to indicate how you consider these communities "underserved" :

In which District(s) did your programs take place? _____

**Outreach* programs are those programs that provide services to populations that have been identified as underserved at locations outside of your facility (e.g., at schools, community centers, free public events, etc.) *Inreach* programs have the same intent as outreach programs only they bring those underserved audiences to your facility.

G. Did you offer programs funded by this FCAC award that met the following Fulton County Board of Commissioners focus areas and goals:

Yes No

<p>FOCUS AREAS & GOALS</p>	<p>List any programs <i>funded by this FCAC award</i> that met the focus areas & goals. Include a brief description if necessary and indicate the District(s) in which the programs took place.</p>
<p><u>A. Health & Human Services</u>: goals are to (1) coordinate health and social services in collaboration with the justice system and community partners and (2) provide prevention programs to needy and at-risk populations that enhance quality of life</p>	
<p><u>B. Children & Youth Services</u>: goals are to (1) coordinate children and youth services in collaboration with the juvenile justice system, schools, libraries, and community partners and (2) provide programs that support the development of families, children, and youth.</p>	
<p><u>C. Juvenile Justice</u>: goal is to (1) provide services that support diversion programs, restoration boards, and involvement of families.</p>	
<p><u>D. Criminal Justice</u>: goal is to (1) coordinate criminal justice through a unified, collaborative approach with courts, public safety, and community partners.</p>	

G

CASH FINANCIAL INFORMATION: Please provide a breakdown of the organization's budget using the following categories (DO NOT CHANGE CATEGORIES). If the organization received Project support, use figures for the project only. **Show actual CASH expenses, as though final reimbursement has been made.** Do not include capital expenditures or payments of loan principal. All expenses must occur between July 1, 2009 and June 30, 2010. **ATTACH A DETAILED BUDGET BREAKDOWN FOR ALL THE FIGURES PROVIDED (both Projected and Actual.)**

In completing **Actual** Cash Expenses and **Actual** Cash Income for any given year, it is considered highly unusual for those figures to be exactly the same (generally there will be a slight deficit or surplus). Be aware that in the event of an audit, the organization will be expected to present documentation to support these figures.

EXPENSES	PROJECTED* Cash Expenses	ACTUAL Cash Expenses
1. Personnel-Administrative	_____	_____
2. Personnel-Artistic	_____	_____
3. Personnel-Technical/Production	_____	_____
4. Outside Fees and Services-Artistic	_____	_____
5. Outside Fees and Services-Other	_____	_____
6. Marketing	_____	_____
7. Other Operating Expenses	_____	_____
8. TOTAL CASH EXPENSES (lines 1 to 7)	_____	_____
	PROJECTED* Cash Income	ACTUAL Cash Income
REVENUE		
9. Earned Income	_____	_____
10. Corporate Support	_____	_____
11. Foundation Support	_____	_____
12. Other Private Support	_____	_____
13. Government Support (federal, state, city)	_____	_____
14. County Government Support (from other Fulton County departments)	_____	_____
15. Applicant Cash	_____	_____
16. SUBTOTAL CASH INCOME (sum of lines 9 to 15)	_____	_____
17. FCAC Award Amount	_____	_____
18. TOTAL CASH INCOME (sum of lines 16 and 17)	_____	_____

* **PROJECTED Cash Expenses and Income** figures are the budget figures submitted in your 2009/2010 *Revised Contract Summary and Budget Form*. If you did not revise your budget because you received your full request amount, please use the figures included in your 2009/2010 application.

H OTHER FINANCIAL INFORMATION

1. **FCAC FUNDS:** Please detail how FCAC funds were spent for this period. Show expenses as though final disbursement has been made.

Description	Application FCAC Funds Disbursement	Actual FCAC Funds Disbursement
a.		
b.		
c.		
d.		
e.		
f.		
g.		
h.		
i.		

Add additional sheets if necessary

I REQUIRED ATTACHMENTS: Enclose only enough materials to sufficiently document contract compliance. Materials will not be returned.

1. **IN-KIND INFORMATION:** Please detail any in-kind goods or services the organization received during the contract cycle. Include source and value. Use same format as Section G.
2. **WRITTEN CORRESPONDENCE TO ALL FULTON COUNTY COMMISSIONERS.** Submit copies of Correspondence to the Board of Commissioners. Reference the contract for more information on this requirement.
3. **PROGRAM DOCUMENTATION:** Announcements, news releases, flyers, posters, and other materials specific to the activities or project; publicity or printed materials documenting the FCAC logo and credit line.

BE SURE TO SIGN THE FRONT PAGE OF THIS FINAL REPORT BEFORE SUBMITTING TO THE FCAC.

Final Report Checklist – Please make sure you have completed the following before submitting your Report:

- Signed the front page of the Final Report (Section B – Certification.)
- Completed *all* of the demographic information and correctly totaled all of the numbers.**
- Detailed any changes to the original Scope of Services, budget, or audience projection in the narrative.
- Indicated any gender-specific programming in the narrative and programming meeting the BOC focus areas.
- Completed the summary of outreach/inreach programs.
- Entered all of the information for the budget (projected *and* actual cash income/expenses), correctly totaled all of the numbers, and **attached a complete budget breakdown for all of the figures provided.**
- Enclosed all of the *REQUIRED ATTACHMENTS*** (see above.)

Assemble your final report and mail to:

Fulton County Arts Council, ATTN: Contracts for Services, 141 Pryor Street, Suite 2030, Atlanta, GA 30303