

Mid Atlantic Arts Foundation  
**FINAL REPORT**  
Mid Atlantic Tours

All programs and publicity materials are included.

CONTACT INFORMATION

Please review the information below for accuracy and make changes as necessary directly on the form.

Grantee: \_\_\_\_\_

AKA: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email \_\_\_\_\_

PROJECT DATA

Artists/Company Presented: \_\_\_\_\_

Activity Start Date: \_\_\_\_\_ Activity End Date: \_\_\_\_\_ Actual Days of Service: \_\_\_\_\_

Number of performances: \_\_\_\_\_

Total audience for the performance(s): \_\_\_\_\_

Number of complementary activities\* designed to support the performance: \_\_\_\_\_

Total participants for complementary activities\*: \_\_\_\_\_

Total seating capacity of facility: \_\_\_\_\_

Of the total individuals benefiting, how many were children or youth? \_\_\_\_\_

Number of individual artists providing services: \_\_\_\_\_

What percentage of the participants/audience for these activities was culturally diverse\*?  
(\*including African, Asian, Latino, Native American, Indian/Alaskan Native, Asian/Pacific Islander) \_\_\_\_\_ %

\*Complementary activities - engagements **must** include at least one complementary activity that builds appreciation for and a greater understanding of the performance or the art form. Complementary activities may include but are not limited to exhibitions, readings, master classes, lecture-demonstrations, workshops, open rehearsals, or pre and post-performance discussions.

**RATINGS SURVEY**

Not at all      Slightly      Moderately      Significantly      N/A

1. Please consider your original reasons for undertaking the project when answering the following questions.

- |    |  |                          |                          |                          |                          |                          |
|----|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. | To what extent were you able to meet the goals that you had established for this project?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. | To what extent did the project expand your programming options?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. | To what extent did Mid Atlantic Tours funding for the project help your organization to leverage other resources (both cash and in-kind) for the engagement? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. | Describe the impact of Mid Atlantic Tours funding for this engagement on your programming and/or budget: (maximum 10 lines or 850 characters)                |                          |                          |                          |                          |                          |

2. Please consider the outreach component of the project when answering the following questions.

- |    |   |                          |                          |                          |                          |                          |
|----|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. | To what extent did the project allow you to continue an <b>existing collaboration</b> with school, health, social service, or other community based organizations?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. | To what extent did the project encourage you to develop <b>new relationships</b> with school, health, social service, or other community based organizations?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. | To what extent did the project help you to strengthen your ongoing audience development efforts?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. | To what extent did the project help you to target new groups for audience development?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. | Describe how this engagement impacted your audience development and engagement efforts. If you reached new or diverse audiences with this engagement, please explain how and to what extent: (maximum 10 lines or 850 characters) |                          |                          |                          |                          |                          |

3. Please consider this definition of “underserved” when answering the following questions:

*“A population that, for reasons of geography, economic conditions, ethnic background, disability or age, is underserved by the arts.”*

a. Using the list below, define the underserved population that you regularly count as audience members (You may check more than one category).

- geographic isolation/ rural     economic conditions     ethnic background  
 disability     age  
 Other (describe):

b. Which group or group(s) of people were you targeting to serve through this project (You may check more than one category).

- geographic isolation/ rural     economic conditions     ethnic background  
 disability     age  
 Other (describe):

c. To what extent did you meet your goal of serving the above group(s) of people through this project?

Not at all	Slightly	Moderately	Significantly	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. In answering the following questions, please consider this definition of “cultural diversity”:

*“Of American Indian or Alaskan Native, Asian, Native Hawaiian or Other Pacific Islander, Black or African American, or Hispanic or Latino heritage.”*

a. What percentage of your current audience is culturally diverse?

\_\_\_\_\_ %

b. Was a goal of your project to further diversify your audience?

Yes

If Yes, to what extent did you meet your audience diversity goal with this project?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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5. How satisfied were you with the artist and management?

a. Promotional material quality and timeliness

b. Cooperation/attitude prior to engagement

c. Cooperation/attitude during engagement

d. Performance quality

e. Teaching abilities (if applicable)

Not satisfied	Satisfied	Very Satisfied	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. ACTUAL PROJECT INCOME AND EXPENSE REPORT - Please show actual expenses and revenues for the ENTIRE project, not just the portion covered by the Mid Atlantic Arts Foundation grant. Remember ACTUAL TOTAL INCOME **must at least equal** ACTUAL TOTAL EXPENSES.

**PROJECT CASH EXPENSES** (Please round off all figures to the nearest dollar)

<b>Personnel</b> (personnel specifically identified with the project)	\$ _____
<b>Artist Fee</b>	\$ _____
<b>Artist Travel</b> (additional costs of lodging, food, vehicle rental, etc. if not included in artist fee)	\$ _____
<b>Performance Space Rental</b> (rental of hall, auditorium, theater)	\$ _____
<b>Marketing/Promotion</b> (radio, TV, newspaper ads, brochures, posters, etc.)	\$ _____
<b>Complementary Activity Expenses</b> (other than artist fees)	\$ _____
<b>Other</b> (please identify) _____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>ACTUAL TOTAL CASH EXPENSES</b>	<b>\$ _____</b>

**PROJECT CASH INCOME**

**EARNED INCOME**

<b>Admissions</b> (sale of tickets, admissions, series subscriptions)	\$ _____
<b>Contracted Services Revenue</b>	\$ _____
<b>Other Revenue</b> (concessions, posters, food, drink, t-shirts, etc.)	\$ _____

**CONTRIBUTED INCOME**

<b>Corporate Support</b>	\$ _____
<b>Foundation Support</b> (other than Mid Atlantic Arts Foundation)	\$ _____
<b>Individuals Support</b>	\$ _____
<b>Federal Government Support</b>	\$ _____
<b>State Government Support</b>	\$ _____
<b>Local Government Support</b>	\$ _____
<b>Grantee Cash Support</b> (accumulated resources, savings, student activities fees, etc., specifically applied to this project)	\$ _____
<b>SUBTOTAL</b> (Total of above income figures)	\$ _____

**Mid Atlantic Arts Foundation Grant Amount** \$ \_\_\_\_\_

**ACTUAL TOTAL CASH INCOME**

(SUBTOTAL plus Mid Atlantic Arts Foundation Grant Amount)  
**Note: Total Cash Income must at least equal Total Cash Expenses.** \$ \_\_\_\_\_

**TOTAL IN-KIND CONTRIBUTIONS** (Cash value of all items donated to this project) \$ \_\_\_\_\_

Notes (Use this space to provide explanation on line items if necessary – 4 lines or 350 characters max):

7. Narrative: Describe the project activities supported by your Mid Atlantic Tours grant (performances and complementary activities) and the impact they had on your organization and your community. Any anecdotes that illustrate the impact of the funded project and its benefits for your community or organization are encouraged and welcomed in your narrative.
8. Please remember that in order to fulfill the requirement of your grant you must credit the Foundation for this engagement. Please include copies of all publicity materials and programs crediting the Foundation, including press releases, invitations, brochures, and copies of press clippings, radio and TV coverage etc.

Mail completed, signed final report form along with any required supporting materials, to:  
Mid Atlantic Arts Foundation  
201 N. Charles Street, Suite 401  
Baltimore, MD 21201

**I hereby certify to the best of my knowledge and belief that this report is true and correct and accurately represents the activities for which the grant award was made, and that all outlays, including awarded grant funds, were spent as set forth in the Grant Award Agreement.**

Signature

Date

Typed Name and Title: