



GRANT RECIPIENT REPORT FORM

This form must be signed and returned by October 1st. Further grant requests from your organization may not be considered if this report is delinquent, and/or not completed

Name of organization reporting: _____

Contact person & title: _____

Phone and email address: _____

Project/Program Name: _____

Amount of Grant Award: \$ _____

Amount of Grant not spent to date: \$ _____

Purpose of Grant (restate from application):

Have there been any changes to your organization's IRS 501(c)(3) not-for-profit status (or fiscal agency relationship under which you applied) since you were awarded this grant? _____. If so, please explain:

A. Expenditures:

Please summarize expenditures of grant funds. List categories and amounts below.



B. Results/Outcomes (attach additional pages if necessary)

1. Please describe the progress made toward the stated goals and objectives related to this specific grant. (Please include those stated goals and objectives in your response.)
2. Describe the measurable change for the benefit of the Rico community that occurred because of the grant funds.
3. Please provide an illustrative, “real life” example.

C. Future Plans:

If you will be continuing this program, what are the plans for sustaining or expanding the program. If discontinuing the program, what factors led to this decision?

D. Other Comments:

Please share with us any recommendations you have for our grant making or reporting process.