

**FINAL Report**

Grant # \_\_\_\_\_

Date of Submission \_\_\_\_\_

**Instructions**

- Use this form **only** if your grant has ended and all grant funds have been spent.
  - If you are reporting instead on your interim progress on a multi-year grant (for example, reporting on work in the first year of a two year grant), please instead use the [Interim Report template](#).
  - If you are reporting on a current grant because you have been invited to apply for renewal funding and you have not spent all grant funds yet, please instead use the [Progress Report template](#).
- **If you have already submitted a Progress Report on this grant when you applied for renewal funding, and you were *awarded* a renewal grant, you do not need to submit a narrative report again. You are only required to submit a final financial report and a signed cover page.**
- Due date: Final reports are 2 months after your grant ends.
- This form must be signed by an authorized signatory of the grantee (or fiscal sponsor, if applicable.)
- Please upload completed documents in your follow-up form on our [portal](#).
- For questions about reporting requirements, or if you cannot meet the deadline, please contact Grants Manager, Jina S. Freiberg at [jfreiberg@publicwelfare.org](mailto:jfreiberg@publicwelfare.org).

**Name of Organization (or fiscal sponsor, if applicable):** \_\_\_\_\_

**Name of Fiscally sponsored project, if applicable:** \_\_\_\_\_

**Grant Period:** \_\_\_\_\_

**Time Period Covered by Report:** \_\_\_\_\_

**Total grant received from the Public Welfare Foundation:** \_\_\_\_\_

**Total amount of UNEXPENDED funds as of the date of your report:  
(only for Program/Project Support Grants)** \_\_\_\_\_

**Required Confirmation: I confirm that the information contained in this report is accurate and complete.**

\_\_\_\_\_  
**Signature of Chief Executive Officer or Other Authorized Signatory** (For fiscally sponsored projects, signatory must be a representative of the fiscal sponsor, and project director must sign below as well):

**Printed Name and Title:** \_\_\_\_\_

**Date of Signing:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Fiscally Sponsored Project Director/ Authorized Signatory, if applicable**

**Printed Name and Title:** \_\_\_\_\_

**Date of Signing:** \_\_\_\_\_

**Narrative instructions:**

- **For multi-year grants, you must report on the work of the entire grant period.**
- In no more than five pages, please answer the following questions. Please refer to the proposal you submitted to the Foundation in writing this report.

**1. What activities did you conduct during the grant period, including those not anticipated in your original proposal? What activities did you decide not to undertake?**

**2. What outcomes did you achieve during the grant period? What anticipated outcomes were not achieved? Please explain.**

**3. Describe the methods used to evaluate and assess your work.**

**4. Provide reflection on challenges faced and/or strategic lessons learned and, if applicable, your plans to adjust strategy moving forward.**

Optional:

**5. What groups are you working with in achieving your outcomes under the grant?**

**6. Have there been any significant changes (positive or negative) in your organizational capacity during the grant period? What staff changes have occurred?**

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### **Financial Information:**

Provide the following information about receipt and expenditure of your PWF grant for the time period covered by this report:

- **For general support grants**, provide a financial statement listing your organization's actual income (including a line item for the funds you received from the Public Welfare Foundation) and line item expenditures for the time period covered by this report.
- **For project support grants**, please provide the project's actual income and a line-by-line reconciliation of the actual project expenditures with the approved project budget that was submitted with the proposal and note any modifications that were made. (Please see the sample financial reporting template available [on our website](#)).