

FINAL REPORT

Date:

Name of Organization:

Fiscal Agent (if different from your organization):

Address:

Phone:

Fax:

Website:

Primary Contact:

Title:

Phone:

Fax:

Email:

Grant Program Name:

Grant Reference #:

Grant Amount:

General Operating Project Support Challenge Grant Capital/Endowment

Period that this report covers: ___/___ to ___/___

Please respond to the following five questions using up to 3 (three) pages in total, not including the cover page. Your responses should focus specifically on the funded project or program, if applicable, or in the case of general operating grants, on your entire organization.

1. Referring to the goals and objectives described in your original grant request (or any revisions submitted subsequent to the grant award), please indicate the following:
 - a) What were your major accomplishments?
 - b) What steps or actions were used to meet your objectives and goals?
 - c) What measures were used to determine your progress?
 - d) What were the unexpected results or key learning's you would share with funder's?

2. Describe any setbacks encountered during the period of this grant.
 - a) How did these setbacks impact your organization or project?
 - b) How were these setbacks addressed?

3. Who else has funded this project (or your organization), and at what level? If total proposed budget amount was not raised, indicate if program goals were altered in any way.

4. What steps are being made to ensure the sustainability of your project or organization beyond this grant period?

5. If your program involved collaboration with other organizations, please comment on its effect upon the program.

REQUIRED ATTACHMENTS:

- ___ List of current Board of Directors
- ___ An Itemized Final Project Budget for this Grant

ADDITIONAL ATTACHMENTS:

- ___ Promotional/dissemination materials (i.e. brochures, flyers, ad copy)
- ___ News Clippings
- ___ Most recent audit, account review, or end of year financial statement

This report may be submitted in one of the following ways:

Mail: BCBSMA Foundation, 401 Park Drive, Boston, MA 02215, Attn. Final Report
Fax: 617-246-3992