

1. Were you able to carry out ALL approved project activities? Yes No

Describe the activities supported by this award. Please report solely on activities funded by the National Endowment for the Arts and the project match reported on your Federal Financial Report. These activities must be consistent with your application narrative, the approved project budget, and any approved grant amendments. (3,000 character limit)

[TEXT FIELD – 3,000 CHARACTER LIMIT]

2. What did this project accomplish and who benefited? List and describe key accomplishments of this project. Please include any direct and indirect benefits/impacts that resulted from this grant. Where possible, identify beneficiaries of the project (e.g., types of individuals, organizations, disciplines/fields, or communities). (3,000 character limit)

[TEXT FIELD – 3,000 CHARACTER LIMIT]

3. A. Did the project encounter any events and/or circumstances that impeded your ability to conduct the project as planned?

Yes No

B. If yes, then please describe the nature of the challenge(s) and how you addressed them. (2,000 character limit)

[TEXT FIELD – 2,000 CHARACTER LIMIT]

4. Please complete the following tables regarding the involvement of key partners, funders (besides the Arts Endowment), and key artists.

| Name of Key Partner/Funder | Type of Entity | Nature of Involvement | Contributed Match? (Including In-Kind) |
|----------------------------|--|--|---|
| (text field) | (drop down menu) <ul style="list-style-type: none"> • Nonprofit Arts Organization • Nonprofit Community Organization • Private Foundation • School or School District (K-12) • Local Government Agency • State Government Agency • Federal Government Agency* • College/University • Library • Religious Organization • Media Organization • For-profit Company • Nonprofit organization other than those identified above • Tribal Government Agency • Other | (text field – 700 character limit per field) | (Yes/No) |
| (text field) | (drop down menu) | (text field – 700 char.) | (Yes/No) |
| (text field) | (drop down menu) | (text field – 700 char.) | (Yes/No) |

CLICK HERE TO ADD NEW ROW

*Please note that funding from other federal government agencies CANNOT be counted as match (cost share).

| Name of Key Artist | Nature of Involvement |
|--------------------|-----------------------|
| (text field) | (text field) |
| (text field) | (text field) |

CLICK HERE TO ADD NEW ROW

TO COMPLETE YOUR NARRATIVE PORTION, please click on the Arts Education project type identified in your approved application or amendment, as appropriate. Each project type has a unique set of questions; you should respond only to the questions related to your project type.

Part IB: [Direct Learning for Students](#)

Part IC: [Professional Development for Teachers, Teaching Artists, District Staff or Community Leaders](#)

Part ID: [Collective Impact](#)

PART IB: ARTS EDUCATION NARRATIVE: Direct Learning for Students project type ONLY

| Student Engagement | Number |
|---|--------|
| Number of students engaged in the project as learners | |
| Number of students engaged in the project as learners who demonstrated learning | |

1. Identify the students' specific learning outcomes assessed during the project. Describe the assessment method (e.g., performance rubric, pre- and post-testing) and tools used to measure students' achievement of these learning outcomes. (2,500 character limit)

| |
|--------------------------------------|
| [TEXT FIELD – 2,500 CHARACTER LIMIT] |
|--------------------------------------|

PART IB: ARTS EDUCATION NARRATIVE: Direct Learning for Students project type ONLY

2. Discuss the achievement of your identified learning outcomes and how assessing student learning affected your project overall. (2,500 character limit)

[TEXT FIELD – 2,500 CHARACTER LIMIT]

PART IC: ARTS EDUCATION NARRATIVE: Professional Development project type ONLY

| Professional Development Participants | Number |
|---|--------|
| Number of participants engaged in professional development activities | |
| Number of participants reporting a change in practice as a result of the professional development | |

1. Identify the specific outcomes for participants in the project and describe any program evaluation tools used to measure participants' achievement of these outcomes. (2,500 character limit)

[TEXT FIELD – 2,500 CHARACTER LIMIT]

PART IC: ARTS EDUCATION NARRATIVE: Professional Development project type ONLY

2. Discuss the achievement of your identified outcomes and any available evidence regarding the number of participants who have reported a change in their practice as a result of the professional development. (2,500 character limit)

[TEXT FIELD – 2,500 CHARACTER LIMIT]

PART ID: ARTS EDUCATION NARRATIVE: Collective Impact project type ONLY

- 1. Discuss anticipated long-term impacts that may not have been measurable within the grant period of performance (e.g., changes to standards or policies impacting arts education). Please be as specific as possible. (2,500 character limit)

[TEXT FIELD – 2,500 CHARACTER LIMIT]

PART IIA: PROJECT ACTIVITY

Provide data for activities supported with this award (NEA and cost share funding) during the period of performance. Indicate the number of activities delivered. Leave blank any items that are not applicable or for which actual figures/supportable estimates do not exist.

| Project Activity | Number |
|--|---------------|
| Number of Professional Original Works of Art Created <ul style="list-style-type: none"> Do not include student works, adaptations, re-creations, or restaging of existing works. | |
| Number of Fairs/Festivals Held <ul style="list-style-type: none"> Report media arts and film festivals in the Exhibitions field below, not here. Do not break out fair/festival activities (performances, etc.) in other project activity fields. | |
| Number of Exhibitions Curated/Presented <ul style="list-style-type: none"> Include visual arts, media arts, design, and film festivals. Count each curated film series as a single exhibition. An exhibition staged multiple times should be counted as one exhibition. | |
| Number of Concerts/Performances/Readings | |
| Number of Arts Instruction Activities <ul style="list-style-type: none"> Include classes, demonstrations, lectures, and other means used to teach knowledge of and/or skills in the arts. A class taught over multiple sessions should be counted as one class. A class repeated for multiple audiences should be counted per audience. | |

PART IIB: INDIVIDUALS BENEFITED

Provide data for individuals who directly benefited during the period of performance. Leave blank any items that are not applicable or for which actual figures/supportable estimates do not exist.

| Individuals Compensated from the Project Budget | A | B |
|---|------------------------------|--|
| Enter the number of individuals who were paid, in whole or in part, with project funds (both the NEA and the cost share) reported on your Federal Financial Report. | Number of individuals | Of the number reported in column A, how many were hired (as employees, not contractors) by your organization during the project period as a result of this award? |
| Artists | | |
| Others (includes employees, temporary staff, and contractors who did not work as artists on this project) | | |
| Total | | |

| "In-Person" Arts Experience | Number | |
|---|-------------------|--|
| Enter the number of people that directly engaged with the arts, whether through attendance at arts events or participation in arts learning or other types of activities that involved people directly interacting with artists or the arts. Do not count individuals who were primarily reached through television, radio, the Internet, or other media. Avoid inflated numbers, and do not double-count repeat attendees. | a. Adults | |
| | b. Children/Youth | |
| | c. Total | |

| Virtual Arts Experience | Total Number of Unique Visitors |
|--|---------------------------------|
| If your project used online or mobile components to engage audiences (e.g., podcasts, live web streaming, mobile applications, online videos/audio/games, e-book or e-reader downloads, distance learning, internet-based artworks, online collections/ exhibitions, etc.), then please enter an estimate of the total number of unique visitors who accessed these components during the grant period. Do not include people who visited a website for unrelated content. | |

| If your project used online or mobile components to engage audiences, then please select the “type” that best describes the form of technology used. (Select all that apply.) | |
|---|--|
| <input type="checkbox"/> | Podcasts |
| <input type="checkbox"/> | Live web streaming |
| <input type="checkbox"/> | Mobile applications |
| <input type="checkbox"/> | Online videos/audio/games |
| <input type="checkbox"/> | E-book or e-reader downloads |
| <input type="checkbox"/> | Distance learning |
| <input type="checkbox"/> | Internet-based artworks |
| <input type="checkbox"/> | Online collections/exhibitions |
| <input type="checkbox"/> | Other. Please enter the type of other technology: [Text box] |

PART IIC: POPULATION DESCRIPTORS

For the next three sections, please select all groups of people that your project intended to serve directly. Then answer two follow-up questions in each section.

| Racial/Ethnic Groups | |
|--------------------------|---|
| <input type="checkbox"/> | N - American Indian or Alaskan Native |
| <input type="checkbox"/> | A - Asian |
| <input type="checkbox"/> | B - Black or African American |
| <input type="checkbox"/> | H - Hispanic or Latino |
| <input type="checkbox"/> | P - Native Hawaiian or other Pacific Islander |
| <input type="checkbox"/> | W - White |
| <input type="checkbox"/> | O - Other Racial/Ethnic Group. Please enter the type of group: [Text box] |
| <input type="checkbox"/> | U - No Specific Racial/Ethnic Group |

If your project focused on serving one or more racial/ethnic groups, then did it succeed in this objective?

Yes No

If yes, then please complete this table. Provide an estimate, if available, of the percentage that the group(s) represented in the total population served by this project.

| Racial/Ethnic Groups | Percentage of Total Population Served |
|--|---------------------------------------|
| (drop down menu) <ul style="list-style-type: none"> • American Indian or Alaskan Native • Asian • Black or African American • Hispanic or Latino • Native Hawaiian or other Pacific Islander • White • Other Racial/Ethnic Group | (% field) |
| (drop down menu) | (% field) |

[CLICK HERE TO ADD NEW ROW](#)

| Age Groups | |
|--------------------------|--------------------------------|
| <input type="checkbox"/> | 1. Children/Youth (0-17 years) |
| <input type="checkbox"/> | 2. Young Adults (18-24 years) |
| <input type="checkbox"/> | 3. Adults (25-64 years) |
| <input type="checkbox"/> | 4. Older Adults (65+ years) |
| <input type="checkbox"/> | 5. No Specific Age Group |

If your project focused on serving one or more specific age groups, then did it succeed in this objective?

Yes No

If yes, then please complete this table. Provide an estimate, if available, of the percentage that the group(s) represented in the total population served by this project.

| Age Groups | Percentage of Total Population Served |
|---|---------------------------------------|
| (drop down menu) <ul style="list-style-type: none"> • Children/Youth (0-17 years) • Young Adults (18-24 years) • Adults (25-64 years) • Older Adults (65+ years) | (text field) |
| (drop down menu) | (text field) |

[CLICK HERE TO ADD NEW ROW](#)

| Underserved/Distinct Groups | |
|-----------------------------|---|
| <input type="checkbox"/> | D - Individuals with Disabilities (physical, cognitive, or sensory) |
| <input type="checkbox"/> | I - Individuals in Institutions (include people living in hospitals, hospices, nursing homes, assisted care facilities, correctional facilities, and homeless shelters) |
| <input type="checkbox"/> | P - Individuals below the Poverty Line |
| <input type="checkbox"/> | E - Individuals with Limited English Proficiency |
| <input type="checkbox"/> | M - Military Veterans/Active Duty Personnel |
| <input type="checkbox"/> | Y - Youth at Risk |
| <input type="checkbox"/> | O - Other Underserved/Distinct Group. Please enter the type of group: [Text box] |
| <input type="checkbox"/> | U - No Specific Underserved/Distinct Group |

If your project focused on serving one or more underserved/distinct groups, then did it succeed in this objective?

Yes No

If yes, then please complete this table. Provide an estimate, if available, of the percentage that the group(s) represented in the total population served by this project.

| Underserved/Distinct Groups | Percentage of Total Population Served |
|---|---------------------------------------|
| (drop down menu) <ul style="list-style-type: none"> • Individuals with Disabilities (physical, cognitive, or sensory) • Individuals in Institutions (include people living in hospitals, hospices, nursing homes, assisted care facilities, correctional facilities, and homeless shelters) • Individuals below the Poverty Line • Individuals with Limited English Proficiency • Military Veterans/Active Duty Personnel • Youth at Risk • Other Underserved/Distinct Group | (% field) |
| (drop down menu) | (% field) |

[CLICK HERE TO ADD NEW ROW](#)