



MAC Annual Grant Final Report

Your final report provides allows the City of Madison to track the impact our grant has had on the community. You are required to complete this form within 30 days of the completion of your project.

Payment will be issued after the final report is received.

For questions, comments, or concerns, email madisonarts@cityofmadison.com

If you need an interpreter, translator, materials in alternate formats or other accommodations to access this information, please call (608) 266-4635 immediately.

Si necesita un intérprete, traductor, algún material en otro formato u otras adaptaciones para acceder a esta información, llame al (608) 266-4635 de inmediato.

Yog tias koj xav tau ib tug neeg txhais lus, tus neeg txhais ntawv, los sis xav tau cov ntaub ntawv ua lwm hom ntawv los sis lwm cov kev pab kom paub txog cov lus qhia no, thov hu rau (608) 266-4635 tam sim no.

如果您获取此类信息时需要口译人员、翻译人员、不同格式的材料, (608) 267-8727

What grant cycle are you reporting on?

2023-24 Arts Grants

2024-25 Arts Grants

Clear Selection

Project Title *

Name of the project funded by MAC

Grant Recipient *

Individual or Organization

Your Name *

Your Email *

Your Phone Number *

Number of Project Producers *

How many staff/volunteers led this project?

Names of Project Producers

Optional. List the names of all the staff/volunteers who led the project.

ABOUT THE ARTISTS

Total Number of Artists Funded *

How many artists were funded over the course of this project, including other funds (not just the grant from MAC)?

Names of Artists Funded

If known, list the names of the artists funded.

Artists Ethnicity

Optional. Check all options that apply to artists funded by this project.

- Hispanic/Latino
- Non-Hispanic/Latino

Prefer not to answer

How many artists funded by this project identified as Hispanic/Latino?

Optional.

How many artists funded by this project identified as non-Hispanic/Latino?

Optional.

Artists Race

Optional. Check all options that apply to artists funded by this project.

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black or African American
- White
- Multiracial
- A race not listed
- Prefer not to answer

How many artists funded by this project identified as American Indian or Alaskan Native?

Optional.

How many artists funded by this project identified as Asian or Pacific Islander?

Optional.

How many artists funded by this project identified as Black or African American?

Optional.

How many artists funded by this project identified as White?

Optional.

How many artists funded by this project identified as Multiracial?

Optional.

How many artists funded by this project identified as a race not listed?

Optional.

Artists Gender

Optional. Check all options that apply to artists funded by this project.

Woman

- Man
- Non-binary/Genderqueer
- Prefer not to answer
- Prefer to write-in

How many artists funded by this project identified as a woman?

Optional.

How many artists funded by this project identified as a man?

Optional.

How many artists funded by this project identified as non-binary/genderqueer?

Optional.

Artists Trans Status

Optional. Do any of the artists funded by this project identify as Trans?

- Yes
- No

Artist Disability Status

Optional. Do any of the artists funded by this project identify as a person with a disability?

- Yes

No

AUDIENCE & ACTIVITIES

Total Audience Size *

Total number of people engaged throughout the project

Locations & Populations Reached *

List any specific neighborhoods, organizations, ages, or identities of the audience, if known. Provide as much detail as possible.

New Audiences Served

If your project reached a new audience this year, describe below.

Date of Free Event *

Location of Free Event *

Number of Attendees at Free Event: *

Briefly describe how the MAC grant helped your organization, and how citizens of Madison benefited. *

Briefly describe the project strengths, weaknesses, and impact. Comment on future plans, if any. *

FINANCIAL ACCOUNTING

List of Other Cash Funding

List money received for the project from other sources including admission fees, gifts, grants, etc. Do not list your MAC grant.

Ex: \$2,000.00 - Dane Arts Project Grant

Total of Other Cash Funding *

How much money did you receive for this project, not including your MAC grant?

This should equal the total of all items listed above

List of In-kind Contributions *

List goods and services, if any, which were donated to the project, with amounts based on their fair market value.

Ex. \$1,200 - studio space

Total Value of In-Kind Contributions *

What is the total value of in-kind contributions? This should equal the total of all items listed above.

List of Project Expenses *

List each project expense, including in-kind contributions.

Ex. \$2,000 - printing

Total Project Budget *

What was the total project budget? This should equal the total of all items listed above.

Final Financial Accounting

OPTIONAL: Upload your final project expense & income accounting as a PDF file. Include income (both cash, and in-kind contributions), and expenses (personnel, supplies, equipment, rental, [promotion, transportation, etc..). Note the amount of MAC grant funds used for each expense.

⬇ Drop files here

Attach 2-3 photos of the funded project *

Upload only JPG or PNG files. Title each file with the year, project name, (if relevant) the pictured artist, and the photo credit.

Ex: 2022_SessionsatMcPikPark_ LillyHiattandVandoliers _CreditBobQueen.jpg

⬇ Drop files here

Photo Permissions *

By submitting photos, you give the City of Madison permission to use these photos for any purpose in any media, including for advertising and trade purposes. You also represent that any people depicted the photographs have consented to the use of their likeness for this purpose. You also acknowledge that neither you nor any person or organization in depicted the photographs will receive any compensation for the use of these photos, and release the City of Madison and its agents, employees, and assigns from any claims, which are in any way connected with this use.

Community Testimonials *

Please upload 2-3 testimonials from participants. Testimonials are direct quotes from a participant describing their experience with the project. Please include the name of the testimonial provider, their email address, and their association with the project.

⬇ Drop files here

Final Report Acknowledgement *

By checking the box below, I agree and affirm that the information above is accurate to the best of my knowledge.

Submit

Do not submit passwords through this form. [Report malicious form](#)