

STATE OF RHODE ISLAND
DESIGNATED GRANT STATUS REPORT

INSTRUCTIONS

1. Report on all Designated Grant activity for the reporting period. The mid-year report should report on programmatic and financial activity for the period July1-December 31 and the final report should report for the period July 1 through June 30.
2. Refer to your initial designated grant submission and grant agreement when completing the report to ensure that all goals, objectives and activities are addressed in the report.
3. Present both accomplishments and lessons learned. Highlight and explain any unanticipated challenges encountered, how the challenges were overcome, and the lessons learned as a result of the challenges.
4. Responses should be clear, concise, and understandable to any reader.

Due Date: Mid-year reports are due no later than January 15 and final reports are due no later than June 30 of the state fiscal year for which the grant is issued.

SECTION 1: DESIGNATED GRANT IDENTIFYING INFORMATION

Name of Person Preparing Report	
Telephone Number	
Email Address	
Project Title	
Award Amount	
Name of Recipient Entity	
Address	
City/Town	
Grant Period Begin Date	
Grant Period End Date	

SECTION 2: REPORT TYPE

Final Report – Select this option if all work has been completed and funds reimbursed in accordance with the signed Designated Grant Agreement.

Mid-Year Status – Select this option if work on grant is ongoing and/or not all grant funds have been reimbursed in accordance with Designated Grant Agreement.

SECTION 3: DESIGNATED GRANT PROGRESS REPORT

1. GRANT PURPOSE:

Briefly summarize the purpose of the funding, including the issues and opportunities to be addressed as originally stated in your submission.

2. GOALS AND ACTIVITIES:

Describe the progress made on the goals, objectives and activities outlined in the State Designated Grant submission. List each goal and report progress to-date on achieving the goal. Where applicable, provide supporting data to demonstrate progress. If no progress has been made on a specific goal, please explain why.

3. SUCCESSES AND CHALLENGES

Describe the significant successes and challenges your agency has experienced related to the project/program funded through this grant.

4. OUTCOMES/DELIVERABLES

Detail any outcomes and deliverables that are a result of this grant.

5. UNANTICIPATED RESULTS

Describe any unanticipated results – positive or negative – and the implications on the project. **If this is a mid-year status report, will all grant funds be spent by June 30?**

SECTION 4: DESIGNATED GRANT FINANCIAL REPORT

1. FINANCIAL STATUS REPORT

	Approved Budget	Expenditures through end of reporting period	Balance Remaining
Total Project Cost			
RI Designated Grant Funds			
Other Funds Supporting Project			

2. ADVANCE PAYMENTS

- a. Did your entity receive an advance payment for this grant award? Yes/No _____
- b. Amount Advanced _____
- c. Date(s) of Advance Payment(s) _____

SECTION 5: ENTITY INFORMATION UPDATE

1. PERSONNEL UPDATE

Have there been changes in key agency positions since the entity completed its designated grant submission? Please complete the table below.

Position	Yes	No	If Yes, Provide the Name on Person Now Holding Position
Director/ Principal Officer			
Chief Financial Officer			
Program Manager			

2. ENTITY DOCUMENTATION

Are the following entity documents up-to-date?

Document Name	Yes	No	Comments
IRS Form 990			
Complete Financial Statement			
Single Audit Report			

Note: Updated documents must be made available to state agency upon request.

SECTION 6: CERTIFICATION OF DULY AUTHORIZED INDIVIDUAL

I declare that I have examined this report, including any accompanying attachments, and that the information contained herein is accurate and complete.

Name of Duly Authorized Individual	
Title of Duly Authorized Individual	
Signature of Duly Authorized Individual	
Date Report Certified	