



FINAL REPORT

Date: _____

Organization Name: _____

Program Name (if applicable): _____

Contact Person Name and Title: _____

Address: _____

Phone: _____ Email: _____

Grant Amount: _____

Grant Purpose: General Operating Project Support Challenge Grant Capital/Endowment

Period that this report covers: *From:* _____ *To:* _____

1. Please describe how the Virginia Wellington Cabot Foundation grant money was spent, and enclose a copy of your most recent financial statements (audited preferred):

2. To what extent have your stated goals been met?

3. What steps are being taken to ensure the sustainability of the program or organization beyond the period of the Virginia Wellington Cabot Foundation grant?

We appreciate your help in improving our grant making by completing this evaluation, and we welcome any additional comments you wish to make.

Please submit this **Final Report** via email to Heidi Heinlein at hheinlein@gmafoundations.com or by mail to:

Heidi Heinlein
Virginia Wellington Cabot Foundation
c/o GMA Foundations
2 Liberty Square, Suite 500
Boston, MA 02109