Example Grantee Organization

Report ID: 3849
Grant ID: G-202108-04611
Due: August 15, 2021
Report Type: Final Report

Report Status:
Draft
Due On: 8/15/2021
Received Date:

Table Of Contents

About the Organization
Grant Information
Grant Scope of Work & Aspired to Deliverables
Systems Projects and Results
Communities Projects and Results
Organizations Projects and Results
Workplan Update
Narrative
Financials
Documents

About the Organization

Name: Example Grantee Organization
Primary Contact: Grantee User
EHF Program Officer: Celene Meyer

Grant Information

Grant Title:
Grant Amount:
Grant Start Date:
Grant End Date:
Grant Extended:
Report Due Date: August 15, 2021
Report Received:
Outcome: O3: Activate Communities
Goal: Goal 2
Strategy: Strategy 6: Raise Community Voices
Project Type: Communities, Organizations, Systems
**Grant Scope of Work & Aspired to Deliverables**

**Systems Projects and Results**

Amount of Grant Request allocated to this work:

Amount of project budget allocated to this work:

**What amount remains unspent to date:**

$0.00

This is the type of change you were seeking to develop/inform:

This is when anticipated policy or practice to be fully enacted:

These are the results you projected to achieve for this work during the grant period:

What new or added results will be achieved for both the organization and those you serve once the new capacity is in place?

**How successful were you in achieving the results to which you committed?**

**Are you on track to achieve the stated results?**

<table>
<thead>
<tr>
<th>Population</th>
<th>Anticipated (from grant)</th>
<th>Progress to Date (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low income populations (defined as at or below 200% FPL)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racial/Ethnic minorities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children ages 0 - 3 years and their caregivers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural populations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Un or under-insured populations including Medicare beneficiaries</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Communities Projects and Results**

Amount of Grant Request allocated to this work:

Amount of project budget allocated to this work:
What amount remains unspent to date: $0.00

This is the type of change you were seeking to develop/inform:

This is when anticipated policy or practice to be fully enacted:

These are the results you projected to achieve for this work during the grant period:

How successful were you in achieving the results to which you committed?

Are you on track to achieve the stated results?

<table>
<thead>
<tr>
<th>Population</th>
<th>Anticipated (from grant)</th>
<th>Progress to Date (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low income populations (defined as at or below 200% FPL)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racial/Ethnic minorities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children ages 0 - 3 years and their caregivers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural populations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Un or under-insured populations including Medicare beneficiaries</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

▼ Organizations Projects and Results

Amount of Grant Request allocated to this work:

Amount of project budget allocated to this work:

What amount remains unspent to date: $0.00

This is the type of capacity you were seeking to build through this project:

This the specific type of project the funds will be used for:

This is the infrastructure and/or care process to be developed or enhanced:

This is when anticipated new capacity will be fully implemented:

These are the results you projected to achieve for this work during the grant period:
How successful were you in achieving the results to which you committed?

Are you on track to achieve the stated results:

<table>
<thead>
<tr>
<th>Measures/Indicators</th>
<th>Anticipated (from grant)</th>
<th>Progress to Date (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of participants to benefit once capacity is fully implemented</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of nonprofits to benefit once capacity is fully implemented</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average annual increase in organization revenue once capacity is built</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average annual cost saving for organizations once capacity is built</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

▼ Workplan Update

Type of Project (work) #1

Type of Project (Work):

Key Project Element or Critical Step:

Deliverable or Milestone:

Describe your progress to-date toward the anticipated milestone:

Estimate the percentage of completion for the milestone thus far (0% to 100%): 0%

Describe any challenges and/or problems that you have encountered as you work towards this milestone. Include planned or implemented solutions as well:

Type of Project (work) #2

Type of Project (Work):

Key Project Element or Critical Step:

Deliverable or Milestone:

Describe your progress to-date toward the anticipated milestone:

Estimate the percentage of completion for the milestone thus far (0% to 100%): 0%

Describe any challenges and/or problems that you have encountered as you work towards this milestone. Include planned or implemented solutions as well:
Narrative

Here's the list of counties you anticipated serving with this grant

| Brazoria |

What counties have you served to date with this grant?

Describe, as appropriate, what you believe to be the impact of the project has been at the individual or client level, at the organizational level, or at the community level?

For example:
- Has the project contributed in some significant way to general knowledge about a subject? Or to a change in conventional wisdom?
- Has it increased the public’s access to information?
- Has it created a new model for delivering services?
- Has it informed public policy? How?
- Has it informed the work of other professionals or organizations? How?
- Has it changed an institution so that it is better able to fulfill its mission? How?

What aspects of this project will be sustained beyond this grant? Please explain how you will continue or build upon the work supported by this grant.

During the grant period, have there been any changes in your organization’s mission, management, location, programs, and/or overall financial health such as new revenue sources?

In addition to EHF’s support, has your organization received funding from other foundations, corporations, or government?

- If so, please give each funder’s name, the amount provided, and when it was provided. If you only know the total provided, put that total amount and which funders contributed to it.
- If the support is in-kind and you can estimate the dollar amount, provide that figure; if you cannot estimate the amount, just describe the nature of the support.
- Did EHF funding help lead to this additional funding or was it unrelated?
- Did the project receive funding to support continuation after EHF’s funding ended? Please describe the funding: What organization gave it, amount received, and when the funding ends. Then describe the work being done with this funding.

Did you find EHF staff to be helpful to you and your organization throughout the grant period? If so, how?

What could EHF have done differently during your grant? What could we have done more or less to support your project?

What feedback on the grant process or other comments would you like to share?

Do you have any stories that capture the impact of this project? If so, please share one or two.

Please provide examples and stories of people/communities/organizations that the project has helped; lives that have changed; and work that may have led to policy change, such as legislation or regulation.
**Financials**

Considering all EHF funds received to date for this grant, what amount of funds remain unspent?  

$0.00

**Documents**

- Final Grant Expenditure Report

Optional Attachments