FINANCIAL STATUS REPORT
(Short Form)

- *Final report* due no later than 90 days after the award end date.
- Please type or print clearly.
- FAX one copy to 202/682-5610 or 202/682-5609 — **OR**— Mail to: Grants & Contracts Office, National Endowment for the Arts, 1100 Pennsylvania Avenue, N.W., Washington, DC 20506-0001

1. FEDERAL AGENCY TO WHICH REPORT IS SUBMITTED: **National Endowment for the Arts**	2. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY THE FEDERAL AGENCY: __ __ -- __ __ __ __ -- __ __ __ __	OMB APPROVAL #: **0348-0039**

3. RECIPIENT ORGANIZATION (Name and complete address, including ZIP code):

4. EMPLOYER IDENTIFICATION NUMBER: __ __ -- __ __ __ __ __ __ __	5. RECIPIENT ACCOUNT NUMBER OR IDENTIFYING NUMBER:	6. FINAL REPORT: ☐ YES ☐ NO	7. BASIS: ☐ CASH ☐ ACCRUAL

8. GRANT PERIOD: From: (Month, Day, Year)	To: (Month, Day, Year)	9. PERIOD COVERED BY THIS REPORT: From: (Month, Day, Year)	To: (Month, Day, Year)

10. TRANSACTIONS	I PREVIOUSLY REPORTED	II THIS PERIOD	III CUMULATIVE
a. TOTAL OUTLAYS (actual)			
b. RECIPIENT SHARE OF OUTLAYS (non-Federal)			
c. FEDERAL SHARE OF OUTLAYS			
d. TOTAL UNLIQUIDATED OBLIGATIONS			
e. RECIPIENT SHARE OF UNLIQUIDATED OBLIGATIONS			
f. FEDERAL SHARE OF UNLIQUIDATED OBLIGATIONS			
g. TOTAL FEDERAL SHARE (Sum of lines c and f)			
h. TOTAL FEDERAL FUNDS AUTHORIZED FOR FUNDING PERIOD			
I. UNOBLIGATED BALANCE OF FEDERAL FUNDS (Line h minus g)			

11. INDIRECT EXPENSE	a. TYPEOF RATE: (Check appropriate box.) ☐ PROVISIONAL ☐ PREDETERMINED ☐ FINAL ☐ FIXED			
	b. RATE %	c. BASE	d. TOTAL AMOUNT	e. FEDERAL SHARE

12. REMARKS: ATTACH ANY EXPLANATIONS DEEMED NECESSARY OR INFORMATION REQUIRED BY FEDERAL SPONSORING AGENCY IN COMPLIANCE WITH GOVERNING LEGISLATION.

13. CERTIFICATION: I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THIS REPORT IS CORRECT AND COMPLETE AND THAT ALL OUTLAYS AND UNLIQUIDATED OBLIGATIONS ARE FOR THE PURPOSES SET FORTH IN THE AWARD DOCUMENTS.

TYPED OR PRINTED NAME AND TITLE:	TELEPHONE (Area code, number, and extension)
SIGNATURE OF AUTHORIZED CERTIFYING OFFICAL:	DATE REPORT SUBMITTED:

FOR AGENCY USE ONLY

GRANTS & CONTRACTS REVIEWER: _____ G &C APPROVAL: _____