

2023-24 OGP Final Rep	ort - Narrative Questions	
progress. The Project Challenges see	llenges many organizations have faced over the last few years, we are allowing modifications for reporting on projec tion can be used to describe any challenges you have faced during this year including challenges that rose out of th reduling or cancellation of events, etc.	
Program Goals		
BRIEFLY describe your OGP funded project.	test	le.
Characters entered: 4 Min: Max: 200		**
Project Progress and Success		
2. What short term and/or long term goals are you working on with this project?	test	la de
Characters entered: 4 Min: Max: 500		
What progress did you make ward these goals? Demonstrate ing qualitative and/or antitative information.	test	
aracters entered: 4 n: Max: 750		
What was the greatest success uring this project in impacting ur organization and/or mmunity?	test	
aracters entered: 4 n: Max: 750		
oject Challenges		
What challenges did you loounter in implementing this oject, if any? What helped/would live helped you meet those lallenges?	test	
naracters entered: 4 in: Max: 750		

Cultural Equity and Inclusion St	atement/Policy/Plan	
6. How has the process of creating your organization's Statement, Policy and/or Plan impacted your organization's work? This could include programs and activities, staffing, planning, or any other internal processes or changes. Provide one or more specific examples.	test	
7. For organizations with annual budgets of \$1M + (required to submit a CEI policy and/or plan), describe the progress you have made toward achieving the goals of your CEI Plan. SKIP THIS QUESTION IF YOU DID NOT SUBMIT A CEI PLAN.	test	d.
Characters entered: 4 Min: Max: 750		
articipation/ Project Reach		
	nis project in particular? *Only report the number of people who partici	pated in this OGP grant funded project, not the
	. If a category count is not applicable, please enter N/A for that categor	
	. If a category count is not applicable, please enter N/A for that category objects and private performances, events, programs, workshops,	
asses, lectures, or residencies).  Total free attendance (including pu		ry.
isses, lectures, or residencies).  Total free attendance (including puttures, or residencies).  Total attendance in classes/workshorkshops, lectures, residencies or o	ublic and private performances, events, programs, workshops, blic and private performances, events, programs, workshops, classes, ops, both paid and unpaid. This should include only classes, ther educational events, not performances. (This may be all or part of	y
asses, lectures, or residencies).  Total free attendance (including publicities, or residencies).  Total attendance in classes/workshorkshops, lectures, residencies or oe numbers you reported in a and b	ublic and private performances, events, programs, workshops, blic and private performances, events, programs, workshops, classes, ops, both paid and unpaid. This should include only classes, ther educational events, not performances. (This may be all or part of above).	y y
asses, lectures, or residencies).  Total free attendance (including puctures, or residencies).  Total attendance in classes/workshorkshops, lectures, residencies or oe numbers you reported in a and b	ublic and private performances, events, programs, workshops, blic and private performances, events, programs, workshops, classes, ops, both paid and unpaid. This should include only classes, ther educational events, not performances. (This may be all or part of above).	y y y
asses, lectures, or residencies).  Total free attendance (including puctures, or residencies).  Total attendance in classes/workshorkshops, lectures, residencies or o e numbers you reported in a and b  Number of paid staff members who	ublic and private performances, events, programs, workshops, blic and private performances, events, programs, workshops, classes, ops, both paid and unpaid. This should include only classes, ther educational events, not performances. (This may be all or part of above).	y y y y
asses, lectures, or residencies).  Total free attendance (including puctures, or residencies).  Total attendance in classes/workshorkshops, lectures, residencies or one numbers you reported in a and b.  Number of paid staff members who	ublic and private performances, events, programs, workshops, blic and private performances, events, programs, workshops, classes, ops, both paid and unpaid. This should include only classes, ther educational events, not performances. (This may be all or part of above).  worked on this project.	y y y y y

# 2023-24 OGP Final Report - Narrative Questions Please note - in response to the challenges many organizations have faced over the last few years, we are allowing modifications for reporting on project progress. The Project Challenges section can be used to describe any challenges you have faced during this year including challenges that rose out of the mandatory closing of facilities, rescheduling or cancellation of events, etc. 10. Please check all applicable descriptions of the specific communities targeted for service in this project. CHECK ALL THAT APPLY ☐ Foster youth or former foster youth Homeless individuals Incarcerated or previously incarcerated individuals Individual artists ☐ Individuals of a particular faith (describe below) ☐ Individuals with disabilities (describe below) ☐ Individuals in residential facilities or institutions ☐ Individuals with low income □ LGBTQ individuals ☐ Military veterans/active personnel Recent immigrants ☐ General audience/constituency - no group specified ☐ Other distinct group (describe below) Describe as necessary: b. Specific Age Groups. CHECK ALL THAT APPLY □ Pre-Kindergarten (0-5 years) K-12 (6-17 years) ☐ Young Adults (18-24 years) ☐ Adults (25-64 years) □ Older Adults (65 plus years) ☐ General Audience - no group specified Describe as necessary: c. Specific Gender. CHECK ALL THAT APPLY ☐ Female ☐ Male Other (please describe)

☐ General Audience - no group specified

Describe as necessary:

d. Racial/ethnic groups. CHECK ALL THAT APPLY
☐ American Indian/Alaskan Native
□ Arab/Arab American
□ Asian/Asian American
□ Black/African/African American
☐ Hispanic/Latino/a
□ Native Hawaiian/other Pacific Islander
☐ White (non-Hispanic only)
☐ General Audience - no group specified
Describe as necessary:
PREVIOUS SAVE & CONTINUE EDITING MARK AS COMPLETE



Final Report Matching Expenses	0%
Please note – in response to the challenges many organizations face and will face as a result of the COV reporting on project progress and expenses.	/ID-19 pandemic, we are allowing modifications for
INSTRUCTIONS FOR FILLING OUT BUDGET TABLE	
Enter project expenses for the SECOND YEAR of the grant period. Do not enter your organization's annua project. Show how expended were matched in the MATCHING FUNDS column.	l budget; only show expenses specific to the grant
Reminder: OGP funds cannot be used for catering & hospitality, fundraising, lodging, meals or travel expe	enses.
All OGP grants must be matched at least dollar for dollar with earned or contributed cash support. In-kin if an organization receives a \$10,000 grant, the total project costs must be at least \$20,000 and the organ project funds from sources other than the Arts Commission	
Click "Next" to Start.	
(This question is only visible to administrators)  Total Grant Award:	

## **Identify Matching Expenditures**

	OGP YEAR 2 FUNDS	YEAR 2 MATCH
Request/Match Amount	0.0	0.0

## MATCHING EXPENSES

Please note that commas, decimals and dollar signs will cause an error in the totals and for validation at the bottom. Do <u>not</u> use symbols.

	OGP EXPENDITURES	MATCHIN	G EXPENSES
A. Administrative & Artistic Salaries, Fees & Fringe Subtotal	\$	\$	
B. Marketing	\$	\$	
C. Operations	\$	\$	
D. Fundraising	\$	\$	
E. Professional Development	\$	\$	
F. Programming	\$	\$	
G. Other Expenses	\$	\$	

TOTAL	\$ 0		\$ 0		
	MUST BE = TO OGP YEAR 2 F	FUNDS	MUST BE = OR >	TO YEAR 2 MATCH	
leets or Exceed Expectations?	true		true		
ease provide your source(s) of M	latching Funds				
					/.
Developed the state of the second	//				
Provide a detailed list of "Other	" expenses in the "Budget Notes" s	ection. All additio	nal notes are optional.**	k	l.
Provide a detailed list of "Other	" expenses in the "Budget Notes" s	ection. All additio	nal notes are optional.**	×	l.
Provide a detailed list of "Other	" expenses in the "Budget Notes" s	ection. All additio	nal notes are optional.**	k	le
Provide a detailed list of "Other'	" expenses in the "Budget Notes" s	ection. All additio	nal notes are optional.**	<b>x</b>	le
Provide a detailed list of "Other	" expenses in the "Budget Notes" s	ection. All additio	nal notes are optional.**	•	
				•	
certify that the County Grant was	expenses in the "Budget Notes" so			•	
certify that the County Grant was				•	
certify that the County Grant was		contributed incon			



## OGP Year 2 Report-Supplemental Materials

#### 1. IMAGES:

1-2 high quality images illustrating the funded project to possibly be used for L.A. County Department of Arts and Culture's marketing and promotion of OGP and your work. Images must be at least 300 dpi (dots/pixels per inch) and saved in JPEG format. Title each image with the name of your organization followed by a number (Example: OrgName1, OrgName2, OrgName3).

If available please also add the photographer credit under the image description as well as the name(s) of any artists whose work is included in the photograph.

Upload Image 1

**⚠** Upload a file

Accepted formats: .pdf, .ppt, .pptx, .jpg, .jpeg

Upload Image 2 (optional)

**⚠** Upload a file

Accepted formats: .pdf, .ppt, .pptx, .jpg, .jpeg

#### 2. AUTHORIZATION FOR USE OF IMAGES

I certify that I have permission from the photographer and the people in the attached photograph(s) to use the photograph(s) for the purposes of publicizing my organization and its County-funded project and to promote programs of the Department of Arts and Culture on the Department's websites, marketing materials (including Department's website, digital newsletters, and social media) and through distribution to press outlets. I hold harmless the Los Angeles County Department of Arts and Culture and by extension LA County from any litigation or other claims arising from the use of these photographs.

☐ I certify

☐ I prefer the images not be used for publicity or promotion of County grant programs.

## 3. PROOF OF RECOGNITION

Include one example verifying recognition of Department of Arts and Culture support. Grantees are required to recognize support from Los Angeles County by placing the Department of Arts and Culture's logo and credit line on the organization's printed materials and Web site, and listing the Department of Arts and Culture among the organization's donors or supporters. Department of Arts and Culture logos can be downloaded here.

**⚠** Upload a file

#### 4. LETTER OF IMPACT to BOARD OF SUPERVISORS:

Grantees are required to send at least one letter to their Board Supervisors. (In Year 1) a letter of acknowledgement, thanking the Board of Supervisors for the grant and/or (In Year 2) a letter providing details about the OGP project and its impact in your community.

Letters should be sent on behalf of the executive director, board chair, or both. They should be sent directly to your County Supervisor by email or US mail. Note that your organization's district may have changed after the 2021 redistricting process. Use the link below to look up your district using your address: <a href="https://lavote.gov/apps/precinctsmaps">https://lavote.gov/apps/precinctsmaps</a>

More details and address for Board of Supervisors, visit: https://www.lacountyarts.org/funding/organizational-grant-program/manage-your-grant/grant-requirements.

Please note, the below upload can be skipped if the organization sent aletter in Year 1 of the grant cycle.

Upload copy of the sent email



## 5. PROGRAM LOCATIONS ZIP CODE LIST:

Please provide the zip code of every location where you provided programming or services that were funded by your OGP grant.

 $\underline{\textbf{Note:}} \ \textbf{The list should only include physical locations of programming } \underline{\textbf{not individual participant/audience}} \ \textbf{addresses.}$ 

**⚠** Upload a file

Accepted formats: .xls, .xlsx, .csv, .txt, .doc, .docx

SAVE & CONTINUE EDITING

MARK AS COMPLETE