



Grantee Interim Report

No further grant requests from your organization can be considered until this report has been completed and returned. .

Name of organization reporting: _____
(Should be the same as on IRS Form 990)

Dates covered by this grant: from _____ to _____

Executive Director: _____

Phone and email: _____

Contact person/title/phone/email: (If different from Executive Director) _____

Mailing Address: _____

City/State/Zip: _____

Fax Number: _____

Project/Program Name: _____

Amount of Grant: _____ Grant I.D. No. (if applicable): _____

Purpose of Grant: _____

Have there been any changes to your organization's IRS 501(c)(3) not-for-profit status since you were awarded this grant? _____ If yes, please explain: _____

I hereby certify that the above and attached statements are true and accurate.

Signature of Executive Director or Authorized Board Officer

Date



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NARRATIVE *(Please refer to outcomes and evaluation information provided by your organization in original grant proposal and/or those listed in Schedule A of the Daniels Fund grant contract and include a maximum of 4 pages, exclusive of attachments).*

1. Please describe the progress made toward the stated goals and objectives related to this specific grant. (Please include those stated goals and objectives in your response.)

2. Were there any unanticipated challenges, either positive or negative, that you have not already described? If yes, please describe the implications on the progress of your project.

3. Has the original intent of the project changed in any way? If yes, please describe.
