South Dakota Community Foundation
Final Evaluation & Statement of Expenditures

CSA:
Grantee:
Grant # (Office Use Only):

Grant Objectives:
Were the goals described in the application accomplished?
☐ **Yes** ☐ **No**
If no, why?

Grant Outcomes:
Were there any unexpected outcomes?
☐ **Yes** ☐ **No**
If so, what were they?

Statement of Grant Expenditures

Grant Amount		$
Itemized Grant Expenses		
Total Grant Dollars Expended		$
Amount Due Back to SDCF		$