SaskCulture Inc.

MULTICULTURAL INITIATIVES FUND (MIF)

Annual Funding Grant – Follow-up Form

Identification

| Name of Organization | | | | | |
|----------------------|--------------------|---|---------------------------|--|--|
| Mailing Address | | Postal Code | | | |
| Phone# | Fax# | Email . | Address | | |
| Contact Person | | Title | | | |
| Grant Number | Grant Amount \$ | Amount being requested on follow-up \$ | Fiscal Year End: MM/DD/YY | | |

MIF Annual Funding Follow-up Reports must include:

- Completed and signed Annual Funding Grant Follow-up Form (this form)
- Completed Annual Follow-up Profile Form
- Activity Summary: What did you plan to do? What did you do? Explain changes. Highlight impacts. Future direction. Maximum two pages in length.
- Attach a description and show evidence, if available, of how Saskatchewan Lotteries and SaskCulture were publicly acknowledged as a source of funds for your organization.
- Financial Report
 - Annual Funding Budget Follow-up Form. Summarize your organization's expenditures and revenues under the following headings:
 - Column 1 Actuals from previous fiscal year
 - Column 2 Current fiscal year proposed budget (submitted in your original funding application)
 - Column 3 Official year-end financial statement
 - Column 4 Next year's proposed.
 - Financial Statement (Audited Financial Statement for organizations with annual budgets exceeding \$25,000)
- Advocacy Input: It is important for SaskCulture to demonstrate the impact the lottery system. Please attach any information you feel could be used as part of our Culture Builds Community campaign. This could take the form of success stories, initiatives, accomplishments, research or statistics.

Certification

| We the undersigned do hereby affirm that all conditions stated in the guidelines for this program have been met and that this follow-up form | | | | | | |
|--|------|---------------------------|------|--|--|--|
| constitutes a correct and true statement. | | | | | | |
| Signature of President | | Signature of Treasurer | | | | |
| | | | | | | |
| | | | | | | |
| Name of President (Print) | | Name of Treasurer (Print) | | | | |
| | | | | | | |
| | | | | | | |
| Phone | Date | Phone | Date | | | |
| | | | | | | |
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SaskCulture Inc.

MULTICULTURAL INITIATIVES FUND

Annual Follow-up Profile

| Name of Organization | | | | | | | | |
|----------------------|---------------|---|--|--|--|--|--|--|
| Gr | ant | Number Fiscal Year to | | | | | | |
| | | Day/month/year Day/month/year | | | | | | |
| | | | | | | | | |
| 1. | 1. Membership | | | | | | | |
| | • | Number of Individual Members | | | | | | |
| | | Estimated # of Youth # of Adults # of Seniors $(19 \& under)$ (20 – 54) # of Seniors (55+) | | | | | | |
| | • | Number of Organization Members | | | | | | |
| | | Please attach a list of your member organizations | | | | | | |
| 2. | Vo | lunteers | | | | | | |
| | • | Number of organization volunteers | | | | | | |
| | • | Approximate number of volunteer hours per year | | | | | | |
| | | | | | | | | |
| 3. | Pr | ograms | | | | | | |
| | • | Total number of programs offered by your organization (If a program has a number of events within a series, count the series as one program) | | | | | | |
| | | Estimated number of participants | | | | | | |
| | | Estimated # of Youth # of Adults # of Seniors $(19 \& under)$ (20 – 54) # of Seniors $(55+)$ | | | | | | |
| | • | Of the above programs, the total number of programs with public participation (Include only those programs/services open to the general public) | | | | | | |
| | | Estimated number of participants | | | | | | |
| | | Estimated # of Youth # of Adults # of Seniors $(19 \& under)$ (20 – 54) (55+) | | | | | | |

| Multicultural Initiatives Fund Annual Funding Follow-Up Budget Form | | | | | | | |
|--|--|--|--|--|--|--|--|
| BUDGET DETAILS | PREVIOUS YEAR Actuals (previous year's audit) Fiscal year 20_/20_ | FOLLOW-UP YEAR Proposed (original budget) Fiscal year 20_/20_ | FOLLOW-UP YEAR Actuals (from most recent audit) Fiscal year 20_/20_ | CURRENT YEAR Revised Fiscal year 20_/20_ | | | |
| EXPENSES | | - | | • | | | |
| A. Administration personnel office other sub-total | | | | | | | |
| B. Travel/Meetings staff volunteers AGM other sub-total | | | | | | | |
| C. Corporate Business memberships professional fees Insurance other | | | | | | | |
| sub-total D. PR/Communications newsletter other sub-total | | | | | | | |
| E. Programs/Services (identify each) | | | | | | | |
| sub-total F. Other | | | | | | | |
| - sub total | | | | | | | |
| TOTAL EXPENSES | | | | | | | |
| REVENUES A. Self- generated membership fees program/service fees fundraising corporate sponsorship | | | | | | | |
| sub-total B. Grants SaskCulture Inc. (MIF) | | | | | | | |
| Other grants/ agencies (identify) - - sub-total | | | | | | | |
| C. Other (identify) | | | | | | | |
| TOTAL REVENUE | | | | | | | |
| SURPLUS/ DEFICIT | | | | | | | |
| Accumulated SURPLUS / DEFICIT | | | | | | | |