

# Final Report Tips FY2026



# Final Invoice

## Final Invoice

- **NM Arts Contract Award Amount (Populated on Form)**
- **Enter Amount Requested this Invoice**
- **Enter Total Previously Requested**
- **NM Arts Contract Amount Remaining** should be zero (\$0.00).

*\*Please use whole numbers.*

## Itemized Invoice

- List dollar amounts on appropriate line items for the current invoice.
- Amounts by line item should be the amount of **New Mexico Arts funds** spent for this invoice and not your total expenditures.
- If you are only submitting a Final Invoice, the line items listed here should match your Final Fiscal Report (FFR).

# Final Fiscal Report

- List the Actual Income and Expenses for your funded program(s).
- The line-item totals in your FFR must match the total of all submitted invoices by line item.
- Download the Final Fiscal Report (FFR) , enter your data, save, and upload the file. See [Manage Your Grant](#)
- Name your uploaded file: YourOrganizationName\_FFR
- FFR figures should align with your Final Narrative & Program Data., i.e. Private Support corresponds though is not limited to Volunteer Data in questions 14a & 14b, and Salaries and Benefits correspond to Staff Data questions 15a & 16b.

### Final Fiscal Report

Please list **actual** income & expenses for the NMA Funded Program(s)

**Please round figures to the nearest dollar.**

Organization Name:			
INCOME	Cash Income	NM Arts	In-Kind
A. Revenue - Earned Income			
1 Admissions			
2 Contracted Services Revenue			
3 Other Revenue			
B. Support			
1 Corporate Support			
2 Foundation Support			
3 Other Private Support			
4 Government Support			
a Federal non-NEA			
b National Endowment for the Arts			
c State/Regional, not NM Arts			
d Local			
C. Other Income			
D. Subtotal Cash Income	\$0		\$0
E. New Mexico Arts Contract Amount			
F. Total Income	\$0		

EXPENSES	Expenses	NMA Share	In-Kind
	do not include NMA		= Equals In-kind Income
A. Personnel			
1 Administrative Salaries & Benefits			
2 Artistic Salaries & Benefits			
B. Contracted Fees & Services			
1 Administrative			
2 Artistic			
C. Travel			
D. Marketing & Public Relations			
E. Remaining Operating Expenses			
1 Mortgage (NMA cannot be mortgage)			
2 Rent			
3 Supplies			
4 Other (phone, postage, etc.)			
F. Total Each Column	\$0	\$0	\$0
G. Total Cash Expenses	\$0		

Income minus Expenses                                                                                    

4/16/2026

- Enter **Organization Name**
- Column 1, enter **Total Cash Income** and **Total Cash Expenses** for the funded program.
- Column 2, enter the **New Mexico Arts Contract Amount** listed in your grant agreement. Enter the **NMA Share** for Expenses and ensure the figures listed match all itemized expenses listed in your invoices.
- Column 3, enter the In-Kind Income and In-Kind Expenses for the funded program.
- Include a 50% match for the funded program at least half of which must be cash.
- See [Budget-Detail-Tips.pdf](#) for guidance.

### FFR Bottom Line Clarification

Last Line on FFR - Income minus Expense (**Column 1 Income less Expenses does not have to be zero**) (Column 2 NMA Share and Column 3 In-Kind should be zero)

### Final Fiscal Report

Please list actual income & expenses for the NMA Funded Program(s)

Please round figures to the nearest dollar.

<b>Organization Name:</b>			
<b>INCOME</b>	Cash Income	NM Arts	In-Kind
A. Revenue - Earned Income			
1 Admissions			
2 Contracted Services Revenue			
3 Other Revenue			
B. Support			
1 Corporate Support			
2 Foundation Support			
3 Other Private Support			
4 Government Support			
a Federal non-NEA			
b National Endowment for the Arts			
c State/Regional, not NM Arts			
d Local			
C. Other Income			
D. Subtotal Cash Income	\$0		\$0
E. New Mexico Arts Contract Amount			
<b>F. Total Income</b>	<b>\$0</b>		

<b>EXPENSES</b>	Expenses	NMA Share	In-Kind
	do not include NMA		= Equals In-Kind Income
A. Personnel			
1 Administrative Salaries & Benefits			
2 Artistic Salaries & Benefits			
B. Contracted Fees & Services			
1 Administrative			
2 Artistic			
C. Travel			
D. Marketing & Public Relations			
E. Remaining Operating Expenses			
1 Mortgage (NMA cannot be mortgage)			
2 Rent			
3 Supplies			
4 Other (phone, postage, etc.)			
<b>F. Total Each Column</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>G. Total Cash Expenses</b>	<b>\$0</b>		

Income minus Expenses \$0                      \$0                      \$0

4/16/2026

#### Actual Total Income\*

Please enter the amount on line F. Actual Total Income from your

\$

#### Actual Total Cash Expenses\*

Please enter the amount on line G. Actual Total Expenses from your

\$

#### Actual Total In-Kind\*

Please enter the amount on line F. Actual Total Each Column for the

Note that your actual total In-Kind Income reported in your Final F

\$

**Actual Total Income\*** must match figure listed on FFR.

**Actual Total Cash Expenses\*** must match figure listed on FFR

**Actual Total In-Kind\*** must match figure listed on FFR

# Expenses

EXPENSES	Expenses <small>do not include NMA</small>	NMA Share	In-Kind <small>= Equals In-kind Income</small>
A. Personnel			
1 Administrative Salaries & Benefits			
2 Artistic Salaries & Benefits			
B. Contracted Fees & Services			
1 Administrative			
2 Artistic			
C. Travel			
D. Marketing & Public Relations			
E. Remaining Operating Expenses			
1 Mortgage (NMA cannot be mortgage)			
2 Rent			
3 Supplies			
4 Other (phone, postage, etc.)			
F. Total Each Column	\$0	\$0	\$0
G. Total Cash Expenses	\$0		

Income minus Expenses \$0                      \$0                      \$0

4/16/2026

## Personnel Expenses

List all administrative and artistic personnel costs for the funded program.

1. **Administrative Salaries and Benefits:** All paid full- or part-time W2 salaried employees.
2. **Artistic Salaries and Benefits:** all paid full or part-time W-2 salaried employees.

## Contracted Fees & Services

List all contracted fees and services related to the funded program.

1. **Administrative Contracted Fees and Services:** Includes consultants, accountants, secretarial support, a contracted project director (1099 contractors)
2. **Artistic Contracted Fees and Services:** Includes artists, actors, printers, designers, etc. (1099 contractors)

If you list Full-Time and/or Part-Time Employees under Program Data, you will have figures for Administrative and/or Artistic Salaries in the Cash and/or NMA Share Column(s).

**15a. Staff Data: Full-Time Employees** *How many full-time employees worked on your funded programs and services? If none enter 0.*

**16a. Staff Data: Part-Time Employees\*** *How many part-time employees worked on your funded programs and services? If none enter 0.*

# In-Kind

Please list Total In-Kind for the funded program; this includes goods or services provided to an organization at no charge or at a reduced rate. In-Kind may be used towards the required match.

Any in-kind listed as income should also be listed as expenses on the appropriate expense line item. In-kind income must equal in-kind expenses.

## How do you calculate In-Kind?

- Volunteer Hours are listed as (other private support) and are calculated at current market wages, at least the federal minimum wage (7.25/hr.) unless the volunteer is donating professional services, which are calculated at professional rates and should be listed as “Corporate support.” See volunteer hours in Program Data.
- Donated materials and donated space (rental) directly involved with the proposed program should be calculated at fair market value.
- \*Do not include board members’ usual duties such as board meetings, organizational retreats, and committee meetings as in-kind support.

### Final Fiscal Report

Please list actual income & expenses for the NMA Funded Program(s)

Please round figures to the nearest dollar.

Organization Name: \_\_\_\_\_

INCOME	Cash Income	NM Arts	In-Kind
A. Revenue - Earned Income			
1 Admissions			
2 Contracted Services Revenue			
3 Other Revenue			
B. Support			
1 Corporate Support			1500
2 Foundation Support			
3 Other Private Support			7500
4 Government Support			
a Federal non-NEA			
b National Endowment for the Arts			
c State/Regional, not NM Arts			
d Local			1500
C. Other Income			
D. Subtotal Cash Income	\$0		10,500
E. New Mexico Arts Contract Amount			
F. Total Income	\$0		

EXPENSES	Expenses	NMA Share	In-Kind
	do not include NMA		= Equals In-kind Income
A. Personnel			
1 Administrative Salaries & Benefits			
2 Artistic Salaries & Benefits			
B. Contracted Fees & Services			
1 Administrative			3750
2 Artistic			3750
C. Travel			
D. Marketing & Public Relations			
E. Remaining Operating Expenses			
1 Mortgage (NMA cannot be mortgage)			
2 Rent			1500
3 Supplies			1500
4 Other (phone, postage, etc.)			
F. Total Each Column	\$0	\$0	10500
G. Total Cash Expenses	\$0		

Income minus Expenses \$0                      \$0                      \$0

4/16/2026

### In-Kind Income

List the In-Kind support for the funded program including, but not limited to:

- Corporate Support: Contributed goods/services from businesses.
- Private Support: Contribution of individuals which may include volunteer hours for funded activities.
- Government Support: may include in-kind support from a government entity.

### In-Kind Expense

List the In-Kind support for the funded program, determine the nature of the contribution including, but not limited to:

Contracted Fees and Services

1. Administrative: Duties being performed at no cost or a discounted rate.
2. Artistic: Artists donating all or a portion of their time

**\*In-Kind Revenue should equal In-Kind Expense.**



# Final Narrative

- Please describe the New Mexico Arts-funded programs and services as outlined in your Schedule of Programs and Services in your Grant Agreement –See Executed Grant Agreement.
- If the programs didn't happen as planned, please discuss in your narrative and describe any program changes in your narrative.
- Please include only the funded programs and services; do not include activities outside of your grant period or activities that are subject to funding restrictions.

# Project Activity Location

Venue Physical Address	Venue City	Venue State	Venue Zip Code	Latitude	Longitude	Number of days on which activities occurred at this venue	Number of locations
DO NOT PROVIDE LOCATION/VENUE NAME				<u>ONLY IF NO PHYSICAL ADDRESS PROVIDED</u>	<u>ONLY IF NO PHYSICAL ADDRESS PROVIDED</u>		ADD ADDITIONAL LOCATIONS AS NEEDED
text	text	state abbreviation (2 char)	5 digit number	Number with six decimal places (DD.DDDDDD)	Number with six decimal places (-DD.DDDDDD)		Number
123 New Mexico Street	Santa Fe	NM	87505			10	1
222 Chile Street	Albuquerque	NM	87102			5	2
820 N. Silver Street	Silver City	NM	88061			2	3
	Silver City	NM	-----	32.81744969	-108.3096447	1	4

- The PAL captures geographic information for your funded projects only.
- Download the **Project Activity Location** (PAL) Form, enter your location data, save, and upload the file.
- **Number each location in the last column.**
- Please name your file: YourOrganizationName\_PAL
- Make sure that counties served reflected in Program Data align with cities listed on the PAL.

# Program Data

Select the answers that best apply to your funded programs and services. Refer to your last submitted Final Report to assist with appropriate selections.

# ADA Compliance

These are organization-based questions that extend beyond funded programs. Please provide information regarding the accessibility of your programming.