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| S:\Common Office\Logo.Donor and Credit Instructions\CMA\JV-Logo\CMA.Vertical\cmaVERT.bw.big.jpg.jpg | **FINAL REPORT****PRESENTER CONSORTIUM FOR JAZZ** |

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| Grantee name:       | Year awarded: PCJ 2022 |
| Contact person:       | Title:       |
| Address:       |
| Phone:       | Email:       |
| CMA member#        | EIN#       |
| Your consortium partners:       |
| Your organization was the (please check one) [ ]  Lead Presenter [ ]  Presenter Partner  |

1. **YOUR PRESENTER CONSORTIUM FOR JAZZ PROJECT**

Please summarize your project including any activities in addition to the concert performances.

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Please complete the table below for each ensemble presented.

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|  | Ensemble 1 | Ensemble 2  | Ensemble 3  |
| Name of Ensemble |       |       |       |
| Date |       |       |       |
| Venue |       |       |       |
| House capacity |       |       |       |
| # Tickets Sold |       |       |       |
| # Tickets Comp |       |       |       |
| Ticket price(s) |       |       |       |
| Musician 1+instrument(s) |       |       |       |
| Musician 2+instrument(s) |       |       |       |
| Musician 3+instrument(s) |       |       |       |
| Musician 4+instrument(s) |       |       |       |
| Musician 5+instrument(s) |       |       |       |
| Musician 6+instrument(s) |       |       |       |
| Musician 7+instrument(s) |       |       |       |
| Musician 8+instrument(s) |       |       |       |
| Musician 9+instrument(s) |       |       |       |
| Musician 10+instrument(s) |       |       |       |

Please summarize your marketing efforts and the results you achieved. (Explain digital promotion for the event as well as the number of people who registered for/ were able to experience the event.)

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Please compare your projected and actual income and expenses.

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| EXPENSES | PROJECTED | ACTUAL |
| Ensemble(s) fee(s) | $       | $       |
| Ensemble(s) travel | $      | $      |
| Ensemble(s) housing/per diem | $      | $      |
| Production | $      | $      |
| Marketing | $      | $      |
| Total Expenses | $      | $      |
|  |  |  |
| Earned Incomet |
| Ticket sales | $      | $      |
| Merchandise sales | $      | $      |
| Other | $      | $      |
| Total Earned Income | $      | $      |
|  |
| Contributed Income  |
| Government | $      | $      |
| Corporate | $      | $      |
| Foundation | $      | $      |
| Individual | $      | $      |
| Other | $      | $      |
| Total Contributed Income  | $      | $      |
|  |
| Total earned and contributed income | $      | $      |
| CMA Grant | $      | $      |
| Total Income (Earned Income, Contributed Income, plus CMA Grant) | $      | $      |
|  |
| Surplus/Deficit (Total Income minus Total Expenses) | $      | $      |

Did problems arise resulting from the collaborative nature of the project? If so, please describe the issue(s) and if/how you found resolution.

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Had you been part of a presenting consortium prior to receiving this grant? [ ] Y [ ] N

If yes, did it involve either of your partners in this project? [ ] Y [ ] N

Would you have undertaken this project without consortium grant support? [ ] Y [ ] N

Do you anticipate seeking other consortium opportunities that ***are*** connected to grant funds? [ ] Y [ ] N

Do you anticipate seeking other consortium opportunities that are ***not*** connected to grant funds? [ ] Y [ ] N

Please share key pandemic related experiences as presenting organization

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Please use this space to share any testimonial or stories about this project you would like to share.

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Would you allow CMA to share this testimonial on the CMA website? [ ] Y [ ] N

[ ]  Yes, one copy of marketing, press and media documentation of grant activities is included in this report.

*To the best of my knowledge, the information reported above is correct*

*and all cash payouts have been made in accordance with grant requirements.*

|  |  |
| --- | --- |
| Contact person      | Title      |
| Signature | Date      |

 Please email report to:

Susan Dadian: sdadian@chamber-music.org