

# REPORT 2018 July Cycle

## GENERAL INFORMATION

### Organization Information

<b>Legal Name:</b> Make-A-Wish Central and South Texas		<b>Federal Tax ID#:</b> 74-2357788	
<b>Address:</b> 1931 NW Military Highway Ste. 210	<b>City:</b> San Antonio	<b>State:</b> Texas	<b>Zip Code:</b> 78213
<b>Website:</b> www.cstx.wish.org		<b>Fax:</b> (512) 329-9474	

### Head Of Organization

<b>Name:</b> Kathrin Brewer	<b>Title:</b> President & CEO
<b>E-Mail Address:</b> kbrewer@cstx.wish.org	<b>Phone:</b> (210) 862-8228

### Application Contact

<b>Name:</b> Sarah Gaye Conner	<b>Title:</b> San Antonio Regional Director	<b>E-Mail Address:</b> sarah@cstx.wish.org	<b>Phone:</b> (210) 525-9474
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## REPORT INFORMATION

<b>Report Funding Cycle:</b> 2018 July Cycle	<b>Report Date:</b> 03/31/2020 12:00 am
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**1: Please include in your report the dollar amount of the funds that were awarded, the date they were funded and what the funds supported.**

Awarded Amount: 50,000	Date: 07/26/2019
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**2: Were the objectives cited in your original proposal met? Please address each started objective and how it was met.**

Yes, the objectives were met. The grant of \$50,000 adopted the wishes of 10 children with critical illnesses in San Antonio.

**3: Please explain any changes from the original proposal and the circumstances that lead to the modification of the objective.**

no changes

**4: What needs were addressed?**

Ten children waiting for their wishes were adopted to The Najim Charitable Foundation, and they all had life changing wish experiences.

The wish granting experience gave the children much needed hope to help them persevere through their difficult all consuming medical condition.

**5: What method of evaluation did you use to monitor and measure the project's outcome and what are the result?**

The child's wish coordinator monitors every step of the way of the wish process from conception of the wish, to the completion of the wish, and throughout the follow up with the family.

It is our goal to deliver the highest quality wishes possible. In order for us to measure our performance and continually strive to improve our services, we encourage every family to complete a Wish Satisfaction Survey at the end of the child's wish. Those results provide feedback to the board, wish team and staff to strengthen our services.

The outcome for this grant was successful. Ten children had their heartfelt wishes granted which created life changing wish experiences for them.

**6: Do you plan to continue this project, and if so, how do you plan to sustain it?**

With hundreds of children in our pipeline and an unprecedented rise in referrals, we will sustain our 35 year tradition of never denying a wish to a medically qualified child by continuing to seek support from foundations, corporations, individuals, national partners, our Kids For Wish Kids school based program, external events and internal events.

**7: Please provide any other comments or information relevant to this grant.**

Make-A-Wish is honored to be part of Harvey Najim's philanthropy. We value and appreciate the integral support that has enabled to make a profound difference in the lives of so many children in San Antonio.

**8: Please provide an updated detailed projected budget with expenses for the received grant. Also include the totals for the budgeted and actual amount. Explain any discrepancies between the budgeted and the actual expenses for the project.**

Line Item Description	Total Project Funds Allocation	Najim Requested Funds	Project Funds Actual	Najim Funds Allocation
Adopt A Wish Program	\$4,223,015	\$50,000 (10 Wishes)	\$59,093	\$50,000
<b>TOTAL:</b>	<b>\$4,223,015</b>	<b>\$50,000</b>	<b>\$59,093</b>	<b>\$50,000</b>

**Signature**

Sarah Gaye B. Conner