

North Carolina Department of Public Safety
This information should be completed and submitted by each grantee receiving
\$1,000,000 or more in total state grant funds.

Schedule of Receipts and Expenditures
(≥ \$1,000,000)

All forms must be completed and emailed to: DPS_Grantcompliance@ncdps.gov

Each grantee receiving \$1,000,000 or more should complete the basic information requested here relative to the organization, as well as the accounting for State funds received, used or expended.

State Authorization: G.S.143C-6-23 09 NCAC 03M .0401

1. Organization:	
Organization Name:	
Tax Identification #:	
Organization Fiscal Year End: (mm/dd/yyyy)	
Mailing Address (street, city, state, zip code):	
Phone Number (area code + number):	
Fax Number (area code + number):	
Contact Person:	
Contact Person Title:	
E-Mail Address:	

a. Receipts		
Funding State Agency	Grant Title	Total Receipts
b. Expenditures		
Category	Dollar Amount	
Personnel		
Contracted Services		
(a)Total Personnel/Contracted Services Costs:		
Office Supplies & Materials		
Service Related Supplies		
(b)Total Supplies & Material Costs:		
Travel		
Communications & Postage		
Utilities		
Printing & Binding		
Repair & Maintenance		
Meeting/Conference Expense		
Employee Training (no travel)		
Classified Advertising		
In-State Board Meeting Expenses		
(c)Total Non-Fixed Operating Expense:		

This form is effective 10/1/24.
 If there are any questions, please contact the Agency's Division that provided your grant.
 Emergency Management: 919-825-2500
 Governor's Crime Commission: 919-733-4564

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Office Rent (Land, Buildings, etc.)	
Furniture Rental	
Equipment Rental (Phones, Computers, etc.)	
Vehicle Rental	
Dues & Subscriptions	
Insurance & Bonding	
Books/Library Reference Materials	
Mortgage Principal, Interest and Bank Fees	
(d)Total Fixed Charges & Other Expenses:	
Buildings & Improvements	
Leasehold Improvements	
Furniture/Non-Computer Equip., \$500+ per item	
Computer Equipment/Printers, \$500+ per item	
Furniture/Equip., under \$500 per item	
(e)Total Property & Equipment Outlay:	
Purchase of Services	
Contracts with Service Providers	
Stipends/Scholarships/Bonuses/Grants	
(f)Total Services/Contracts:	
Food	
Other (provide description here):	
(g)Total Other Expenses:	
Total Expenditures (sum a through g)	

Unexpended cash balance (do NOT use with reimbursement grants)

Beginning of the year cash balance	
End of the year cash balance	

NOTE: Per [09 NCAC 03M .0205](#), North Carolina state law requires every [non-state entity](#) that is **not** subject to the requirements of the [Local Government Commission](#) (LGC) who “receives, holds, uses, or expends” State financial assistance in an amount equal to or greater than \$1,000,000 within its fiscal year to conduct an annual audit within 9 months of their fiscal year end. “State financial assistance” includes all state grant funding and federal pass-through grant funding from state agencies to non-state entities. Audits must single or program-specific and must be conducted in accordance with Generally Accepted Government Auditing Standards ([gao.gov/yellowbook](#)). See [NCEM Grants Management & Compliance website](#) and [FAQs](#) for more information.

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