

STATE GRANT COMPLIANCE REPORTING

Report Template B: Please use this reporting template for the END OF YEAR report

1. Organization:	
Organization Name:	Burke United Christian Ministries
Organization Tax ID #:	59-177149
Project/Activity Title:	Directed Grant
Reporting Period:	July 1, 2021 through June 30, 2022
Organization Fiscal Year End:	June 30
Mailing Address (street, city, state, zip code):	305-B West Union St. Morganton, NC 28655
Phone Number (area code + number):	828-433-8075
Fax Number (area code + number):	828-433-7906
Contact Person:	Alice Horton
Contact Person Title:	Executive Director
E-Mail Address:	bucmdirector@gmail.com

2. Preparer: [PLEASE INDICATE WHO PREPARED THIS INFORMATION BY CHECKING]	<input checked="" type="checkbox"/> Employee	<input type="checkbox"/> CPA/Accountant
Name of Preparer: Alice Horton	Employee	
Phone Number:	828-433-8075 ext. 224	

3. Please provide a list of the Organization's Board Members. [ADD ADDITIONAL PAGES, IF NEEDED]	
Name of Board Member	Board Member Title
Bobby Walters	President
Michele Byrd	Vice President
Dan Boggs	Tres.
Pat Irwin	Secretary

4. What restrictions are placed upon the grant by the grant award document? If the grant award document does not identify specific restrictions, please identify the intended use of the grant funds as included in the award document.
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Restrictions:

Dollars were used to purchase food, assist individuals with power, water and rent assistance, to pay for employees who assist people diversion and to pay for the rent for the organization.

5. Does the organization have a Conflict of Interest policy?	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
6. Is the organization a for profit entity?	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no

Alice Horton
(Executive Director)
confirmed via
email on 7/18 that
answer to #5 is
"yes".

9/20/2022

7. Did the organization subgrant or pass down any funds to another organization?			<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no
If yes, answer the following:				
a. Name of Subaranteee	b. Program Name	c. Amount Subgranted		

8. Program Activities and Accomplishments:

SCHEDULE OF RECEIPTS AND EXPENDITURES

Report Template C: Please use this reporting template for the END OF YEAR report

9. Organization:	
Organization Name:	Burke United Christian Ministries
Organization Tax ID#:	59-177149
Organization Fiscal Year End:	June 30
Mailing Address (street, city, state, zip code):	305-B West Union St. Morganton, NC 28655
Phone Number (area code + number):	828-433-8075
Fax Number (area code + number):	828-433-7906
Contact Person:	Alice Horton
Contact Person Title:	Executive Director
E-Mail Address:	bucmdirector@gmail.com

a. Receipts		
Funding State Agency	Grant Title	Total Receipts
b. Expenditures		
Category	Dollar Amount	
Personnel		
Contracted Services		
(a)Total Personnel/Contracted Svcs Costs:	5,000	
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:		
Office Rent (Land, Buildings, etc.)	10,000	
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 (program expenses): the purchase of food for the food pantry and dollars to assist people living in poverty with power, water and rent.	10,000
Other (provide description here):	
Other (provide description here):	
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: If total receipts, expenditures, beginning or ending unexpended grant balance available for expenditures is \$500,000 or more, an audit is required by G.S. 143C-6-23.

If there are any questions, please contact the Contract Administrator.

PROGRAM ACTIVITIES AND ACCOMPLISHMENTS REPORT
Report Template D: Please use this reporting template for the END OF YEAR report

Recipient Name:	Burke United Christian Ministries
Recipient Tax ID #	59-177149
Project/Activity Title:	Directed Grant
Recipient's Fiscal Year End:	June 30
Report Completion Date:	June 7, 2022
Preparer of This Report:	Alice Horton

1. **What were the original goals and expectations for the activity supported by this grant?**
 - A. To provide crisis assistance funding for individuals and families who need help with power, water and rent assistance.
 - B. To provide hot meals to the local community of Burke who are in need
 - C. Request Food to be provided through our Food Pantry for people of Burke County.

2. **If applicable, how have those goals and expectations been revised or refined during the course of the project?**

No changes to the goals

3. **What has the activity accomplished with these grant funds? Please include specific information including facts and statistics to support conclusions and judgments about the activity's impact.**
 - A. We have provided 845,368 pounds of food through our food pantry
 - B. We have provided 38,131 hot meals through the soup kitchen
 - C. We have provided services to 12,320 people
 - D. We have provided over \$100,000 in financial and clothing services 21/22

4. If the activity is a continuing one, briefly summarize future plans and funding prospects.
- A. Yes, we will be continuing with these projects in the future. We believe that we will see an uptick in the need for food due to the increase in price. We also speculate that the community will continue to have needs for power, water and rent. We will continue to request private gifts from individuals, churches and foundations.

If there are any questions, please contact the Contract Administrator.