

Gaming Account Summary Report Tutorial

Organizations that receive a Community Gaming Grant and/or earn revenues from licensed gaming events over \$20,000 in a 12-month period are required to complete a **Gaming Account Summary Report**. In this report, organizations must record all deposits to and payments from their Gaming Account over the course of the fiscal year in which the grant was received and/or the gaming event revenues were earned (i.e., the organization's most recently completed fiscal year).

Organizations that did not receive a Community Gaming Grant in their most recently completed fiscal year but have money in their Gaming Account from activity in previous years are also required to complete a Gaming Account Summary Report.

This tutorial will provide you with step-by-step instructions on how to properly complete a Gaming Account Summary Report. Please contact the Community Gaming Grant Branch at <u>CommunityGamingGrants@gov.bc.ca</u> if you have any questions or need further assistance.

1. Open a New Gaming Account Summary Report Form

Organizations have 90 days after the end of their fiscal year to complete and submit a Gaming Account Summary Report. Open a new report form at <u>http://www2.gov.bc.ca/assets/gov/sports-recreation-arts-and-culture/gambling/grants/form-acct-summary-rpt.pdf</u>.

2. Enter Your L & G Number and Reporting Dates





3. Enter Your Organization Information

SECTION 1 - ORGANIZATION INFORMATION		PLEASE PRINT CLEARLY	
Organization name: (as it appears on the constitution and/or certificate of	incorporation if applicable)	-	
Organization mailing address: Unit, Street, and/or PO Box	City	Postal Code	Enter your organization's official name and mailing information.
SECTION 2 – OPENING BALANCE OF GAMING ACC Opening balance is the amount carried forward from the previous year's rej amount will be zero. If your organization has more than one Gaming Accou	OUNT port (Closing Balance). If you have n nt, report the total opening balances	s 1 not previously had any gaming funds, the s of all Gaming Accounts.	
Enter the opening balance for your Gaming Account on Line	1. This is how much money yo	ou had in your Gaming Account on	
the first day of your most recently completed fiscal year. If yo the opening balance must match the closing balance (line 4)	ur organization has previously 47) from the previous year's Ga	had licensing and/or gaming funds, aming Account Summary Report.	

4. Enter Your Gaming Revenue

Enter all the gaming grant revenue from your most recently completed fiscal year on Lines 2-5:



the year on Line 5. You **do not** need to report on non-gaming grants.

5. Enter Your Gross Revenue from All Gaming Event Licences

Enter the gross revenue for all your licensed gaming events during your most recently completed fiscal year on Lines 6-13. You only need to complete this part of the report if you had a Class A, B, C, or D gaming licence and held a gaming event or events (e.g., raffle, casino, or bingo) during this time and earned revenue:

Licence number:	Licence type: (Class A,B,C,D)	Reporting period: From (DD-MM-YYYY)	To (DD-MM-YYYY)	Amount:	
1				\$	i a
-				\$	
-				\$	
				\$	
				\$	1
			1	\$	1
				\$	1
				\$	1

On Lines 6-13, enter the licence number, licence type, reporting period and amount you earned for each gaming event. Include an additional sheet with your report if you need more lines.

Any gaming revenues that your organization generated *after* your most recently completed fiscal year are to be included on your *next* Gaming Account Summary Report.



6. Enter Your Other Gaming Revenue

Enter any other gaming revenue you earned during your most recently completed fiscal year on Lines 14-17:



If you received a GST rebate, earned interest, or earned revenue from the sale of assets purchased with gaming funds, enter the total amount on Line 14.

Enter any donations of gaming funds you received from Service Clubs on Lines 15-17. Include an additional sheet if you need more lines.

dd Lines 2-17 then enter the total on Line 18. This is the total gaming revenue you earned from all gaming activity during your most recently completed fiscal year.

7. Enter Your Gaming Event Prize Costs and Expenses

On Lines 19-26, enter all the money you spent on your licensed gaming events during your most recently completed fiscal year:



Add Lines 23-25 and enter the amount on Line 26. This is the total of all your expenses for all your licensed gaming events during your most recently completed fiscal year.

8. Calculate Your Net Gaming Proceeds and Disbursements

Next, calculate how much money you had to spend after subtracting the costs and expenses for all your gaming activities:

Net gaming proceeds: (subtract lines 22 and 26 from line 18)	>>> \$	27
Total gaming revenue available for disbursement: (add lines 1 and 27)	>>> \$	28
Total Capital Project Grant disbursements (if applicable): Please itemize how Capital Project Gra disbursed on the Capital Project Grant Supplement only.	ant funds were >>> \$. 29

In your occurred a capital moject entry enter the total collar value of an item funds you disbursed from it on Line 29. Do not provide an itemized breakdown of disbursements on this form; use the Capital Project Grant Supplement form. Subtract Line 22 (your total prize costs) and Line 26 (your total gaming event expenses) from Line 18 (your total gaming revenue). Enter what is left on Line 27. This is your net gaming proceeds.

Add Line 1 (the opening balance in your Gaming Account at the start of your most recently completed fiscal year) and Line 27 (your net gaming proceeds). Enter the total on Line 28.



9. Enter Your Gaming Fund Disbursements

Record how you disbursed (i.e., paid out) the money from your Gaming Account on Lines 30-45:

Date: (DD-MM-YYYY)	Cheque, EFT, or Reference #:	Disbursed to:	Purpose:	Amount:		
				\$	30	
				\$	31	
-				\$	32	
				\$	33	
1				\$	34	For each disbursement, record t
				\$	35	or electronic file transfer numb
				\$	36	who received the money, what
				\$	37	purpose of the expenditure was,
				\$	38	the total amount that was spen
				\$	39	
			\$ 40	40	Record each transaction on a n	
				\$	41	report if you need more lines
				\$	42	
				\$	43	If you transferred funds to you
				\$	44	operating/general account, provi
				s	45	reimbursement summary (<u>see</u>

Add Lines 29-45 and record the total on Line 46. This is the total amount you disbursed from your Gaming Account during your most recently completed fiscal year.

If you wrote a Gaming Account cheque and it was not cashed before the end of the reporting period, do **not** record it in this Gaming Account Summary Report. Include the cheque in your next Gaming Account Summary Report, after the cheque has been cashed.

10. Enter Your Closing Balance

SECTION 6 - CLOSING	BALANCE (subtract line 46 from line 28) S 47	
The closing balance must agree organization's financial statement	h your organization's financial records (general ledger balance or whatever other accounting record supports your and is to be carried forward as the opening balance to the next Gaming Account Summary Report.	
	Subtract Line 46 (total gaming fund disbursements) from Line 28 (total gaming funds available for disbursements)	ent).
	Record this amount on Line 47. This is the closing balance on your Gaming Account at the end of your mos recently completed fiscal year. The closing balance must match your organization's financial records. This is	t is

11. Enter Your Gaming Account Information at Fiscal Year End

Financial institution name: (the name of your bank, credit u	nion, etc.)		
Financial Institution address: Unit, Street, and/or PO Box	City	Postal	Code
Account information and balances: (attach an additional sh	heet if necessary)		
Account type:	Account number:	Balance:	
Gaming Account at fiscal year-end:		\$	48
Term deposit(s): (gaming funds only)		\$	49
GIC(s): (gaming funds only)		\$	50
Other: (short description):		\$	51
Total of account halances: (add lines 48 to 51 - this total m	ust agree with line 47)	2 444	52

Complete these fields with the appropriate information about your Gaming Account, using your bank records.

If you have more than one Gaming Account, please include the closing balance from the most recently completed fiscal year here.

http://gov.bc.ca/gaminggrants



12. Enter Retained Service Club Proceeds

ſ	SECTION 8A - SERVICE CLU	JBS				
	Service Clubs (e.g. Lions Club, Kiwanis (15 per cent of their community gaming gr are included in the permitted percentage	Club, Rotary Club) may re rant; refer to the appropria and the applicable gamir	etain up to 15 per cent of the net proceeds ate guidelines for additional information. Id ng event licence and/or community gaming	from their licensed gaming activities and entify which of the above disbursements grant application number(s).		
	Total percentage retained: (gaming event licence)	%	Gaming event licence number:			
	Total percentage retained: (community gaming grant)	%	Community gaming grant application number:		ſ	C

If you are a Service Club and have retained some of your grant funds or licensed gaming revenues, complete this section as instructed.

13. Enter the percent of grant funds used for operating costs, not related to programming.

SECTION 8B - ORGANIZATIO	ON OPERATIN	IG C	OSTS			If your organization has used grant
For grants received after April 1, 2022 , organizational operational costs. These additional information. Identify the applic grants.	Community Gaming costs do not need to able community gai	Gran be re ning g	t recipients can use up to 15 percent of the elated to the direct delivery of the program. grant application number(s). Please note the grant application number(s).	e total grant funds toward Refer to the appropriate guidelines for his does not apply to PAC or DPAC		funds for organizational costs unrelated to program delivery, complete this section as instructed.
Total percentage retained: (community gaming grant)		%	Community gaming grant application number:		•	Note: this section only applies to gran received after April 1, 2022 and does

14. Describe the Community Benefit from your Organization's Gaming Grant Funded Programs

SECTION 9 - COMMUNITY BENEFIT

Briefly describe how the broader community benefited from your organization's gaming grant funded programs for the fiscal year covered by this report. For each funded program, please provide statistics (if applicable), including, for example: the number of people served, attendees or participants, public access such as number of events, classes, sessions, or operating times. Please note that this information may be made publicly available by the Community Gaming Grants Branch. (Limit your description to 300 words. A max of three photos may also be included in this report.)

> In 300 words or less, describe how the money you spent from your gaming revenues benefitted the community. Include statistics when possible.



15. Sign Off on Your Gaming Account Summary Report

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Position: (with the organization)	First n	responsible for the rep ame:	Last name	treasurer – both m :	ust sign this form)	
Address: Unit and Street	-	City		Province	Postal Code	
Business phone number: (XXX) XXX-XXXX	Ext:	Home phone numb	er: (XXX) XXX-XXXX	Cell phone numb	ber: (XXX) XXX-XXXX	Have two unrelated board
E-mail address: (provide a valid e-mail address		Signature:		Date signed: (DD)-MM-YYYY)	members (one of whom must the treasurer) fill out this section
Position: (with the organization)	First n	ame:	Last name	Last name:		In doing so they are certifying the report is complete and accur
Address: Unit and Street		City Province Postal Code		Postal Code	E-signatures are NOT accepted	
Business phone number: (XXX) XXX-XXXX	Ext:	Home phone numb	er: (XXX) XXX-XXXX	() XXX-XXXX Cell phone number: (XXX) XXX-XXXX		
E-mail address: (provide a valid e-mail address	-	Signature:		Date signed: (DD	D-MM-YYYY)	
port prepared by: (if the report was prepared by	one of the	people above, include o	only their name below)	-		
Position: (with the organization)	First n	ame:	Last name	:	15	
Address: Unit and Street	-	City		Province	Postal Code	
Business phone number: (XXX) XXX-XXXX	Ext:	Home phone numb	er: (XXX) XXX-XXXX	Cell phone numb	ber: (XXX) XXX-XXXX	Have the person who prepared report fill out this section. Agai
E-mail address: (provide a valid e-mail address)	-	Signature:		Date signed: (DD	D-MM-YYYY)	e-signatures are NOT accepted