RCCI Simplified Annual Financial Report (Child Nutrition Report) Instructions

The simplified AFR reports expenses equal to the revenue reported. Other expenses are paid for by a different fund. This simplifies accounting and doesn't require a fund transfer to the food service account.

The Annual Financial Report (AFR) reports total food service revenues and expenditures for July 1 through June 30 (the school fiscal year).

Steps to completing the Simplified AFR

1. Claim Date

• Year selected is the end of the reporting year. For example, 2020-2021 school year, select 2021.

2. Beginning Fund Balance

• "Beginning fund balance" must be the same as the "ending fund balance" from the previous year. For most RCCIs this should be \$0.00

3. Revenue

- Calculate number of meals claimed multiplied by federal and state reimbursement = Total Food Revenue
- Enter revenue for each program under 'School Food Revenue'. Note: most RCCIs do not have 'Non-Program Foods'.

		School Based Child	Nutrition Programs		
Revenues	Transfer from Non- Food Service Account-Operating Transfer	Transfer from Non- Food Service Account-Paid Lunch Equity	Transfer from Non- Food Service Account-Non- Program Food Revenue	Scho Food Revenue (excluding Transfers)	Total Revenues
National School Lunch Program (NSL)			Ϋ́		Tel 🔜 🗔
School Breakfast Program (SB and S8SEVERE)			0		0
NSL After School Snacks (SK-NSL and SK-NSLAE)					0.00
Special Milk Program (SMP)			0		0.00
Grants (equipment, FFVP, etc)					0.00
Wisconsin School Day Milk Program (WSDMP)					0.00
Elderly Nutrition Improvement Program (EN)					0.00
Non-Program Foods			\sim		0.00
CACFP					0.00
SFSP					0.00

4. Expenditures

- Calculate Food Expenditures
 - If Vended Meal Agreement or Food Service Management Company (FSMC)
 number of meals received multiplied by per meal cost in FSMC contract = Total Food Expense
 - If Self-Operating number of meals prepared multiplied by per meal cost = Total Food Expense

5. Determine if revenue exceeds expenses or if expenses exceed revenue.

- If Revenue Exceeds Expenses: Calculate Labor Expenditures
 - You will allocate a particular employee's labor for the amount that brings the food service balance to \$0.00. The employee's remaining labor is paid for by another fund.
 - To Calculate from this report take Total School Food Revenue (for all programs) minus Food Expenditures (for all programs) = amount of total labor expense needed to bring the account to \$0.00
 - \circ $\,$ Allocate half of the labor amount to NSL and half the amount to SB $\,$

	Expenditures						
	Expenses	Labor Expenditures:	Food Expenditures:	Equipment Expenditures:	Purchased Services Expenditures:	Other Expenditures:	Total Expenditures
	National School Lunch Program (NSL)						
	School Breakfast Program (SB and SBSEVERE)						
	NSL After School Snacks (SK- NSL and SK- NSLAE)						
5	Special Milk Program (SMP)						
	Grants (equipment, FFVP, etc)						
	Wisconsin School Day Milk Program (WSDMP)						
	Elderly Nutrition Improvement Program (EN)						
	Non-Program Foods						
	CACFP						
	SFSP						

• For example: \$26,250.00 (food revenue) minus \$24,000 (food expense) minus \$2250.00 (labor) = \$0.00.

If Expenses Exceed Revenue

- A fund transfer to the non-profit food service account will be required to cover the deficit.
- This ledger transfer can be done monthly or at the end of the year.
- This is recorded under Revenue-'Transfer from nonfood service account operating transfer'. Th.is should be divided evenly between breakfast and lunch.

6. Ending Fund Balance Summary

- This information will be populated from what has been entered into the report.
- Below is what this will look like using the numbers in the example above.

All USDA Child Nutrition Programs		Other U	Other USDA Child Nutrition Programs			
including CACFP,SFSP		Items	CACFP	SFSP		
Beginning Fund Balance	0.00	Total Revenues	0.00] [0.00		
+ Total Revenues from ALL Programs	26,250.00	Total	0.00] [0.00 -		
- Total expenditures from all programs	26,250.00	Expenditures				
= Ending Fund Balance	0.00					

7. Certify and Submit

	[CERTIFIC	CATION]		
I HEREBY CERTIFY to the best of my knowledg permanent agreement/policy statement between available to support this information.				
First Name Phone Number	Debra 608 267 3724	Last Name Extension	Wollin	
Email debra.wollin	@dpi.wi.gov			
	Subm	iit		