

## INSTRUCTIONS FOR COMPLETING THE ANNUAL FINANCIAL REPORT

- 1 Enter your financial information in the dark grey cells on each of the following worksheets. Cells not highlighted in dark grey are automatically calculated and should not be changed.
- 2 Use the tab key or arrow keys to move through the cells in each worksheet.
- 3 In the "Type of Entity" area on the Concessioner Information worksheet, make the appropriate selection using the dropdown menu.
- 4 Manually enter the correct concessioner ID. Concessioner ID's take the form ABCD-###, where ABCD represents the alphanumeric code for the park and the numbers are a contract number.
- 5 To move a comment box, place the cursor on the comment box, left click and hold, then drag the comment box to to another place on the screen.
- 6 The signature(s) on the Concessioner Info worksheet should be typed rather than written.
- 7 Do not enter zeroes, NA, dashes or anything else in cells which are not applicable to your operation. Leave these cells blank.
- 8 For help, email [afr\\_submission@nps.gov](mailto:afr_submission@nps.gov)



CONCESSIONER ANNUAL FINANCIAL REPORT
(For Concessioners with Special Accounts and Utility Add-ons)



CONCESSIONER: - PERIOD ENDING: MM/DD/YYYY

For the Period from: [ ] to: [ ]

Concessioner ID [ ]
Concessioner Name [ ]
Park Unit [ ]

[ ] Contract or Permit Number [ ] Effective Date [ ] Expiration Date

Type of Entity [ ]

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- Schedule N - Special Account Annual Reconciliation
Schedule O - Special Account Project Expenditures
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ANNUAL FINANCIAL STATEMENT CERTIFICATION (Either one or both of the certifications below may be completed)

COMPLETE THE CERTIFICATION BELOW IF YOU ARE THE CONCESSIONER AND COMPLETED THE ANNUAL FINANCIAL REPORT

By typing my name below, I certify that I am authorized to complete and submit this report. This report has been examined by me and to the best of my knowledge and belief is a true, correct, and complete report.

Name of Person Responsible for Report Information [ ]
Title [ ]
Date [ ]

COMPLETE THE CERTIFICATION IF YOU ARE A CPA WHO HAS EITHER COMPILED, REVIEWED OR AUDITED THE CONCESSIONER'S FINANCIAL STATEMENTS AND HAVE COMPLETED THE ANNUAL FINANCIAL REPORT.

By typing my name in the box below, I certify that I have been authorized to complete and submit this report on behalf of the concessioner. This report has been completed and prepared under my supervision using data/information from the company's compiled/reviewed/audited financial statements and/or other financial records and to the best of my knowledge and belief is a true, correct, and complete report.

Name of Person Responsible for Report Information [ ]
Title [ ]
Date [ ]

CONCESSIONER CONTACT INFORMATION

Mailing Address [ ]
City [ ]
State [ ]
Zip Code [ ]
Telephone [ ]
Email Address [ ]

## NOTICES

### PRIVACY ACT STATEMENT

**Authority:** 16 U.S.C. 5966, Commercial Use Authorizations.

**Purpose:** The purposes of the system are (1) to assist NPS employees in managing the NPS Commercial Services program allowing commercial uses within a unit of the National Park System to ensure that business activities are conducted in a manner that complies with Federal laws and regulations; (2) to monitor resources that are or may be affected by the authorized commercial uses within a unit of the National Park System; (3) to track applicants and holders of commercial use authorizations who are planning to conduct or are conducting business within units of the National Park System; and (4) to provide to the public the description and contact information for businesses that provide services in national parks.

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C.552a(b) of the Privacy Act, records or information contained in this system may be disclosed outside DOI as a routine use pursuant to 5 U.S.C. 552a(b)(3) to other Federal, state and local governments, tribal organizations, and members of the general public upon request for names, addresses and phone numbers of Commercial Use Authorizations (CUA) holders conducting business within units of the National Park System for the purpose of informing the public of the availability of the services offered by the CUA holder. In addition, records or information contained in this system may be disclosed outside DOI based on an authorized routine use when the disclosure is compatible with the purpose for which the records were compiled as described under the system of records notice for this system.

**Disclosure:** Voluntary, however, failure to provide the requested information may impede our ability to 1) manage the National Park Service (NPS) Commercial Services Program allowing commercial uses within a unit of the NPS, 2) monitor resources that are or may be affected by the authorized commercial uses, and 3) provide the public the description and contact information for businesses that provide services in national parks.

### PAPERWORK REDUCTION ACT STATEMENT

We collect this information under the authority of Title IV of the National Parks Omnibus Management Act of 1998 (Pub. L. 105–391). We use this information to determine the franchise fees of the concessioner. Your response is required to obtain or retain a benefit. We may not collect or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned Control No. 1024-0029.

### ESTIMATED BURDEN STATEMENT

We estimate that it will take you 2 hours to complete this form, including time to review instructions, gather and maintain data, and complete and review the form. You may send comments on the burden estimate or any aspect of this form to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Please do not send your completed form to this address.

**SUPPLEMENTAL SCHEDULE N - SPECIAL ACCOUNT ANNUAL RECONCILIATION**

**CONCESSIONER: -**

**PERIOD ENDING: MM/DD/YYYY**

CALCULATION OF ANNUAL SPECIAL ACCOUNT CONTRIBUTION			
	A	B	C
1 Account Description (CIA, GIA, Campground, etc.)	Total All Columns	(Account Description)	(Account Description)
2 Calculation Method (Flat Fee, Percentage, or Mixed)		(Calculation Method)	(Calculation Method)
3 Dollar Amount (If Stated in the Authorization)			
4 Gross Receipts Pursuant to Account			
5 Less - Adjustments to Gross Receipts			
6 Gross Receipts Subject to Fee Calculation		0	0
7 Special Account Percentage of Gross Receipts			
8 Amount Due to Special Account for Percentage Fee		0	0
9 (Describe Other Method)			
10 Accrued Amount Due to Special Account for the Current Year (Carry to Schedule A, Line 10)	0	0	0
11 Current Year Special Account Expenditures (Schedule O, Line 40)	0		

SPECIAL ACCOUNT COMBINED RECONCILIATION			
12 Balance in Special Account from Prior Year	0		
13 Plus: Current Year Deposits	0		
14 Less: Current Year Expenditures	0		
15 Plus: Current Year Interest	0		
16 Less: Current Year Bank Charges	0		
17 Balance in Special Account at Year End	0	0	0

ALLOCATION OF YEAR END BALANCE			
18 (List Encumbered Project and Amount)	0		
19 (List Encumbered Project and Amount)	0		
20 (List Encumbered Project and Amount)	0		
21 Total Encumbered Project Amount	0	0	0
22 Total Unencumbered Balance	0		
23 Total Encumbered and Unencumbered Amount	0	0	0

DEPOSIT RECONCILIATION			
24 Deposits for Prior Year Liabilities	0		
25 Deposits for Current Year Liabilities	0		
26 Total Deposits Made in Current Year	0	0	0

27 Accrued Liability not yet Deposited for Current Year	0		
28 Accrued Amount Due to Special Account for the Current Year	0	0	0

EXPENDITURES RECONCILIATION			
29 Expenditures for Prior Year Liabilities	0		
30 Expenditures for Current Year Liabilities	0		
31 Total Expenditures	0	0	0

**SUPPLEMENTAL SCHEDULE N - SPECIAL ACCOUNT ANNUAL RECONCILIATION**

**CONCESSIONER: -**

**PERIOD ENDING: MM/DD/YYYY**

CALCULATION OF ANNUAL SPECIAL ACCOUNT CONTRIBUTION			
	A	D	E
1 Account Description (CIA, GIA, Campground, etc.)	Total All Columns	(Account Description)	(Account Description)
2 Calculation Method (Flat Fee, Percentage, or Mixed)		(Calculation Method)	(Calculation Method)
3 Dollar Amount (If Stated in the Authorization)			
4 Gross Receipts Pursuant to Account			
5 Less - Adjustments to Gross Receipts			
6 Gross Receipts Subject to Fee Calculation		0	0
7 Special Account Percentage of Gross Receipts			
8 Amount Due to Special Account for Percentage Fee		0	0
9 (Describe Other Method)			
10 Accrued Amount Due to Special Account for the Current Year (Carry to Schedule A, Line 10)	0	0	0
11 Current Year Special Account Expenditures (Schedule O, Line 40)	0		

SPECIAL ACCOUNT COMBINED RECONCILIATION			
12 Balance in Special Account from Prior Year	0		
13 Plus: Current Year Deposits	0		
14 Less: Current Year Expenditures	0		
15 Plus: Current Year Interest	0		
16 Less: Current Year Bank Charges	0		
17 Balance in Special Account at Year End	0	0	0

ALLOCATION OF YEAR END BALANCE			
18 (List Encumbered Project and Amount)	0		
19 (List Encumbered Project and Amount)	0		
20 (List Encumbered Project and Amount)	0		
21 Total Encumbered Project Amount	0	0	0
22 Total Unencumbered Balance	0		
23 Total Encumbered and Unencumbered Amount	0	0	0

DEPOSIT RECONCILIATION			
24 Deposits for Prior Year Liabilities	0		
25 Deposits for Current Year Liabilities	0		
26 Total Deposits Made in Current Year	0	0	0

27 Accrued Liability not yet Deposited for Current Year	0		
28 Accrued Amount Due to Special Account for the Current Year	0	0	0

EXPENDITURES RECONCILIATION			
29 Expenditures for Prior Year Liabilities	0		
30 Expenditures for Current Year Liabilities	0		
31 Total Expenditures	0	0	0

**SUPPLEMENTAL SCHEDULE N - SPECIAL ACCOUNT ANNUAL RECONCILIATION**

**CONCESSIONER: -**

**PERIOD ENDING: MM/DD/YYYY**

CALCULATION OF ANNUAL SPECIAL ACCOUNT CONTRIBUTION			
	A	F	G
1 Account Description (CIA, GIA, Campground, etc.)	Total All Columns	(Account Description)	(Account Description)
2 Calculation Method (Flat Fee, Percentage, or Mixed)		(Calculation Method)	(Calculation Method)
3 Dollar Amount (If Stated in the Authorization)			
4 Gross Receipts Pursuant to Account			
5 Less - Adjustments to Gross Receipts			
6 Gross Receipts Subject to Fee Calculation		0	0
7 Special Account Percentage of Gross Receipts			
8 Amount Due to Special Account for Percentage Fee		0	0
9 (Describe Other Method)			
10 Accrued Amount Due to Special Account for the Current Year (Carry to Schedule A, Line 10)	0	0	0
11 Current Year Special Account Expenditures (Schedule O, Line 40)	0		

SPECIAL ACCOUNT COMBINED RECONCILIATION			
12 Balance in Special Account from Prior Year	0		
13 Plus: Current Year Deposits	0		
14 Less: Current Year Expenditures	0		
15 Plus: Current Year Interest	0		
16 Less: Current Year Bank Charges	0		
17 Balance in Special Account at Year End	0	0	0

ALLOCATION OF YEAR END BALANCE			
18 (List Encumbered Project and Amount)	0		
19 (List Encumbered Project and Amount)	0		
20 (List Encumbered Project and Amount)	0		
21 Total Encumbered Project Amount	0	0	0
22 Total Unencumbered Balance	0		
23 Total Encumbered and Unencumbered Amount	0	0	0

DEPOSIT RECONCILIATION			
24 Deposits for Prior Year Liabilities	0		
25 Deposits for Current Year Liabilities	0		
26 Total Deposits Made in Current Year	0	0	0

27 Accrued Liability not yet Deposited for Current Year	0		
28 Accrued Amount Due to Special Account for the Current Year	0	0	0

EXPENDITURES RECONCILIATION			
29 Expenditures for Prior Year Liabilities	0		
30 Expenditures for Current Year Liabilities	0		
31 Total Expenditures	0	0	0

**SUPPLEMENTAL SCHEDULE O - SPECIAL ACCOUNT PROJECT EXPENDITURES**

**CONCESSIONER: -**

**PERIOD ENDING: MM/DD/YYYY**

Project Number	Special Account Name	Project Description	Current Year Expenditures	Estimated Percent Complete
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
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34				
35				
36				
37				
38				
39				
40	TOTAL SPECIAL ACCOUNT PROJECT EXPENDITURES		0	

**SUPPLEMENTAL SCHEDULE R - ADD-ON RECONCILIATION**

**CONCESSIONER: -**

**PERIOD ENDING: MM/DD/YYYY**

	Type	Location	Amount Collected	Approved Amount	Over/Under	AFR Reference*	Notes
1							
2							
3							
4							
5							
6							
7							
8							
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35							
36							
37							
38							
39							
40							

\*Identify which Schedule(s) and Line(s) each add-on or pass-through is Reported on in the AFR



<b>Schedule N, Calculation Method</b>	<b>Schedule K, Type</b>	<b>Concessioner Info, Type of Entity</b>
Flat Fee	C	C Corporation
Percentage	G	S Corporation
Mixed	L	B Corporation
	I	Limited Liability Company
	M	Partnership
	P	Sole Proprietorship
		Other