**Organization Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Lead organization’s statement of financial activity as of (date):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Unrestricted | Temporarily Restricted | Permanently Restricted | Total |
| **Income** |  |  |  |  |
|  Program Fees |  |  |  |  |
|  Contributions & Gifts |  |  |  |  |
|  Membership Dues |  |  |  |  |
|  Fundraising Events |  |  |  |  |
|  Grants |  |  |  |  |
|  Other (describe):  |  |  |  |  |
|  Investment Income |  |  |  |  |
|  Net Assets released from Restriction |  |  |  |  |
|  Total |  |  |  |  |
|  |  |  |  |  |
| **Expenses** |  |  |  |  |
|  Program/Client Services |  |  |  |  |
|  Research |  |  |  |  |
|  Administration Expense |  |  |  |  |
|  Fundraising |  |  |  |  |
|  Other (describe):  |  |  |  |  |
|  Total |  |  |  |  |
|  Excess of Income over Expense |  |  |  |  |