Lead organization's statement of financial activity as of (date): _____

| - 1 | Unrestricted | Temporarily Restricted | Permanently Restricted | Total |
|--------------------------------------|--------------|---------------------------|-------------------------|-------|
| Income | | | | |
| Program Fees | | | 2 | |
| Contributions & Gifts | | | | |
| Membership Dues | | 1 | | |
| Fundraising Events | | | | |
| Grants | | | | |
| Other (describe): | | | | |
| Investment Income | | | | |
| Net Assets released from Restriction | | | | |
| Total | | | | |
| | | | | |
| Expenses | | | | - |
| Program/Client Services | | | | |
| Research | | | 40 | |
| Administration Expense | | | | |
| Fundraising | | | | |
| Other (describe): | | | | |
| Total | 1 | | | |
| Excess of Income over Expense | | | and a large of the same | |