

1. Organization Name:	2. For Fiscal Year Ending:
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**Section 1. Balance Sheet – Concise Statement of Financial Position**

<b>A. Assets and liabilities:</b>	<b>Amount</b>
3. Unrestricted Assets:	
4. Restricted Assets:	
5. Fixed Assets:	
6. Total Current Assets:	
7. Total Current Liabilities:	
8. Total Net Assets:	
<b>B. Fund balance:</b>	
9. Unrestricted net assets at beginning of fiscal year:	
10. Unrestricted net assets at end of fiscal year:	
11. Total Change in unrestricted net assets:	

**Sections 2 and 3: Statement of Activities for Reporting Period**

<b>Section 2. Support and revenues:</b>	<b>Amount</b>
12. Government grants and contracts:	
13. §131F-2(18) qualifying organization grants:	
14. §131F-2(5) qualifying bona fide membership fees	
15. Program service revenues not exceeding service or good fair market value:	
16. Program service revenues over and above service or good fair market value:	
17. Corporate or business grants:	
18. Contributions designated or received through third party channels ( <i>e.g., via parent group, federated fundraising group</i> ):	
19. §131F-2(5) non-qualifying donation-based membership fees:	
20. Fair market value of “in-kind” contributions and forbearances received:	
21. Restricted direct contributions ( <i>e.g., endowment giving, charitable gift annuities, unrealized bequests</i> ):	
22. Unrestricted direct contributions:	
23. Total G.S. §131F-2(5) “contributions” ( <i>add items 16 through 22 and enter total here</i> ):	
24. Total Support and Revenue ( <i>add items 12 through 22 and enter total here</i> ):	

**Section 3. Functional Expense Statement:**

Functional Expenses	(A) TOTAL	(B) Program Services	(C) Management and General	(D) Fund raising
25. Grants and allocations				
26. Specific assistance to individuals				
27. Benefits paid to or from members				
28. Compensation of officers, directors, etc.				
29. Other salaries and wages				
30. Pension plan contributions				
31. Other employee benefits				
32. Payroll taxes				
33. Professional fundraising fees				
34. Accounting fees				
35. Legal fees				
36. Supplies				
37. Telephone				
38. Postage and shipping				
39. Occupancy				
40. Equipment rental and maintenance				
41. Printing and publications				
42. Travel				
43. Conferences, conventions and meetings				
44. Interest				
45. Depreciation, depletion, etc.				
46. Other expenses not covered above				
<b>Total Expense Amounts:</b>	<b>Total:</b>	<b>Program Services:</b>	<b>Management and General:</b>	<b>Fundraising:</b>
47. TOTAL EXPENSES:				

CSL Contact Information:

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 Telephone: (919) 814-5400 - Toll free for NC residents: 1-888-830-4989  
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Annual Financial Report Form

Form Revision: February 2, 2018

Effective Date: July 24, 2012

**Joint cost allocations:**

48. Are any joint costs from a combined educational campaign and fundraising solicitation reported in the expense totals for Section 3 (B) Program Services?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<i>If the answer to item 48 is "No", skip items 49 through 52 and proceed to item 53. If the answer to item 48 is "Yes", answer items 49 through 52:</i>	<b>Amount</b>	
49. Aggregate (total) amount of joint costs:		
50. Amount allocated to Program Services:		
51. Amount allocated to Management and General:		
52. Amount allocated to Fundraising:		
<b>Optional Attachments:</b>		
53. You may submit additional explanatory or descriptive information as attachments. Please check "Yes" here if attaching additional information:	<input type="checkbox"/> YES	<input type="checkbox"/> NO

**54. FINANCIAL REPORT CERTIFICATION – MUST HAVE THREE (3) SIGNATURES (18 NCAC 11 . 0506 (a))**

We, as members of the audit and/or finance committee or as members of the board of directors of the organization identified above, do hereby certify that the information in this report and any attachments is true and correct to the best of our individual and collective knowledge.

Name:	Signature
Title:	
Name:	Signature
Title:	
Name:	Signature
Title:	

55. Report Completion and Signature Date:	
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