



**Current Officers, Directors, Trustees & Key Employees**

Name and Address	Title	Average hours/wk	Compensation
1.			
2.			
3.			
4.			
5.			
6.			
7.			

How many officers, directors, trustees & key employees are permitted to vote at board meetings? \_\_\_\_

**Complete the following for all employees paid more than \$50,000/year:**

(attach separate sheet if you have more than 2)

Name and Address	Title	hours/wk	Compensation
1.			
2.			

**Complete the following for independent contractors paid more than \$50,000/year:**

(attach separate sheet if you have more than 2)

Name and Address	Type of Service	Compensation
1.		
2.		
-		

**Organization Income:**

Total:

Contributions, gifts	
Membership dues	
Program income	
Interest	
Special event income (list)	
1.	
2.	
3.	

**Organization Expenses:**

Total:

Accounting fees	
Bank Fees	
Employee Benefits	
Credit Card Fees	
Dept. of Justice Fee (OR)	
Equipment	
Fundraising	
Grants paid	

Assets at <b>beginning</b> of year:		Assets at <b>year end</b> :	
Checking Account	\$	Checking Account	\$
Savings Account	\$	Savings Account	\$
Accounts/Pledges receivable	\$	Accounts/Pledges receivable	\$
Other current assets (describe)	\$	Other current assets (describe)	\$
	\$		\$
	\$		\$
	\$		\$

Liabilities at <b>beginning</b> of year:		Liabilities at <b>year end</b> :	
Accounts payable	\$	Accounts payable	\$
Grants payable	\$	Grants payable	\$
Other liabilities (describe)	\$	Other liabilities (describe)	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

<b>Schedule of Contributors For Organizations Exempt Under Section 501(c)(3)</b> (don't complete if organization is a Private Foundation, Section 501(e), 501(k), 501(n) or 4947(a)(1) ) Complete the following for any contributors who gave \$5,000 or more (cash & non-cash). Attach separate additional pages if needed.		
<b>Name and Address</b>	<b>Contribution (year total)</b>	<b>If non-cash, provide description</b>
1.		
2.		
3.		
4.		
5.		
6.		