

Balance Sheet

Organization: _____

Date: _____

ASSETS		
Current Assets:		
Checking/Savings/C.D.s (please list)	\$	-
	\$	-
	\$	-
	\$	-
Accounts Receivable	\$	-
Prepaid Expense	\$	-
Total Current Assets	\$	-
Fixed Assets:		
Fixed Assets	\$	-
Less Accumulated Depreciation (negative #)	\$	-
Total Net Fixed Assets	\$	-
Other:		
Other Assets	\$	-
Total Other Assets	\$	-
TOTAL ASSETS	\$	-
(A)	\$	-

LIABILITIES and Net ASSETS		
Current Liabilities:		
Accounts Payable	\$	-
Payroll Taxes Payable	\$	-
Total Current Liabilities	\$	-
Long-Term Liabilities:		
Loans	\$	-
Other	\$	-
Total Long-Term Liabilities	\$	-
TOTAL LIABILITIES	\$	-
Net Assets:		
Without Donor Restrictions	\$	-
With Donor Restrictions	\$	-
TOTAL NET ASSETS	\$	-
TOTAL LIABILITIES AND NET ASSETS	\$	-
(B)	\$	-
("A" needs to equal "B")		