|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ANNUAL GROUP FINANCIAL REPORT** | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | |  |
| Master Gardener  4-H | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | |  |
| County | | |  | |  | Jan 1 | | | | |  | - | | | Dec 31 | |  |  |
|  | | |  | |  |  | | | | |  |  | | |  | |  |  |
|  | | |  | |  | Jul 1 | | | | |  | - | | | Jun 30 | |  |  |
|  | | |  | |  |  | | | | |  |  | | |  | |  |  |
|  | | |  | |  | Oct 1 | | | | |  | - | | | Sep 30 | |  |  |
|  | | |  | |  |  | | | | |  |  | | |  | |  |  |
| **Statement of Income and Expenses** | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | |  |
|  | **Income** | | | | | | | | | | | | |  | |  | |  |
|  |  | Summarize by source and amount: | | | | | |  | |  | | | |  | |  | |  |
|  |  | Example: | | | | | |  | |  | | | |  | |  | |  |
|  |  |  | | Plant Sales | | | | $ | |  | | | |  | |  | |  |
|  |  |  | | Training Fees | | | | $ | |  | | | |  | |  | |  |
|  |  |  | | Member Contributions | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | |  | |  | | | |  | |  | |  |
|  |  |  | | **Total Income (A)** | | | |  | |  | | | | **$** | |  | |  |
|  |  |  | |  | | | |  | |  | | | |  | |  | |  |
|  | **Expenses** | | | | | | | | | | | | |  | |  | |  |
|  |  | Summarize by source and amount: | | | | | |  | |  | | | |  | |  | |  |
|  |  | Example: | | | | | |  | |  | | | |  | |  | |  |
|  |  |  | | Plant Sales | | | | $ | |  | | | |  | |  | |  |
|  |  |  | | Training Fees | | | | $ | |  | | | |  | |  | |  |
|  |  |  | | Member Contributions | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | | $ | |  | | | |  | |  | |  |
|  |  |  | |  | | | |  | |  | | | |  | |  | |  |
|  |  |  | | **Total Expenses (B)** | | | |  | |  | | | | **$** | |  | |  |
|  |  |  | |  | | | |  | |  | | | |  | |  | |  |
|  |  |  | | | | | |  | |  | | | |  | |  | |  |
|  | **Net Income (Loss)(C) [(A) – (B) = (C) ]** | | | | | | |  | |  | | | | **$** | |  | |  |
|  |  |  | | | | | |  | |  | | | |  | |  | |  |
| We hereby certify that this is a correct Annual Financial Report which includes the Statement of Income and Expenses and the Statement of Assets, Liabilities and Equity. | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | |  |
|  | | | | | | |  | |  | | | |  | | | | |  |
|  | | | | | | |  | |  | | | | | | | | |  |
| Treasurer | | | | | | |  | | President | | | | | | | | |  |
|  | | | | | | |  | |  | | | | | | | | |  |
|  | | | | | | |  | |  | | | | | | | | |  |
|  | | | | | | |  | | Date Submitted | | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ANNUAL FINANCIAL REPORT(cont.)** | | | | | | | | | |  |
|  | | | | | | | | | |  |
| **Statement of Assets, Liabilities and Equity** | | | | | | | | | |  |
|  | | | | | | | | | |  |
|  | | | | **Year End as of** | | |  | | |  |
|  | | | | | | | | | |  |
|  | **Assests:** | | | | | | | |  |  |
|  |  | Cash or Checking Account | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | Inventory/Equipment | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | Other | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  |  | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  |  | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | **Total Assets (A)** | | |  |  | | $ |  |  |
|  |  |  | | |  |  | |  |  |  |
|  | **Liabilities:** | | | | | | | |  |  |
|  |  | Accounts Payable | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | Other | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  |  | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  |  | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | **Total Liabilities (B)** | | |  |  | | $ |  |  |
|  |  |  | | |  |  | |  |  |  |
|  | **Equity:** | | | |  |  | |  |  |  |
|  |  | Beginning Fund Balance | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | Current year’s Net Income (Loss) | | | $ |  | |  |  |  |
|  |  |  | | |  |  | |  |  |  |
|  |  | **Total Equity (C)** | | |  |  | | $ |  |  |
|  |  |  | | |  |  | |  |  |  |
|  | **Total Liabilities and Equity [(B) + (C) = (A)]** | | | | |  | | $ |  |  |
|  |  | |  | |  |  | |  |  |  |
|  |  | |  | |  |  | |  |  |  |
|  | Send to: | | Office of CFO | | Complete within 60 days after financial year end and provide copy to County Extension Office. | | | | | |
|  |  | | UACES | |  | | | | | |
|  |  | | 2301 South University Ave | |  | | | | | |
|  |  | | Little Rock, AR 72204 | |  | | | | | |