

Booster/PTO Annual Checklist

Legal Name:	
Federal EIN (Employer Identification Number):	
Fiscal Year:	

ORGANIZATION ROSTER	Name, position & contact information
Organization President:	
Organization VP:	
Organization Treasurer:	
Organization Secretary:	
Organization Chair:	
Organization Member At Large:	
Organization Member At Large:	

INSURANCE	Details		
Do we have insurance?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Insurance Carrier:			
Policy Number:			
Documents Stored: (location, drive, file, etc)			
Do we run background checks on all board members annually?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

BANKING	Details		
Financial Institution:			
Account Information:			
2 Signatures Required:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Who has access?			
Do we have a checking/savings account?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do we have account debit cards?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Who has possession of the cards?			
Who will account transfer to? Date?			
What documentation does the bank require to transfer an account?			
Do we use Venmo or another service to collect funds?			
Cash counting procedure:			
Bank drop procedure:			
Reimbursement procedure:			

YEARLY FILING			
IRS	\$50,000 or less 990N Postcard • \$50,001-\$200,000 990EZ • Over \$200,001 990		
Was the 990/N/EZ filed for the previous fiscal year? <i>*Must be postmarked by the 15th day of the fourth month after fiscal year-end.</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Gross income: \$	
Date filed:	
User ID:	
Password:	
Who is responsible for filing & where is a copy stored:	

MN Secretary of State	
Was the organization's status renewed with the Secretary of State? <i>*Must be postmarked by Dec. 31.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
User ID:	
Password:	
Certificate of Good Standing:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Who is responsible for filing:	

MN Attorney General (if you have filed w/AG)	
Do we file an Annual Charitable Report with the AG ? <i>*Must be postmarked by the 15th day of the seventh month after fiscal year-end.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
User ID:	No user ID or password required
Who is responsible for filing:	

ANNUAL AUDIT	Details		
Was the annual audit completed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Year-end financial report & statement reviewed & approved?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

RECORD RETENTION	Note location stored/additional information		
Permanently			
Articles of Incorporation: <i>*One time document from initial set up</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Certificate of Incorporation & annual re-registration paperwork from SOS:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
IRS Form 1023 & documentation submitted with Form 1023:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
IRS Letter of Determination for 501c3 tax-exempt status:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
EIN documentation:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
State sales tax exemption documents (ST16 no sales tax in MN):		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Year-End treasurer reports:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Annual reports from auditor/audit committee:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Monthly meeting minutes:		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Monthly agendas:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Membership list:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
7 Years			
IRS Form, 990, 990-EZ,990-N:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bank statements:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Canceled checks:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Check registers:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3 Years			
Monthly treasurer reports:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Historical			
Bylaws:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mission statement:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Invoices:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Receipts:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Deposit slips:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cash Count Worksheet		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Reimbursement Request Forms w/receipts attached:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Budgets - previous & current approved:		<input type="checkbox"/> Yes	<input type="checkbox"/> No

DOCUMENT STORAGE	Share w/new members. Change passwords as members exit the organization. Check off as transfer is completed and note names of members w/access
Google Drive/Folders/Drop-box access account: Password:	
Document storage hardcopy (location):	
Document organization process:	

COMMUNICATION/ OTHER	How, who & why we communicate (email, text, phone, in person, no contact)		
Organization email address: Password:			
Coach/Principal:			
Asst. Coach/Asst. Principal:			
School liaison (if applicable):			
School admin contact to share board info with (new/current):			
Captains/student representative:			
E-newsletter:			
Facebook: Instagram: Twitter: Other:			
Can we distribute flyers to families? How?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vendor:			
Vendor:			

Vendor:	
Vendor:	
Volunteer Services Coordinator:	

FUNDRAISING EVENTS	List annual or new fundraising campaigns or events. (Include dates, times, vendors, chairperson, location, etc.)

IMPORTANT DATES/ EVENTS CALENDAR	This calendar or planning document will be shared with your organization, families & school. Share all meeting dates, time & location. Fundraising event dates & time, vendors, chairperson, location, etc. Don't forget any school sponsored events.

Signature: _____ Date: _____

Signature: _____ Date: _____

Notes