**Financial Review/Audit Report   
for Local PTAs **

Name of PTA/PTSA: EAGLE VIEW ELEMENTARY SCHOOL

EIN Number: \_\_\_\_\_\_\_03-0605655\_\_\_\_\_ Date of Financial Review: \_\_\_\_\_10/04/2021\_\_\_\_

Financial Review period from \_\_\_\_\_\_\_\_\_Nov 1, 2020\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_July 1, 2021\_\_\_.

Presented to PTA executive board on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(date)* and adopted by your General Membership on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*date).*

Date of last financial review: \_\_\_11/13/2020\_\_\_\_\_\_. Last financial review covered the period from \_\_\_\_\_\_July 1, 2019\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_Oct 31, 2020\_\_\_\_\_\_\_\_.

PTA District: \_\_\_\_\_\_\_NOVA\_\_\_\_\_\_\_ PTA Council: \_\_\_\_\_\_\_\_\_\_\_\_FCCPTA\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**President**  **Treasurer**

*Signatures should be current president and treasurer in office at time of executive board approval and general membership adoption.* **The following information is submitted to the Virginia PTA as the annual financial review of this association.**

**FINANCIAL REVIEW COMMITTEE or AUDITOR:** *(a committee of 3 people that are not authorized to sign checks for this PTA during this financial review period OR an experienced auditor)*

The financial records of this PTA are \_\_\_\_ **complete** or \_\_\_\_ **incomplete***.* If incomplete, include comments detailing missing documentation and recommendations.

**Financial Review Committee**: **Auditor:**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Financial Review Committee Chair*

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Financial Review Committee Member* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Financial Review Committee Member*

**Financial Management Checklist**

The purpose of this checklist is to provide general guidance to PTA volunteer leaders in the management of their resources. Stewardship of other people’s money is an important part of volunteer activity and requires systematic and ongoing attention.

This is a complete review of the financial management practices of the PTA, and assists the financial review committee/auditor with their inspection of the books and records. **This checklist is kept as part of the adopted financial review report and filed with the permanent financial records.**

**Officer Information:**

President during financial review period: \_\_\_\_\_\_\_Jaime Yarussi\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
phone: \_\_202-631-9119\_\_\_\_\_\_\_

Treasurer during financial review period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sheryl Pinto\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
phone: \_\_\_703-474-4458\_\_\_

Secretary during financial review period: \_\_\_\_\_\_\_Ako Cromwell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Treasurer’s Records:** | **Treasurer** | **Financial Review Committee** |
| 1. Do the treasurer records include:   * Contact information for the Executive Board? * Copy of previous financial review/audit? * Copy of the bylaws and standing rules *(if applicable)*? * Copy of membership roster? * Copy of the adopted budget? * Copy of IRS 990 filing? * Copy of insurance policy? * A copy of the 501c(3) determination letter? * A copy of the sales tax exempt certificate? *(if applicable)* * A copy of bank signatory paperwork? * Minutes of all meetings? *(Board and general membership)* * Treasurer reports with budget-to-date information for **every** meeting? * Bank statements? * Documentation for **every** expense and **all** income? * The annual year-end report? |  |  |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| Yes  No | Yes  No |
| 2. Were the records turned over in a timely manner to the financial review committee?  **If no**, when were they turned over?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Comments**:  **Recommendation**: All PTA records are the property of the PTA and shall be available to the membership. |  | Yes  No |
| 3. Where are your treasurer records maintained?  Location: \_\_\_\_Treasurer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If possible, your records should be kept at your school in a secure location. Your board needs to know where these books are kept. |  |  |
| 4. Are the current treasurer books held by the treasurer?  The treasurer maintains all financial records. | Yes  No |  |

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| **Budget:** | **Treasurer** | **Financial Review Committee** |
| 1. Was the budget adopted by the general membership?  When?  **If no**,  **Comments**:  **Recommendation**: The proposed budget is to be prepared by a budget committee, presented to the executive board and then to the general membership for adoption. We are a membership association and this money belongs to our members. | Yes  No  \_Feb 9, 2021\_\_  *(date)* | Yes  No |
| * Was the budget prepared by a budget committee? * **If no**, who prepared the budget? * Is the budget based on knowledge of last year’s income/expenses, current financial conditions, expense needs etc.? * Does the budget show all sources of income, totaled and balanced, against all total expense categories? * Was the budget reviewed by the Board before general membership adoption? | Yes  No |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Yes  No |  |
| Yes  No |  |
| Yes  No |  |
| 2. Was a budget report presented at every PTA board/general membership meeting?  **If no**,  **Comments**:  **Recommendation**: A budget report showing income and expenses in each budget line should be presented at every PTA Board/general membership meeting. | Yes  No | Yes  No |
| 3. Is a copy of the adopted financial review/audit report sent to the state office each year? | Yes  No |  |
| 4. Are there any irregularities in the budgeted amounts to actual expenses/income?  **If yes**,  **Comments**:  **Recommendation**: any budget amendment over $300 must be approved by your general membership. |  | Yes  No |

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| **Treasurer’s Reports:** | **Treasurer** | **Financial Review Committee** |
| 1. Was a detailed, written treasurer’s report presented at **every** PTA board/general membership meeting?  **If no**,  **Comments**:  **Recommendation**: A treasurer’s report detailing income and expenses and reconciled to the bank statement must be presented at every PTA board/general membership meeting. | Yes  No | Yes  No |
| * Were the reports clear, concise and easily understood? * Did the reports show, in detail, the source(s) of all income and expenses? | Yes  No | Yes  No |
| Yes  No | Yes  No |
| 2. Did the treasurer prepare an annual or year-end detailed, written report? | Yes  No | Yes  No |
| 3. Do the canceled checks **and** the entries in the checkbook **and** the treasurer’s reports **all agree**? |  | Yes  No |
| 4. Do the deposit slips **and** the entries in the income ledger **and** the treasurer’s reports **all agree?** |  | Yes  No |
| 5. Have all financial obligations of the PTA been paid in full? |  | Yes  No |

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| **Bank Reconciliation:** | **Treasurer** | **Financial Review Committee** |
| 1. Were the bank statements reconciled every month?  **If no,** when were they reconciled?  **Comments**:  **Recommendation**: Bank statements must be reconciled every month. | Yes  No | Yes  No |
| 2. Are bank reconciliations verified each month by individuals that are not authorized to sign checks?  **If no**, were they verified in any months?  **Comments**:  **Recommendation**: Bank statements must be opened by a non-signer and must be verified against the treasurer’s report every month. | Yes  No | Yes  No |
| 3. Did the year-end financial report reconcile with the final bank statement? | Yes  No | Yes  No |

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| **Financial Procedures and Controls:** | **Treasurer** | **Financial Review Committee** | |
| 1. Are all PTA monies kept separate from school, personal or other organization’s funds? | Yes  No | |  |
| 2. Are the state and national portions of membership dues sent to the Virginia PTA state office before November 1st?  **If no**,  **Comments**:  **Recommendation**: Membership funds belonging to Virginia and National PTA are transfer funds and should be remitted to Virginia PTA. | Yes  No | | Yes  No |
| * Do the deposit records for membership match the membership numbers?   **If no**,  **Comments:**  **Recommendation:** membership funds belonging to Virginia and National PTA should be remitted to Virginia PTA and are not included in your PTA budget. |  | | Yes  No |
| What was the PTA’s total membership count for the year? | \_\_\_\_14\_\_\_\_\_\_\_ | |  |
| PTA membership dues are $\_\_3.75\_\_\_\_ per member for the \_\_\_\_\_\_\_\_\_2020-2021\_\_\_\_ school year. | *complete section* | |  |
| What was the date and dollar amount of dues sent to Virginia PTA?   * + Date: \_\_\_\_11/12/2020\_\_\_ Amount: \_\_\_\_\_52.50\_\_\_\_\_\_   + Date: \_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   + Date: \_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *complete section* | |  |
| What was the amount of dues paid to Council, if applicable?   * + Date: \_\_\_\_\_11/12/2020\_ Amount: \_\_\_\_\_\_\_3.50\_\_\_\_\_\_\_ | *complete section* | |  |
| 3. Was there a proper invoice or receipt for each expenditure?  **If no**,  **Comments**:  **Recommendation**: There **must** be a receipt or invoice for every check written. If there is no receipt, no check should be written. | Yes  No | | Yes  No |
| * Was every expense checked against the budget before authorization? * Were receipts and invoices matched against the request before payment? * Is there a time limit for reimbursements? | Yes  No | |  |
| Yes  No | |  |
| Yes  No | |  |
| 4. Is there a policy that prohibits the signing of blank checks?  Are all checks signed by at least two authorized people?  **If no**, how often were they only signed by one person?  **Comments**:  **Recommendation**: all checks **must** be signed by 2 people. | Yes  No | |  |
| Yes  No | | Yes  No |
| * Was the check register kept current? * Are **all** checks used in sequential order? * Are all checks accounted for, including voided checks? | Yes  No | | Yes  No |
| Yes  No | | Yes  No |
| Yes  No  No check book for 2020-2021 | | Yes  No |
| Were there any checks written to “cash” or cash withdrawals?  **If yes,** list:  Amount: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Check #: \_\_\_\_\_\_\_\_\_\_\_  Amount: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Check #: \_\_\_\_\_\_\_\_\_\_\_  Amount: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Check #: \_\_\_\_\_\_\_\_\_\_\_  **Comments**:  **Recommendation**: **NEVER** write a check to “cash”. There is no record of how your PTAs funds were spent. | Yes  No | | Yes  No |
| 5. Is signatory paperwork up-to-date with at least three (3) signatures? | Yes  No | |  |
| Does the PTA/PTSA have checking account?  With which bank? \_\_\_\_UNITED BANK\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Does the PTA/PTSA have a savings account?  With which bank? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Does the PTA/PTSA have any certificates of deposit?  With which bank? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Does the PTA/PTSA have a debit card?  **If yes**,  **Comments**:  **Recommendation**: Virginia PTA **strongly** advises units not to hold debit cards as they can be easily misused. | Yes  No | |  |
| Yes  No | |  |
| Yes  No | |  |
| Yes  No | | Yes  No |
| 6. Are at least two people involved in the processes of depositing funds and handling cash?  **If no**, how often did only one person count?  **Comments**:  **Recommendation**: A deposit reconciliation form must be used for every cash deposit, with two people counting the funds every time. A “cash counting sheet for event” may also be used (National PTA). | Yes  No  No cash events in 2020-2021 | | Yes  No |
| Were all funds deposited **promptly**? (within the next business day)  **If no**, how much time lapsed?  **Comments**:  **Recommendation**: PTA funds should never be taken home with you and should be deposited the same day they are received or the next business day. | Yes  No | | Yes  No |
| Was all income properly allocated into the appropriate budget line? | Yes  No | |  |

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| **Insurance:** | **Treasurer** | **Financial Review Committee** |
| 1. Are insurance policies in force to protect the PTA against loss of property by reason of fire, theft or other casualty? | Yes  No | Yes  No |
| 2. Are liability policies in effect to protect PTA officers and members, schoolchildren or other third parties where PTA projects or activities may result in an accident? | Yes  No | Yes  No |
| 3. Are the treasurer and all others authorized to handle PTA funds covered by a fidelity bond in the amount determined by the board? | Yes  No | Yes  No |

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| **Internal Revenue Service (IRS) and Tax Forms:** | **Treasurer** | **Financial Review Committee** |
| 1. What is the PTA/PTSA’s Employer Identification Number (EIN)? \_\_\_\_\_\_\_\_\_\_\_03-0605655\_\_\_\_\_\_\_\_ |  |  |
| 2. A copy of the letter from Virginia PTA verifying your PTA as a subordinate of the Virginia PTA with our 501c(3) Determination Letter and your Sales Tax Exemption Certificate are in your permanent files. | Yes  No  Reinstatement has been filed | Yes  No |
| 3. Has the IRS form 990, 990-EZ or E-Postcard been filed with the IRS? | Yes  No | Yes  No |
| Has it been forwarded to Virginia PTA? (the e-mail confirmation may be forwarded for the E-Postcard) | Yes  No |  |
| 4. Is the PTA/PTSA incorporated?   * If “YES”, has an annual corporate report been filed with the state government, as required? * Does the annual report reflect current officers and/or a registered corporate agent? | Yes  No |  |
| Yes  No |  |
| Yes  No |  |

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| **Fundraising, Corporate Sponsorship and Grants:** | **Treasurer** |
| 1. Did the PTA follow the 3 to 1 rule for fundraising *(reference “Standards for PTA Fundraising” at www.ptakit.org)* | Yes  No |
| 2. Did the PTA ensure fundraisers did not exploit children? | Yes  No |
| 3. Were all fundraisers approved by the general membership? | Yes  No |
| 4. Was care taken to see that no laws were violated during fundraisers? | Yes  No |
| 5. Were all school system policies for fundraisers followed? | Yes  No |
| 6. Did the President sign all fundraising contracts? | Yes  No |
| 7. Were sufficient procedures in place to ensure the safe handling of funds? | Yes  No |
| 8. Did the PTA receive any money from grants?  If “YES” list:  Grant Source Amount  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Yes  No |
| Were monies expended in accordance with grant application? | Yes  No |
| 9. Did the PTA receive any money or goods from corporate sponsorships?  Was the money or goods used according to the request? | Yes  No  Yes  No |

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| **Leadership Training** | **Treasurer** |
| 1. Were officers sent to Leadership Training and Annual Conference? | Yes  No |
| 2. Did officers participate in District or Council training? | Yes  No |
| 3. Did officers complete National PTA E-learning courses? | Yes  No |

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| **Financial Review Committee or Auditor Additional Comments and Recommendations:** |
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**Financial Review Report for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

EIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Date of financial review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Financial review period from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

Last financial review period from \_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_. Ending balance: $\_\_\_\_\_\_\_\_\_\_\_\_.

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| **1. Beginning Balance** (Should match prior financial review/audit “Ending Balance”) | $ |
| **2. Receipts** (*Total of all deposits and credits)* | $ |
| **3. Add line 1 and line 2:** | $ |
| **4. Expenses** (*Total of all checks written and debits)* | $ |
| **5. Subtract line 4 from line 3 for “ENDING BALANCE”** *(Should match check register)* **TREASURER’S RECORDS** | **$** |
| **OUTSTANDING CHECKS AND DEPOSITS:** | |
| **6. Balance on Last Bank Statement:** | $ |
| |  |  |  | | --- | --- | --- | | Check # | Payable to: | Amount | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  | Total outstanding checks: | *$* |   ***Outstanding Checks****:* |  |
| **7. Subtract total for Outstanding Checks from Line 6.** | $ |
| ***Outstanding Deposits***   |  |  | | --- | --- | | Source of Deposit | Amount | |  |  | |  |  | |  |  | | TOTAL OUTSTANDING DEPOSITS: | $ | |  |
| **8. Add total Outstanding Deposits to Line 7.** | $ |
| **9. Enter amount in line 8 to verify “ENDING BALANCE”**  *Should match check register and amount in Line 5.* **BANK RECORDS** | **$** |