

Financial Management Checklist

Stewardship of the organization's money is an important part of the board's fiscal responsibilities and requires systematic and ongoing attention. The following checklist provides an outline and written record for an annual financial management review. If utilized, this completed checklist should be filed with the audit and kept with financial records.

This checklist should be completed annually, and any outstanding issues should be resolved or corrected. File this checklist with the audit and keep it with the permanent financial records.

| Name of Organization: | |
|-----------------------|--|
| Address: | |
| City/State/Zip: | |
| Treasurer: | |
| President: | |
| Fiscal Period/Year: | |
| Budgeting: | |

| Budgeting | | |
|---|-----|----|
| Does a finance committee preparing the preliminary budget? | Yes | No |
| Is the preliminary budget based on all necessary information (membership | | |
| estimates, other sources of income, expenses)? | Yes | No |
| Does the budget show all sources of income, totaled and balanced, against all | | |
| total expense categories? | Yes | No |
| Has the budget been formally adopted by the appropriate body (i.e. board) | Yes | No |
| Are policies in place to permit changes to budget line items as needed during | | |
| the fiscal year? | Yes | No |
| Are monthly financial reports made to the appropriate body? | Yes | No |
| Does the organization perform an independent audit at the close of each fiscal | Yes | No |
| year? | | |
| Financial Controls | | |
| Does your organization use an accounting system with accurate records of | | |
| income and expense transactions? | Yes | No |
| Are all bank signatory cards up-to-date with at least two signatures that have | | |
| been approved by the board? | Yes | No |
| Are at least two people involved in the process of keeping financial records, | | |
| depositing revenue, issuing checks, and handling cash? | Yes | No |
| Are all funds deposited in a timely manner? | Yes | No |
| Does your organization perform monthly bank reconciliation by individuals other | | |
| than those who are authorized to sign checks? | Yes | No |
| Does your organization have salaried staff? | Yes | No |
| Are appropriate withholdings made (state and federal taxes, etc.) and | | |

| 1 | 1 |
|-----|---|
| Yes | No |
| Yes | No |
| | |
| | |
| Yes | No |
| | |
| Yes | No |
| | |
| | |
| Yes | No |
| | |
| Yes | No |
| | |
| | |
| Yes | No |
| | |
| Yes | No |
| | |
| Yes | No |
| | Yes |