

READ THESE INSTRUCTIONS CAREFULLY AND GATHER ALL MATERIALS BEFORE COMPLETING THE AUDIT

Purpose: To meet the Florida PTA and **IRS** audit compliance requirement as stated in the Local Unit Bylaws, Article VII, Section 5, which reads in part:

“The treasurer’s accounts shall be examined annually by an auditor or an audit committee of not less than three members who, satisfied that the treasurer’s annual report is correct, shall sign a statement of that fact at the end of the report. The audit committee shall be appointed by the Executive Board. The committee’s report shall be given at the next regular meeting after the audit is completed.”

- **Auditors of the PTA books must be current PTA Members and CANNOT be signers on the bank account or have handle PTA funds for fundraisers, deposits, etc., during the period being audited.**
- The Executive Board shall select an **audit committee of (3) three members or hire a Professional auditor/CPA.**
- The PTA/PTSA Treasurer shall organize and submit to the auditor(s) all financial records and forms after the end of the fiscal period, June 30, each year. (See *Page 2 for financial records required.*)
- The completed audit must be presented to the members at the first general membership meeting the following fiscal year. It is presented to the membership for informational purposes only.

To remain in Good Standing, PTAs are required to email, fax, or mail a completed, signed, and dated copy of the Audit Report to Florida PTA as specified in the bylaws Article IV Basic Policies, item i –

“The annual financial audit/review must be completed and a copy sent to the Florida PTA State Office by August 31st each year.”

Email to: audit@FloridaPTA.org

FAX: 407-240-9577

Mail a copy to: Florida PTA, 1747 Orlando Central Parkway, Orlando, FL 32809

****This audit must be completed before filing the IRS 990.***

*****Please provide a completed copy of this audit to the person preparing your IRS Form 990.***

******Do not wait for Florida PTA to confirm or approve the audit before you file the IRS 990. You may file the IRS 990 as soon as the audit has been completed and emailed to audit@floridapta.org.***

All PTA/PTSA units must file (1) one of the three types of IRS 990s listed below:

The three-year average of gross receipts will determine the **correct form IRS 990** to file

File the **990N postcard** for those PTA/PTSA units that earned less than **\$50,000**.

File the **990EZ form** for those PTA/PTSA units that earn between **\$50,000** and **\$200,000**.

File the **990 form** for those PTA/PTSA units with more than **\$200,000**.

PTA ANNUAL AUDIT/FINANCIAL REVIEW FORM (Page 1 of 2)

Date of Audit (mm/dd/yyyy): _____ 8 Digit Local PTA Unit ID

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FULL PTA/PTSA Name: _____ County: _____

Audit Contact Person: _____ PTA Position: _____

Street Address: _____

City: _____ Zip: _____

Phone: _____ Email: _____

Banking Institution Name: _____

Auditor/Audit Committee: Please complete Sections A and B. Audit Period Covered: July 1, 20_____ to June 30, 20_____

Section A Audit Committee: Please check the boxes of the financial records provided to you from the Treasurer:

- | | |
|--|---|
| <p><input type="checkbox"/> Copy of last annual audit report (as of June 30 previous year)</p> <p><input type="checkbox"/> All Bank Statements (including PayPal, Stripe, Square, Venmo, CashApp, etc.)</p> <p><input type="checkbox"/> Checkbook register with running balance (handwritten, excel, QuickBooks, etc.) Checkbook</p> <p><input type="checkbox"/> Copies of ALL credit card statements (if applicable)</p> <p><input type="checkbox"/> All Deposit Receipts/Records</p> <p><input type="checkbox"/> All Cash Verification Forms and Receipts</p> <p><input type="checkbox"/> All Check Request Forms with receipts/bills attached</p> <p><input type="checkbox"/> Pre-Approval & Authorization Forms for credit, debit, and EFT expenses Receipts of bills paid or itemized statements</p> <p><input type="checkbox"/> Treasurer's Ledger Book (Excel Spreadsheet, QuickBooks, etc.)</p> | <p><input type="checkbox"/> If any were conducted, copies of any interim audits that were conducted during the year</p> <p><input type="checkbox"/> Treasurer's reports from ALL PTA/PTSA meetings including final general membership Annual Meeting</p> <p><input type="checkbox"/> Copy of Final Approved budget and all amendments (voted upon and approved by the membership at a general meeting)</p> <p><input type="checkbox"/> Minutes of all board, executive committee and association meetings.</p> <p><input type="checkbox"/> Bylaws - Current copy of your bylaws, Stamped Approved by FPTA</p> <p><input type="checkbox"/> Filed copy of IRS Form 990, 990EZ or 990N "accepted" confirmation from previous tax year.</p> <p><input type="checkbox"/> No Records Found or Provided Due to Inactive Year</p> |
|--|---|

Section B Please check **Yes** or **No** for each of the following questions, if applicable.

Y N

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Does amount shown on first bank statement (adjusted for outstanding checks and deposits) correspond to the starting balance recorded in checkbook register, ledger, treasurer's report and ending balance of audit from previous annual audit? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Were bank statements reconciled monthly by the treasurer? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Were bank statements signed by another person not authorized to sign checks or related to a check signer? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Did all checks written contain two signatures (President, Treasurer or other Elected Official / bank signatory)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Were all checks properly recorded in checkbook register, ledger and with treasurer reports? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Were all bank charges and interest recorded in checkbook register, ledger and treasurer reports? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Did the PTA purchase insurance? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Were all check requests and reimbursement authorizations approved by the president or designee and contain receipts? |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Did the PTA get pre-approval for all payments made via electronic funds transfer (EFT), credit card, and/or debit card? |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Did the PTA Purchase or Receive Gift Cards/Gift Certificates? |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Were Gift Cards/Gift Certificates documented properly? (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Did the PTA use Cash Verification Forms or Cash Count Sheet? |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Were all funds received and counted by two persons and verified by the treasurer? |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Did funds received match deposits recorded in the checkbook register ledger and treasurer reports? |
| <input type="checkbox"/> | <input type="checkbox"/> | 15. Was income spent according to the approved/amended budget? |
| <input type="checkbox"/> | <input type="checkbox"/> | 16. Did the general membership meeting minutes also include budget approval? |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. Did the general membership meeting minutes also include a motion and vote for approval of all budget amendments? |
| <input type="checkbox"/> | <input type="checkbox"/> | 18. _____ # of memberships sold _____ # of membership dues paid to the state - Do they match? |

Please contact and return the completed audit to the incoming Treasurer. Incoming Treasurer cannot write checks until audit is completed.

Outgoing Treasurer's Signature: _____	Date: _____
Outgoing Treasurer's Email: _____	Phone: _____
Incoming Treasurer's Name: _____	Phone: _____
Incoming Treasurer's Email: _____	

PTA ANNUAL AUDIT/FINANCIAL REVIEW FORM (Page 2 of 2)

Date of Audit: _____

8 Digit Local PTA Unit ID

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PTA/PTSA Name: _____ County: _____

Dates covered by this Audit/Fiscal Year: **July 1, 20** _____ **to June 30, 20** _____

Check numbers covered by this audit: Beginning check # _____ Ending check # _____

1. **BOOK BALANCE ON HAND** (as of last audit **on June 30th of previous year**).....\$ _____
2. **RECEIPTS/INCOME** received since last audit.....\$ _____
3. **TOTAL CASH** (add Line 1 and Line 2 together for Total Cash)\$ _____
4. **EXPENSES/DISBURSEMENTS** (must include outstanding checks).....\$ _____
5. **BOOK BALANCE ON HAND** as of June 30, 20 ____ (subtract Line 4 from Line 3).....\$ _____ ★
6. **TOTAL ACCOUNT/BANK STATEMENT BALANCE** as of June 30, 20 ____.....\$ _____
7. **OUTSTANDING CHECKS** (write total amount of outstanding checks).....\$ _____

Date of Check	Check #	Amount of Transaction

8. **Balance in Checking Account** (Subtract Line 7 from Line 6).....\$ _____ ★

★ **Reconciliation Note:** Line 5 and Line 8 must be the same to balance the PTA books to bank. If Line 5 and Line 8 are not equal, your audit report is not reconciled. Re-check outstanding checks and deposits.

If receipts reported on line 2 is greater than or equal to \$50,000, and **your average gross receipts for the past (3) years are greater than \$50,000**, YOU MUST COMPLETE THIS SECTION below to calculate the Gross Income and Total Expenses to be used on your IRS Form 990EZ or 990 (long form).

9. Total Members Paid for this Fiscal Year _____ x **\$3.50** = (Payments made to FPTA) \$ _____
10. Subtract line 9 from line 2 to calculate **Gross Receipts used for IRS reporting on Form 990** \$ _____
11. Subtract line 9 from line 4 to calculate **Total Expenses used for IRS reporting on Form 990** \$ _____

This audit must be completed before filing the IRS 990. Please provide a copy of this audit to the person preparing your Form 990.

PLEASE CHECK ONE:

- _____ I (We) have audited the books and find them to be correct.
- _____ I (We) have audited the books and found the following problems and or/make these suggestions.
- _____ I (We) have audited the books and found significant problems that must be reported to Florida PTA immediately for assistance.

AUDIT COMMENTS REQUIRED: If the audit committee finds missing funds, inadequate records, or if standard best practices and accounting procedures are not used, please attach detailed findings and recommendations.

_____ I (We) have attached our findings/recommendations to this form.

*****ALL ORIGINAL SIGNATURES ARE REQUIRED (Florida PTA does NOT accept electronic signatures.)*****

Auditor 1 /Reviewer Signature☐ Professional Auditor or CPA_____
Auditor 2 /Reviewer Signature_____
Auditor 3 /Reviewer Signature_____
Printed Name Auditor 1/Reviewer_____
Printed Name Auditor 2/Reviewer_____
Printed Name Auditor 3/Reviewer_____
Incoming President's Signature_____
Incoming Treasurer's Signature_____
Date

FLORIDA PTA COMPLIANCE: (1) A copy of the signed and dated Audit Report must be submitted to Florida PTA annually (2) ALL ORIGINAL SIGNATURES ARE REQUIRED ON PAGE 2 (Florida PTA does NOT accept electronic signatures.)(3) Once the appropriate 990 is filed with the IRS, on or before November 15, **you are required to forward an "accepted" copy of the 990N or a complete signed and dated copy of the 990EZ or 990 Long Form to Florida PTA. Include copies of all 990EZ and 990 Schedules.**