Exhibit A: Sample Operations Inventory

Nonprofit Status:

IRS Determination Letter IRS Form 1023 – Mission Statement Board Minutes

Financial Information:

Employer Identification Number (EIN #): _____

Current and previous 990s

Current and previous audited financial

statements

Financial statements

Sales Tax Exemption Certificate

Blank checks

Computer passwords

Donor records

Client records

Vendor records

Volunteer records

Or where those records can be easily accessed

Key Contacts:

Bank Name:

Account Number(s)
Branch Contacts:

Account Number(s):

Phone: Fax: Email:

Investment Firm:

Financial Planner/Broker:

Representative Name:

Account Number:

Phone: Fax:

Email:

Legal Counsel:

Contact Name:

Account Number:

Phone: Fax:

Email:

Payroll Contact:

Contact Name:

Account Number:

Phone: Fax:

Email:

Office Lease:

Contact Name:

Account Number:

Phone: Fax:

Email:

Building Management/Maintenance:

Contact Name:

Phone: Fax:

Email:

Security System Consultant:

Contact Name:

Account Number:

Phone: Fax:

Email:

Insurance Contacts:

General Liability:

Contact Name:

Account Number:

Phone: Fax:

Email:

Directors and Officers Liability:

Contact Name:

Account Number:

Phone: Fax:

Email:

Health Insurance:

Contact Name:

Account Number:

Phone: Fax:

Email:

Unemployment Insurance:

Contact Name:

Account Number:

Phone: Fax:

Email:

Workers' Compensation:

Contact Name:

Account Number:

Phone: Fax: Email:	Contact Names
Email:	Contact Name:
	Account Number:
	Phone: Fax:
Disability Insurance:	Email:
Contact Name:	
Account Number:	Long Term Care:
Phone: Fax:	Contact Name:
Email:	Account Number:
	Phone: Fax:
Life Insurance:	Email:
Contact Name:	Ellian.
	 Steporting to the board during hourst meetings.
Account Number:	Retirement Plan:
Phone: Fax:	Contact Name:
Email:	Account Number:
	Phone: Fax:
Dental:	Email:
	B. Organization Communications/Public Symbols:
Name of person completing this docum	ent:
This information last updated on:	
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Nonprofit Advancement (www.nonprofitadva	incement.org)
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