## Information and Contact Inventory

<table>
<thead>
<tr>
<th>NONPROFIT STATUS</th>
<th>Onsite Location</th>
<th>Online URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>IRS Determination Letter</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>IRS Form 1023</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Bylaws</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Mission Statement</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Board Minutes</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Property and franchise tax exemption certificates</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Trademark certificate</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>State Certificate of Incorporation</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Endowment agreement</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Corporate Seal</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

### FINANCIAL INFORMATION

Employer Identification Number (EIN) #: ____________________________________________________________

Current & Previous

- Form 990s □ □
- Current & Previous audited financial statements □ □

State or District Sales-Tax Exemption Certificate □ □

DUNNS and Merchant Info. □ □

1099MISC tax forms □ □

Blank Checks □ □
Computer Information

CAC Network Server □ __________________________
Backup Schedule □ __________________________
Password-network administrator □ __________________________
Case Tracking System administration □ __________________________
Financial software access □ __________________________
Fundraising software access □ __________________________

FINANCIAL INFORMATION

<table>
<thead>
<tr>
<th></th>
<th>Onsite Location</th>
<th>Online URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donor Records</td>
<td>□</td>
<td></td>
</tr>
<tr>
<td>Member Center Records</td>
<td>□</td>
<td></td>
</tr>
<tr>
<td>Vendor Records</td>
<td>□</td>
<td></td>
</tr>
<tr>
<td>Volunteer Records</td>
<td>□</td>
<td></td>
</tr>
</tbody>
</table>

Auditor
Name: __________________________
Phone #: __________________________
Email Address: __________________________

Banking Information
Name: __________________________
Account #: __________________________
Branch Representative __________________________
Phone #: __________________________
Fax #: __________________________
Email Address: __________________________
### Banking Information

<table>
<thead>
<tr>
<th><strong>Name:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Account #:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Branch Representative:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Phone #:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Fax #:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Email Address:</strong></td>
<td></td>
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<tr>
<td><strong>Fax #:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Email Address:</strong></td>
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</tbody>
</table>

### Investments

<table>
<thead>
<tr>
<th><strong>Financial Planner / Broker Company:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Representative Name:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Phone #:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Fax #:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Email Address:</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Name</strong></th>
<th><strong>Title</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

Who is authorized to make Banking and/or Investment transfers?  
1  
2  
3  

Who are the authorized check signers?  
1  
2  
3  

Is there an office safe?  

Who has the combination/keys?  

### Attorney

<table>
<thead>
<tr>
<th>Company Name:</th>
<th>Counsel Name:</th>
<th>Phone #:</th>
<th>Email Address:</th>
</tr>
</thead>
</table>

### HUMAN RESOURCES INFO

<table>
<thead>
<tr>
<th>Employee Records/Personnel Info*</th>
<th>Onsite Location</th>
<th>Online URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Onsite Location</td>
<td>□ Online URL</td>
<td></td>
</tr>
</tbody>
</table>

*Names, home addresses, phone numbers, email, emergency contacts, etc.

<table>
<thead>
<tr>
<th>I-9s</th>
<th></th>
</tr>
</thead>
</table>

### Professional Employee Organization (PEO)

<table>
<thead>
<tr>
<th>Company Name:</th>
<th>Account #:</th>
<th>Representative:</th>
<th>Phone #:</th>
<th>Fax #:</th>
<th>Email Address:</th>
</tr>
</thead>
</table>

### General Liability/Commercial Umbrella

<table>
<thead>
<tr>
<th>Company/Underwriter:</th>
<th>Policy #:</th>
<th>Rep Phone #:</th>
<th>Rep Email Address#:</th>
</tr>
</thead>
</table>

### Disability Insurance (Short-Term)

<table>
<thead>
<tr>
<th>Company/Underwriter:</th>
<th>Policy #:</th>
<th>Rep Phone #:</th>
<th>Rep Email Address#:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Broker Phone #:</th>
<th>Broker Email Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Directors &amp; Officers Liability</strong></td>
<td><strong>Disability Insurance (Long-Term)</strong></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>Company/Underwriter:</td>
<td>Company/Underwriter:</td>
</tr>
<tr>
<td>Policy #:</td>
<td>Policy #:</td>
</tr>
<tr>
<td>Rep Phone #:</td>
<td>Rep Phone #:</td>
</tr>
<tr>
<td>Rep Email Address#:</td>
<td>Rep Email Address#:</td>
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<tr>
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<td>Broker Email Address:</td>
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<table>
<thead>
<tr>
<th><strong>Unemployment Insurance</strong></th>
<th><strong>Life Insurance</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company/Underwriter:</td>
<td>Company/Underwriter:</td>
</tr>
<tr>
<td>Policy #:</td>
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</tr>
<tr>
<td>Rep Phone #:</td>
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<td>Broker Email Address:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Workers’ Compensation</strong></th>
<th><strong>Retirement Plan (401K)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company/Underwriter:</td>
<td>Company/Underwriter:</td>
</tr>
<tr>
<td>Policy #:</td>
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<tr>
<td>Rep Phone #:</td>
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</tr>
<tr>
<td>Broker Email Address:</td>
<td>Broker Email Address:</td>
</tr>
</tbody>
</table>
### Building Management

**Company Name:**

**Contact Name:**

**Office Phone #:**

**Cell Phone #:**

**Email Address:**

### Office Security System

**Company Name:**

**Account #:**

**Contact Name:**

**Rep. Phone #:**

**Rep. Email Address:**

**Broker Phone #:**

**Broker Email Address:**

### Vendor Information

**IT Support**

**Company Name:**

**Account #:**

**Contact Name:**

**Phone #:**

**Email Address:**

**Website Consultants**

**Company Name:**

**Account #:**

**Contact Name:**

**Phone #:**

**Email Address:**

**Other Key Vendors**

**Company Name:**

**Account #:**

**Contact Name:**

**Phone #:**

**Email Address:**
The Emergency Succession Plan and the supporting documents (the information and contact inventory, job descriptions, and organizational charts) should be reviewed and updated annually.