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2008-08-01 PCA Affiliate Financial Form Instructions

Pennsylvania Counseling Association

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Approved

Pennsylvania Counseling Association
Affiliate Financial Form Instructions

The Pennsylvania Counseling Association (PCA) is a 501 (c) (6) corporation and is required to file annual tax reports of all financial activities. Since chapters/divisions are subdivisions of PCA, their financial activities must also be included in the corporation report.

To meet this federal reporting requirement, chapter/divisions may become independent 501 (c)(6) corporations and file annual independent 990 tax forms with the Internal Revenue Services and send a copy of that form to PCA. Chapters/divisions may also choose to complete the following financial form and submit it to the PCA Treasurer annually so that the profit/loss financial data can be included in the PCA tax statements. If you choose to complete the PCA Affiliate Financial Form, this form must be submitted to the PCA Treasurer by August 1 for each preceding tax year with the first report being due on August 1, 2009.

This form will supersede the annual fiscal reporting form currently in place required for affiliate reimbursements from PCA. Signed annual fiscal reporting forms will cease to be recognized for reimbursement after August 1, 2009.

Pennsylvania Counseling Association
Affiliate Financial Form

This report covers fiscal period from July 1, 20__ to June 30, 20__

Affiliate name: _____

Affiliate contact person: _____

Telephone Number: _____

Email Address: _____

Organization checking account number: _____

Bank Name and location where checking account is located:

Checking account balance at the beginning of this fiscal period: _____

Income sources and amounts accumulated during the fiscal period

Memberships: _____

Trainings/Seminars: _____

Contributions: _____

Other sources (identify activity and amount)

Total income amount for this fiscal period: _____

Expense sources and amounts that occurred during this fiscal period

Supplies: _____

Travel: _____

Postage: _____

Publications: _____

Other (identify expense source and amount)

Total expenses for this fiscal period: _____

Profit/Loss for this fiscal period: _____

Other sources of income:

Certificate of Deposit:

Face amount at the beginning of the fiscal period: _____

Interest accrued: _____

* Withdrawals: _____

Savings Account

Amount at the beginning of the fiscal period: _____

Contributions: _____

* Withdrawals: _____

* Withdrawals must be noted as income in your checking account or shown as an exact expense.

As a representative of this PCA chapter/division, I attest that the information provided here is accurate and complete.

Signature

Date

Printed Name: _____

Position within Affiliate Organizations: _____