

2024 Branch Annual Report Worksheet

(Information is to be entered into the form on the Branch Informers webpage.)

All ASALH branches are required to complete a yearly Branch Annual Report and submit it to ASALH Headquarters no later than March 31st.

ASALH's Bylaws require the Executive Council to review each Branch's compliance status at the annual June meeting. We look forward to learning how you uphold and promote the legacy of ASALH and Dr. Carter G. Woodson.

If you do not have a bank account or an EIN, please call the Executive Director Sylvia Cyrus at 202.238.5918 before proceeding.

INSTRUCTIONS

1. Gather all of your Branch's supporting documents prior to completing the form. This includes but is not limited to the following:

- Bank Statement(s) as of 12/31/23
- Branch Financial Report as of 12/31/23
- Branch Programs / Activities Report(s) as of 12/31/23
- All Branch Officers Name, Phone Number, and Email Addresses

[Print Here](#) to download a hard copy of the Branch Annual Report to use as a reference.

2. Please be sure to complete all required fields, indicated by a red asterisk (*). You will not be able to submit the form electronically if you do not complete the required fields.

You **MUST** complete the entire form in **one session**. You will not be able to save your place and return to the form later. If you close your browser prior to pressing the "Submit" button on the final page, you will lose your work and have to start over.

Also, if you try to navigate backwards or forwards using your browser arrows, you will lose your work. You must use the "Continue" or "Go Back" links at the bottom of each page to navigate forwards or backwards.

3. Review your information to ensure it is correct prior to submitting. You will not be able to change or update your report after it is submitted. If you would like to print out your completed report, you will have to print each (one) page at a time.

4. After you submit your report, **PLEASE BE PATIENT!** It may take some time for your submission to send, depending on your internet speed. Please do not navigate away from the page or press the submit button more than once. If you do, your submission may not process. You will receive a confirmation message upon successful submission, as well as an email confirmation.

5. If you have questions about the Branch Annual Reporting process or submission, please contact Sylvia Cyrus, ASALH Executive Director, at scyrus@asalh.org.

I. BRANCH INFORMATION

* Branch Name: _____

* Branch Mailing Address: _____

* Branch EIN: _____

* Name of the bank where the Branch has an account: _____

* Address of the bank where the Branch has an account: _____

Branch Phone Number: _____

Branch E-mail Address: _____

Branch Website: _____

Branch Social Media Platforms:

Facebook: _____

Twitter: _____

Instagram: _____

LinkedIn: _____

Date Branch charter was issued (New Branches Only): _____

Branch Tax ID Number (if applicable): _____

* Does your Branch have an IRS 501(c)(3) tax exempt status:

YES: ___ NO: ___

* Does your Branch have a State tax exemption:

YES: ___ NO: ___

MEMBERS:

* Total Number of 2023 Non-Institutional members: _____

* Number of Members Retained from 2022: _____

* Number of NEW Members in 2023: _____

* Total Number of 2023 Institutional members: _____

* Are your Branch members aware of their eligibility to receive a complimentary subscription of the Journal of African American History:

YES: ___

NO: ___

II. 2023 BRANCH OFFICERS

Branch President:

* Branch President Name: _____

* Branch President Email Address: _____

* Branch President Phone Number: _____

Branch Vice- President:

* Branch Vice-President Name: _____

* Branch Vice-President Email Address: _____

* Branch Vice-President Phone Number: _____

Branch Treasurer:

* Branch Treasurer Name: _____

* Branch Treasurer Email Address: _____

* Branch Treasurer Phone Number: _____

Branch Secretary:

* Branch Secretary Name: _____

* Branch Secretary Email Address: _____

* Branch Secretary Phone Number: _____

Branch Historian:

* Branch Historian Name: _____

* Branch Historian Email Address: _____

* Branch Historian Phone Number: _____

III. 2023 BRANCH FINANCIAL INFORMATION

BRANCH FINANCIAL POSITION:

- * Cash Balance at 12/31/23: \$ _____
- * Total Outstanding Receivables at 12/31/23: \$ _____
- * Total Outstanding Liabilities at 12/31/23: \$ _____

BRANCH INCOME:

- * 2023 National Membership Dues: \$ _____
- * 2023 Local Membership Dues: \$ _____
- * 2023 Donations / Contributions: \$ _____
- * 2023 Total Program / Event Income: \$ _____
- * 2023 Other Income: \$ _____
- * TOTAL 2023 BRANCH INCOME: \$ _____

BRANCH EXPENSES:

- * 2023 National Membership Dues: \$ _____
- * 2023 Annual Branch Contribution to ASALH: \$ _____
- * 2023 Total Program / Event Expenses: \$ _____
- * 2023 Other Expenses: \$ _____
- * TOTAL 2023 BRANCH EXPENSES: \$ _____

* How often does your Branch generate financial reports?

MONTHLY: ___

QUARTERLY: ___

OTHER: _____ (Please explain)

* Is your Branch current with your required tax filings (Form 990)?

YES: ___

Date latest Form 990N, 990-EZ, or 990 was filed? _____

NO: ___

OTHER: ___ (Please explain)

IV. 2023 BRANCH ACTIVITIES / PROGRAMS

Enter a list of your Branch's 2023 activities / programs. For each activity / program, please provide the following information:

- Name of Activity / Program
- Date the Activity / Program was Held
- Location the Activity / Program was Held
- The Target Audience
- Number of Attendees
- Purpose/Impact of the Activity / Program

BLACK HISTORY MONTH:

* Did your Branch host a Black History Month Activity / Program?

YES: ___

NO: ___

Describe Here: _____

FOUNDERS DAY:

* Did your Branch host a Founders Day Activity / Program?

YES: ___

NO: ___

Describe Here: _____

WOODSON BIRTHDAY:

* Did your Branch host a Woodson Birthday Activity /Program?

YES: ___

NO: ___

Describe Here: _____

ANNUAL CONFERENCE:

* How many members attended the in-person Conference?

AMOUNT: _____

BLACK HISTORY MONTH FESTIVAL:

* How many members attended the virtual conference?
AMOUNT: _____

OTHER ACTIVITIES / PROGRAMS:

* Did your Branch host any other Activities /Programs?
YES: ____
NO: ____

Describe Here:_____

V. VERIFICATION

* I certify that the information submitted is correct and accurate to the best of my knowledge.

YES:_____

* Submitter's Name: _____

* Submitter's E-mail Address: _____

* Submitter's Phone Number: _____

* Date of Report Submission: _____

In order to submit this form, you must verify the words or characters presented in the two images below. If you cannot read one of the words or images, prese the circular “reload” button to receive a different image. You can also press the speaker button to have words or characters read to you.

Additional Information Submitted for the Annual Branch Report (Optional):