**Federal Awards Compliance Audit Guidance and Testing**

|  |  |
| --- | --- |
| **NAME OF CLIENT:** |  |
| **YEAR ENDED:** | 2021 |

|  |  |
| --- | --- |
| **FEDERAL AWARD NAME:** | Coronavirus Relief Fund |
| **AL#:** | #21.019 |

**This File has been broken into following sections:**

* Discussion on Agency Adoption of the UG and example citations
* Introduction- Materiality Sheet – See the table of contents
* Part I- General OMB Compliance Supplement Information,
* Part II- Pass Through Agency Program Specific Introductory Information,
* Part III- Applicable Compliance Requirement Guidance
  + OMB compliance requirements
  + Pass through agency/grant agreement compliance requirements
  + Audit Objectives and Control Testing Procedures
  + Suggested Audit Procedures- Compliance/Substantive Tests
  + Audit Implications Summary
* Program Testing Conclusion

# Important Information (please read)

**This FACCR has been tailored for local governments and Not-For–Profits receiving funding passed through OBM via HB 481 and 614 *AND/OR* passed through other local governments. It does not include all required references and testing for Institutes of Higher Learning or State organizations.**

**Additional FACCRs are available for the 6 direct recipients and their subrecipients as well as funds passed through the Ohio Department of Education. Refer to the chart and list of FACCRs on the following page to determine which FACCR should be used.**

**Available CRF FACCRs (Numbers Correspond to FACCR References in Chart Below):**

1. Six Direct Recipients and their Subrecipients
   * Includes guidance specific to the six direct recipients (City of Columbus and Cuyahoga, Franklin, Hamilton, Montgomery, and Summit Counties) as well as amounts passed to other entities from those direct recipients.
2. Passed Through OBM and Other Local Governments
   * Includes guidance specific to those receiving CRF monies passed through OBM via HB 481 and 614 as well as passed through other local governments (Counties, Cities, Villages, etc.).
3. Passed Through ODE
   * Includes guidance specific to those receiving CRF monies passed through ODE.
4. Passed Through a Direct Recipient, OBM, Other Local Governments, and/or ODE
   * Combines the guidance in the three other available FACCRs.

**\* - *AND/OR* Passed Through Direct Recipient**

**^ - *AND/OR* Other Local Gov**

***Note: If your auditee does not fall into a situation described in the table above, please reach out to the FACCR inbox (IPAs) or send a Spiceworks Ticket to the FACCR Specialty (AOS) for further guidance.***

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

**Please refer to the terms and conditions of the grant to determine if any additional requirements were imposed. If additional material requirements are identified, auditors will need to create procedures to test those requirements. If you have questions, AOS Auditors please open a Spiceworks ticket for assistance (IPAs email** [**FACCR@ohioauditor.gov**](mailto:FACCR@ohioauditor.gov)**).**

**Also see guidance in** [**Appendix VII**](OMB_Compliance_Supplement_APP_VII.pdf) **of the Compliance Supplement.**

**Note: During 2020, The Office of Management and Budget (OMB) revised sections of the Uniform Guidance (UG).  These revisions to the UG were effective for funds awarded on or after November 12, 2020 (except for the amendments to §§ 200.216 and 200.340, which were effective on August 13, 2020).  The** [**eCFR**](https://www.ecfr.gov/cgi-bin/ECFR?page=browse) **has been updated to reflect these revisions, but guidance prior to the date of the revision is still accessible through the eCFR by selecting a date prior to 11/12/20 using the “Browse/Search Previous” button.**

**NAVIGATION PANE**

**This file has been arranged to be navigable. Click on the view tab above and check the box that says “Navigation Pane” to bring up the headings. Click on the various sections within the navigation pane to go directly to that section.**

**TABLE OF CONTENTS**

**The Table of Contents starts on page. On the table of contents page, users can also click on listed sections to go directly to that section. Please note that as information is added into the unrestricted portions of the FACCRs, page numbering can change and won’t necessarily reflect the footer page numbers. The table of contents can be updated to reflect the proper footer page numbers by clicking on word “contents” directly above the line starting with Introduction, will bring up the icon “update table”. Clicking on the update table icon will allow users to update the page numbers to reflect current footer page numbers.**

# AGENCY ADOPTION OF THE UG AND EXAMPLE CITATIONS

Federal awarding agencies adopted or implemented the Uniform Guidance in 2 CFR part 200. The OMB guidance is directed to Federal agencies and, by itself, does not establish regulatory requirements binding on non-federal entities. The Federal awarding agency implementation gives regulatory effect to 2 CFR part 200 for that agency’s Federal awards and, thereby, establishes requirements with which the non-Federal entity must comply when incorporated in the terms and conditions of the federal award. The following code sections are where ED, HHS, USDA, DOT, EPA, DOL and HUD have adopted the Uniform Guidance in 2 CFR part 200. For the complete list of agencies adopting 2 CFR 200, as of the date of the OMB Compliance Supplement, see [**Appendix II**](OMB_Compliance_Supplement_APP_II.pdf)**.**

In implementing the UG, agencies were able to make certain changes to the part 200 by requesting needed exceptions. A few adopted the UG with no changes; however most agencies did make changes to the UG by either adding specific requirements or editing/modifying the existing language within certain sections of the UG. OMB does not maintain a complete listing of approved agency exception to the UG. Auditors should review the OMB Compliance Supplement and, as necessary, agency regulations adopting/implementing the OMB uniform guidance in 2 CFR part 200 to determine if there is any exception related to the compliance requirements that apply to the program (see link below)

**Auditors should review this** [**link**](Agency%20Adoption%20of%20the%20UG%20and%20Example%20Citations.pdf) **for a full discussion of agency adoption of the UG and how to cite non-compliance exception.**

*(Source: AOS CFAE)*

# Table of Contents

Table of Contents

[Important Information (please read) 1](#_Toc88457858)

[AGENCY ADOPTION OF THE UG AND EXAMPLE CITATIONS 5](#_Toc88457859)

[Table of Contents 6](#_Toc88457860)

[Introduction: Materiality by Compliance Requirement Matrix 8](#_Toc88457861)

[Part I – OMB Compliance Supplement Information 12](#_Toc88457862)

* [I. Program Objectives 12](#_Toc88457863)
* [II. Program Procedures 12](#_Toc88457864)
* [III. Source of Governing Requirements 13](#_Toc88457865)
* [IV. Other Information 13](#_Toc88457866)

[Part II – Pass through Agency and Grant Specific Information 15](#_Toc88457867)

* [Program Overview and Testing Considerations 15](#_Toc88457868)
* [Reporting 16](#_Toc88457869)

[PART III – APPLICABLE COMPLIANCE REQUIREMENTS 17](#_Toc88457870)

[A. ACTIVITIES ALLOWED OR UNALLOWED 17](#_Toc88457871)

* [OMB Compliance Requirements 17](#_Toc88457872)
* [Additional Program Specific Information 18](#_Toc88457873)
* [Audit Objectives and Control Testing 23](#_Toc88457874)
* [Suggested Audit Procedures – Compliance 24](#_Toc88457875)
* [Audit Implications Summary 25](#_Toc88457876)

[B. ALLOWABLE COSTS/COST PRINCIPLES 26](#_Toc88457877)

* [Applicability of Cost Principles 26](#_Toc88457878)
* [Additional Program Specific Information 29](#_Toc88457879)
* [Indirect Cost Rate 34](#_Toc88457880)
* [Cost Principles for States, Local Governments and Indian Tribes 36](#_Toc88457881)
* [Allowable Costs – State/Local Government-wide Central Service Costs 43](#_Toc88457882)
* [Allowable Costs – State Public Assistance Agency Costs 47](#_Toc88457883)
* [Cost Principles for Nonprofit Organizations 50](#_Toc88457884)
* [Audit Implications Summary 51](#_Toc88457885)

[H. PERIOD OF PERFORMANCE 52](#_Toc88457886)

* [OMB Compliance Requirements 52](#_Toc88457887)
* [Additional Program Specific Information 53](#_Toc88457888)
* [Audit Objectives and Control Testing 55](#_Toc88457889)
* [Suggested Audit Procedures – Compliance 56](#_Toc88457890)
* [Audit Implications Summary 57](#_Toc88457891)

[L. REPORTING 58](#_Toc88457892)

* [OMB Compliance Requirements 58](#_Toc88457893)
* [Additional Program Specific Information 62](#_Toc88457894)
* [Audit Objectives and Control Testing 65](#_Toc88457895)
* [Suggested Audit Procedures – Compliance 66](#_Toc88457896)
* [Audit Implications Summary 70](#_Toc88457897)

[M. SUBRECIPIENT MONITORING 71](#_Toc88457898)

* [OMB Compliance Requirements 71](#_Toc88457899)
* [Additional Program Specific Information 72](#_Toc88457900)
* [Audit Objectives and Control Testing 74](#_Toc88457901)
* [Suggested Audit Procedures – Compliance 75](#_Toc88457902)
* [Audit Implications Summary 76](#_Toc88457903)

[Program Testing Conclusion 77](#_Toc88457904)

# Introduction: Materiality by Compliance Requirement Matrix

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Planning Federal Materiality by Compliance Requirement**  See Footnotes 1-6 below the matrix table for further explanation, in particular, review note 6 which discusses tailoring the matrix assessments. | | | | | | | | | | | |
|  |  |  | **(1)** | **(2)** | **(6)** | **(6)** | **(3)** | **(4)** | **(5)** | **(5)** | **(6)** |
| **Compliance Requirement** | | | **Applicable per Compl.**  **Suppl.** | **Direct & material to program / entity** | **Monetary or nonmonetary** | **If monetary, population subject to require.** | **Inherent risk (IR) assess.** | **Final control risk (CR) assess.** | **Detection risk of noncompl.** | **Overall audit risk of noncompl.** | **Federal materiality by compl. requirement** |
|
|
|
| *(Yes or No)* | *(Yes or No)* | *(M/N)* | *(Dollars)* | *(High/Low)* | *(High/Low)* | *(High/Low)* | *(High/Low)* | *typically 5% of population subject to requirement* |
| **A** |  | **Activities Allowed or Unallowed** | Yes |  | M |  |  |  |  |  | *5%* |
| **B** |  | **Allowable Costs/Cost Principles** | Yes |  | M |  |  |  |  |  | *5%* |
| **C** |  | **Cash Management** | No |  |  |  |  |  |  |  |  |
| **D** |  | ***RESERVED*** |  |  |  |  |  |  |  |  |  |
| **E** |  | **Eligibility** | No |  |  |  |  |  |  |  |  |
| **F** |  | **Equipment & Real Property Mgmt** | No |  |  |  |  |  |  |  |  |
| **G** |  | **Matching, Level of Effort, Earmark** | No |  |  |  |  |  |  |  |  |
| **H** |  | **Period of Performance** | Yes |  | M |  |  |  |  |  | *5%* |
| **I** |  | **Procurement & Sus. & Debarment** | No |  |  |  |  |  |  |  |  |
| **J** |  | **Program Income** | No |  |  |  |  |  |  |  |  |
| **K** |  | ***RESERVED*** |  |  |  |  |  |  |  |  |  |
| **L** |  | **Reporting** | Yes |  | N |  |  |  |  |  | *5%* |
| **M** |  | **Subrecipient Monitoring** | Yes |  | N |  |  |  |  |  | *5%* |
| **N** |  | **Special Tests & Provisions** | No |  |  |  |  |  |  |  |  |

**NOTE: For all compliance requirements marked as applicable in Column (1) you MUST document in your working papers or this FACCR why a requirement is not direct and material to your program/entity as marked in Column (2). When making that determination all parts of that compliance requirement have to be considered. For example, Equipment and Real Property contains procedures regarding Acquisitions, Dispositions, and Inventory Management. The documentation on why the compliance requirement is not be applicable to the program/entity must cover all parts of that compliance requirement.**

**(1)** Taken form Part 2, Matrix of Compliance Requirements, of the [OMB Compliance Supplement](https://www.whitehouse.gov/wp-content/uploads/2021/08/OMB-2021-Compliance-Supplement_Final_V2.pdf). When Part 2 of the Compliance Supplement indicates that a type of compliance requirement is not applicable, the remaining assessments for the compliance requirement are not applicable.

**(2)** If the Supplement notes a compliance requirement as being applicable to the program in column (1), it still may not apply at a particular entity either because that entity does not have activity subject to that type of compliance requirement, or the activity could not have a material effect on a major program. If the Compliance Supplement indicates that a type of compliance requirement is applicable and the auditor determines it also is direct and material to the program at the specific entity being audited, the auditor should answer this question “Yes,” and then complete the remainder of the line to document the various risk assessments, sample sizes, and references to testing. Alternatively, if the auditor determines that a particular type of compliance requirement that normally would be applicable to a program (as per part 2 of the Compliance Supplement) is not direct and material to the program at the specific entity being audited, the auditor should answer this question “No.” Along with that response, the auditor should document the basis for the determination (for example, "per the Compliance Supplement, eligibility requirements only apply at the state level").

**(3)** Refer to the AICPA Audit Guide, Government Auditing Standards and Single Audits, chapter 10, Compliance Auditing Applicable to Major Programs, for considerations relating to assessing inherent risk of noncompliance for each direct and material type of compliance requirement. The auditor is expected to document the inherent risk assessment for each direct and material compliance requirement.

**(4)** Refer to the AICPA Audit Guide, Government Auditing Standards and Single Audits, chapter 9, Consideration of Internal Control over Compliance for Major Programs, for considerations relating to assessing control risk of noncompliance for each direct and material types of compliance requirement. To determine the control risk assessment, the auditor is to document the five internal control components of the Committee of Sponsoring Organizations of the Treadway Commission (COSO) (that is, control environment, risk assessment, control activities, information and communication, and monitoring) for each direct and material type of compliance requirement. Keep in mind that the auditor is expected to perform procedures to obtain an understanding of internal control over compliance for federal programs that is sufficient to plan the audit to support a low assessed level of control risk. If internal control over compliance for a type of compliance requirement is likely to be ineffective in preventing or detecting noncompliance, then the auditor is not required to plan and perform tests of internal control over compliance. Rather, the auditor must assess control risk at maximum, determine whether additional compliance tests are required, and report a significant deficiency (or material weakness) as part of the audit findings. The control risk assessment is based upon the auditor's understanding of controls, which would be documented outside of this template. Auditors may use the practice aid, Controls Overview Document, to support their control assessment. The Controls Overview Document assists the auditor in documenting the elements of COSO, identifying key controls, testing of those controls, and concluding on control risk. The practice aid is available in either a checklist or narrative format.

**(5)** Audit risk of noncompliance is defined in AICPA, Professional Standards, vol. 1, AU-C 935, as the risk that the auditor expresses an inappropriate opinion on the entity's compliance when material noncompliance exists. Audit risk of noncompliance is a function of the risks of material noncompliance and detection risk of noncompliance. A “Low” assessment of Detection Risk in this matrix means that the risk has been reduced to an acceptable level.

**(6)** CFAE included the typical monetary vs. nonmonetary determinations for each compliance requirement in this program. However, auditors should tailor these assessments as appropriate based on the facts and circumstances of their entity’s operations. The AICPA Single Audit Guide 10.56 states the auditor's tests of compliance with compliance requirements may disclose instances of noncompliance. The Uniform Guidance refers to these instances of noncompliance, among other matters, as “audit findings.” Such findings may be of a monetary nature and involve questioned costs or may be nonmonetary and not result in questioned costs. AU-C 935.13 & .A7 require auditors to establish and document two materiality levels: (1) a materiality level for the program as a whole. The column above documents quantitative materiality at the COMPLIANCE REQUIREMENT LEVEL for each major program; and (2) a second materiality level for the each of the applicable 12 compliance requirement listed in Appendix XI to Part 200.

*Note:*

a. If the compliance requirement is of a monetary nature, and

b. The requirement applies to the ***total*** population of program expenditure,

Then the compliance materiality amount for the program also equals materiality for the requirement. For example, the population for allowable costs and cost principles will usually equal the total Federal expenditures for the major program as a whole. Conversely, the population for some monetary compliance requirements may be less than the total Federal expenditures. Auditors must carefully determine the population subject to the compliance requirement to properly assess Federal materiality. Auditors should also consider the qualitative aspects of materiality. For example, in some cases, noncompliance and internal control deficiencies that might otherwise be immaterial could be significant to the major program because they involve fraud, abuse, or illegal acts. Auditors should document PROGRAM LEVEL materiality in the Record of Single Audit Risk (RSAR).

*(Source: AOS CFAE)*

[***Performing Tests to Evaluate the Effectiveness of Controls throughout this FACCR***](Performing%20Tests%20to%20Evaluate%20the%20Effectiveness%20of%20Controls%20throughout%20this%20FACCR.pdf)

[***Improper Payments***](Improper%20Payments.pdf)

# Part I – OMB Compliance Supplement Information

### I. Program Objectives

**Note**: This program is considered a “higher risk” program for 2021, pursuant to [2 CFR section 200.519(c)(2)](2CFR200.519.pdf). Refer to the “Programs with Higher Risk Designation” section of [Part 8, Appendix IV, Internal Reference Tables](OMB_Compliance_Supplement_APP_IV.pdf), for a discussion of the impact of the “higher risk” designation on the major program determination process.

The purpose of the Coronavirus Relief Fund (the Fund) is to provide direct payments to state, territorial, tribal, and certain eligible local governments to cover:

1. Necessary expenditures incurred due to the public health emergency with respect to Coronavirus Disease 2019 (COVID–19);
2. Costs that were not accounted for in the government’s most recently approved budget as of March 27, 2020; and
3. Costs that were incurred during the period that begins on March 1, 2020; and ends on December 31, 2021.

On December 27, 2020, the Consolidated Appropriations Act, 2021, Pub. L. No.116-260 was signed into law. Division N, Title X, Section 1001 extends the period for which recipients may incur eligible costs using payments from the Fund from December 30, 2020, to December 31, 2021.

For more information on the limitation for use of payments from the Fund, please reference US Department of the Treasury’s (Treasury) guidance located in the section below titled “Availability of Other Program Information.”

Auditors must use Treasury’s guidance and Frequently Asked Questions (FAQ) in final form as published in the Federal Register on January 15, 2021, at [86 FR 4182](86FR4182.pdf) and Treasury’s Office of Inspector General (OIG) guidance on reporting and record retention, including related FAQs at <https://oig.treasury.gov/cares-act-reporting-and-record-keeping-information>, as the criteria when auditing use of payments from the Fund, as well as when reporting findings.

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

*CFAE Note: Please see revised guidance regarding Period of Performance and obligation dates in section H of this FACCR.*

### II. Program Procedures

1. Overview

The Treasury provided assistance of $150 billion from the Fund in direct payments to state, territorial, tribal, and eligible local governments with $3 billion reserved for payments to the District of Columbia, Puerto Rico, US Virgin Islands, Guam, Northern Mariana Islands, and American Samoa and $8 billion reserved for payments to tribal governments. The remaining $139 billion were allocated for payments to the 50 states and eligible local governments with each state receiving a minimum payment no less than $1.25 billion for fiscal year 2020. Payments to states were subject to reduction based on payments to eligible local governments. Amounts paid to states and eligible local governments were based on 2019 population data from the US Census Bureau.

Units of local government eligible for direct payment include counties, municipalities, towns, townships, villages, parishes, boroughs, or other units of general government below the state level with a population that exceeds 500,000. Eligible units of local government had to provide a certification to receive direct payment from the Fund. The secretary of the Treasury made a determination to allocate payments to tribal governments based on population, employment, and expenditure data.

State, territorial, tribal, and eligible local governments are required to use payments from the Fund to cover:

1. Necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID–19);
2. Costs that were not accounted for in the governments’ most recently approved budget as of March 27, 2020; and
3. Costs that were incurred during the period that begins on March 1, 2020; and ends on December 31, 2021.

Governments otherwise have broad discretion to utilize payments for expenditures ranging from COVID-19 testing including, but not limited to, reimbursing small businesses for the costs of business interruption caused by required closures.

The CARES Act statutory criteria on use of payments from the Fund stated in section 601(d) of the Social Security Act, as added by section 5001 of Division A of the CARES Act and as interpreted in Treasury’s guidance and FAQs, applies to prime recipients, subrecipients, and beneficiaries, as detailed in Section M. on Subrecipient Monitoring below and Treasury’s FAQ No. B.13. Please note that Fund payments provided to beneficiaries are not subject to audit per 2 CFR Part 200, Subpart F.

1. Subprograms/Program Elements - *Not Applicable*

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

### III. Source of Governing Requirements

The Fund is authorized by the CARES Act, Pub. L. No. 116-136, Division A, Title V (2020) (codified as 42 USC 801 et seq.), as amended by the Consolidated Appropriations Act, 2021, Pub. L. No.116-260, Division N, Title X, Section 1001.

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

### IV. Other Information

**Availability of Other Program Information**

Additional information on the Fund is available on the Treasury website at <https://home.treasury.gov/policy-issues/cares/state-and-local-governments>.

Treasury has published in the Federal Register its Guidance and FAQs regarding the Coronavirus Relief Fund for states, tribal governments, and certain eligible local governments. The guidance published in the Federal Register is unchanged from the last version of the Guidance dated September 2, 2020, and the FAQ dated October 19, 2020, each of which was published on [Treasury's website](https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/coronavirus-relief-fund), except for certain changes noted in the [Federal Register](86FR4182.pdf) notice.

The Federal Register notice is available at 86 FR 4182 (Jan. 15, 2021) and on Treasury’s website at <https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf>

Treasury OIG’s guidance on reporting and record retention, including related FAQs, can be found at <https://oig.treasury.gov/cares-act-reporting-and-record-keeping-information>.

If there are specific questions regarding the Fund, the CARES Program Office may be contacted via telephone at (202) 622-6415 or by e-mail at [CoronaVirusReliefFund@treasury.gov](mailto:CoronaVirusReliefFund@treasury.gov).

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

# Part II – Pass through Agency and Grant Specific Information

### Program Overview and Testing Considerations

**Ohio Office of Budget and Management**

**Funding Information**

Funds were awarded to the State of Ohio as Federal Financial Assistance from the U.S. Department of Treasury. Funds were awarded under the Social Security Act, as amended by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”) as the Coronavirus Relief Fund (CRF).

**Federal Assistance Information**

The U.S. Department of Treasury did not provide a notice of award to the State of Ohio, thus a Federal Award Identification Number (FAIN) for each of the two payments to the state was found on USASpending.gov to be SLT0018 and SKT0234. The federal award date is presumed to be the date of enactment of the CARES Act, March 27, 2020.

Funds are considered federal financial assistance and have been assigned a Catalog of Federal Domestic Assistance (CFDA) or Assistance Listing Number of 21.019. Fund payments are considered to be federal financial assistance subject to the Single Audit Act (31 U.S.C. §§ 7501-7507) and the related provisions of the Uniform Guidance, 2 C.F.R. § 200.303 regarding internal controls, §§ 200.330 through 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements.

*(Source: Ohio Office of Budget and Management (OBM))*

**Sources of Funding and Subawards:**

Auditors must carefully consider the sources of CRF funding and related agreements in regards to treatment for SEFA reporting, including evidence indicating subrecipient, vendor, and/or beneficiary relationships between governments. Many entities are designing and implementing programs to share CRF funding with other governments, small businesses, not-for-profits, etc. in order to assist with relief efforts in areas with the most need. Additional information regarding the sources of CRF funding can be found here - <https://ohioauditor.gov/resources/covid19/CRF_Flowcharts_Funding.pdf> .

**Since the various sources of the CRF program are all part of the CFDA #21.019 major program, only one opinion on compliance will be issued using the results of testing in the FACCR.**

**Additional Resources:**

AOS will audit expenditures in accordance with the law and guidance issued at the time an expenditure was made with Coronavirus Relief Funds and any additional guidance available at the time of the audit. Those resources may include (but are not be limited to):

U.S. Department of Treasury’s Management Office Coronavirus Relief Fund Guidance was published in the Federal Register on January 15, 2021 (<https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf>). Other information can be found on the Treasury’s website at <https://home.treasury.gov/policy-issues/cares/state-and-local-governments>.

U.S. Department of Treasury Office of the Inspector General (OIG) Coronavirus Relief Fund Reporting and record-keeping information page, which includes a link to the *most updated version* of the related Frequently Asked Questions (FAQ) document at:

<https://oig.treasury.gov/cares-act-reporting-and-record-keeping-information>

OBM’s Coronavirus Relief Fund Local Government Assistance Program website includes additional information on permissible and prohibited uses of CRF, subgranting, etc. at <https://grants.ohio.gov/fundingopportunities.aspx#funding-opportunities-coronavirus-relief>

OBM’s Ohio Grants Partnership Local Government Assistance Program General Guidance and Subgranting Requirements here - <https://grants.ohio.gov/fundingopportunities.aspx#funding-opportunities-coronavirus-relief>

OBM Coronavirus Relief Fund (CRF) Local Government Assistance Program Guidance and Frequently Asked Questions at <https://grants.ohio.gov/Documents/Funding_Opportunities/Coronavirus_Relief_Fund/Guidance_Trainings_JobAids_Webinars/Coronavirus_Relief_Fund_Guidance_Updated_2021-01-19.pdf>

Ohio AOS FAQs here - <https://ohioauditor.gov/resources/covid19_faqs.html>

Ohio AOS CRF Use of Federal Coronavirus Aid, Relief, and Economic Security (CARES) Act Coronavirus Relief Funds (CRF) to Support Small Businesses and Provide Housing Assistance here - <http://ohioauditor.gov/resources/Covid19/AOS_Advisory_CARES_Act_100720.pdf>

Ohio AOS Subgranting Responsibilities Under Uniform Guidance Act here - <http://www.ohioauditor.gov/resources/covid19/AOS_UG_Guidance_1009.pdf>

Further information regarding CRF funding passed through OBM is also available in [Ohio Compliance Supplement Chapter 2](https://ohioauditor.gov/references/compliancemanuals.html), step 2-24 which includes a summary of Ohio’s related legislation.

*(Source: AOS CFAE)*

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

### Reporting

Additional SEFA and Footnote resources available for AOS Staff in the Audit Employees Briefcase and on the [IPA Resource Internet Page](http://www.ohioauditor.gov/references/practiceaids.html):

* Examples SEFA and Footnote shells
* Additional SEFA Guidance in the “Single Audit SEFA 2021 Completeness Guide”

*(Source: CFAE)*

# PART III – APPLICABLE COMPLIANCE REQUIREMENTS

## A. ACTIVITIES ALLOWED OR UNALLOWED

**Federal awarding agencies adopted/implemented the Uniform Guidance in 2 CFR part 200. The OMB guidance is directed to Federal agencies and, by itself, does not establish regulatory requirements binding on non-federal entities. Throughout the FACCR 2 CFR part 200 has been referenced, however in determining compliance auditors need to refer the applicable agency codification of 2 CFR Part 200. Auditors should review this** [**link**](Agency%20Adoption%20of%20the%20UG%20and%20Example%20Citations.pdf) **for a full discussion of agency adoption of the UG and how to cite non-compliance exceptions. Auditors will need to start with the agency codification of the UG when citing exceptions.**

### OMB Compliance Requirements

**Important Note:** For a cost to be allowable, it must (1) be for a purpose the specific award permits and (2) fall within [2 CFR 200 subpart E](2CFR200_Subpart%20E.pdf) Cost Principles. These two criteria are roughly analogous to classifying a cost by both program/function and object. That is, the grant award generally prescribes the allowable program/function while 2 CFR 200 subpart E prescribes allowable object cost categories and restrictions that may apply to certain object codes of expenditures.

For example, could a government use an imaginary Homeland Security grant to pay OP&F pension costs for its police force? To determine this, the client (and we) would look to the grant agreement to see if police activities (security of persons and property function cost classification) met the program objectives. Then, the auditor would look to Subpart E (provisions for selected items of cost [§ 200.420-200.476](2CFR200.420_thru_200.476.pdf)) to determine if pension costs (an object cost classification) are permissible. (200.431(g) states they are allowable, with certain provisions, so we would need to determine if the auditee met the provisions.) Both the client and we should look at 2 CFR 200 subpart E even if the grant agreement includes a budget by object code approved by the grantor agency. Also, keep in mind that granting agencies have codified 2 CFR 200 and some agencies have been granted exceptions to provisions within 2 CFR 200.

*(Source: AOS CFAE)*

The specific requirements for activities allowed or unallowed are unique to each Federal program and are found in the laws, regulations, and the provisions of the Federal award contracts or grant agreements pertaining to the program. For programs listed in this Supplement, the specific requirements of the governing statutes and regulations are included in Part 4, “Agency Program Requirements” or Part 5, “Clusters of Programs,” as applicable. This type of compliance requirement specifies the activities that can or cannot be funded under a specific program.

**Source of Governing Requirements**

The requirements for activities allowed or unallowed are contained in program legislation, Federal awarding agency regulations, and the terms and conditions of the award.

*(Source: 2021 OMB Compliance Supplement Part 3)*

**Agency Codification Adjustments/Exceptions:**

The most recent compilation of agency additions and exceptions is provided on the CFO website here: <https://www.cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf>. However, this list is only updated through 12/2014. AOS evaluated agency exceptions through August 2019. For further evaluation of exceptions, AOS auditors only will need to reference our internal AOS evaluation process [at the following link](http://portal/BP/Intranet/Auditor%20Resources%20File%20Bin/UG%20Exception%20Evaluation%20by%20Federal%20Agency.xlsx).

**Part 4 OMB Program Specific Requirements**

The Fund is designed to provide ready funding to address unforeseen financial needs and risks created by the COVID-19 public health emergency. Governments may use Fund payments for eligible expenses subject to the restrictions set forth in section 601(d) of the Social Security Act. Payments must be used to cover costs that are:

1. Necessary expenditures incurred due to the public health emergency with respect to COVID–19;
2. Not accounted for in the governments’ most recently approved budget as of March 27, 2020; and
3. Incurred during the period that begins on March 1, 2020; and ends on December 31, 2021.

A cost meets the requirement of “costs not accounted for in the budget most recently approved as of March 27, 2020,” if either (a) the cost cannot lawfully be funded using a line item, allotment, or allocation within that budget or (b) the cost is for a substantially different use from any expected use of funds in such a line item, allotment, or allocation.

Please see Treasury’s guidance on “Costs not accounted for in the budget most recently approved as of March 27, 2020,” at <https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf> for additional details.

Fund payments are not required to be used as the source of funding of last resort. However, recipients may not use payments from the Fund to cover expenditures for which they will receive reimbursement from other sources. Governments are responsible for making determinations as to what expenditures are necessary due to the public health emergency with respect to COVID-19.

Please see Treasury’s FAQs at <https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf> for more information related to the expenditures that may or may not be covered with payments from the Fund.

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

### Additional Program Specific Information

CFAE NOTE: Similar to payments made to contractors, disbursements made to beneficiaries are subject to testing as part of this compliance requirement. In order to determine if payments to beneficiaries are allowable, auditors should test to ensure 1) the beneficiary was eligible under the program guidelines, 2) the expenditure met the three-prong requirements of CRF (included in the OMB requirements above), and 3) the required support for the payment have been provided. (See the SEFA Completeness document as well as Section M of this FACCR for additional information regarding beneficiaries.)

*(Source: AOS CFAE)*

**Passed through the Ohio Office of Budget and Management via HB 481 and HB 614**

**Permissible Use of Funds**

The following list of specific permissible uses is not intended to be comprehensive:

*Medical Expenses*

* COVID-19-related expenses of public hospitals, clinics, and similar facilities.
* Expenses of establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity, including related construction costs.
* Costs of providing COVID-19 testing, including serological testing.
* Emergency medical response expenses related to COVID-19, including emergency medical transportation.
* Expenses for establishing and operating public telemedicine capabilities for COVID-19- related treatment.
* Personal Protective Equipment to address the current COVID-19 pandemic.

*Public Health and Related Measures*

* Expenses for communication and enforcement by governments for public health orders related to COVID-19.
* Expenses for acquisition, distribution, and disposal of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers in connection with the COVID-19 public health emergency.
* Expenses for disinfection of public areas and other facilities, e.g., nursing homes, government facilities, parks, etc., in response to the COVID-19 public health emergency.
* Expenses for technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety.
* Expenses for public safety measures undertaken in response to COVID-19.
* Expenses for quarantining individuals.
* Expenses associated with COVID-19 contact tracing.
* Food delivery to vulnerable populations to enable compliance with COVID-19 public health precautions.
* Expenses to facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
* Expenses of providing paid sick and paid family and medical leave to public employees who are infected/directly impacted to enable compliance with COVID-19 public health precautions. Full costs are eligible despite leave being in previously approved budget.
* COVID-19-related expenses of maintaining correctional facilities and jails, including as related to sanitation and improvement of social distancing measures, to enable compliance with COVID-19 public health precautions.
* Expenses for care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions.

*Personnel (updated October 1, 2020)*

Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency are allowable. The U.S. Treasury has indicated that the full amount of payroll and benefits for substantially dedicated employees may be covered using the funds. In addition, the U.S. Treasury has not defined what “substantially dedicated” means and requires each jurisdiction to maintain documentation of the “substantially dedicated” conclusion with respect to employees. For our state-level purposes, we are sharing that OBM generally defines a benchmark for identifying substantial dedication to be a contribution of 50% or more of time. Jurisdictions are welcome to follow this benchmark or not; it is up to each jurisdiction to define its own thresholds of substantial dedication and to document the justification for that decision.

Public safety and public health personnel are “presumed” for administrative convenience to be substantially dedicated unless the chief executive determines that specific circumstances indicate otherwise. Treasury has provided an administrative accommodation for “presumed” public safety and public health employees indicating these employees which meet the substantially dedicated test are considered substantially different use, thus allowing for previously budgeted personnel to be eligible to be charged to the CRF. The U.S. Treasury defined the “presumed” public safety and public health positions that are eligible for the accommodation as follows:

* Public Safety positions include:
  + Police officers, sheriffs, and deputy sheriffs; firefighters; emergency medical responders; correctional and detention officers; and those who directly support such employees such as dispatchers and supervisory personnel.
* Public Health positions include:
  + Employees involved in providing medical and other health services to patients and supervisory personnel, including medical staff assigned to schools, prisons, and other such institutions, and other support services essential for patient care (e.g. laboratory technicians) as well as employees of public health departments directly engaged in matters related to public health and related supervisory personnel.

Public safety, public health, health care, human services, and similar employees that are not substantially dedicated but have some time dedicated to mitigating or responding to COVID-19 may allocate specific time spent to the funds as tracked. Health care, human services, and similar employees who are substantially dedicated to mitigating or responding to the public health emergency are not granted a presumption by the U.S. Treasury. These employees can qualify for 100% of their payroll but are required to have documentation such as timesheets demonstrating substantial dedication through activities related specifically to the response or mitigation of COVID-19. In addition, personnel that were diverted to a substantially different use due entirely to the COVID-19 public health emergency and are supporting the response to COVID-19 are allowable. This could mean the repurpose of positions who would have been furloughed or laid off (in other words were underutilized due to COVID-19) to perform previously unbudgeted functions substantially dedicated to mitigating or responding to the COVID-19 public health emergency.

This payroll topic continues to be clarified by officials from the U.S. Department of Treasury and the U.S. Department of Treasury Office of Inspector General. Future federal guidance may continue to clarify these requirements. OBM continues to recommend jurisdictions maintain detailed documentation about decisions to use the CRF for employee payroll.

*Equipment*

* Expenses to improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions.
* Equipment and lease costs if previously unbudgeted and consistent with other criteria.

*Economic Support*

* Small business assistance related to required and/or voluntary closures and the expenditures related to providing these programs.
* Increased workers compensation related to expanded coverage due to COVID-19.
* Unemployment insurance costs incurred by the Recipient as an employer.
* Financial assistance to individuals and families directly impacted by a loss of income due to COVID-19
  + Could include payment of overdue rent and mortgage to avoid eviction or foreclosure, unforeseen costs for funerals, or other emergency individual needs.

**Prohibited Use of Funds**

* Revenue replacement/forgone revenue including unpaid property taxes and utility fees. Expenses covered by business interruption insurance or reimbursed through other federal aid received in response to COVID-19.
* Expenses that have been or will be reimbursed under any other federal program.
* Any costs, including indirect, administrative, and payroll, that were already in the most recently approved budget as of March 27th. *(Note: Previously budgeted personnel expenses that are considered substantially different use may be allowable)*
* Personnel expenses for employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19. *(Note: there can be instances when personnel expenses for employees who are not substantially dedicated to mitigating or responding to COVID-19 are allowable, including (1) public safety, public health, health care, human services, and similar employees that are not substantially dedicated but have some time dedicated to mitigating or responding to COVID-19 may allocate specific time spent to the funds as tracked and (2) personnel that were diverted to a substantially different use due entirely to the COVID-19 public health emergency and are supporting the response to COVID-19 are allowable)*
* Personnel costs of private employees paid directly (grants or loans to private employers may be allowed to cover this).
* Workforce bonuses, this prohibition does not include hazard pay or overtime.
* Severance Pay.
* Medicaid Match.
* Property tax assistance, some exceptions may be made if assistance is provided to individuals who have been economically impacted by COVID-19 to prevent foreclosures.
* Prepayments on contracts related to COVID-19, unless this is part of the normal policies and procedures.
* Damages covered by insurances.
* Reimbursement to donors for donated items or services.
* Legal settlements.

*(Source: Ohio Office of Budget and Management (OBM))*

**Passed through another local government**

**This section should also contain program specific information for Activities Allowed and Unallowed that are applicable to the CRF program contained within the individual grant application, agreement, and policies. This is particularly important for CRF programs as more entities may be acting as pass-through entities with additional requirements. Include any additional requirements and delete this yellow highlighted text. Be sure to indicate the source of your information. If no additional requirements are noted, indicate as such.**

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

### Audit Objectives and Control Testing

[**See here for the OMB Supplement Audit Objectives and Compliance Requirements**](Activities_Allowed_or_Unallowed_Audit_Objectives.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

### Suggested Audit Procedures – Compliance

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| 1. Identify the types of activities which are either specifically allowed or prohibited by the laws, regulations, and the provisions of the contract or grant agreements pertaining to the program.  2. When allowability is determined based upon summary level data, perform procedures to verify that:  a. Activities were allowable.  b. Individual transactions were properly classified and accumulated into the activity total.  3. When allowability is determined based upon individual transactions, select a sample of transactions and perform procedures to verify that the transaction was for an allowable activity.  **CFAE Note:**  Testing should clearly indicate that auditors tested expenditures against the three prong requirement. Specifically, auditors should document whether each expenditure tested was:   1. A necessary expenditure incurred due to the public health emergency with respect to COVID–19; 2. Not accounted for in the entity’s most recently approved budget as of March 27, 2020; and 3. Incurred during the period that begins on March 1, 2020; and ends on December 31, 2021.   4. The auditor should be alert for large transfers of funds from program accounts which may have been used to fund unallowable activities. |

### Audit Implications Summary

|  |
| --- |
| **Audit Implications (adequacy of the system and controls, and the effect on sample size, significant deficiencies / material weaknesses, material non-compliance and management letter comments)** |
| 1. **Results of Test of Controls: (including material weaknesses, significant deficiencies and management letter items)** 2. **Assessment of Control Risk:** 3. **Effect on the Nature, Timing, and Extent of Compliance (Substantive Test) including Sample Size:** 4. **Results of Compliance (Substantive Tests) Tests:** 5. **Questioned Costs: Actual \_\_\_\_\_\_\_\_\_\_ Projected \_\_\_\_\_\_\_\_\_\_** |

## B. ALLOWABLE COSTS/COST PRINCIPLES

**Federal awarding agencies adopted/implemented the Uniform Guidance in 2 CFR part 200. The OMB guidance is directed to Federal agencies and, by itself, does not establish regulatory requirements binding on non-federal entities. Throughout the FACCR 2 CFR part 200 has been referenced, however in determining compliance auditors need to refer the applicable agency codification of 2 CFR Part 200. Auditors should review this** [**link**](Agency%20Adoption%20of%20the%20UG%20and%20Example%20Citations.pdf) **for a full discussion of agency adoption of the UG and how to cite non-compliance exceptions. Auditors will need to start with the agency codification of the UG when citing exceptions.**

### Applicability of Cost Principles

**Important Note:** For a cost to be allowable, it must (1) be for a purpose the specific award permits and (2) fall within 2 CFR 200 subpart E Cost Principles. These two criteria are roughly analogous to classifying a cost by both program/function and object. That is, the grant award generally prescribes the allowable program/function while 2 CFR 200 subpart E prescribes allowable object cost categories and restrictions that may apply to certain object codes of expenditures.

For example, could a government use an imaginary Homeland Security grant to pay OP&F pension costs for its police force? To determine this, the client (and we) would look to the grant agreement to see if police activities (security of persons and property function cost classification) met the program objectives. Then, the auditor would look to Subpart E (provisions for selected items of cost §200.420-200.475) to determine if pension costs (an object cost classification) are permissible. (200.431(g) states they are allowable, with certain provisions, so we would need to determine if the auditee met the provisions.) Both the client and we should look at 2 CFR 200 subpart E even if the grant agreement includes a budget by object code approved by the grantor agency. Also keep in mind that granting agencies have codified 2 CFR 200 and some agencies have been granted exceptions to provisions within 2 CFR 200.

*(Source: AOS CFAE)*

The cost principles in [2 CFR part 200, subpart E](2CFR200_Subpart%20E.PDF) (Cost Principles), prescribe the cost accounting requirements associated with the administration of Federal awards by:

1. States, local governments and Indian tribes
2. Institutions of higher education (IHEs)
3. Nonprofit organizations

As provided in [2 CFR section 200.101](2CFR200.101.pdf), the cost principles requirements apply to all Federal awards with the exception of grant agreements and cooperative agreements providing food commodities; agreements for loans, loan guarantees, interest subsidies, insurance; and programs listed in [2 CFR section 200.101(e)](2CFR200.101(e).pdf) (see [Appendix I](2CFR200_APPENDIX_I.pdf) of this Supplement). Federal awards administered by publicly owned hospitals and other providers of medical care are exempt from 2 CFR part 200, subpart E, but are subject to the requirements [45 CFR part 75, Appendix IX](45CFR75_Appendix_IX.pdf), the Department of Health and Human Services (HHS) implementation of 2 CFR part 200. The cost principles applicable to a non-Federal entity apply to all Federal awards received by the entity, regardless of whether the awards are received directly from the Federal awarding agency or indirectly through a pass-through entity. For this purpose, Federal awards include cost-reimbursement contacts under the Federal Acquisition Regulation (FAR). The cost principles do not apply to Federal awards under which a non-Federal entity is not required to account to the Federal awarding agency or pass-through entity for actual costs incurred.

**Source of Governing Requirements**

The requirements for allowable costs/cost principles are contained in [2 CFR part 200, subpart E](2CFR200_Subpart%20E.PDF), program legislation, Federal awarding agency regulations, and the terms and conditions of the award.

The requirements for the development and submission of indirect (facilities and administration (F&A)) cost rate proposals and cost allocation plans (CAPs) are contained in [2 CFR part 200, Appendices III-VII](2CFR200_Appendix_III_thru_VII.pdf) as follows:

* Appendix III to Part 200—Indirect (F&A) Const Identification and Assignment and Rate Determination for Institutions of Higher Education (IHEs)
* Appendix IV to Part 200—Indirect (F&A) Costs Identification and Assignment, and Rate Determination for Nonprofit Organizations
* Appendix V to Part 200—State/Local Government-Wide Central Service Cost Allocation Plans
* Appendix VI to Part 200—Public Assistance Cost Allocation Plans
* Appendix VII to Part 200—States and Local Government and Indian Tribe Indirect Cost Proposals

Except for the requirements identified below under “Basic Guidelines,” which are applicable to all types of non-Federal entities, this compliance requirement is divided into sections based on the type of non-Federal entity. The differences that exist are necessary because of the nature of the non-Federal entity organizational structures, programs administered, and breadth of services offered by some non-Federal entities and not others.

*(Source: 2021 OMB Compliance Supplement Part 3)*

**Agency Codification Adjustments/Exceptions:**

The most recent compilation of agency additions and exceptions is provided on the CFO website here <https://www.cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf>. However, this list is only updated through 12/2014. AOS evaluated agency exceptions through August 2019. For further evaluation of exceptions, AOS auditors only will need to reference our internal AOS evaluation process [at the following link](http://portal/BP/Intranet/Auditor%20Resources%20File%20Bin/UG%20Exception%20Evaluation%20by%20Federal%20Agency.xlsx).

**Basic Guidelines**

Except where otherwise authorized by statute, cost must meet the following general criteria in order to be allowable under Federal awards;

1. Be necessary and reasonable for the performance of the Federal award and be allocable thereto under the principles in [2 CFR part 200, subpart E](2CFR200_subpart%20E.PDF).

2. Conform to any limitations or exclusions set forth in 2 CFR part 200, subpart E or in the Federal award as to types or amount of cost items.

3. Be consistent with policies and procedures that apply uniformly to both federally financed and other activities of the non-Federal entity.

4. Be accorded consistent treatment. A cost may not be assigned to a Federal award as a direct cost if any other cost incurred for the same purpose in like circumstances has been allocated to the Federal award as an indirect cost.

5. Be determined in accordance with generally accepted accounting principles (GAAP), except, for State and local governments and Indian tribes only, as otherwise provided for in 2 CFR part 200.

6. Not be included as a cost or used to meet cost-sharing or matching requirements of any other federally financed program in either the current or a prior period.

7. Be adequately documented.

**Selected Items of Cost**

*Note that the 2 CFR was revised on August 12, 2020 and the revisions are effective November 13, 2020. Auditors are reminded to check the proper and applicable versions of 2 CFR 200 depending on the occurrence date of the transactions reviewed. The August revisions are reflected in all references in this section.*

[2 CFR sections 200.420 through 200.476](2CFR200.420_thru_200.476.pdf) provide the principles to be applied in establishing the allowability of certain items of cost, in addition to the basic considerations identified above. These principles apply whether or not a particular item of cost is treated as a direct cost or indirect (F&A) cost. Failure to mention a particular item of cost is not intended to imply that it is either allowable or unallowable; rather, determination of allowability in each case should be based on the treatment provided for similar or related items of cost and the principles described in [2 CFR sections 200.402 through 200.411](2CFR200.402_thru_411.pdf).

[List of Selected Items of Cost Contained in 2 CFR Part 200](Selected_Items_of_Cost_Part_3_ComplianceSupplement.pdf)

*(Source: 2021 OMB Compliance Supplement Part 3)*

**Part 4 OMB Program Specific Requirements**

As a direct payment for specified use, these funds are considered federal financial assistance, but are not provided pursuant to a grant agreement. In accordance with [2 CFR section 200.101(b)](2CFR200.101.pdf) regarding applicability only certain provisions of the Code of Federal Regulations, Title 2, Subtitle A, Chapter II, Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (“Uniform Guidance”– 2 CFR Part 200) apply to the Fund and these provisions include the following:

1. Subpart A-Definitions;
2. Subpart B-General provisions except for 2 CFR sections 200.111–113;
3. 2 CFR section 200.303 regarding internal controls;
4. 2 CFR sections 200.330–332 regarding subrecipient monitoring and management; and
5. Subpart F – Audit Requirements

All other provisions of 2 CFR Part 200 are not applicable to the Fund.

While 2 CFR Part 200, Subpart E, cost principles do not apply to the Fund, auditors should use Treasury’s guidance and [FAQs published in the Federal Register](86FR4182.pdf) as the criteria when testing the allowability of costs under the Fund. For example, while not exhaustive, in the context of real property improvements and acquisitions and equipment acquisitions (which includes vehicles) this means that the acquisition itself must be necessary due to the COVID-19 public health emergency. In particular, a government must (i) determine that it is not able to meet the need arising from the public health emergency in a cost-effective manner by leasing property or equipment or by improving property already owned and (ii) maintain documentation to support this determination. Likewise, an improvement, such as the installation of modifications to permit social distancing, would need to be determined to be necessary to address the COVID-19 public health emergency (see Treasury’s FAQ No. A.58 for more detail on real property improvements and acquisitions and equipment acquisitions).

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

**Written Procedure Requirements:**

[2 CFR 200.302](2CFR200.302.pdf)(b)(7) requires written procedures for determining the allowability of costs in accordance with Subpart E-Cost Principles of this part and the terms and conditions of the Federal award.

[2 CFR 200.430](2CFR200.430.pdf) states that costs of compensation are allowable to the extent that they satisfy the specific requirements of this part, and that the total compensation for individual employees: (1) Is reasonable for the services rendered and conforms to the established written policy of the non-Federal entity consistently applied to both Federal and non-Federal activities; (2) Follows an appointment made in accordance with a non-Federal entity's laws and/or rules or written policies and meets the requirements of Federal statute, where applicable; and (3) Is determined and supported as provided in paragraph (i) of this section, Standards for Documentation of Personnel Expenses, when applicable.

[2 CFR 200.431](2CFR200.431.pdf) requires established written leave policies if the entity intends to pay fringe benefits.

[2 CFR 200.464](2CFR200.464.pdf)(a)(2) requires reimbursement of relocation costs to employees be in accordance with an established written policy must be consistently followed by the employer.

[2 CFR 200.475](2CFR200.475.pdf) requires reimbursement and/or charges to be consistent with those normally allowed in like circumstances in the non-Federal entity's non-federally-funded activities and in accordance with non-Federal entity's written travel reimbursement policies.

*(Source: CFAE/eCFR)*

### Additional Program Specific Information

CFAE NOTE: Similar to payments made to contractors, disbursements made to beneficiaries are subject to testing as part of this compliance requirement. In order to determine if payments to beneficiaries are allowable, auditors should test to ensure 1) the beneficiary was eligible under the program guidelines, 2) the expenditure met the three-prong requirements of CRF (included in the OMB requirements above), and 3) the required support for the payment have been provided. (See the SEFA Completeness document as well as Section M of this FACCR for additional information regarding beneficiaries.)

*(Source: AOS CFAE)*

**Passed through the Ohio Office of Budget and Management via HB 481 and HB 614**

**Permissible Use of Funds**

The following list of specific permissible uses is not intended to be comprehensive:

*Medical Expenses*

* COVID-19-related expenses of public hospitals, clinics, and similar facilities.
* Expenses of establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity, including related construction costs.
* Costs of providing COVID-19 testing, including serological testing.
* Emergency medical response expenses related to COVID-19, including emergency medical transportation.
* Expenses for establishing and operating public telemedicine capabilities for COVID-19- related treatment.
* Personal Protective Equipment to address the current COVID-19 pandemic.

*Public Health and Related Measures*

* Expenses for communication and enforcement by governments for public health orders related to COVID-19.
* Expenses for acquisition, distribution, and disposal of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers in connection with the COVID-19 public health emergency.
* Expenses for disinfection of public areas and other facilities, e.g., nursing homes, government facilities, parks, etc., in response to the COVID-19 public health emergency.
* Expenses for technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety.
* Expenses for public safety measures undertaken in response to COVID-19.
* Expenses for quarantining individuals.
* Expenses associated with COVID-19 contact tracing.
* Food delivery to vulnerable populations to enable compliance with COVID-19 public health precautions.
* Expenses to facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
* Expenses of providing paid sick and paid family and medical leave to public employees who are infected/directly impacted to enable compliance with COVID-19 public health precautions. Full costs are eligible despite leave being in previously approved budget.
* COVID-19-related expenses of maintaining correctional facilities and jails, including as related to sanitation and improvement of social distancing measures, to enable compliance with COVID-19 public health precautions.
* Expenses for care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions.

*Personnel (updated October 1, 2020)*

Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency are allowable. The U.S. Treasury has indicated that the full amount of payroll and benefits for substantially dedicated employees may be covered using the funds. In addition, the U.S. Treasury has not defined what “substantially dedicated” means and requires each jurisdiction to maintain documentation of the “substantially dedicated” conclusion with respect to employees. For our state-level purposes, we are sharing that OBM generally defines a benchmark for identifying substantial dedication to be a contribution of 50% or more of time. Jurisdictions are welcome to follow this benchmark or not; it is up to each jurisdiction to define its own thresholds of substantial dedication and to document the justification for that decision.

Public safety and public health personnel are “presumed” for administrative convenience to be substantially dedicated unless the chief executive determines that specific circumstances indicate otherwise. Treasury has provided an administrative accommodation for “presumed” public safety and public health employees indicating these employees which meet the substantially dedicated test are considered substantially different use, thus allowing for previously budgeted personnel to be eligible to be charged to the CRF. The U.S. Treasury defined the “presumed” public safety and public health positions that are eligible for the accommodation as follows:

* Public Safety positions include:
  + Police officers, sheriffs, and deputy sheriffs; firefighters; emergency medical responders; correctional and detention officers; and those who directly support such employees such as dispatchers and supervisory personnel.
* Public Health positions include:
  + Employees involved in providing medical and other health services to patients and supervisory personnel, including medical staff assigned to schools, prisons, and other such institutions, and other support services essential for patient care (e.g. laboratory technicians) as well as employees of public health departments directly engaged in matters related to public health and related supervisory personnel.

Public safety, public health, health care, human services, and similar employees that are not substantially dedicated but have some time dedicated to mitigating or responding to COVID-19 may allocate specific time spent to the funds as tracked. Health care, human services, and similar employees who are substantially dedicated to mitigating or responding to the public health emergency are not granted a presumption by the U.S. Treasury. These employees can qualify for 100% of their payroll but are required to have documentation such as timesheets demonstrating substantial dedication through activities related specifically to the response or mitigation of COVID-19. In addition, personnel that were diverted to a substantially different use due entirely to the COVID-19 public health emergency and are supporting the response to COVID-19 are allowable. This could mean the repurpose of positions who would have been furloughed or laid off (in other words were underutilized due to COVID-19) to perform previously unbudgeted functions substantially dedicated to mitigating or responding to the COVID-19 public health emergency.

This payroll topic continues to be clarified by officials from the U.S. Department of Treasury and the U.S. Department of Treasury Office of Inspector General. Future federal guidance may continue to clarify these requirements. OBM continues to recommend jurisdictions maintain detailed documentation about decisions to use the CRF for employee payroll.

*Equipment*

* Expenses to improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions.
* Equipment and lease costs if previously unbudgeted and consistent with other criteria.

*Economic Support*

* Small business assistance related to required and/or voluntary closures and the expenditures related to providing these programs.
* Increased workers compensation related to expanded coverage due to COVID-19.
* Unemployment insurance costs incurred by the Recipient as an employer.
* Financial assistance to individuals and families directly impacted by a loss of income due to COVID-19
  + Could include payment of overdue rent and mortgage to avoid eviction or foreclosure, unforeseen costs for funerals, or other emergency individual needs.

**Prohibited Use of Funds**

* Revenue replacement/forgone revenue including unpaid property taxes and utility fees. Expenses covered by business interruption insurance or reimbursed through other federal aid received in response to COVID-19.
* Expenses that have been or will be reimbursed under any other federal program.
* Any costs, including indirect, administrative, and payroll, that were already in the most recently approved budget as of March 27th. *(Note: Previously budgeted personnel expenses that are considered substantially different use may be allowable)*
* Personnel expenses for employees whose work duties are not substantially dedicated to mitigating or responding to COVID-19. *(Note: there can be instances when personnel expenses for employees who are not substantially dedicated to mitigating or responding to COVID-19 are allowable, including (1) public safety, public health, health care, human services, and similar employees that are not substantially dedicated but have some time dedicated to mitigating or responding to COVID-19 may allocate specific time spent to the funds as tracked and (2) personnel that were diverted to a substantially different use due entirely to the COVID-19 public health emergency and are supporting the response to COVID-19 are allowable)*
* Personnel costs of private employees paid directly (grants or loans to private employers may be allowed to cover this).
* Workforce bonuses, this prohibition does not include hazard pay or overtime.
* Severance Pay.
* Medicaid Match.
* Property tax assistance, some exceptions may be made if assistance is provided to individuals who have been economically impacted by COVID-19 to prevent foreclosures.
* Prepayments on contracts related to COVID-19, unless this is part of the normal policies and procedures.
* Damages covered by insurances.
* Reimbursement to donors for donated items or services.
* Legal settlements.

*(Source: Ohio Office of Budget and Management (OBM))*

**Passed through another local government**

**This section should also contain program specific information for Allowed Costs/Cost Principles that are applicable to the CRF program contained within the individual grant application, agreement, and policies. This is particularly important for CRF programs as more entities may be acting as pass-through entities with additional requirements. Include any additional requirements and delete this yellow highlighted text. Be sure to indicate the source of your information. If no additional requirements are noted, indicate as such.**

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

### Indirect Cost Rate

Except for those non-Federal entities described in [2 CFR part 200, Appendix VII, paragraph D.1.b](2CFR200_Appendix_VII_Para_D(1)(b).pdf), if a non-Federal entity has never received a negotiated indirect cost rate, it may elect to charge a de minimis rate of 10 percent of modified total direct costs (MTDC). Effective on November 12, 2020, any non-federal entity can use the de minimus rate. Such a rate may be used indefinitely or until the non-Federal entity chooses to negotiate a rate, which the non-Federal entity may do at any time. If a non-Federal entity chooses to use the de minimis rate, that rate must be used consistently for all of its Federal awards. Also, as described in [2 CFR section 200.403](2CFR200.403.pdf), costs must be consistently charged as either indirect or direct, but may not be double charged or inconsistently charged as both. In accordance with [2 CFR section 200.400(g)](2CFR200.400(g).pdf), a non-Federal entity may not earn or keep any profit resulting from Federal financial assistance, unless explicitly authorized by the terms and conditions of the award. A non-federal entity can always choose to charge the federal award less than the negotiated rates or the de minimis rate.

*(Source: 2021 OMB Compliance Supplement Part 3)*

#### Audit Objectives (Deminimis Indirect Cost Rate) and Control Testing Procedures

[**See here for the OMB Supplement Audit Objectives and Compliance Requirements**](Allowable%20Costs%20audit%20objectives_deminimis%20indirect%20cost%20rate.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

#### Suggested Compliance Audit Procedures – De Minimis Indirect Cost Rate

**Note**: The following subsections identify requirements specific to each type of non-Federal entity.

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| The following suggested audit procedures apply to any non-Federal entity using a de minimis indirect cost rate, whether as a recipient or a subrecipient. None of the procedures related to indirect costs in the sections organized by type of non-Federal entity apply when a de minimis rate is used.  **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| 1. Determine that the non-Federal entity has not previously claimed indirect costs on the basis of a negotiated rate. Auditors are required to test only for the three fiscal years immediately prior to the current audit period.  2. Test a sample of transactions for conformance with [2 CFR section 200.414(f)](2CFR200.414(f).pdf).  a Select a sample of claims for reimbursement of indirect costs and verify that the de minimis rate was used consistently, the rate was applied to the appropriate base, and the amounts claimed were the product of applying the rate to a modified total direct costs base.  b Verify that the costs included in the base are consistent with the costs that were included in the base year, i.e., verify that current year modified total direct costs do not include costs items that were treated as indirect costs in the base year.  3. For a non-Federal entity conducting a single function, which is predominately funded by Federal awards, determine whether use of the de minimis indirect cost rate resulted in the non-Federal entity double-charging or inconsistently charging costs as both direct and indirect. |

**2 CFR PART 200**

### Cost Principles for States, Local Governments and Indian Tribes

**Introduction**

[2 CFR part 200, subpart E](2CFR200_subpart%20E.PDF), and [Appendices III-VII](2CFR200_Appendix_III_thru_VII.pdf) establish principles and standards for determining allowable direct and indirect costs for Federal awards. This section is organized into the following areas of allowable costs: States and Local Government and Indian Tribe Costs (Direct and Indirect); State/Local Government Central Service Costs; and State Public Assistance Agency Costs.

In addition the 2 CFR 200 was revised on August 13, 2020. Section 200.216, Prohibition on certain telecommunication and video surveillance services or equipment, is effective on August 13, while other revisions are effective November 12, 2020. Auditors are reminded to check the proper and applicable versions of 2 CFR 200 depending on the occurrence date of the transactions reviewed.

***Cognizant Agency for Indirect Costs***

[2 CFR part 200, Appendix V, paragraph F](2CFR200_Appendix_V_Para_F.pdf), provides the guidelines to use when determining the Federal agency that will serve as the cognizant agency for indirect costs for States, local governments, and Indian tribes. References to the “cognizant agency for indirect costs” are not equivalent to the cognizant agency for audit responsibilities, which is defined in [2 CFR section 200.1\_Cognizant\_Agency](2CFR200.1_Cognizant_Agency.PDF).

For indirect cost rates and departmental indirect cost allocation plans, the cognizant agency is generally the Federal agency with the largest value of direct Federal awards (excluding pass-through awards) with a governmental unit or component, as appropriate. In general, unless different arrangements are agreed to by the concerned Federal agencies or described in 2 CFR part 200, Appendix V, paragraph F, the cognizant agency for central service cost allocation plans is the Federal agency with the largest dollar value of total Federal awards (including pass-through awards) with a governmental unit.

Once designated as the cognizant agency for indirect costs, the Federal agency remains so for a period of 5 years. In addition, 2 CFR part 200, Appendix V, paragraph F, lists the cognizant agencies for certain specific types of plans and the cognizant agencies for indirect costs for certain types of governmental entities. For example, HHS is cognizant for all public assistance and State-wide cost allocation plans for all States (including the District of Columbia and Puerto Rico), State and local hospitals, libraries, and health districts and the Department of the Interior (DOI) is cognizant for all Indian tribal governments, territorial governments, and State and local park and recreational districts.

*(Source: 2021 OMB Compliance Supplement Part 3)*

#### Audit Objectives/Compliance Requirements and Control Tests Allowable Costs –– Direct and Indirect Costs

The individual State/local government/Indian tribe departments or agencies (also known as “operating agencies”) are responsible for the performance or administration of Federal awards. In order to receive cost reimbursement under Federal awards, the department or agency usually submits claims asserting that allowable and eligible costs (direct and indirect) have been incurred in accordance with [2 CFR part 200, subpart E](2CFR200_subpart%20E.PDF).

The indirect cost rate proposal (ICRP) provides the documentation prepared by a State/local government/Indian tribe department or agency to substantiate its request for the establishment of an indirect cost rate. The indirect costs include (1) costs originating in the department or agency of the governmental unit carrying out Federal awards, and (2) for States and local governments, costs of central governmental services distributed through the State/local government-wide central service CAP that are not otherwise treated as direct costs. The ICRPs are based on the most current financial data and are used to either establish predetermined, fixed, or provisional indirect cost rates or to finalize provisional rates (for rate definitions refer to [2 CFR part 200, Appendix VII, paragraph B](2CFR200_Appendix_VII_Para_B.pdf)).

*(Source: 2021 OMB Compliance Supplement Part 3)*

[**See here for the OMB Supplement Audit Objectives and Compliance Requirements**](Allowable%20Costs_DirectandIndirect_ComplianceReq_Auditobjectives.pdf)

**Additional Control Test Objectives for Written Procedures**

When documenting and identifying the key control(s) in place to address the compliance requirement, consider if the client has written procedures to document the control process.

* UG requires written policies for the requirements outlined in [2 CFR 200.302](2CFR200.302.pdf)(b)(7), [2 CFR 200.430](2CFR200.430.pdf), [2 CFR 200.431](2CFR200.431.pdf), [2 CFR 200.464](2CFR200.464.pdf)(a)(2), and [2 CFR 200.475](2CFR200.475.pdf)*.*
* Document whether the non-Federal entity established written procedures consistent with the following requirements:
  + 2 CFR 200.302(b)(7) for determining the allowability of costs in accordance with Subpart E-Cost Principles.
  + 2 CFR 200.430 for allowability of compensation costs.
  + 2 CFR 200.431 for written leave policies.
  + 2 CFR 200.464(a)(2) for reimbursement of relocation costs.
  + 2 CFR 200.475 for travel reimbursements.
* It is auditor judgment how to report instances where the entity either lacks having a written policy or their written policy is insufficient to meet the requirements of 2 CFR 200.302(b)(7), 2 CFR 200.430, 2 CFR 200.431, 2 CFR 200.464(a)(2), and 2 CFR 200.475.
  + While auditors would normally use a written policy as the basis for the compliance control, there could be other key controls in place to ensure program compliance.
  + The lack of a policy would be noncompliance, which could rise to the level of material noncompliance and even a control deficiency (SD / MW) if there were underlying internal control deficiencies.
    - If there are key controls in place operating effectively, AOS auditors would report the lack of the required UG policy as a management letter citation. However, in subsequent audits, evaluate if the noncompliance should be elevated if not adopted. Written policies aid in consistency and adherence to requirements strengthening internal control processes.

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

#### Suggested Compliance Audit Procedures – Direct and Indirect Costs

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| ***Direct Costs***  Test a sample of transactions for conformance with the following criteria contained in 2 CFR part 200, as applicable:   1. If the auditor identifies unallowable direct costs, the auditor should be aware that “directly associated costs” might have been charged. Directly associated costs are costs incurred solely as a result of incurring another cost, and would not have been incurred if the other cost had not been incurred. For example, fringe benefits are “directly associated” with payroll costs. When an unallowable cost is incurred, directly associated costs are also unallowable. 2. Costs were approved by the Federal awarding agency, if required (see the above table (Selected Items of Cost, Exhibit 1) or [2 CFR section 200.407](2CFR200.407.pdf) for selected items of cost that require prior written approval). 3. Costs did not consist of improper payments, including (1) payments that should not have been made or that were made in incorrect amounts (including overpayments and underpayments) under statutory, contractual, administrative, or other legally applicable requirements; (2) payments that do not account for credit for applicable discounts; (3) duplicate payments; (4) payments that were made to an ineligible party or for an ineligible good or service; and (5) payments for goods or services not received (except for such payments where authorized by law).   d. Costs were necessary and reasonable for the performance of the Federal award and allocable under the principles of [2 CFR part 200, subpart E](2CFR200_subpart%20E.PDF).  e. Costs conformed to any limitations or exclusions set forth in 2 CFR part 200, subpart E, or in the Federal award as to types or amount of cost items.  f. Costs were consistent with policies and procedures that apply uniformly to both federally financed and other activities of the State/local government/Indian tribe department or agency.  g. Costs were accorded consistent treatment. Costs were not assigned to a Federal award as a direct cost if any other cost incurred for the same purpose in like circumstances was allocated to the Federal award as an indirect cost.  h. Costs were not included as a cost of any other federally financed program in either the current or a prior period.  i. Costs were not used to meet the cost-sharing or matching requirements of another Federal program, except where authorized by Federal statute.  j. Costs were adequately documented.  ***Indirect Costs***  a. If the State/local department or agency is not required to submit an ICRP and related supporting documentation, the auditor should consider the risk of the reduced level of oversight in designing the nature, timing, and extent of compliance testing.  b. *General Audit Procedures* – The following procedures apply to charges to cost pools that are allocated wholly or partially to Federal awards or used in formulating indirect cost rates used for recovering indirect costs under Federal awards.  (1) Test a sample of transactions for conformance with:  (a) The criteria contained in the “Basic Considerations” section of [2 CFR sections 200.402 through 200.411](2CFR200.402_thru_411.pdf).  (b) The principles to establish allowability or unallowability of certain items of cost ([2 CFR sections 200.420 through 200.476](2CFR200.420_thru_200.476.pdf)).  Note: While several selected items of cost are included in Exhibit 1 , one item to note is *Compensation - Personnel Services*, (formally referred to as Time and Effort/Semi Annual Certification). See [2 CFR 200.430](2CFR200.430.pdf).  (2) If the auditor identifies unallowable costs, the auditor should be aware that directly associated costs might have been charged. Directly associated costs are costs incurred solely as a result of incurring another cost, and would have not been incurred if the other cost had not been incurred. When an unallowable cost is incurred, directly associated costs are also unallowable. For example, occupancy costs related to unallowable general costs of government are also unallowable.  c. *Special Audit Procedures for State, Local Government, and Indian Tribe ICRPs (see also the AOS discussion on* [*testing the ICRP*](Testing%20the%20ICRP%20discussion.pdf)*)*  (1) Verify that the ICRP includes the required documentation in accordance with [2 CFR part 200, Appendix VII, paragraph D](2CFR200_Appendix_VII_Para_D.pdf).  (2) *Testing of the ICRP* – There may be a timing consideration when the audit is completed before the ICRP is completed. In this instance, the auditor should consider performing interim testing of the costs charged to the cost pools and the allocation bases (e.g., determine from management the cost pools that management expects to include in the ICRP and test the costs for compliance with 2 CFR part 200). Should there be audit exceptions, corrective action may be taken earlier to minimize questioned costs. In the next year’s audit, the auditor should complete testing and verify management’s representations against the completed ICRP.  The following procedures are some acceptable options the auditor may use to obtain assurance that the costs collected in the cost pools and the allocation methods used are in compliance with [2 CFR part 200, subpart E](2CFR200_subpart%20E.PDF):  (a) *Indirect Cost Pool* – Test the indirect cost pool to ascertain if it includes only allowable costs in accordance with 2 CFR part 200.  (i) Test to ensure that unallowable costs are identified and eliminated from the indirect cost pool (e.g., capital expenditures, general costs of government).  (ii) Identify significant changes in expense categories between the prior ICRP and the current ICRP. Test a sample of transactions to verify the allowability of the costs.  (iii) Trace the central service costs that are included in the indirect cost pool to the approved State/local government or central service CAP or to plans on file when submission is not required.  (b) *Direct Cost Base* – Test the methods of allocating the costs to ascertain if they are in accordance with the applicable provisions of 2 CFR part 200 and produce an equitable distribution of costs.  (i) Determine that the proposed base(s) includes all activities that benefit from the indirect costs being allocated.  (ii) If the direct cost base is not limited to direct salaries and wages, determine that distorting items are excluded from the base. Examples of distorting items include capital expenditures, flow-through funds (such as benefit payments), and subaward costs in excess of $25,000 per subaward.  (iii) Determine the appropriateness of the allocation base (e.g., salaries and wages, modified total direct costs).  (c) *Other Procedures*  (i) Examine the records for employee compensation to ascertain if they are accurate, and the costs are allowable and properly allocated to the various functional and programmatic activities to which salary and wage costs are charged. (Refer to [2 CFR section 200.430](2CFR200.430.pdf) for additional information on support of salaries and wages.)  (ii) For an ICRP using the multiple allocation base method, test statistical data (e.g., square footage, audit hours, salaries and wages) to ascertain if the proposed allocation or rate bases are reasonable, updated as necessary, and do not contain any material omissions.  (3) *Testing of Charges Based Upon the ICRA* – Perform the following procedures to test the application of charges to Federal awards based upon an ICRA:  (a) Obtain and read the current ICRA and determine the terms in effect.  (b) Select a sample of claims for reimbursement and verify that the rates used are in accordance with the rate agreement, that rates were applied to the appropriate bases, and that the amounts claimed were the product of applying the rate to the applicable base. Verify that the costs included in the base(s) are consistent with the costs that were included in the base year (e.g., if the allocation base is total direct costs, verify that current-year direct costs do not include costs items that were treated as indirect costs in the base year).  (4) *Other Procedures* – No Negotiated ICRA  (a) If an indirect cost rate has not been negotiated by a cognizant agency for indirect costs, the auditor should determine whether documentation exists to support the costs. Where the auditee has documentation, the suggested general audit procedures under paragraph 3.b above should be performed to determine the appropriateness of the indirect cost charges to awards.  (b) If an indirect cost rate has not been negotiated by a cognizant agency for indirect costs, and documentation to support the indirect costs does not exist, the auditor should question the costs based on a lack of supporting documentation. |

### Allowable Costs – State/Local Government-wide Central Service Costs

Most governmental entities provide services, such as accounting, purchasing, computer services, and fringe benefits, to operating agencies on a centralized basis. Since the Federal awards are performed within the individual operating agencies, there must be a process whereby these central service costs are identified and assigned to benefiting operating agency activities on a reasonable and consistent basis. The State/local government-wide central service cost allocation plan (CAP) provides that process. ([Refer to 2 CFR part 200, Appendix V](2CFR200_Appendix_V.pdf), for additional information and specific requirements.)

The allowable costs of central services that a governmental unit provides to its agencies may be allocated or billed to the user agencies. The State/local government-wide central service CAP is the required documentation of the methods used by the governmental unit to identify and accumulate these costs, and to allocate them or develop billing rates based on them.

Allocated central service costs (referred to as Section I costs) are allocated to benefiting operating agencies on some reasonable basis. These costs are usually negotiated and approved for a future year on a “fixed-with-carry-forward” basis. Examples of such services might include general accounting, personnel administration, and purchasing. Section I costs assigned to an operating agency through the State/local government-wide central service CAP are typically included in the agency’s indirect cost pool.

Billed central service costs (referred to as Section II costs) are billed to benefiting agencies and/or programs on an individual fee-for-service or similar basis. The billed rates are usually based on the estimated costs for providing the services. An adjustment will be made at least annually for the difference between the revenue generated by each billed service and the actual allowable costs. Examples of such billed services include computer services, transportation services, self- insurance, and fringe benefits. Section II costs billed to an operating agency may be charged as direct costs to the agency’s Federal awards or included in its indirect cost pool.

*(Source: 2021 OMB Compliance Supplement Part 3)*

#### Audit Objectives/Compliance Requirements and Control Tests Allowable Costs - State/Local Government-wide Central Service Costs

[**See here for the OMB Compliance Supplement Audit Objectives and Compliance Requirements**](Allowable%20Costs_StateLocal_Govtwide_Centralservicecosts_ComplianceReq_Auditobjectives.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

#### Suggested Compliance Audit Procedures – State/Local Government-Wide Central Service Costs

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| a. For local governments that are not required to submit the central service CAP and related supporting documentation, the auditor should consider the risk of the reduced level of oversight in designing the nature, timing and extent of compliance testing.  b. *General Audit Procedures for State/Local Government-Wide Central Service CAPs* – The following procedures apply to charges to cost pools that are allocated wholly or partially to Federal awards or used in formulating indirect cost rates used for recovering indirect costs under Federal awards.  (1) Test a sample of transactions for conformance with:  (a) The criteria contained in the “Basic Considerations” section of [2 CFR part 200, subpart E](2CFR200_subpart%20E.PDF) (sections [200.402 through 200.411](2CFR200.402_thru_411.pdf)).  (b) The principles to establish allowability or unallowability of certain items of cost [(2 CFR sections 200.420 through 476](2CFR200.420_thru_200.476.pdf)).  (2) If the auditor identifies unallowable costs, the auditor should be aware that directly associated costs might have been charged. Directly associated costs are costs incurred solely as a result of incurring another cost, and would have not been incurred if the other cost had not been incurred. When an unallowable cost is incurred, directly associated costs are also unallowable. For example, occupancy costs related to unallowable general costs of government are also unallowable.  c. *Special Audit Procedures for State/Local Government-Wide Central Service CAPs*  (1) Verify that the central service CAP includes the required documentation in accordance with [2 CFR part 200 Appendix V, paragraph E](2CFR200_Appendix_V_Para_E.pdf).  (2) *Testing of the State/Local Government-Wide Central Service CAPs – Allocated Section I Costs*  (a) If new allocated central service costs were added, review the justification for including the item as Section I costs to ascertain if the costs are allowable (e.g., if costs benefit Federal awards).  (b) Identify the central service costs that incurred a significant increase in actual costs from the prior year’s costs. Test a sample of transactions to verify the allowability of the costs.  (c) Ascertain if the bases used to allocate costs are appropriate, i.e., costs are allocated in accordance with relative benefits received.  (d) Ascertain if the proposed bases include all activities that benefit from the central service costs being allocated, including all users that receive the services. For example, the State-wide central service CAP should allocate costs to all benefiting State departments and agencies, and, where appropriate, non-State organizations, such as local government agencies.  (e) Perform an analysis of the allocation bases by selecting agencies with significant Federal awards to determine if the percentage of costs allocated to these agencies has increased from the prior year. For those selected agencies with significant allocation percentage increases, ascertain if the data included in the bases are current and accurate.  (f) Verify that carry-forward adjustments are properly computed in accordance with [2 CFR part 200, Appendix V, paragraph G.3](2CFR200_Appendix_V_Para_G(3).pdf).  (3) *Testing of the State/Local Government-Wide Central Service CAPs – Billed Section II Costs*  (a) For billed central service activities accounted for in separate funds (e.g., internal service funds), ascertain if:  (i) Retained earnings/fund balances (including reserves) are computed in accordance with the cost principles;  (ii) Working capital reserves are not excessive in amount (generally not greater than 60 calendar days for cash expenses for normal operations incurred for the period exclusive of depreciation, capital costs, and debt principal costs); and  (iii) Adjustments were made when there is a difference between the revenue generated by each billed service and the actual allowable costs.  (b) Test to ensure that all users of services are billed in a consistent manner. For example, examine selected billings to determine if all users (including users outside the governmental unit) are charged the same rate for the same service.  (c) Test that billing rates exclude unallowable costs, in accordance with the cost principles and Federal statutes.  (d) Test, where billed central service activities are funded through general revenue appropriations, that the billing rates (or charges) were developed based on actual costs and were adjusted to eliminate profits.  (e) For self-insurance and pension funds, ascertain if the fund contributions are appropriate for such activities as indicated in the current actuarial report.  (f) Determine if refunds were made to the Federal Government for its share of funds transferred from the self-insurance reserve to other accounts, including imputed or earned interest from the date of the transfer. |

### Allowable Costs – State Public Assistance Agency Costs

State public assistance agency costs are (1) defined as all costs allocated or incurred by the State agency except expenditures for financial assistance, medical vendor payments, and payments for services and goods provided directly to program recipients (e.g., day care services); and (2) normally charged to Federal awards by implementing the public assistance cost allocation plan (CAP). The public assistance CAP provides a narrative description of the procedures that are used in identifying, measuring, and allocating all costs (direct and indirect) to each of the programs administered or supervised by State public assistance agencies.

[2 CFR part 200, Appendix VI, paragraph A](2CFR200_Appendix_VI_Para_A.pdf), states that, since the federally financed programs administered by State public assistance agencies are funded predominantly by HHS, HHS is responsible for the requirements for the development, documentation, submission, negotiation, and approval of public assistance CAPs. These requirements are specified in [45 CFR part 95, subpart E](45CFR95%20Subpart%20E.pdf).

Major Federal programs typically administered by State public assistance agencies include: Temporary Assistance for Needy Families (AL 93.558), Medicaid (AL 93.778), Supplemental Nutrition Assistance Program (AL 10.561), Child Support Enforcement (AL 93.563), Foster Care (AL 93.658), Adoption Assistance (AL 93.659), and Social Services Block Grant (AL 93.667).

*(Source: 2021 OMB Compliance Supplement Part 3)*

#### Audit Objectives/Compliance Requirements and Control Tests Allowable Costs - State Public Assistance Agency Costs

[**See here for the OMB Compliance Supplement Audit Objectives and Compliance Requirements**](Allowable%20Costs_State%20Public%20Assistance%20Agency%20Costs_OMB%20supplement.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

#### Suggested Compliance Audit Procedures – State Public Assistance Agency Costs

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| This may be applicable to public assistance programs at the local level  a. Since a significant amount of the costs in the public assistance CAP are allocated based on employee compensation reporting systems, it is suggested that the auditor consider the risk when designing the nature, timing, and extent of compliance testing.  b. *General Audit Procedures* – The following procedures apply to direct charges to Federal awards as well as charges to cost pools that are allocated wholly or partially to Federal awards.  (1) Test a sample of transactions for conformance with:  (a) The criteria contained in the “Basic Considerations” section of 2 CFR part 200 ([sections 200.402 through 200.411](2CFR200.402_thru_411.pdf)).  (b) The principles to establish allowability or unallowability of certain items of cost ([2 CFR sections 200.420 through 200.476](2CFR200.420_thru_200.476.pdf)).  (2) If the auditor identifies unallowable costs, the auditor should be aware that directly associated costs might have been charged. Directly associated costs are costs incurred solely as a result of incurring another cost, and would have not been incurred if the other cost had not been incurred. When an unallowable cost is incurred, directly associated costs are also unallowable. For example, occupancy costs related to unallowable general costs of government are also unallowable.  c. *Special Audit Procedures for Public Assistance CAPs*  (1) Verify that the State public assistance agency is complying with the submission requirements, i.e., an amendment is promptly submitted when any of the events identified in [45 CFR section 95.509](45CFR95.509.pdf) occur.  (2) Verify that public assistance CAP includes the required documentation in accordance with [45 CFR section 95.507](45CFR95.507.pdf).  (3) *Testing of the Public Assistance CAP* – Test the methods of allocating the costs to ascertain if they are in accordance with the applicable provisions of the cost principles and produce an equitable distribution of costs. Appropriate detailed tests may include:  (a) Examining the results of the employee compensation system or in addition the records for employee compensation to ascertain if they are accurate, allowable, and properly allocated to the various functional and programmatic activities to which salary and wage costs are charged.  (b) Since the most significant cost pools in terms of dollars are usually allocated based upon the distribution of income maintenance and social services workers’ efforts identified through random moment time studies, determining whether the time studies are implemented and operated in accordance with the methodologies described in the approved public assistance CAP. For example, verifying the adequacy of the controls governing the conduct and evaluation of the study, and determining that the sampled observations were properly selected and performed, the documentation of the observations was properly completed, and the results of the study were correctly accumulated and applied. Testing may include observing or interviewing staff who participate in the time studies to determine if they are correctly recording their activities.  (c) Testing statistical data (e.g., square footage, case counts, salaries and wages) to ascertain if the proposed allocation bases are reasonable, updated as necessary, and do not contain any material omissions.  (4) *Testing of Charges Based Upon the Public Assistance CAP* – If the approved public assistance CAP is determined to be in compliance with the cost principles and produces an equitable distribution of costs, verify that the methods of charging costs to Federal awards are in accordance with the approved CAP and the provisions of the approval documents issued by HHS. Detailed compliance tests may include:  (a) Verifying that the cost allocation schedules, supporting documentation and allocation data are accurate and that the costs are allocated in compliance with the approved CAP.  (b) Reconciling the allocation statistics of labor costs to employee compensation records (e.g., random moment sampling observation forms).  (c) Reconciling the allocation statistics of non-labor costs to allocation data, (e.g., square footage or case counts).  (d) Verifying direct charges to supporting documents (e.g., purchase orders).  (e) Reconciling the costs to the Federal claims. |

### Cost Principles for Nonprofit Organizations

If the federal program is an NPO, pull up the 2021 OMB compliance supplement [Allowable Costs/Cost Principles section](Cost%20Principles%20for%20Nonprofit%20Organizations.pdf). This section can be completed as an addendum to the FACCR, saved within in your working papers and can the cross referenced section can also be added on this page.

Cross Reference to the NPO Allowable cost principles testing: \_\_\_\_\_\_\_\_\_\_\_\_\_

*(Source: 2021 OMB Compliance Supplement Part 3)*

### Audit Implications Summary

|  |
| --- |
| **Audit Implications (adequacy of the system and controls, and the effect on sample size, significant deficiencies / material weaknesses, material non-compliance and management letter comments)** |
| 1. **Results of Test of Controls: (including material weaknesses, significant deficiencies and management letter items)** 2. **Assessment of Control Risk:** 3. **Effect on the Nature, Timing, and Extent of Compliance (Substantive Test) including Sample Size:** 4. **Results of Compliance (Substantive Tests) Tests:** 5. **Questioned Costs: Actual \_\_\_\_\_\_\_\_\_\_ Projected \_\_\_\_\_\_\_\_\_\_** |

## H. PERIOD OF PERFORMANCE

**Federal awarding agencies adopted/implemented the Uniform Guidance in 2 CFR part 200. The OMB guidance is directed to Federal agencies and, by itself, does not establish regulatory requirements binding on non-federal entities. Throughout the FACCR 2 CFR part 200 has been referenced, however in determining compliance auditors need to refer the applicable agency codification of 2 CFR Part 200. Auditors should review this** [**link**](Agency%20Adoption%20of%20the%20UG%20and%20Example%20Citations.pdf) **for a full discussion of agency adoption of the UG and how to cite non-compliance exceptions. Auditors will need to start with the agency codification of the UG when citing exceptions.**

### OMB Compliance Requirements

A non-Federal entity may charge only allowable costs incurred during the approved budget period of a federal award’s period of performance and any costs incurred before the Federal awarding agency or pass-through entity made the Federal award that were authorized by the Federal awarding agency or pass-through entity sections 2 CFR [200.308](2CFR200.308.pdf), [200.309](2CFR200.309.pdf), and [200.403](2CFR200.403.pdf)(h). A period of performance may contain one or more budget periods.

Unless the Federal awarding agency or pass-through entity authorizes an extension, a non-Federal entity must liquidate all financial obligations incurred under the Federal award not later than 90 calendar days after the end date of the period of performance as specified in the terms and conditions of the Federal award ([2 CFR section 200.344(b)](2CFR200.344(b).pdf)). When used in connection with a non-Federal entity’s utilization of funds under a Federal award, “financial obligations” means orders placed for property and services, contracts and subawards made, and similar transactions during a given period that require payment by the non-Federal entity during the same or a future period ([2 CFR section 200.1\_Obligations](2CFR200.1_Obligations.pdf)).

Period of Performance requirements for cost reimbursement contracts subject to the FAR are contained in the terms and conditions of the contract.

**Source of Governing Requirements**

The requirements for the period of performance are contained in [2 CFR section 200.1](2CFR200.001.pdf) Definitions for “budget period,” “financial obligations,” “period of performance”, [2 CFR section 200.308](2CFR200.308.pdf) Revisions of budget and program plans, [2 CFR section 200.309](2CFR200.309.pdf) Modifications to period of performance, [2 CFR section 200.344](2CFR200.344.pdf) (closeout), program legislation, Federal awarding agency regulations; and the terms and conditions of the award.

*(Source: 2021 OMB Compliance Supplement Part 3)*

**Agency Codification Adjustments/Exceptions:**

The most recent compilation of agency additions and exceptions is provided on the CFO website here <https://www.cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf>. However, this list is only updated through 12/2014. AOS evaluated agency exceptions through August 2019. For further evaluation of exceptions, AOS auditors only will need to reference our internal AOS evaluation process [at the following link](http://portal/BP/Intranet/Auditor%20Resources%20File%20Bin/UG%20Exception%20Evaluation%20by%20Federal%20Agency.xlsx).

**Part 4 OMB Program Specific Requirements**

Governments must use the direct payments for necessary expenditures incurred between March 1, 2020, and December 31, 2021, due to the COVID-19 public health emergency. Please see Treasury’s guidance on “Costs incurred during the period that begins on March 1, 2020, and ends on December 31, 2021” for more detail at: <https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf>.

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

On December 14, 2021 Treasury issued a revision to guidance regarding when a cost is considered incurred. That guidance provides, in part, “a cost associated with a necessary expenditure incurred due to the public health emergency is considered to have been incurred by December 31, 2021, if the recipient has incurred an obligation with respect to such cost by December 31, 2021. Treasury defines obligation for this purpose as an order placed for property and services and entry into contracts, subawards, and similar transactions that require payment. Recipients are required to expend their funds received from the CRF to cover these obligations by September 30, 2022.”

Note that for monies passed through OBM, auditors should review the Additional Program Specific information below for OBM’s revised guidance based on Treasury’s revisions.

*(Source: Coronavirus Relief Fund, Revision to Guidance Regarding When a Cost is Considered Incurred, Issued by Treasury on December 14, 2021)*

### Additional Program Specific Information

**Passed through Ohio Office of Budget and Management via HB 481 and HB 641**

**Performance Period**

The U.S. Department of Treasury has determined that CRF funds may only cover costs *incurred* between **March 1, 2020 and December 30, 2020.** On December 27, 2020, President Trump signed the Consolidated Appropriations Act, 2021 which provided an extension on the use of the Coronavirus Relief Funds **through December 31, 2021.**

H.B. 481, Controlling Board OBM0100130, and H.B. 614 of the 133rd General Assembly authorized transfers of federal Coronavirus Relief Funds to counties, cities, villages, and townships and set deadlines for the expenditure of the funds. Section 27 (G) of H.B. 481, as most recently amended by S.B. 310, provided upon the request of the Director of Budget and Management, the Controlling Board may extend the date for local governments to spend Coronavirus Relief Funds and the date by which local governments must return unexpended Coronavirus Relief Funds to the state treasury**. On December 30, 2020, the Ohio Controlling Board approved OBM’s request to extend the deadline for local subdivisions to incur expenses to their Coronavirus Relief Funds to December 31, 2021 and to extend the date by which local subdivisions must pay any unexpended balance of money in the subdivision's local Coronavirus Relief Fund to the state treasury to December 31, 2021.**

House Bill (HB) 481, amended by HB 614, dictates the following timelines in use of funds:

* County auditor shall distribute returned funds on or before **November 25, 2020**; and
* The balance of unexpended funds remaining must be returned to the state treasury not later than February 1, 2021; however, **the Controlling Board action from December 30, 2021 has extended the required return of funds to December 31, 2021.**

*(Source: Ohio Office of Budget and Management (OBM))*

On December 14, 2021, US Treasury revised guidance regarding when a cost is considered incurred. The revised guidance provides that a cost is considered incurred by December 31, 2021 if the recipient had incurred an obligation with respect to such cost by December 31, 2021. As such, OBM is providing additional time to local governments that have open obligations at December 31, 2021 and require additional time to liquidate those obligations. Local governments are now required to expend or return funds no later than February 11, 2022. Also, an additional reporting period has now been added for those that have activity through February 11, 2022. This report will cover activities from January 1, 2022 through February 11, 2022 and is due in the OBM Grants Portal on February 18, 2022.

**Any cash on hand on that report must be returned to OBM no later than February 11, 2022.** Final returns of payment must be received by the Office of Budget and Management no later than December 31, 2021. OMB OBM guidance can be found at [Coronavirus\_Relief\_Fund\_Guidance\_Updated\_2021-12-17.pdf (ohio.gov)](https://grants.ohio.gov/Documents/Funding_Opportunities/Coronavirus_Relief_Fund/Guidance_Trainings_JobAids_Webinars/Coronavirus_Relief_Fund_Guidance_Updated_2021-12-17.pdf).

*(Source:* [*Coronavirus\_Relief\_Fund\_Guidance\_Updated\_2021-12-17.pdf (ohio.gov)*](https://grants.ohio.gov/Documents/Funding_Opportunities/Coronavirus_Relief_Fund/Guidance_Trainings_JobAids_Webinars/Coronavirus_Relief_Fund_Guidance_Updated_2021-12-17.pdf)*)*

**Passed through another local government**

**This section should also contain program specific information for Period of Performance or Federal Funds that are applicable to the CRF program contained within the individual grant application, agreement, and policies. This is particularly important for CRF programs as more entities may be acting as pass-through entities with additional requirements. Include any additional material requirements and delete this yellow highlighted text. Be sure to indicate the source of your information. If no additional requirements are noted, indicate as such.**

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

### Audit Objectives and Control Testing

[**See here for the OMB Supplement Audit Objectives and Compliance Requirements**](Period%20_of_Performance_Federal_Funds_Auditobjectives.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

### Suggested Audit Procedures – Compliance

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| 1. Review the award documents and regulations pertaining to the program and determine any award-specific requirements related to the period of performance.  2. For Federal awards with performance period beginning dates during the audit period, test transactions for costs recorded during the beginning of the period of performance and verify that the costs were not incurred prior to the start of the period of performance unless authorized by the Federal awarding agency or the pass-through entity.  3. For Federal awards with performance period ending dates during the audit period, test transactions for costs recorded during the latter part and after the period of performance and verify that the costs had been incurred within the period of performance.  4. For Federal awards with performance period ending dates during the audit period, test transactions for Federal award costs for which the obligation had not been liquidated (payment made) as of the end of the period of performance and verify that the liquidation occurred within the allowed time period.  5. Test adjustments (e.g., manual journal entries) for Federal award costs and verify that these adjustments were for transactions that occurred during the period of performance. |

### Audit Implications Summary

|  |
| --- |
| **Audit Implications (adequacy of the system and controls, and the effect on sample size, significant deficiencies / material weaknesses, material non-compliance and management letter comments)** |
| 1. **Results of Test of Controls: (including material weaknesses, significant deficiencies and management letter items)** 2. **Assessment of Control Risk:** 3. **Effect on the Nature, Timing, and Extent of Compliance (Substantive Test) including Sample Size:** 4. **Results of Compliance (Substantive Tests) Tests:** 5. **Questioned Costs: Actual \_\_\_\_\_\_\_\_\_\_ Projected \_\_\_\_\_\_\_\_\_\_** |

## L. REPORTING

**Federal awarding agencies adopted/implemented the Uniform Guidance in 2 CFR part 200. The OMB guidance is directed to Federal agencies and, by itself, does not establish regulatory requirements binding on non-federal entities. Throughout the FACCR 2 CFR part 200 has been referenced, however in determining compliance auditors need to refer the applicable agency codification of 2 CFR Part 200. Auditors should review this** [**link**](Agency%20Adoption%20of%20the%20UG%20and%20Example%20Citations.pdf) **for a full discussion of agency adoption of the UG and how to cite non-compliance exceptions. Auditors will need to start with the agency codification of the UG when citing exceptions.**

### OMB Compliance Requirements

*Financial Reporting*

Recipients must use the standard financial reporting forms or such other forms as may be authorized by OMB (approval is indicated by an OMB paperwork control number on the form) when reporting to the Federal awarding agency. Each recipient must report program outlays and program income on a cash or accrual basis, as prescribed by the Federal awarding agency. If the Federal awarding agency requires reporting of accrual information and the recipient’s accounting records are not normally maintained on the accrual basis, the recipient is not required to convert its accounting system to an accrual basis but may develop such accrual information through analysis of available documentation. The Federal awarding agency may accept identical information from the recipient in machine-readable format, computer printouts, or electronic outputs in lieu of closed formats or on paper.

Similarly, a pass-through entity must not require a subrecipient to establish an accrual accounting system and must allow the subrecipient to develop accrual data for its reports on the basis of an analysis of available documentation.

The financial reporting requirements for subrecipients are as specified by the pass-through entity. In many cases, these will be the same as or similar to those for recipients.

The standard financial reporting forms for grants and cooperative agreements are as follows:

* *Request for Advance or Reimbursement (SF-270) (OMB No. 0348-0004))*. Recipients are required to use the SF-270 to request reimbursement payments under non-construction programs, and may be required to use it to request advance payments.
* *Outlay Report and Request for Reimbursement for Construction Programs (SF-271) (OMB No. 0348-0002))*. Recipients use the SF-271 to request funds for construction projects unless they are paid in advance or the SF-270 is used.
* *Federal Financial Report (FFR) (SF-425/SF-425A) (OMB No. 0348-0061)).* Recipients use the FFR as a standardized format to report expenditures under Federal awards, as well as, when applicable, cash status (Lines 10.a, 10.b, and 10c). References to this report include its applicability as both an expenditure and a cash status report unless otherwise indicated.

Electronic versions of the standard forms are located on agency’s home page. Financial reporting requirements for cost reimbursement contracts subject to the Federal Acquisition Regulation (FAR) are contained in the terms and conditions of the contract.

*Performance and Special Reporting*

Non-Federal entities may be required to submit performance reports at least annually but not more frequently than quarterly, except in unusual circumstances, using a form or format authorized by OMB ([2 CFR section 200.329(c)(1)](2CFR200.329(c)(1).pdf)). They also may be required to submit special reports as required by the terms and conditions of the Federal award.

Compliance testing of performance and special reporting is only included in Part 4, “Agency Program Requirements” and Part 5, “Clusters of Programs,” if such reporting has been identified by a federal agency as subject to audit. Further, compliance testing of performance and special reports is only required for data, identified by agencies in parts 4 and 5 as key line items, that are quantifiable and are capable of evaluation against objective criteria stated in the statutes, regulations, contract or grant agreements pertaining to the program.

Performance and special reports in parts 4 and 5 are assumed to meet the above criteria. However, if an agency does not identify key line items for a performance or special report, auditors are only required to test that the report was submitted in a timely manner and no other procedures are required. Similarly, if key line items are identified in parts 4 and 5 that would not be quantifiable and capable of evaluation against objective criteria (e.g., narratives, futuristic information, information that would require verification at the program beneficiary level), auditors are not required to perform testing of such items.

**Federal Funding Accountability and Transparency Act**

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282), as amended by Section 6202 of Public Law 110-252, hereafter referred as the “Transparency Act” that are codified in 2 CFR Part 170, recipients (i.e., direct recipients) of grants or cooperative agreements are required to report first-tier subawards of $30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS). In accordance with OMB Memorandum M-20-21, Implementation Guidance for Supplementing Funding Provided in Response to the Coronavirus Disease 2019 (COVID-19), existing Transparency Act subaward reporting requirements may be leveraged to meet the transparency requirements outlined in the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Information input to FSRS is available at USASpending.gov as the publicly available website for viewing this information (https://www.usaspending.gov/search).

Where the Reporting type of compliance requirement is marked as a “Y” in the Part 2 Matrix of Compliance Requirements, indicating it is subject to audit, auditors must test the compliance with the reporting requirements of 2 CFR Part 170 using the guidance in this section when the auditor determines Reporting to be direct and material and the recipient makes first tier awards.

*Federal Funding Accountability and Transparency Act*

Aspects of the Transparency Act that relate to subaward reporting (1) under grants and cooperative agreements were implemented in OMB in 2 CFR Part 170 and (2) under contracts, by the regulatory agencies responsible for the Federal Acquisition Regulation (FAR at 5 FR 39414 et seq., July 8, 2010). The requirements pertain to recipients (i.e., direct recipients) of grants or cooperative agreements who make first-tier subawards and contractors (i.e., prime contractors) that award first-tier subcontracts. There are limited exceptions as specified in 2 CFR Part 170 and the FAR. The guidance at 2 CFR Part 170 currently applies only to federal financial assistance awards in the form of grants and cooperative agreements (e.g., it does not apply to loans made by a federal agency to a recipient), however the subaward reporting requirement applies to all types of first-tier subawards under a grant or cooperative agreement.

As provided in 2 CFR Part 170 and FAR Subpart 4.14, respectively, federal agencies are required to include the award term specified in Appendix A to 2 CFR Part 170 or the contract clause in FAR 52.204-10, Reporting Executive Compensation and First-Tier Subcontract Awards, as applicable, in awards subject to the Transparency Act.

Consistent with the OMB guidance,

• The 2 CFR Part 170 “subaward” has the meaning given in 2 CFR 200.1 and means an award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal award received by the pass-through entity. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.

• FAR 52.204-10(a) defines “first-tier subcontract” to mean a subcontract awarded directly by a contractor to acquire supplies or services (including construction) for performance of a prime contract, but excludes the contractor’s supplier agreements with vendors, such as long-term arrangements for materials or supplies that benefit multiple contracts or the costs of which would normally be applied to a contractor's general and administrative expenses or indirect cost.

While 2 CFR Part 170 and the FAR implement several distinct Transparency Act reporting requirements, including reporting of executive compensation, the Supplement addresses only the following requirements: (1) recipient reporting of each first-tier subaward or subaward amendment that results in an obligation of $30,000 or more in federal funds; and (2) contractor reporting of each first-tier subcontract award of $30,000 or more in federal funds (this requirement was phased in based on the value of the new prime contract as specified below under “Effective Date of Reporting Requirements”).

*Reporting Site*

Grant and cooperative agreement recipients and contractors are required to register FSRS and report subaward data through FSRS. To do so, they will first be required to register in the System for Award Management (SAM) (if they have not done so previously for another purpose (e.g., submission of applications through Grants.gov) and actively maintain that registration. Prime contractors have previously been required to register in SAM. Information input to FSRS is available at USASpending.gov as the publicly available website for viewing this information (<https://www.usaspending.gov/search> ).

*Key data elements*

Compliance testing of the Transparency Act reporting requirements must include the following key data elements about the first-tier subrecipients and subawards under grants and cooperative agreements.

|  |  |
| --- | --- |
| **Subaward Data Element** | **Definition** |
| Subawardee Name | This is the Sub-Awardee’s Name |
| Subawardee DUNS # | The subawardee organization’s nine-digit Data Universal Numbering System (DUNS) number. |
| Amount of Subaward | The net dollar amount of federal funds awarded to the  subawardee including modifications. |
| Subaward Obligation/Action Date | Date the subaward agreement was signed. |
| Date of Report Submission | Date the recipient entered the action/obligation into FSRS. |
| Subaward Number | Subaward number or other identifying number assigned by the prime awardee organization to facilitate the tracking of its  subawards. |
| Subaward Project Description | Describes the subaward project. |
| Subawardee Names and Compensation of Highly  Compensated Officers | Names of officers if thresholds are met. |

For purposes of programs included in parts 4 and 5 of this Supplement, the designation “Not Applicable” in relation to “Financial Reporting,” “Performance Reporting,” and “Special Reporting” means that the auditor is not expected to audit anything in these categories, whether or not award terms and conditions may require such reporting.

**Source of Governing Requirements**

**Reporting requirements are contained in the following:**

1. Financial reporting, [2 CFR section 200.328](2CFR200.328.pdf)
2. Monitoring and reporting program performance, [2 CFR section 200.329](2CFR200.329.pdf)
3. Program legislation.
4. Transparency Act, implementing requirements in 2 CFR Part 170 and the FAR, and the previously listed OMB guidance documents.
5. Federal awarding agency regulations.
6. The terms and conditions of the award.

*(Source: 2021 OMB Compliance Supplement Part 3)*

**Agency Codification Adjustments/Exceptions:**

The most recent compilation of agency additions and exceptions is provided on the CFO website here <https://www.cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf>. However, this list is only updated through 12/2014. AOS evaluated agency exceptions through August 2019. For further evaluation of exceptions, AOS auditors only will need to reference our internal AOS evaluation process [at the following link](http://portal/BP/Intranet/Auditor%20Resources%20File%20Bin/UG%20Exception%20Evaluation%20by%20Federal%20Agency.xlsx).

**Part 4 OMB Program Specific Requirements**

**1. Financial Reporting** *– Not Applicable*

**2. Performance Reporting** – *Not Applicable*

**3. Special Reporting**

1. Each prime recipient of the Fund shall provide a quarterly Financial Progress Report that contains COVID-19 related costs incurred during the covered period (the period beginning on March 1, 2020; and ending on December 31, 2021) to Treasury OIG. Each prime recipient shall report this quarterly information mentioned above into the GrantSolutions portal. The prime recipient’s quarterly Financial Progress Report submissions should be supported by the data in the prime recipient’s accounting system.

*Key Line Items* – The following line items from the reporting contain critical information:

1. The total amount of payments from the Fund received from Treasury.
2. The amount of funds received that were expended or obligated for each project or activity.
3. A detailed list of all projects or activities for which funds were expended or obligated, including:
   1. The name of the project or activity (please refer to Treasury OIG guidance at [Department of the Treasury Office of Inspector General Coronavirus Relief Fund Frequently Asked Questions Related to Reporting and Recordkeeping (Revised)(OIG-CA-20-028R)](https://oig.treasury.gov/sites/oig/files/2021-03/OIG-CA-20-028R.pdf) (Note: This revised guidance incorporates the extension of the Fund through December 31, 2021, and reflects all previous requirements of the November 25, 2020 version.)
   2. A description of the project or activity
4. Detailed information on any loans issued; contracts and grants awarded; transfers made to other government entities; and direct payments made by the prime recipient that are greater than $50,000. For amounts less than $50,000, the prime recipient must report in the aggregate for these expenditure categories. For direct payments to individuals, aggregate reporting is required to be reported regardless of the amount.
5. Beginning September 21, 2020, prime recipients were required to submit via the GrantSolutions portal the first detailed quarterly Financial Progress Report, which cover the period March 1 through June 30, 2020 (with exception to the September 21 first quarter deadline and the October 13 second quarter reporting deadlines for those prime recipients using the GrantSolutions’ upload feature, which was available December 1, 2020). Thereafter, quarterly reporting will be due no later than ten days after each calendar quarter. If the 10th calendar day falls on a weekend or a federal holiday, the due date will be the next working day. Reporting shall end with either the calendar quarter after the COVID-19 related costs and expenditures have been liquidated and paid or the calendar quarter ending September 30, 2022, whichever comes first. The prime recipient’s quarterly Financial Progress Report submission should be supported by the data in the prime recipient’s accounting system.
6. Special reports for Federal Funding Accountability and Transparency Act (FFATA) reporting. Per question 31 in the Treasury OIG FAQs Related to Reporting and Recordkeeping (referred to above), FFATA reporting does not apply to this program.

Please reference OIG’s FAQs (<https://oig.treasury.gov/sites/oig/files/2021-03/OIG-CA-20-028R.pdf>) and other related guidance for more information at <https://oig.treasury.gov/cares-act>.

**4. Special Reporting for Federal Funding Accountability and Transparency Act** – See OMB Compliance Requirements section above for audit guidance.

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

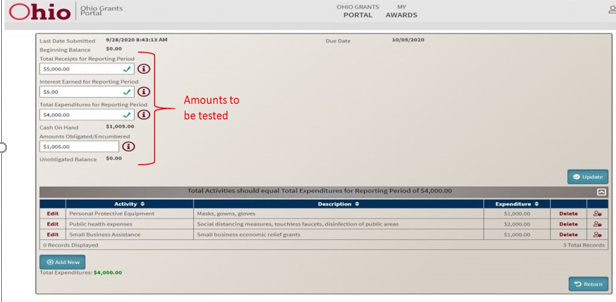
### Additional Program Specific Information

**Passed through the Ohio Office of Budget and Management via HB 481 and 614**

**OBM Reporting Testing Requirements:**

**OBM reporting requirements included here are ONLY required to be tested for *Counties* within the State of Ohio.**

Local government users cannot generate reports from the OBM grants portal but the grant contact may receive a confirmation email with reported amounts once OBM has marked the report “reviewed” in the system. Auditors can use the emailed report/amounts from OBM or may need to work with a County employee to log-in to the portal and review the report(s) submitted. Only *TOTALS* (not each expenditure line item) for the reporting period(s) should be agreed and/or reconciled to the County’s accounting system as part of this testing.



Additionally, OBM is not requiring auditors to test the timely filing of the report, as that information is not consistently presented for audit (i.e. if a government files a correction to a previously submitted report, the re-filed date will appear rather than the original filing date).

For FY2020, auditors need only test the amounts for reports *submitted* during the audit period (i.e. Cycle 1 & 2 due October 20, 2020). This will be the same moving forward, with Cycles 3 – 6 being tested in FY2021 and Cycle 7 being tested in FY22, as necessary.

**Reporting**

OBM will require reporting in the OBM grants portal. The Grant Contact listed on the registration will be provided a log-in to access and complete the financial status reports. Here is the following table of reporting periods and due dates:

|  |  |  |
| --- | --- | --- |
| **Reporting Cycle** | **Reporting Period** | **Due Date** |
| Cycle 1 & 2 | March 1, 2020 to September 30, 2020 | October 20, 2020 |
| Cycle 3 | October 1, 2020 to December 31, 2020 | January 6, 2021 |
| Cycle 4 | January 1, 2021 to March 31, 2021 | April 6, 2021 |
| Cycle 5 | April 1, 2021 to June 30, 2021 | July 6, 2021 |
| Cycle 6 | July 1, 2021 to September 30, 2021 | October 6, 2021 |
| Cycle 7 | October 1, 2021 to December 31, 2021 | January 5, 2022 |

Any cash on hand reported on the cycle 7 report due on January 5, 2022 must be returned to OBM no later than December 31, 2021.

*(Source: Ohio Office of Budget and Management (OBM) and CFAE)*

On December 14, 2021, US Treasury revised guidance regarding when a cost is considered incurred. The revised guidance provides that a cost is considered incurred by December 31, 2021 if the recipient had incurred an obligation with respect to such cost by December 31, 2021. As such, OBM is providing additional time to local governments that have open obligations at December 31, 2021 and require additional time to liquidate those obligations. Local governments are now required to expend or return funds no later than February 11, 2022. Also, an additional reporting period has now been added for those that have activity through February 11, 2022. This report will cover activities from January 1, 2022 through February 11, 2022 and is due in the OBM Grants Portal on February 18, 2022.

**Any cash on hand on that report must be returned to OBM no later than February 11, 2022.** Final returns of payment must be received by the Office of Budget and Management no later than December 31, 2021. OMB OBM guidance can be found at [Coronavirus\_Relief\_Fund\_Guidance\_Updated\_2021-12-17.pdf (ohio.gov)](https://grants.ohio.gov/Documents/Funding_Opportunities/Coronavirus_Relief_Fund/Guidance_Trainings_JobAids_Webinars/Coronavirus_Relief_Fund_Guidance_Updated_2021-12-17.pdf).

*(Source:* [*Coronavirus\_Relief\_Fund\_Guidance\_Updated\_2021-12-17.pdf (ohio.gov)*](https://grants.ohio.gov/Documents/Funding_Opportunities/Coronavirus_Relief_Fund/Guidance_Trainings_JobAids_Webinars/Coronavirus_Relief_Fund_Guidance_Updated_2021-12-17.pdf)*)*

**Passed through another local government**

CFAE NOTEs:

Additional reporting requirements may be included in the terms and conditions of awards from pass-through entities other than OBM. Award documentation including award agreements, applications, and other guidance should be used to draft required procedures related to this compliance requirement.

Links to Additional Resources and Other Information are available to auditors in Parts I and II of this FACCR as well as on the [AOS COVID-19 Resources for Local Governments webpage](https://ohioauditor.gov/resources/COVID19_assistance.html).

*(Source: AOS CFAE)*

**This section should also contain program specific information for Reporting that are applicable to the CRF program contained within the individual grant application, agreement, and policies. This is particularly important for CRF programs as more entities may be acting as pass-through entities with additional requirements. Include any additional material requirements and delete the yellow highlighted text. Be sure to indicate the source of your information. If no additional requirements are noted, indicate as such.**

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

### Audit Objectives and Control Testing

[**See here for the OMB Supplement Audit Objectives and Compliance Requirements**](Reporting_Auditobjectives.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

### Suggested Audit Procedures – Compliance

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Note for Direct Awards Only**: For recipients using HHS’ Payment Management System (PMS) to draw Federal funds, the auditor should consider the following steps numbered 1 through 4 as they pertain to the cash reporting portion of the SF-425A, regardless of the source of the data included in the PMS reports. (During FY2016, HHS is completing the transition from pooled payment to use of subaccounts.) Although certain data is supplied by the Federal awarding agency (e.g., award authorization amounts) and certain amounts are provided by HHS’ Payment Management Services, the auditor should ensure that such amounts are in agreement with the recipient’s records and are otherwise accurate.  **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| 1. Review applicable statutes, regulations, and the terms and conditions of the Federal award pertaining to reporting requirements. Determine the types and frequency of required reports. Obtain and review Federal awarding agency or pass-through entity, in the case of a subrecipient, instructions for completing the reports.  a. For financial reports, ascertain the accounting basis used in reporting the data (e.g., cash or accrual).  b. For performance and special reports, determine the criteria and methodology used in compiling and reporting the data.  2. Select a sample of reports and perform appropriate analytical procedures and ascertain the reason for any unexpected differences. Examples of analytical procedures include:  a. Comparing current period reports to prior period reports.  b. Comparing anticipated results to the data included in the reports.  c. Comparing information obtained during the audit of the financial statements to the reports.  3. Select a sample of each of the following report types, and test for accuracy and completeness:  a. *Financial reports (all entities – related to SEFA reporting)*  (1) Ascertain if the financial reports were prepared in accordance with the required accounting basis.  (2) Review accounting records and ascertain if all applicable accounts were included in the sampled reports (e.g., program income, expenditure credits, loans, interest earned on Federal funds, and reserve funds).  (3) Trace the amounts reported to accounting records that support the audited financial statements and the Schedule of Expenditures of Federal Awards and verify agreement or perform alternative procedures to verify the accuracy and completeness of the reports and that they agree with the accounting records. If reports require information on an accrual basis and the entity does not prepare its accounting records on an accrual basis, determine whether the reported information is supported by available documentation.  (4) For any discrepancies noted in SF-425 reports concerning cash status when the advance payment method is used, review subsequent SF-425 reports to ascertain if the discrepancies were appropriately resolved with the applicable payment system.  b.1. *Performance and special reports (Counties only = OBM Grants Portal Reporting)*  (1) Review the supporting records and ascertain if all applicable data elements were included in the sampled reports. Trace the reported data (TOTALS Only) to records that accumulate and summarize data.  (2) Perform tests of the underlying data to verify that the data were accumulated and summarized in accordance with the required or stated criteria and methodology, including the accuracy and completeness of the reports.  b.2. *Performance and special reports (Passed through Other Local Governments)*  (1) Review the supporting records and ascertain if all applicable data elements were included in the sampled reports. Trace the reported data to records that accumulate and summarize data.  (2) Perform tests of the underlying data to verify that the data were accumulated and summarized in accordance with the required or stated criteria and methodology, including the accuracy and completeness of the reports.  c. Special reports for FFATA  (1) Gain an understanding of the recipient’s methodology used to identify which, if any, awards were subject to the Transparency Act based on inclusion of the award term, the assignment by the federal awarding agency of a new FAIN, the effective date of the reporting requirement, and whether the entity passed funds through to first-tier subrecipients.  (2) Select a sample of first-tier subawards. Obtain related subaward agreements/amendments/modifications and determine if the subaward/subcontract was subject to reporting under the Transparency Act based on (a) the date of the award and (b) the amount of the obligating action for subawards or face value of the first-tier subcontracts (inclusive of modifications).  If the subaward/subcontract was subject to reporting under the Transparency Act:  (a) Using the FAIN, find the award in FSRS.  FSRS is the portal where the recipient enters the award information; it is only accessible by the recipient. Therefore, in order for recipients to demonstrate that information has been properly input, they should coordinate with the auditor regarding the auditor’s review of the information, physically or virtually (e.g. by logging into its FSRS account either in the auditor’s presence or remotely using technology such as screensharing, screenshot evidence, etc.) so that the auditor is able to find the awards in the system as required in this procedure).  (b) Compare the award information accessed in step 2.a to the subaward/subcontract documents maintained by the recipient to assess if—  (i) applicable subaward obligations /modifications have been reported,  (ii) the key data elements (see above) were accurately reported and are supported by the source documentation, and  (iii) the action was reported in FSRS no later than the last day of the month following the month in which the subaward/subaward amendment obligation was made or the subcontract award/subcontract modification was made.  (c) The auditor must provide the following information for non- compliance finding (s) as the results of step 2.b.  (i) The non-federal entity did not report the subaward information  (ii) The non-federal entity did not report the subaward information timely  (iii) The non-federal entity reported incorrect amount  (iv) The non-federal entity did not report all the key data elements  The following format is recommended to report non-compliance findings and included in the audit report. Data is included for illustration purposes only.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Transactions Tested** | **Subaward not reported** | **Report not timely** | **Subaward amount incorrect** | **Subaward missing key elements** | | 25 | 2 | 10 | 13 | 0 | | **Dollar Amount of Tested Transactions** | **Subaward not reported** | **Report not timely** | **Subaward amount incorrect** | **Subaward missing key elements** | | $5,000,000 | $200,000 | $4,000,000 | $800,000 | $0 |   d. *For each type of report*  (1) When intervening computations or calculations are required between the records and the reports, trace reported data elements to supporting worksheets or other documentation that link reports to the data.  (2) Test mathematical accuracy of reports and supporting worksheets.  4. Obtain written representation from management that the reports provided to the auditor are true copies of the reports submitted or electronically transmitted to the Federal awarding agency, the applicable payment system, or pass-through entity in the case of a subrecipient. |

### Audit Implications Summary

|  |
| --- |
| **Audit Implications (adequacy of the system and controls, and the effect on sample size, significant deficiencies / material weaknesses, material non-compliance and management letter comments)** |
| 1. **Results of Test of Controls: (including material weaknesses, significant deficiencies and management letter items)** 2. **Assessment of Control Risk:** 3. **Effect on the Nature, Timing, and Extent of Compliance (Substantive Test) including Sample Size:** 4. **Results of Compliance (Substantive Tests) Tests:** 5. **Questioned Costs: Actual \_\_\_\_\_\_\_\_\_\_ Projected \_\_\_\_\_\_\_\_\_\_** |

## M. SUBRECIPIENT MONITORING

**Federal awarding agencies adopted/implemented the Uniform Guidance in 2 CFR part 200. The OMB guidance is directed to Federal agencies and, by itself, does not establish regulatory requirements binding on non-federal entities. Throughout the FACCR 2 CFR part 200 has been referenced, however in determining compliance auditors need to refer the applicable agency codification of 2 CFR Part 200. Auditors should review this** [**link**](Agency%20Adoption%20of%20the%20UG%20and%20Example%20Citations.pdf) **for a full discussion of agency adoption of the UG and how to cite non-compliance exceptions. Auditors will need to start with the agency codification of the UG when citing exceptions.**

**Note:** Transfers of Federal awards to another component of the same auditee under [2 CFR part 200, subpart F](2CFR200_subpart_F.pdf), do not constitute a subrecipient or contractor relationship.

### OMB Compliance Requirements

A pass-through entity (PTE) must (see here for [2 CFR 200.332(a)](2CFR200.332(a).pdf)):

- *Identify the Award* *and Applicable Requirements* – Clearly identify to the subrecipient: (1) the award as a subaward at the time of subaward (or subsequent subaward modification) by providing the information described in 2 CFR section 200.331(a)(1); (2) all requirements imposed by the PTE on the subrecipient so that the Federal award is used in accordance with Federal statutes, regulations, and the terms and conditions of the award (2 CFR section 200.331(a)(2)); and (3) any additional requirements that the PTE imposes on the subrecipient in order for the PTE to meet its own responsibility for the Federal award (e.g., financial, performance, and special reports) (2 CFR section 200.331(a)(3)).

- *Evaluate Risk* – Evaluate each subrecipient’s risk of noncompliance for purposes of determining the appropriate subrecipient monitoring related to the subaward (2 CFR section 200.331(b)). This evaluation of risk may include consideration of such factors as the following (see here for [2 CFR 200.332(b)-(f)](2CFR200.332(b)_through_(f).pdf)):

1. The subrecipient’s prior experience with the same or similar subawards;
2. The results of previous audits including whether or not the subrecipient receives single audit in accordance with 2 CFR part 200, subpart F, and the extent to which the same or similar subaward has been audited as a major program;
3. Whether the subrecipient has new personnel or new or substantially changed systems; and
4. The extent and results of Federal awarding agency monitoring (e.g., if the subrecipient also receives Federal awards directly from a Federal awarding agency).

- *Monitor* – Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals (2 CFR sections 200.332(d) through (f)). In addition to procedures identified as necessary based upon the evaluation of subrecipient risk or specifically required by the terms and conditions of the award, subaward monitoring must include the following:

1. Reviewing financial and programmatic (performance and special reports) required by the PTE.
2. Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the Federal award provided to the subrecipient from the PTE detected through audits, on-site reviews, and other means.
3. Issuing a management decision for audit findings pertaining to the Federal award provided to the subrecipient from the PTE as required by [2 CFR section 200.521](2CFR200.521.pdf).

* *Ensure Accountability of For-Profit Subrecipients* – Some Federal awards may be passed through to for-profit entities. For-profit subrecipients are accountable to the PTE for the use of the Federal funds provided. Because 2 CFR part 200 does not make subpart F applicable to for-profit subrecipients, the PTE is responsible for establishing requirements, as necessary, to ensure compliance by for-profit subrecipients for the subaward. The agreement with the for-profit subrecipient must describe applicable compliance requirements and the for-profit subrecipient's compliance responsibility. Methods to ensure compliance for Federal awards made to for-profit subrecipients may include pre-award audits, monitoring during the agreement, and post-award audits ([2 CFR section 200.501(h)](2CFR200.501(h).pdf)).

**Source of Governing Requirements**

The requirements for subrecipient monitoring for the subaward are contained in 31 USC 7502(f)(2) (Single Audit Act Amendments of 1996 (Pub. L. No. 104-156)), [2 CFR sections 200.331](2CFR200.331.pdf), [.332](2CFR200.332.pdf), and .[501(h)](2CFR200.501(h).pdf); Federal awarding agency regulations; and the terms and conditions of the award.

*(Source: 2021 OMB Compliance Supplement Part 3)*

**Agency Codification Adjustments/Exceptions:**

The most recent compilation of agency additions and exceptions is provided on the CFO website here <https://www.cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf>. However, this list is only updated through 12/2014. AOS evaluated agency exceptions through August 2019. For further evaluation of exceptions, AOS auditors only will need to reference our internal AOS evaluation process [at the following link](http://portal/BP/Intranet/Auditor%20Resources%20File%20Bin/UG%20Exception%20Evaluation%20by%20Federal%20Agency.xlsx).

**Part 4 OMB Program Specific Requirements**

For additional information on subrecipient monitoring, please reference Part 3 of the Compliance Supplement. (Note: The Single Audit Act and 2 CFR Part 200, Subpart F regarding audit requirements do not apply to beneficiaries as defined in Treasury’s FAQ B.13 at [CRF-Guidance-Federal-Register\_2021-00827.pdf (treasury.gov)](https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf).)

*(Source: 2021 OMB Compliance Supplement, Part 4, Treasury, 21.019 Coronavirus Relief Fund)*

### Additional Program Specific Information

**Passed through the Ohio Office of Budget and Management via HB 481 and 614 AND Passed through another local government**

Subrecipient monitoring is applicable to the CRF program per the CARES Act Requirements.

In accordance with [2 CFR 200.331](https://www.ecfr.gov/cgi-bin/text-idx?SID=f1d6204997e4b95fdc4530ccd756bb7f&mc=true&node=pt2.1.200&rgn=div5#se2.1.200_1331), “The non-Federal entity may concurrently receive Federal awards as a recipient, a subrecipient, and a contractor, depending on the substance of its agreements with Federal awarding agencies and pass-through entities. Therefore, a pass-through entity must make case-by-case determinations whether each agreement it makes for the disbursement of Federal program funds casts the party receiving the funds in the role of a subrecipient or a contractor. The Federal awarding agency may supply and require recipients to comply with additional guidance to support these determinations provided such guidance does not conflict with this section.” This section further defines subrecipients and contractors.

**The CARES Act through CRF funding has introduced the concept of organizations as beneficiaries in addition to the two categories above**. While not addressed in UG, the U.S. Department of the Treasury’s [Coronavirus Relief Fund Guidance as published in the Federal Register on January 15, 2021](https://home.treasury.gov/system/files/136/CRF-Guidance-Federal-Register_2021-00827.pdf) contains the following in section B. Questions Related to Administration of Fund Payments:

13. What are the differences between a subrecipient and a beneficiary under the Fund for purposes of the Single Audit Act and 2 CFR part 200, subpart F regarding audit requirements?

The Single Audit Act and 2 CFR part 200, subpart F regarding audit requirements apply to any non-federal entity, as defined in 2 CFR 200.69, that receives payments from the Fund in the amount of $750,000 or more. Nonfederal entities include subrecipients of payments from the Fund, including recipients of transfers from a State, territory, local government, or tribal government that received a payment directly from Treasury. However, subrecipients would not include individuals and organizations (e.g., businesses, non-profits, or educational institutions) that are beneficiaries of an assistance program established using payments from the Fund. The Single Audit Act and 2 CFR part 200, subpart F regarding audit requirements do not apply to beneficiaries.

Contractors and beneficiaries are *not* subject to subrecipient requirements included in this section but compliance with the requirements of CRF funding is tested at the pass-through entity level in Sections A and B of this FACCR.

Auditors must carefully evaluate the determinations made by funding entities (i.e. subrecipient, contractor, or beneficiary) and the relationships between the parties involved in CRF funding, as they may be different depending on the *substance* of the transactions versus what has been documented in the agreements.

*(Source: AOS CFAE)*

**This section should contain program specific information for Subrecipient Monitoring that are applicable to the CRF program contained within the individual grant application, agreement, and policies. This is particularly important for CRF programs as more entities may be acting as pass-through entities with additional requirements. Include any additional material requirements and delete this yellow highlighted text. Be sure to indicate the source of your information. If no additional requirements are noted, indicate as such.**

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

### Audit Objectives and Control Testing

[**See here for the OMB Supplement Audit Objectives and Compliance Requirements**](Subrecipient_Monitoring_Auditobjectives.pdf)

|  |
| --- |
| **What Control Procedures Address the Compliance Requirement (reference/link to documentation or where the testing was performed):** |
| **Basis for the control** (reports, resources, etc. providing information needed to understand requirements and prevent or identify and correct errors):  **Control Procedure** (description of how auditee uses the “Basis” to prevent, or identify and correct or detect errors):  **Person(s) responsible for performing the control procedure** (title):  **Description of evidence documenting the control was applied** (i.e. sampling unit): |

### Suggested Audit Procedures – Compliance

|  |
| --- |
| **Suggested Audit Procedures – Compliance (Substantive Tests)**  **(Reference / link to documentation where testing was performed testing):** |
| **Note**: The auditor may consider coordinating the tests related to subrecipients performed as part of C., “Cash Management” (tests of cash reporting submitted by subrecipients); E., “Eligibility” (tests that subawards were made only to eligible subrecipients); I., “Procurement and Suspension and Debarment” (tests of ensuring that a subrecipient is not suspended or debarred), and L, “Reporting (tests of performance data reported to funding sources) with the testing of “Subrecipient Monitoring.”  **Consider the results of the testing of internal control in assessing the risk of noncompliance. Use this as the basis for determining the nature, timing, and extent (e.g., number of transactions to be selected) of substantive tests of compliance.** |
| 1. Review the PTE’s subrecipient monitoring policies and procedures to gain an understanding of the PTE’s process to identify subawards, evaluate risk of noncompliance, and perform monitoring procedures based upon identified risks.   2. Review subaward documents including the terms and conditions of the subaward to ascertain if, at the time of subaward (or subsequent subaward modification), the PTE made the subrecipient aware of the award information required by [2 CFR section 200.332(a)](2CFR200.332(a).pdf) sufficient for the PTE to comply with Federal statutes, regulations, and the terms and conditions of the award.  3. Review the PTE’s documentation of monitoring the subaward and consider if the PTE’s monitoring provided reasonable assurance that the subrecipient used the subaward for authorized purposes in compliance with Federal statutes, regulations, and the terms and conditions of the subaward.  4. Ascertain if the PTE verified that subrecipients expected to be audited as required by [2 CFR part 200, subpart F](2CFR200_subpart_F.pdf), met this requirement [(2 CFR section 200.332(f)](2CFR200.332(f).pdf)). This verification may be performed as part of the required monitoring under [2 CFR section 200.332(d)(2)](2CFR200.332(d)(2).pdf) to ensure that the subrecipient takes timely and appropriate action on deficiencies detected though audits. |

### Audit Implications Summary

|  |
| --- |
| **Audit Implications (adequacy of the system and controls, and the effect on sample size, significant deficiencies / material weaknesses, material non-compliance and management letter comments)** |
| 1. **Results of Test of Controls: (including material weaknesses, significant deficiencies and management letter items)** 2. **Assessment of Control Risk:** 3. **Effect on the Nature, Timing, and Extent of Compliance (Substantive Test) including Sample Size:** 4. **Results of Compliance (Substantive Tests) Tests:** 5. **Questioned Costs: Actual \_\_\_\_\_\_\_\_\_\_ Projected \_\_\_\_\_\_\_\_\_\_** |

## Program Testing Conclusion

We have performed procedures sufficient to provide reasonable assurance for federal award program compliance requirements (to support our opinions). The procedures performed, relevant evidence obtained, and our conclusions are adequately documented. (If you are unable to conclude, prepare a memo documenting your reason and the implications for the engagement, including the audit reports.)

|  |  |  |
| --- | --- | --- |
| **Conclusion** | | |
| **The opinion on this major program should be:** | |  |
| **Unmodified:** |  | |
| **Qualified (describe):** |  | |
| **Adverse (describe):** |  | |
| **Disclaimer (describe):** |  | |

**Important Notes:**

* When auditees receive CRF monies from various sources, auditors may use oneFACCR to test the CRF program (as detailed in the table on page 2); however, the funding streams have unique restrictions imposed by the pass-through agencies therefore the streams should be tested as **separate populations**. If auditees receive more than one grant from a given pass-through entity and the grants have differing restrictions or goals (for instance, a School District receives both general CRF funding and a broadband grant from ODE), auditors will need to test the individual grants as separate populations. In addition, if monies are spent for different purposes within the same source, **separate populations** may also be needed in this instance.
* If an exception is noted during testing within one of several populations tested, auditors should evaluate the exception in relation to the CRF funding **as a whole**. AOS Auditors should also review Audit Manual Section 34900.18-.20 and .25-.26.

*(Source: CFAE)*

Per paragraph 13.39 of the **AICPA Audit Guide, *Government Auditing Standards and Single Audits*,** **[Permalink to here](https://checkpoint.riag.com/app/view/docPermaLink?DocID=iAICPAIGS:767.2440&docTid=T0AICPAIGS:767.2440-1&feature=ttoc&lastCpReqId=97899&tlltype=AICPAIGS:767.2668)**, the **following are required to be reported** as audit findings in the federal awards section of the schedule of findings and questioned costs **(**[**see 2CFR200 section 516**](2CFR200.516.pdf)**):**

* Significant deficiencies and material weaknesses in internal control over major programs
* Material noncompliance with the federal statues, regulations, or the terms and conditions of federal awards related to major programs
* Known questioned costs that are greater than $25,000 for a type of compliance requirement for a major program. The auditor also must report (in the schedule of findings and questioned costs) known questioned costs when likely questioned costs are greater than $25,000 for a type of compliance requirement for a major program.
* Known questioned costs that are greater than $25,000 for programs that are not audited as major.
* The circumstances concerning why the opinion in the auditor's report on compliance for major programs is other than an unmodified opinion, unless such circumstances are otherwise reported as audit findings in the schedule of findings and questioned costs for federal awards (for example, a scope limitation that is not otherwise reported as a finding).
* Known or likely fraud affecting a federal award, unless such fraud is otherwise reported as an audit finding in the schedule of findings and questioned costs for federal awards.
* Significant instances of abuse relating to major programs
* Instances in which the results of audit follow-up procedures disclosed that the summary schedule\* of prior audit findings prepared by the auditee in accordance with [Section 200.511(b)](2CFR200.511(b).pdf) of the Uniform Guidance, materially misrepresents the status of any prior audit finding.

[Appendix I](OMB_Compliance_Supplement_APP_I.pdf) lists block grants and other programs excluded from the requirements of specified portions of 2 CFR part 200.

[Appendix II](OMB_Compliance_Supplement_APP_II.pdf) provides regulatory citations for Federal agencies’ codification of the OMB guidance on “Uniform Administrative Requirements, Cost Principles, and Audit Requirements” (in 2 CFR part 200).

All departments and agencies other than the following have OMB-approved exceptions as part of their adoption/implementation: Departments of Commerce, Homeland Security, Housing and Urban Development, and Veterans Affairs; Gulf Coast Restoration Council; Institute of Museum and Library Services; National Endowments for the Arts and Humanities; Office of National Drug Control Policy; and Social Security Administration. The complete list of exceptions is available at <https://www.cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf> and Appendix II of the OMB Compliance Supplement.

|  |
| --- |
| **Cross-reference to internal control matters (significant deficiencies or material weaknesses), if any, documented in the FACCR:** |
|  |

|  |
| --- |
| **Cross-reference to questioned costs and matter of noncompliance, if any, documented in this FACCR:** |
|  |

**Per paragraph 13.50 of the AICPA Audit Guide, *Government Auditing Standards and Single Audits*,** the schedule of findings and questioned costs must include all audit findings required to be reported under the Uniform Guidance. A separate written communication (such as a communication sometimes referred to as a management letter) may not be used to communicate such matters to the auditee in lieu of reporting them as audit findings in accordance with the Uniform Guidance. See the discussion beginning at paragraph 13.34 for information on Uniform Guidance requirements for the schedule of findings and questioned costs. If there are other matters that do not meet the Uniform Guidance requirements for reporting but, in the auditor's judgment, warrant the attention those charged with governance, they should be communicated in writing or orally. If such a communication is provided in writing to the auditee, there is no requirement for that communication to be referenced in the Uniform Guidance compliance report. Per table 13-2 **a matter must meet the following in order to be communicated in the management letter:**

* Other deficiencies in internal control over compliance that are not significant deficiencies or material weaknesses required to be reported but, in the auditor's judgment, are of sufficient importance to be communicated to management.
* Noncompliance with federal statutes, regulations or terms and conditions of federal awards related to a major program that does not meet the criteria for reporting under the Uniform Guidance but, in the auditor's judgment, is of sufficient importance to communicate to management or those charged with governance.
* Other findings or issues arising from the compliance audit that are not otherwise required to be reported but are, in the auditor's professional judgment, significant and relevant to those charged with governance.

|  |
| --- |
| **Cross-reference to any Management Letter items and explain why not included in the Single Audit Compliance Report:** |
|  |