NEW GRANT INFORMATION SHEET

SECTION I – GENERAL GRANT INFORMATION		
Grant Title:	Amount Awarded This Action:	
Award Start Date:	Award End Date:	Subrecipient Award: YES NO
Grantee Name:	Grantee Address:	
Performance Measures YES NO Included in Award:	Match/In-Kind: $ Description:	
SECTION II – SUBRECIPIENT AWARD INFORMATION		
Grantee DUNS #:	Grantee Fiscal Year End Month (MM format):	
Indirect Rate: ___ _ % _____ (Approved rate for Federal Funds Only)	FFATA: YES NO	R&D:

SECTION III – FUNDING ALLOCATIONS (STATE FUNDS)		
Fund Type	Award This Action	Description/Comments
General Fund	$	
Special Fund	$	
Transportation Fund	$	
Other State Funds	$	

FEDERAL FUNDS (includes subrecipient funds)			Required Federal Award Information		
CFDA #	**Program Title**	**Award This Action**	**FAIN**	**Federal Award Date**	**Total Federal Award**
		$			$
Federal Awarding Agency:			Federal Award Project Description:		
		$			$
Federal Awarding Agency:			Federal Award Project Description:		
		$			$
Federal Awarding Agency:			Federal Award Project Description:		
		$			$
Federal Awarding Agency:			Federal Award Project Description:		

SECTION IV - CONTACT INFORMATION	
<u>**STATE GRANTING AGENCY**</u>: Name: Section: Phone: Email:	<u>**GRANTEE**</u> Name: Title: Phone: Email:

Section I – General Grant Information

Grantee Name: The name of the grantee including the doing business as name (DBA) if applicable.

Grantee address information: If the Grantee has multiple addresses, this should be the address associated with the performance of the award. Enter the Zip+4 if available and if required for FFATA reporting.

Grant number: This should be the contract number issued to the original Grant.

The Following is Amended: Check each box that is applicable to this amendment.

Amount Awarded This Action: Enter the current amendment amount. If this award is an amendment that does not affect the amount, enter $0.

End Date: This is the ending date of the performance period covered by this award.

Performance Measures: Check Yes or No to indicate whether or not the award contains performance measures.

Match/In-Kind $ and Description: Enter the amount of match/in-kind required, or enter $0. If a dollar value has been entered, enter a brief description of what is required. The narrative sections of the award may also contain additional information pertaining to required match or in-kind. If desired, this box may also be used to identify funding from other sources involved in the project that will not be covered by this award, such as projects where multiple organizations are contributing funding.

Section II – Subrecipient Award Information

Indirect Rate: Enter the approved indirect rate. If the subrecipient chooses not to request indirect costs for this award, enter 0%. ANY Indirect Rate needs to be approved by Audit.

Section III – Funding Allocation

Special and Other Fund Descriptions: If the award contains Special or Other funds, enter a brief description of the funding source.

CFDA #: Enter the CFDA number for all Federally funded awards.

Program Title: Enter the CFDA program title.

Award This Action: Enter the amount of the current award for each CFDA #. Enter the amount of the amendment. If the amendment does not affect the funding of this CFDA #, enter $0 on that row.

The following information is required *only for <u>federal subrecipient awards</u>*.

FAIN: This is the Federal Award Identification Number assigned by the Federal granting agency.

Federal Award Date: This is the date that the Federal Granting Agency official signed the award to the State Granting Agency.

Total Federal Award: This is the total amount of the Federal award to the State Granting Agency.

Federal Awarding Agency: This is the Federal Agency that issued the award to the State Granting Agency.

Federal Award Project Description: This is the title/description of the Federal award to the State Granting Agency.

Section IV – Contact Information

- Enter a contact person for the State Granting Agency. This individual should be the State's main point of contact for the award and is not required to be the Appointing Authority.

- Enter a contact person for the Grantee. This individual should be the Grantee's main point of contact for the award and is not required to be the official who signed the award.

State of Vermont
Grantee Risk-Based Assessment

Organization Name: _____ **Grant No.:** _____

Grant Title/Description: _____

ELIGIBILITY	Eligible	Ineligible
Suspension & Debarment		
Subrecipient Annual Report		
Single Audit		

1. Amount	Small <$25,000	Medium $25,000 to $250,000	Large >$250,000	Points Awarded
Rate the organization based on the amount of the award	0	10	20	

2. Accounting System	Automated	Manual	Combination	Points Awarded
Rate the organization based on the type of accounting system they use	0	20	0	

3. Program Complexity	Not Complex	Slightly Complex	Moderately Complex	Highly Complex	Points Awarded
Rate the complexity of the program	0	10	20	30	

Programs with complex compliance requirements have a higher risk of non-compliance. In your determination of complexity consider whether the program has complex grant requirements. The following are some examples of reasons a program would be considered more complex:

► Complex programmatic requirements and/or must adhere to regulations

► Various types of program reports are required

► Matching funds or Maintenance of Effort are required

► The organization further subcontracts out the program

4. Organization Risk Rank the organization based on your knowledge of the following:	YES	NO	Points Awarded
a. Is the organization receiving an award for the first time?	35	0	
b. Did the organization adhere to all terms and conditions of prior grant awards?	0	30	
c. Does the organization have adequate and qualified staff to comply with the terms of the agreement?	0	20	
d. Does the organization have prior experience with similar programs?	0	15	
e. Does the organization maintain policies which include procedures for assuring compliance with the terms of the award?	0	10	
f. Does the organization have an accounting system that will allow them to completely and accurately track the receipt and disbursements of funds related to the award?	0	10	
g. If staff will be required to track their time associated with the award, does the organization have a system in place that will account for 100% of each employee's time?	0	10	
h. Did the organization have one or more audit findings in their last single audit regarding program non-compliance?	30	0	
i. Did the organization have one or more audit findings in their last single audit regarding significant internal control deficiency?	20	0	
j. Other issues that may indicate high risk of non-compliance? Explain: *(Point value should be based on evaluator's judgment)*			

Other issues include but are not limited to: (1) having new or substantially changed systems (2) having new compliance personnel (3) external risks including; economic conditions, political conditions, regulatory changes & unreliable information (4) loss of license or accreditation to operate program (5) rapid growth (6) new activities, products, or services (7) organizational restructuring (8) where indirect costs are included, does the organization have adequate systems to segregate indirect from direct costs.

Low = 0 - 40 Moderate= 40 - 70 High= 70 and higher	**TOTAL RISK POINTS:**	

Completed By: _____ **Date:** _____
Signature

Name: _____ **Title:** _____

Justification for issuing award to high-risk grantee

Organization Name: _____ **Grant No.:** _____

Grant Title/Description: _____

Justification:

Approved By: _____ **Date:** _____

Signature

Name: _____ Title: _____

Common Attributes of Grantees with Low, Moderate and High Risk:	
Low Risk *Most of the following attributes must be present to be considered low risk*	**High Risk** *One or more of the following attributes may be present to be considered high risk*
► Organization has complied with the terms and conditions of prior grant awards.	► History of unsatisfactory performance or failure to adhere to prior grant terms and conditions
► No known financial management problems or financial instability	► Financial management problems and/or instability; inadequate financial management system
► High quality programmatic performance	► Program has highly complex compliance requirements
► No, or very insignificant, audit or other monitoring findings	► Significant findings or questioned costs from prior audit
► Timely and accurate financial and performance reports	► Untimely, inadequate, inaccurate reports
► Program likely does not have complex compliance requirements	► Recurring/unresolved issues
► Organization has received some form of monitoring (e.g., single audit, on-site review, etc.)	► Lack of contact with organization or any prior monitoring
	► Large award amount
Moderate Risk ► *Agencies that fall between low risk and high risk are considered moderate risk.*	