



2018-2019 Financial Management Form/ Pre-Award Risk Assessment - New Applicants

The purpose of this survey is to collect information about an organization's capacity to manage federal grant funds prior to issuance of a grant award document. Information may also be used to plan monitoring activities and/or identify technical assistance needed to strengthen operations.

Legal Name of Organization:

Address:

City/State/Zip Code:

EIN:

DUNS Number:

Please answer every question attaching materials & providing comments/explanations.

A. GENERAL INFORMATION

1. Has your organization received a Federal grant or cost-type contract award in the last 2 years?
 Yes No
If yes, what is your Federal cognizant/oversight agency?
Agency:
Name of Contact:
Telephone:
2. Please attach a schedule showing the total Federal dollars awarded to your organization by granting agency for the two most recently completed fiscal years.
3. Has your organization ever received funding from the Corporation for National and Community Service or the New Mexico Commission for Community Volunteerism?
 Yes No
If yes, please specify the grant number[s]:
4. Indicate whether your organization is:
 a non-profit educational institution
 a non-profit organization
 a Tribe
 a Territory
 Other, please specify
5. Has your organization been audited by a Certified Public Accounting firm within the past two years?
 Yes No
If yes, please attach copy.
6. Has your organization completed a recent Single Audit?
 Yes No
If yes, please attach most recent copy.
If no, is one currently underway or scheduled?
 Yes No
Give completion date where applicable.
7. Has your organization been granted tax-exempt status by the IRS?
 Yes No N/A



8. If so, under which section of the IRS Code?

501©3

501©5

501©4

501©6

Other, please specify

Please attach a copy of the most recently filed IRS Form 990.

9. Does your organization have established policies relating to salary scales, fringe benefits, travel reimbursement and personnel policies?

Yes No

B. FUNDS MANAGEMENT

1. Are you using a job cost system?

Yes No

2. Which of the following best describes your organization's accounting system?

Manual Automated Combination

3. How frequently do you post to the general ledger?

Daily Weekly Monthly Other

4. Does the accounting system completely and accurately track the receipt and disbursement of funds by each grant or funding source?

Yes No

5. Are common or indirect cost accumulated into cost pools for allocation to projects, contracts and grants?

Yes No

6. Are the following books of account maintained?

General Ledger Yes No

Income (Sales) Journal Yes No

Cash Receipts Journal Yes No

Purchase Journal Yes No

Cash Disbursements Journal Yes No

General Journal Yes No

Payroll Journal Yes No

Other, describe

7. Does the accounting system provide for the recording of actual grant/contract costs according to categories of your approved budget[s], and provide for current and complete disclosure?

Yes No

8. Are time and activity distribution records maintained by funding source and project for each employee to account for total hours [100%] devoted to your organization?

Yes No

9. Is your organization familiar with Federal cost principles?

Yes No

10. Is your organization familiar with procedures for the determination and allowance of costs in connection with Federal grants and contracts?

Yes No

C. INTERNAL CONTROLS

1. Are the duties of the bookkeeper/record keeper separate from cash functions (receipt or payment or cash)?

Yes No

2. Are checks signed by individual[s] whose duties exclude recording cash received, approving vouchers for payment and the preparation of payroll?

Yes No



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- 3. Are purchase approval methods documented and communicated?
 Yes No
- 4. Are accounting entries supported by appropriate documentation?
 Yes No
- 5. Are cash or in-kind matching funds supported by appropriate documentation?
 Yes No
- 6. Are employee time sheets supported by appropriately signed documentation?
 Yes No
- 7. Are employees who handle funds bonded against loss by reasons of fraud or dishonesty?
 Yes No
- 8. Are there procedures documented for complying with the applicable cost principles and the conditions of the award?
 Yes No

COMMENTS/EXPLANATIONS

The total number of attachments is: _____ Including: Audit(s) IRS Form 990

Attach numbered sheets as necessary.

PREPARED BY (SIGNATURE):
 TITLE ANT TYPED NAME:
 DATE:
 TELEPHONE/EMAIL:

FOR INTERNAL USE ONLY

REVIEWED BY:
 DATE:
 COMMENTS:

