GRANT AMENDMENT INFORMATION SHEET

	SECTION I	- GENERAL	GR	ANT INFOR	MATION		
Grantee Name:		Grantee Addre					
Grant #: The follow	ring is Amended:	Amount Awarded \$		\$	Award End Date:		
Amount Term Scope of W		This Action:					
Performance Measures	YES NO	Match/In-Kind	l:	\$			
Included in Award:		Description:					
S	ECTION II – S	SUBRECIPIE	NT	AWARD INF	ORMATION		
Indirect Rate:		FFATA: YES		NO	R&D:		
%		120		1,0			
(Approved rate for Federal							
	CTION III – F				TATE FUNDS)		
Fund Type		Award This Action			Description/Comments		
General Fun	d	\$					
Special Fund	1	\$					
Transportation Fund		\$					
Other State Fu	nds	\$					
FEDE	RAL FUNDS				Required Fed	eral	
(includes s	ubrecipient fund	ds)			Award Informa	ation	
CFDA#	Program	Award Thi	S	FAIN	Federal	Total Federal	
СГВА п	Title	Action		TAII	Award Date	Award	
		\$				\$	
Federal Awarding Agenc	y:		Fe	deral Award P	roject Description	1:	
		\$				\$	
Federal Awarding Agenc	y:		Fe	deral Award P	roject Description	1:	
		\$				\$	
Federal Awarding Agenc	y:	_ `	Fe	deral Award P	roject Description	1	
						\$	
Federal Awarding Agenc		\$					
redetai riwaranig rigene	y:	\$	Fe	deral Award P	roject Description	1:	
Tederal Marding Medic		S ON IV - CONT				1:	
STATE GRANTING A	SECTIO		AC G	T INFORMA RANTEE		1:	
STATE GRANTING A	SECTIO		AC G	T INFORMA RANTEE ame:		n:	
STATE GRANTING AONAME: Section:	SECTIO		AC G Na Ti	T INFORMA RANTEE ame: tle:		n:	
STATE GRANTING A	SECTIO		AC Na Ti Ph	T INFORMA RANTEE ame:		n:	

Section I – General Grant Information

Grantee Name: The name of the grantee.

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 original agreement number.

The Following is Amended: Check each type of amendment in this box.

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.

<u>Section III – Funding Allocation</u>

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 federal subrecipient awards.

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.

<u>Section IV – Contact Information</u>

- 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:			Gı	rant No.:		
Grant Title/Description:						
Suspension & Deba Subrecipient Annua Single Audit	rment	ible	Ineligible			
1. Amount			<u>Small</u> <\$25,000	Medium \$25,000 to \$250,000	<u>Large</u> >\$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 sy	stem they use		0	20	0	
3. Program Complexity	Not Con	nplex	Slightly Complex	Moderately Complex	Highly Complex	Points Awarded
Rate the complexity of the program	0		10	20	30	
 whether the program has complex grant requirements. To complex: Complex programmatic requirements and/or must a regulations Matching funds or Maintenance of Effort are required. 	dhere to	► Var	ious types of p	rogram reports a		
4. Ourselesting Pick						
4. Organization Risk	. II a dia a			VEC	NO	Points
Rank the organization based on your knowledge of the formula. Is the organization receiving an award for the first time.				YES 35	NO	Awarded
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?						
d. Does the organization have prior experience with similar programs?				0	15	
e. Does the organization maintain policies which include procedures for assuring complia with the terms of the award?			ompliance	0	10	
f. Does the organization have an accounting system that will allow them to comple accurately track the receipt and disbursements of funds related to the award?			tely and	0	10	
g. If staff will be required to track their time associated with the award, does the organize have a system in place that will account for 100% of each employee's time?			rganization	0	10	
Did the organization have one or more audit findings in their last single audit regarding rogram non-compliance?						
 Did the organization have one or more audit findings in significant internal control deficiency? 		udit reg	arding	20	0	
j. Other issues that may indicate high risk of non-complia (Point value should be based on evaluator's Judgment)	ance? Explain:					
<u>Other issues</u> include but are not limited to: (1) having new or substantially political conditions, regulatory changes & unreliable information (4) loss or organizational restructuring (8) where indirect costs are included, does the	of license or accreditation	on to oper	ate program (5) rap	id growth (6) new ac	tivities, products, or s	
Low = 0 - 40 Moderate = 40 - 70 High	= 70 and higher		тота	L RISK POINTS:		
Completed By:		Date:				
Signature		Date.				
Name:		Title				

Justification for issuing award to	high-risk grantee	
Organization Name:	Grant No.:	
Grant Title/Description:		
Justification:		
Approved By:	Date:	
	Signature	
Name:	Title:	

Low Risk Most of the following attributes must be present to be considered <u>low</u> 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	► Lack of contact with organization or any prior monitoring			
review, etc.)	► Large award amount			