



## RISK ASSESSMENT QUESTIONNAIRE

The purpose of the risk assessment is to determine whether a potential grantee is financially stable and if the organization uses accounting systems that are adequate to meet the State of Vermont administrative requirements. Please complete the following questionnaire and have it signed by the Executive Director and Fiscal Officer for your organization.

**Name of Entity Completing Questionnaire:** \_\_\_\_\_

Question	Yes	No	N/A
1. Does your organization use an electronic accounting software system (as opposed to manual)?			
2. Does the accounting system track receipts and disbursements by funding source?			
3. Does your organization maintain documentation to substantiate the value of in-kind contributions?			
4. Does your organization have a Financial Director, Financial Manager, Treasurer or equivalent?			
5. Does your organization regularly monitor budgeted versus actual expenditures to ensure that cost categories are not over-spent or under-spent?			
6. Does your organization have written procurement procedures indicating which individuals are authorized to initiate a purchase request, the flow of documents, and the requested levels of approval?			
7. A) Did your organization expend more than \$750,000 in federal funds during your previous fiscal year?			
B) Did your organization have a Single Audit performed? If so, please include the Single Audit Report with submittal of Risk Assessment Questionnaire.			
C) If there were any findings in the Single Audit Report, has your agency implemented action plans to address all findings? <b>If no, please explain:</b>			

Question	Yes	No	N/A
8. Does the organization have a system to track staff time spent on various grants/projects, for employees whose salaries are allocated to more than one contract/grant?			
9. Has your organization recently implemented any system changes including financial management, accounting systems, or any significant management changes? <b>If yes, please explain:</b>			
10. Does your organization have a written Accounting and Financial Reporting Policy?			
11. Does your organization require employees to follow a Personnel Policy with spending guidelines?			

I hereby certify that to the best of my knowledge and belief, the information provided in response to the foregoing questions is true and accurate.

\_\_\_\_\_  
Chief Officer Signature

\_\_\_\_\_  
Chief Fiscal Officer Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date