

# Grant Program Accounting System & Financial Capability Questionnaire

## **PURPOSE**

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR \$200's Standards for Financial and Program Management. The responses to this questionnaire are used to assist in the Agricultural Marketing Service's (AMS) evaluation of your accounting system to ensure the adequate, appropriate, and transparent use of Federal funds. Failure to comply with the criteria outlined in the regulations above may preclude your organization from receiving an award. This form applies to AMS' competitive grant programs.

### **ORGANIZATION INFORMATION**

Organization Name: Enter the Legal Name of the Organization

**Employer Identification Number**: Enter Organization's EIN

**Authorized Organization Representative (AOR):** Enter the Name of Individual Authorized to Sign this Document

Year the Organization was established: Enter Calendar Year

Number of Employees: Enter Number of Employees

### **GRANT STAFF INFORMATION**

Provide the name of the project staff and number of years that they have been employed by the applicant organization.

Staff Member	Name	Number of Years
AOR		
Project Director		
Financial Point of Contact		

### FINANCIAL MANAGMENT SYSTEM AND INTERNAL CONTROLS

Requirement	Yes	No
Is there a dedicated accountant or finance manager responsible for monitoring organizational funds?		
Does your organization have written accounting policies and procedures that meet the requirements associated with <u>2 CFR \$200.302</u> ?  If yes, provide a copy of or a hyperlink to your organization's written accounting policies and procedures		
(e.g., payment procedures and budgeting process).		
Hyperlink (if available):		
Does your organization have a written account of its internal controls as required by <u>2 CFR \$200.303</u> ?		
If yes, provide a copy of or a hyperlink to your organization's written internal controls for Federal awards (e.g., segregation of duties).		
Hyperlink (if available):		

# **AUDIT FINANCIAL AND REPORTS**

Requirement Yes No

Does your organization	issue annual financial reports and/or plans?					
	een audited within the last 5 fiscal years? r a hyperlink to the audit report.					
Hyperlink (if available):						
ADDITIONAL INFORMATION						
Additional financial information including expanding on responses in previous sections						
APPLICANT CERTIFICATION						
I certify that the above information is complete and correct to the best of my knowledge.						
	AOR Signature and Date					
	Phone:					
	Email:					

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

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- 1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410;
- 2) fax: (202) 690-7442; or
- 3) email: program.intake@usda.gov.

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