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Independent Auditor’s Report

To the Board of Trustees
Community College District of Monroe County, Michigan d/b/a Monroe County Community College

We have audited the financial statements of Community College District of Monroe County, Michigan d/b/a Monroe County Community College (the “College”) and its discretely presented component unit as of and for the year ended June 30, 2022 and the related notes to the financial statements, which collectively comprise the College’s basic financial statements. We have issued our report thereon dated November 23, 2022, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. We have not performed any procedures with respect to the audited financial statements subsequent to November 23, 2022.

The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance, and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as a whole.

December 9, 2022
Independent Auditor's Report

To Management and the Board of Trustees
Community College District of Monroe County, Michigan d/b/a Monroe County Community College

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, the financial statements of Community College District of Monroe County, Michigan d/b/a Monroe County Community College (the "College") and its discretely presented component unit as of and for the year ended June 30, 2022 and the related notes to the financial statements, which collectively comprise the College's basic financial statements, and have issued our report thereon dated November 23, 2022. The financial statements of the Foundation at Monroe Community College were not audited in accordance with Government Auditing Standards.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the College's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control. Accordingly, we do not express an opinion on the effectiveness of the College's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the College's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. We identified certain deficiencies in internal control, described in the accompanying schedule of findings and questioned costs as items 2022-01 and 2022-02 that we consider to be material weaknesses.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the College's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under Government Auditing Standards.
To Management and the Board of Trustees  
Community College District of Monroe County, Michigan d/b/a Monroe County Community College

College's Response to Findings

*Government Auditing Standards* requires the auditor to perform limited procedures on the College's response to the findings identified in our audit and described in the accompanying schedule of findings and questioned costs. The College's response was not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the College's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the College's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

November 23, 2022
Report on Compliance for Each Major Federal Program and Report on Internal Control Over Compliance Required by the Uniform Guidance

Independent Auditor’s Report

To the Board of Trustees
Community College District of Monroe County, Michigan d/b/a Monroe County Community College

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Community College District of Monroe County, Michigan d/b/a Monroe County Community College's (the “College”) compliance with the types of compliance requirements identified as subject to audit in the Office of Management and Budget (OMB) Compliance Supplement that could have a direct and material effect on each of the College's major federal programs for the year ended June 30, 2022. The College's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the College complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of the major federal programs for the year ended June 30, 2022.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (“Uniform Guidance”). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor’s Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the College and to meet our other ethical responsibilities in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of the College's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the College’s Federal programs.
To the Board of Trustees  
Community College District of Monroe County, Michigan d/b/a Monroe County Community College

**Auditor’s Responsibilities for the Audit of Compliance**

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the College's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS, Government Auditing Standards, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the College’s compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, Government Auditing Standards, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the College's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the College’s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the College’s internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

**Report on Internal Control Over Compliance**

Our consideration of internal control over compliance was for the limited purpose described in the Auditor’s Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that have not been identified. However, as discussed below, we did identify a certain deficiency in internal control over compliance that we consider to be a material weakness.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. We consider the deficiency in internal control over compliance described in the accompanying schedule of findings and questioned costs as item 2022-003 to be a material weakness.

A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention of those charged with governance.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.
To the Board of Trustees
Community College District of Monroe County, Michigan d/b/a Monroe County Community College

Government Auditing Standards requires the auditor to perform limited procedures on the College's response to the internal control over compliance findings identified in our audit described in the accompanying schedule of findings and questioned costs. The College's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

December 9, 2022
## Schedule of Expenditures of Federal Awards

### Year Ended June 30, 2022

<table>
<thead>
<tr>
<th>Federal Agency/Pass-through Agency/Program Title</th>
<th>Assistance Listing Number</th>
<th>Pass-through Entity or Other Identifying Number</th>
<th>Award Amount</th>
<th>Total Amount Provided to Subrecipients</th>
<th>Federal Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clusters:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Financial Assistance Cluster - U.S. Department of Education:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Federal Pell Grant Program</td>
<td>84.063</td>
<td>P063P211643</td>
<td>2,397,971</td>
<td>-</td>
<td>2,397,971</td>
</tr>
<tr>
<td>Pell Administrative Cost Allowance</td>
<td>84.063</td>
<td>P063C211643</td>
<td>4,065</td>
<td>-</td>
<td>4,180</td>
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<tr>
<td>Federal Work-Study Program</td>
<td>84.033</td>
<td>P033A212048</td>
<td>40,000</td>
<td>-</td>
<td>23,031</td>
</tr>
<tr>
<td>Federal Supplemental Educational Opportunity Grants</td>
<td>84.007</td>
<td>P007A212048</td>
<td>59,735</td>
<td>-</td>
<td>76,704</td>
</tr>
<tr>
<td>Federal Direct Student Loans:</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subsidized</td>
<td>84.268</td>
<td>P268C021643</td>
<td>N/A</td>
<td>-</td>
<td>907,193</td>
</tr>
<tr>
<td>Plus</td>
<td>84.268</td>
<td>N/A</td>
<td>N/A</td>
<td>-</td>
<td>11,911</td>
</tr>
<tr>
<td>Unsubsidized</td>
<td>84.268</td>
<td>N/A</td>
<td>N/A</td>
<td>-</td>
<td>1,600,786</td>
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<tr>
<td>Total Student Financial Assistance Cluster</td>
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<td></td>
<td></td>
<td></td>
<td>5,021,776</td>
</tr>
<tr>
<td>TRIO Cluster - U.S. Department of Education:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Upward Bound 09/01/2021 - 08/31/2022 Monroe</td>
<td>84.047A</td>
<td>P047A170893</td>
<td>288,933</td>
<td>-</td>
<td>187,693</td>
</tr>
<tr>
<td>Upward Bound 09/01/2020 - 08/31/2021 Monroe</td>
<td>84.047A</td>
<td>P047A170893</td>
<td>250,000</td>
<td>-</td>
<td>58,480</td>
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<tr>
<td>Upward Bound 09/01/2021 - 08/31/2022 Airport</td>
<td>84.047A</td>
<td>P047A170894</td>
<td>297,601</td>
<td>-</td>
<td>205,769</td>
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<tr>
<td>Upward Bound 09/01/2020 - 08/31/2021 Airport</td>
<td>84.047A</td>
<td>P047A170894</td>
<td>257,500</td>
<td>-</td>
<td>74,577</td>
</tr>
<tr>
<td>Upward Bound 09/01/2021 - 08/31/2022 Jefferson</td>
<td>84.047A</td>
<td>P047A170895</td>
<td>297,600</td>
<td>-</td>
<td>196,716</td>
</tr>
<tr>
<td>Upward Bound 09/01/2020 - 08/31/2021 Jefferson</td>
<td>84.047A</td>
<td>P047A170895</td>
<td>263,937</td>
<td>-</td>
<td>82,015</td>
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<tr>
<td>Total TRIO Cluster</td>
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<td></td>
<td></td>
<td></td>
<td>804,250</td>
</tr>
<tr>
<td>Research and Development Cluster - National Science Foundation:</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Science Foundation Welding Grant</td>
<td>47.076</td>
<td>1801678</td>
<td>224,906</td>
<td>-</td>
<td>40,260</td>
</tr>
<tr>
<td>Passed through the University of Michigan -</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Science Foundation Welding Grant</td>
<td>47.076</td>
<td>2000730/ SUBK00012139</td>
<td>105,027</td>
<td>-</td>
<td>12,904</td>
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<tr>
<td>Total Research and Development Cluster</td>
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<td></td>
<td></td>
<td>53,164</td>
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<tr>
<td>Total clusters</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,879,190</td>
</tr>
<tr>
<td>Other federal awards:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>U.S. Department of Education:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COVID-19 - Education Stabilization Fund:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COVID-19 - Higher Education Emergency Relief Fund - Student Aid</td>
<td>84.425E</td>
<td>P425E202505</td>
<td>3,786,879</td>
<td>-</td>
<td>2,620,508</td>
</tr>
<tr>
<td>Total Education Stabilization Fund</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,310,112</td>
</tr>
<tr>
<td>Passed through the Michigan Department of Education - Career and Technical Education - Basic Grants to States:</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Administration</td>
<td>84.048A</td>
<td>2225-18</td>
<td>9,200</td>
<td>-</td>
<td>9,200</td>
</tr>
<tr>
<td>Regional Allocation</td>
<td>84.048A</td>
<td>2221-18</td>
<td>210,281</td>
<td>-</td>
<td>210,281</td>
</tr>
<tr>
<td>Total Career and Technical Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>219,481</td>
</tr>
<tr>
<td>Total U.S. Department of Education</td>
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<td></td>
<td></td>
<td></td>
<td>5,529,594</td>
</tr>
<tr>
<td>U.S. Department of Education:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Passed through Oakland Community College - H-1B Job Training Grants</td>
<td>17.268</td>
<td>HG344362060-A-26</td>
<td>100,000</td>
<td>-</td>
<td>28,941</td>
</tr>
<tr>
<td>Passed through the University of Toledo - Great Start for Higher Education - Special Education:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Development to Improve Services and Results for Children with Disabilities</td>
<td>84.325N</td>
<td>H325N180008-20</td>
<td>39,490</td>
<td>-</td>
<td>20,125</td>
</tr>
<tr>
<td>Total other federal awards</td>
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<td></td>
<td></td>
<td></td>
<td>5,578,669</td>
</tr>
<tr>
<td>Total federal awards</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11,457,849</td>
</tr>
</tbody>
</table>

Total $16,781,956 $ - $ $11,457,849
Note 1 - Basis of Presentation

The accompanying schedule of expenditures of federal awards (the “Schedule”) includes the federal grant activity of Community College District of Monroe County, Michigan d/b/a Monroe County Community College (the “College”) under programs of the federal government for the year ended June 30, 2022. The information in the Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (the “Uniform Guidance”). Because the Schedule presents only a selected portion of the operations of the College, it is not intended to and does not present the financial position, changes in net position, or cash flows of the College.

Note 2 - Summary of Significant Accounting Policies

Expenditures reported in the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, wherein certain types of expenditures are not allowable or are limited as to reimbursement. The pass-through entity identifying numbers are presented where available.

The College has elected not to use the 10 percent de minimis indirect cost rate to recover indirect costs, as allowed under the Uniform Guidance.

Note 3 - Adjustments and Transfers

As allowable and in accordance with federal regulations issued by the U.S. Department of Education, in the year ended June 30, 2022, the College transferred $16,969 of the Federal Work-Study Program (84.033) award to the 2021-2022 Federal Supplemental Educational Opportunity Grant (84.007) award, which it expended in the 2021-2022 award year.
Schedule of Findings and Questioned Costs
Section I - Summary of Auditor's Results

Financial Statements

Type of auditor's report issued: Unmodified

Internal control over financial reporting:

- Material weakness(es) identified? Yes No
- Significant deficiency(ies) identified that are not considered to be material weaknesses? Yes X None reported

Noncompliance material to financial statements noted? Yes X None reported

Federal Awards

Internal control over major programs:

- Material weakness(es) identified? Yes No
- Significant deficiency(ies) identified that are not considered to be material weaknesses? Yes X None reported

Any audit findings disclosed that are required to be reported in accordance with Section 2 CFR 200.516(a)? Yes No

Identification of major programs:

<table>
<thead>
<tr>
<th>CFDA Number</th>
<th>Name of Federal Program or Cluster</th>
<th>Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>84.425E, 84.425F, 84.425M</td>
<td>COVID-19 - Higher Education Stabilization Fund</td>
<td>Unmodified</td>
</tr>
<tr>
<td>84.047A</td>
<td>TRIO - Upward Bound</td>
<td>Unmodified</td>
</tr>
</tbody>
</table>

Dollar threshold used to distinguish between type A and type B programs: $750,000

Auditee qualified as low-risk auditee? Yes No
Section II - Financial Statement Audit Findings

Reference Number | Finding
--- | ---
2022-001 | Finding Type - Material weakness

Criteria - Management is responsible for maintaining its accounting records in accordance with generally accepted accounting principles (GAAP).

Condition - During the audit, significant adjustments were identified and proposed (which were approved and posted by management) to adjust the College’s general ledger to the appropriate balances.

Context - The College did not have proper procedures in place to ensure cutoff of expenditures at June 30, 2022. This resulted in three adjustments which were identified by the auditors and posted by management - an entry in the amount of $149,844 to increase prepaid expenses and decrease administration expenses to account for a multi-year contract that had been expensed in full (and also decrease HEERF revenue and increase unearned revenue), an entry in the amount of $304,924 to increase due to general fund and decrease TRIO grant expenditures in order to properly account for internal balances, and an entry in the amount of $2,620,508 to increase HEERF grant revenue and increase student service expense to properly account for the student aid portion of the HEERF grant.

Cause - This condition was the result of lack of oversight and lack of proper procedures around the cutoff of expenditures in the College’s books and records.

Effect - Audit adjustments were identified and recorded by management, resulting in material impact to the financial statements.

Recommendation - Management has taken appropriate corrective action for the current year by reviewing and approving the proposed audit adjustments. For future periods, we recommend that management implement procedures to ensure that all general ledger accounts are appropriately reconciled and adjusted at year-end, including implementing more robust procedures to evaluate proper cutoff of payables and expenditures.

Views of Responsible Officials and Planned Corrective Actions - A detailed business procedure will be written and implemented that expressly lists how to handle expenditures that extend beyond the College’s fiscal year; but still falls within the grant year. The procedure will reference the use of the approved grant budget for determining allowable expenditures and time line for those expenditures.
<table>
<thead>
<tr>
<th>Reference Number</th>
<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>2022-002</td>
<td>Finding Type - Material weakness</td>
</tr>
</tbody>
</table>

Criteria - The timely preparation and issuance of audited financial statements in accordance with generally accepted accounting principles requires a coordinated effort between management and the external auditors. This places the burden on the College to properly prepare for the audit, including timely closing of the accounting records, reconciling internal accounts (namely due to/due from and transfers in/out), and preparation of workpapers to support the significant account balances.

Condition - The completion of the audit was delayed due to errors in the general ledger that were discovered during audit fieldwork and internal accounts balances that were not reconciled.

Context - The College did not provide the external audit team with closed books, reconciled balances, and workpapers to support these balances in a timely manner.

Cause - As it related to the closing of the books and audit preparation, the College did not have proper procedures in place to ensure that this process was completed timely. Proper procedures are necessary to prepare audit support that is free from material errors and to prevent late filing.

Effect - As a result, the College's financial statements and audit report were filed eight days past the deadline.

Recommendation - We recommend that information is provided to the external audit team much sooner in future years to ensure all parties involved have a sufficient amount of time to review the financial statements prior to submission.

Views of Responsible Officials and Planned Corrective Actions - A detailed business procedure will be written and implemented that expressly lists how to handle year-end audit as it relates to both the Annual Financial Audit and the Single Audit. The procedure will include processes for quarterly balancing and review, at a minimum. It will also include who is to handle all pieces of the audit and preparation in the absence of the Director of Financial Services.
### Section III - Federal Program Audit Findings

<table>
<thead>
<tr>
<th>Reference Number</th>
<th>Finding</th>
<th>Questioned Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2022-003</td>
<td>CFDA Number, Federal Agency, and Program Name - ALN 84.425E and 84.425F, Department of Education, COVID-19 - Education Stabilization Fund 84.047A, Department of Education, TRIO Cluster - Upward Bound 84.425N, Great Start for Higher Education</td>
<td>None</td>
</tr>
</tbody>
</table>

Federal Award Identification Number and Year - P425E202505, P425F202028, P425M200851, P047A170893, P047A170894, P047A170895, H325N180008-20

Pass-through Entity - N/A for ALN 84.425E and 84.047A, which were direct funded

ALN 84.425N was passed through the University of Toledo

Finding Type - Material weakness

Repeat Finding - No

Criteria - 2 CFR 200.510(b) requires organizations to prepare a Schedule of Expenditures of Federal Awards (SEFA) for the period covered by the auditee's financial statements, which must include the total federal awards expended as determined in accordance with 2 CFR 200.502. While not required, the auditee may choose to provide information requested by federal awarding agencies and pass-through entities to make the schedules easier to use.

Condition - The original schedule of expenditures of federal awards (SEFA) provided by the College was not complete and accurate. The audit team identified numerous errors throughout the course of our procedures which were brought to management's attention. Management made the appropriate corrections to adjust the SEFA to the appropriate balances and presentation.

Questioned Costs - None

Identification of How Questioned Costs Were Computed - N/A
### Context
The College accumulates the financial data and other required information to complete the SEFA. The original SEFA provided by the College to the audit team included several inaccuracies, including missing and/or incomplete expenditure amounts and incorrect presentation of pass through entities, award numbers, and award amounts. The SEFA most significantly included the following inaccuracies:

- $2,620,508 spent under ALN 84.425E (HEERF) was improperly excluded from the SEFA.
- Expenditures under ALN 84.425F (HEERF) were overstated by $149,844 for costs incurred outside the fiscal period under audit.
- Expenditures under ALN 84.047A (TRIO) were overstated by $304,924 for costs incurred outside the fiscal period under audit.
- $28,941 spent under ALN 84.425N (Great Start for Higher Education) was improperly excluded from the SEFA.

### Cause and Effect
Controls and processes in place to prepare the SEFA did not ensure that the SEFA was complete and accurate. After follow-ups with the audit team, all errors were corrected by management and all expenditure amounts and information were properly reported on the SEFA for the year ended June 30, 2022.

### Recommendation
The College's process for preparing the SEFA should be adjusted to ensure that accounting records are closed timely, internal accounts are reconciled (i.e. the SEFA reconciles to federal revenue recorded), and appropriate workpapers are prepared to support the SEFA balances. In addition, client should review award numbers, award amounts, pass through entity information, and expenditure amounts for accuracy before providing the SEFA to the auditors. This process should include review by appropriate individuals, including the Director of Financial Aid, Director of Financial Services, and individuals involved in the administration of grants.

### Views of Responsible Officials and Corrective Action Plan
A detailed business procedure will be written and implemented that expressly lists how to handle year-end audit as it relates to both the Annual Financial Audit and the Single Audit. The procedure will include processes for quarterly balancing and review, at a minimum. The procedure will include the creation of the annual SEFA document to be used by auditors in determining what programs the College has been awarded and what expenditures have been made. It will also include who is to handle all pieces of the audit and preparation in the absence of the Director of Financial Services.