Question 13 (Legislator Brew)

Center for Community Alternatives

 ID
 ARPA ID
 Done?
 Score

 33
 19
 yes
 25

Company Name

Center for Community Alternatives

Project Name

Promoting A Community Transformation: Nonviolence Project (PACT: Nonviolence Project)

Sc	coring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Υ
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	Υ
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
FI	inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	2
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES:	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	3
N	OTES:	
A	udits	-
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	OTES:	
In	direct Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	1
N	OTES: 21.9	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	OTES: 5	
FI	nal Score/Notes	10.000
	Final Score	25
N	OTES:	

FLPPS

 ID
 ARPA ID
 Done?
 Score

 32
 21
 yes
 35

Company Name

FLPPS

Project Name

Complex Care Program

Staff

Faye, Rebecca, Matt, Laura

50	coring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	General Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	IOTES:	
F	inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	2
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	•
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	1
N	IOTES:	
E	experience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	4
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	0
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	3
N	IOTES:	
A	Audits	.00.
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	IOTES:	.5=55
ti	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	NOTES:	
C	Overall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	2
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	NOTES:	
F	inal Score/Notes	
	Final Score	35
N	NOTES: Medium risk.	

Consumer Credit Counseling Service of Rochester

 ID
 ARPA ID
 Done?
 Score

 30
 47
 yes
 53

Company Name

Consumer Credit Counseling Service of Rochester

Project Name Driven2Success

Sc	roring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
FI	inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	2
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	3
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES: Need info about their financial system.	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	5
	OTES: Entity did not provide financial statements. Confirmed with Chad that they have never been required to have a single audit as they have never xpended more than \$750k in Federal funds.	
In	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	OTES:	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	OTES: 3	
FI	inal Score/Notes	
	Final Score	53
N	OTES:	

Veterans Outreach Center, Inc.

 ID
 ARPA ID
 Done?
 Score

 29
 72
 yes
 29

Company Name

Veterans Outreach Center, Inc.

Project Name

Veteran Housing and Services Project (VHSP)

Sc	oring	-
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	eneral Assessments	1
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
FI	inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	3
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES: Don't have info on financial system. Rated 3 bc audit report doesn't have anything notable.	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	2
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	
N	OTES:	
In	direct Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	OTES:	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	OTES: 25	
FI	nal Score/Notes	
	Final Score	29
N	OTES:	

Big Brothers Big Sisters of Greater Rochester NY

 ID
 ARPA ID
 Done?
 Score

 28
 76
 yes
 45

Company Name

Big Brothers Big Sisters of Greater Rochester NY

Project Name

Youth Mentoring and Family Support in Monroe County

1 is the earnery authorized to do business in New York State? 2 Does this proposal qualify for funding under ARPA requirements? 3 Does the project advance one of the 3 goals outlined by Morroe County's Recovery Agenda and one of the 6 metrics? 4 Nas the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx) 2 Nas the entity doopted and implemented all required Uniform Guidance policies and procedures? 3 Does the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? 3 Does the entity have a Code of Ethics policy which is provided to all associated employees? 4 NoTES: Financial Management, Systems and Personnel 5 Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward in funda activities? 5 Does the entity is financial management system provide for the control and accountability of project funds, property, and other assets? 5 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. 5 What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 5 Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits. (b) Time & attendance. (c) Leave. (d) 6 Nondiscrimination. (e) Repotism, (f) Coeffict of Interest? 7 Does the entity have sufficient internal controls related to the subaward funds? 7 Does the entity have sufficient internal controls related to the subaward funds? 7 Does the entity have sufficient internal controls related to the subaward funds? 8 Vihat is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. 9 What is the entity previously received grants from the federal government? If yes, please list the last three agenc	S	coring	
3 Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics? 4 Has the Data Collection form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx) 7 Ceneral Assassments 1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures? 3 Does the entity have a Code of Ethics policy which is provided to all associated employees? 1 Does the entity have a Code of Ethics policy which is provided to all associated employees? 1 Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? 2 Does the entity's financial management system that provides records that can identify the sources and application of funds for subaward funded activities? 3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. 3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. 4 What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 5 Does the entity have sufficient cash flow to carry out the subaward funds? 7 Does the entity have sufficient cash flow to carry out the subaward funds? 8 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to carry out the subaward terms? 9 Does the entity have sufficient cash flow to	1	Is the agency authorized to do business in New York State?	Υ
Was the Data Collection form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx) Telegraph	2	Does this proposal qualify for funding under ARPA requirements?	Y
Cemeral Assessments Has the entity adopted and implemented all required Uniform Guidance policies and procedures? 1 Has the entity adopted and implemented records cretention policies consistent with the ARP/CSLFRF award terms? 1 Does the entity have a Code of Ethics policy which is provided to all associated employees? 1 NOTES: Financial Management, Systems and Personnel 1 Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? 1 Does the entity have a financial management system provide for the control and accountability of project funds, property, and other assets? 3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. 5 What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 5 Does the entity have sufficient internal controls related to the subaward funds? 1 Does the entity have sufficient cash flow to carry out the subaward funds? 1 Does the entity have sufficient cash flow to carry out the subaward funds? 1 Does the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. 3 What is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. 3 I dentify any other monitoring interventions the entity is currently subject to related to other federal grant awards. 3 I dentify any other monitoring interventions the entity is currently subject to related to other federal grant awards. 3 I she entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit and do not complete the rest of the Audit section. 3 I she entity have a designated federal cognizant audit agency? If yes	3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures? 1 Is as the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? 1 Is obset the entity have a Code of Ethics policy which is provided to all associated employees? 1 Is obset the entity have a Code of Ethics policy which is provided to all associated employees? 1 Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? 2 Does the entity is financial management system provide for the control and accountability of project funds, property, and other assets? 3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. 4 What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 5 Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) 6 Does the entity have sufficient cash flow to carry out the subaward funds? 5 Does the entity have sufficient cash flow to carry out the subaward terms? 6 Does the entity have sufficient cash flow to carry out the subaward terms? 7 Does the entity have sufficient cash flow to carry out the subaward terms? 8 What is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. 9 What is the entity previously received grants on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain. 9 Gently any other monitoring interventions the entity is currently subject to related to other federal grant awards. 1 Is the entity experienced in managing federal funds of the scope of this proposed subaward? 1 Does th	4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	Y
Also the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? 1	G	eneral Assessments	
3 Does the entity have a Code of Ethics policy which is provided to all associated employees? INOTES:	1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
NOTES: Financial Management, Systems and Personnel Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. What is the entity's senior management. Does the entity's senior management. Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have sufficient cash flow to carry out the subaward tunds? Does the entity have sufficient cash flow to carry out the subaward terms? That is the entity pave sufficient cash flow to carry out the subaward terms? The subaward terms? Besperience with Other Federal Grants Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. A last the entity past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain. Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards. Is the entity experienced in managing federal funds of the scope of this proposed subaward? The subaward of the audit agency? Has the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency. Has the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last t	2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	
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Indirect Rate Information 1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. NOTES:	3		1
1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. NOTES:	N	OTES:	
NOTES:	Br	ndirect Rate Information	
	1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
Overall Rick Assessment	N	OTES:	
Official Kisk Assessment	O	verail Risk Assessment	
1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	4
What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	2		1
NOTES: 14 - main contact is overwhelmed by ARPA process and has not met any of the survey deadlines. May find implementation and reporting very difficult.			
Final Score/Notes	F	inal Score/Notes	
Final Score 45		Final Score	45
NOTES:	N	OTES:	1

Dress for Success Rochester

 ID
 ARPA ID
 Done?
 Score

 27
 79
 yes
 58

Company Name

Dress for Success Rochester

Project Name

Dress for Success Rochester: Road to Success

Sco	oring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
Ge	eneral Assessments	F
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
NC	DTES:	
Fi	nancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	3
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	2
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
NC	OTES: ED is relatively new. The contact for this grant changed multiple times throughout this process.	
Ex	perience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
NC	DTES:	
Au	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	5
NC	DTES: audit is not required	31
tne	direct Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
NC	DTES:	
01	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	4
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	3
NC	OTES: 37	
Fil	nal Score/Notes	
	Final Score	58
NC	DTES:	

Community Resource Collaborative on Behalf of the Neighborhood Collaborative Project

ID	ARPA ID	Done?	Score
26	80	yes	67

Company Name

Community Resource Collaborative on Behalf of the Neighborhood Collaborative Project

Project Name

Neighborhood Collaborative Project (NCP)

5	coring	
1	. Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
0	General Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
1	NOTES:	
F	inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	2
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	4
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	5
7	Does the entity have sufficient cash flow to carry out the subaward terms?	5
N	NOTES:	
E	xperience with Other Federal Grants	11 1202
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
N	NOTES:	
1	Audits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	5
V	IOTES:	
Ŀ	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	IOTES:	
C	Overall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	5
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	4
N	NOTES: 60	
F	inal Score/Notes	
	Final Score	67
I	NOTES:	

Lifespan of Greater Rochester

ID	ARPA ID	Done?	Score
25	83	yes	23

Company Name

Lifespan of Greater Rochester

Project Name

Improving Older Adults' Health, Safety and Economic Recovery Through Community-based Aging Services and Healthcare Integration

Sc	coring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	Y
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
F	Inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES:	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	1
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	OTES:	
Ir	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	1
N	OTES: 16.30	
0	verall Risk Assessment	30.00
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	2
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	OTES: 1.3	
F	Inal Score/Notes	
	Final Score	23
N	OTES:	

Trillium Health

ID ARPA ID Done? Score24 92 yes 30

Company Name

Trillium Health

Project NameProject ACCESS

So	coring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	Y
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
F	Inancial Management, Systems and Personnel	Ш
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	3
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES:	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	3
N	OTES:	
A	audits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	OTES:	
h	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	OTES:	
C	Overall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	OTES: .02	
F	inal Score/Notes	
	Final Score	30
N	IOTES:	

Mt. Olivet Baptist Church

 ID
 ARPA ID
 Done?
 Score

 23
 110
 yes
 81

Company Name

Mt. Olivet Baptist Church

Project Name

Mt. Olivet Baptist Church Active Shooter Preventive Action Plan

Sco	ring	
1	s the agency authorized to do business in New York State?	Υ
2 (Does this proposal qualify for funding under ARPA requirements?	Y
3 [Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4 1	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
Ge	neral Assessments	
1 1	las the entity adopted and implemented all required Uniform Guidance policies and procedures?	5
2 1	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	5
3 [Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
NO	TES: per legal, no code of ethics are required. Per legal, this church is a subcontractor rather than a subrecipient.	
Fin	ancial Management, Systems and Personnel	
	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	5
2 1	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	5
3 1	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	5
7	Does the entity have sufficient cash flow to carry out the subaward terms?	5
NO	TES: Per legal, no personnel policies are required because this church is a subcontractor rather than a subrecipient.	
Ex	perience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	dentify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	s the entity experienced in managing federal funds of the scope of this proposed subaward?	5
NO	TES: Per legal, this church is a subcontractor rather than a subrecipient.	
Au	dits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	5
	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	5
NO	TES: Per legal, this church is a subcontractor rather than a subrecipient.	
Inc	lirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
NO	TES:	
Ov	erall Risk Assessment	
ı	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	2
	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	5
NO	TES:	
Fir	al Score/Notes	
	Final Score	81
NO	TES:	

Foodlink, Inc.

 ID
 ARPA ID
 Done?
 Score

 22
 128
 yes
 37

Company Name

Foodlink, Inc.

Project Name

Expanding Food Access for Monroe County Families

36	oring	
1	Is the agency authorized to do business in New York State?	Υ
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Υ
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
F	inancial Management, Systems and Personnel	Ţ
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	3
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	3
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	4
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	3
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	C
6	Does the entity have sufficient internal controls related to the subaward funds?	[1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES: Don't have financial statements/ financial mgmt system info.	
E	xperience with Other Federal Grants	11
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	Œ
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	E
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	•
N	OTES:	
Ir	direct Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	
N	OTES:	
O	verall Risk Assessment	T
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	•
N	OTES: .06	
F	inal Score/Notes	
-	Final Score	8 3

EnCompass: Resources for Learning

 ID
 ARPA ID
 Done?
 Score

 21
 148
 yes
 38

Company Name

EnCompass: Resources for Learning

Project Name

Youth Workforce Consortium aka "The Hive"

Scoring
1 Is the agency authorized to do business in New York State?
2 Does this proposal qualify for funding under ARPA requirements?
3 Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?
4 Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)
General Assessments
1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures?
2 Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?
3 Does the entity have a Code of Ethics policy which is provided to all associated employees?
NOTES:
Financial Management, Systems and Personnel
Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?
2 Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?
3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.
What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.
Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?
6 Does the entity have sufficient internal controls related to the subaward funds?
7 Does the entity have sufficient cash flow to carry out the subaward terms?
NOTES: Do not have audited financial statements.
Experience with Other Federal Grants
1 Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.
What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.
3 Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.
4 Is the entity experienced in managing federal funds of the scope of this proposed subaward?
NOTES:
Audits
1 Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.
2 Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.
3 If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.
NOTES: Cannot locate Single Audit online. Request from Entity.
Indirect Rate Information
Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no. indicate the de minimis 10% indirect rate will apply.
NOTES:
Overall Risk Assessment
1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?
What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)
NOTES: 24
Final Score/Notes
Final Score 38
NOTES:

Volunteers of America of Western New York, Inc.

 ID
 ARPA ID
 Done?
 Score

 20
 152
 yes
 36

Company Name

Volunteers of America of Western New York, Inc.

Project Name

VOA's Hydroponic Farm

Scoring	
1 Is the agency authorized to do business in New York State?	Y
2 Does this proposal qualify for funding under ARPA requirements?	Y
3 Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4 Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
General Assessments	in i
1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2 Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3 Does the entity have a Code of Ethics policy which is provided to all associated employees?	
NOTES:	
Financial Management, Systems and Personnel	
Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2 Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	4
What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	3
Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6 Does the entity have sufficient internal controls related to the subaward funds?	1
7 Does the entity have sufficient cash flow to carry out the subaward terms?	3
NOTES:	
Experience with Other Federal Grants	
1 Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3 Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4 Is the entity experienced in managing federal funds of the scope of this proposed subaward?	1
NOTES:	
Audits	
1 Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2 Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3 If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
NOTES: VOA confirmed no Single Audit even though original survey indicated yes.	
Indirect Rate Information	
1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
NOTES:	
Overall Risk Assessment	
1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	2
2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	h 1
NOTES: 2	
Final Score/Notes	
Final Scor	е 36
NOTES:	

Willow Domestic Violence Center of Greater Rochester, Inc.

ID	ARPA ID	Done?	Score
19	157	ves	46

Company Name

Willow Domestic Violence Center of Greater Rochester, Inc.

Project Name

Launching a Multi-Disciplinary Family Justice Center in Monroe County

Does this proposal qualify for funding under ARPA requirements? Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics? Has the Data Collection Form on Pederal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf/aspx) Has the entity adopted and implemented all required Uniform Guidance policies and procedures? Has the entity adopted and implemented all required Uniform Guidance policies and procedures? Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFAF award terms? Does the entity have a Code of Ethics policy which is provided to all associated employees? Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward unded activities? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? Does the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) sonodiscrimination, (e) Apposition, (f) Conflict of Interest? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have a program and periods. Does the entity have sufficient internal controls related to the subaward funds? Does the entity have a designated federal funds of the scope of	Scoring	
boes the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics? Nas the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx) Nas the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx) Nas the entity adopted and implemented all required Uniform Guidance policies and procedures? Nas the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? 1	1 Is the agency authorized to do business in New York State?	Y
Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx) Flas the entity adopted and implemented all required Uniform Guidance policies and procedures? Las the entity adopted and implemented all required Uniform Guidance policies and procedures? Las the entity have a Code of Ethics policy which is provided to all associated employees? Does the entity have a foode of Ethics policy which is provided to all associated employees? Does the entity have a fondand management system that provides records that can identify the sources and application of funds for subaward funded activities? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. Does the entity have a formal, written personnel policy that addresses. (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) anondiscrimination, (e) Nepoticm, (f) Conflict of Interest? Does the entity have sufficient thernal controls related to the subaward funds? Does the entity have sufficient cash flow to carry out the subaward terms? What is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. What is the entity previously received an epather pass performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If entity in an	2 Does this proposal qualify for funding under ARPA requirements?	Y
Has the entity adopted and implemented all required Uniform Guidance policies and procedures? It is the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? It is the entity have a Code of Ethics policy which is provided to all associated employees? Does the entity have a Code of Ethics policy which is provided to all associated employees? Financial Management. Systems and Personnel Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. What is the entity saff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have sufficient internal controls related to the subaward funds? Does the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. What is the entity previously received grants from the federal grogram outcomes and managing federal funds in compliance with federal regulations? If the entity have performance on meeting federal grogram outcomes and managing federal funds in compliance with federal regulations? If the entity any other monitoring interventions the entity is currently subject to related to other federal grant awards. Sources: Audits Does the entity have a designated federal cognizant audit agency? If yes, please pro	3 Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
Has the entity adopted and implemented all required Uniform Guidance policies and procedures? Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? 1 Does the entity have a Code of Ethics policy which is provided to all associated employees? 1 Does the entity have a Guidance of Ethics policy which is provided to all associated employees? 1 Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? 1 Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? 2 Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? 3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. 4 What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 5 Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) mondiscrimination, (e) Nepotism, (f) Conflict of Interest? 5 Does the entity have sufficient internal controls related to the subaward funds? 7 Does the entity have sufficient cash flow to carry out the subaward terms? 1 The streement of the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. 3 What is the entity previously received grants from the federal program outcomes and managing federal funds in compliance with federal regulations? If the entity previously received a negative past performance, please explain. 4 Is the entity perion management on meeting federal funds of the scope of this proposed subaward? 5 In the entity have a designated federal cognizant audi	4 Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/upload	dpdf.aspx)
Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms? Does the entity have a Code of Ethics policy which is provided to all associated employees? Timancial Management, Systems and Personnel Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Mondiscrimination, (e) Nepotism. (f) Conflict of interest? Does the entity have sufficient cash flow to carry out the subaward funds? Does the entity have sufficient cash flow to carry out the subaward terms? WITES: Experience with Other Federal Grants Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. What is the entity past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain. Joen the monitoring interventions the entity is currently subject to related to other federal grant awards. I Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency. Has the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit and do not complete the rest of the Audit sesser. He entity has not had an audit, do they have annual financ	General Assessments	
Does the entity have a Code of Ethics policy which is provided to all associated employees? Planacial Management, Systems and Personnel	1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	
NOTES: Financial Management, Systems and Personnel Loses the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities? Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets? What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management. What is the entity's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest? Does the entity have sufficient internal controls related to the subaward funds? Does the entity have sufficient cash flow to carry out the subaward funds? Does the entity have sufficient cash flow to carry out the subaward terms? Does the entity have sufficient cash flow to carry out the subaward terms? The sufficient cash flow to carry out the subaward terms? What is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. What is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. Is the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods. Sources: Audits Loses the entity experienced in managing federal funds of the scope of this proposed subaward? Loses the entity experienced in managing federal funds of the scope of this proposed subaward? Loses the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency. Last the entity has not had an audit, do they have annual financial statements that have	2 Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	
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Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	NOTES:	
	Indirect Rate Information	
NOTES:	1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10	% indirect rate will apply.
	NOTES:	
	Overall Risk Assessment	
Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed suba	award?
What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)		moderate risk; 67%-100%: high
NOTES: 14.6	NOTES: 14.6	
Final Score/Notes	Final Score/Notes	
Final Score 46		Final Score 46
NOTES:	NOTES:	

Reentry Association of WNY, Inc.

 ID
 ARPA ID
 Done?
 Score

 18
 170
 yes
 78

Company Name

Reentry Association of WNY, Inc.

Project NameReentry One-Stop

50	coring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	eneral Assessments	Salver Co
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	3
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES: Missing M/WBE and Insurance Policies.	54
F	inancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	5
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	5
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	3
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	5
7	Does the entity have sufficient cash flow to carry out the subaward terms?	5
N	OTES: Start-up program. Never required an Audit or Financial Statements. Do not have the internal statement prepared.	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
N	OTES:	
A	udits	
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2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
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N	OTES:	
Ir	ndirect Rate Information	
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N	OTES:	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	3
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	5
N	OTES: 95	
F	inal Score/Notes	
	Final Score	78
N	OTES:	

Mary Cariola Center

 ID
 ARPA ID
 Done?
 Score

 17
 171
 yes
 46

Company Name

Mary Cariola Center

Project Name

Cariola Workforce Development Program Supporting Careers in the Education and Support of Individuals with Complex Disabilities

Scoring
1 Is the agency authorized to do business in New York State?
2 Does this proposal qualify for funding under ARPA requirements?
3 Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?
4 Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)
General Assessments
1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures?
2 Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?
3 Does the entity have a Code of Ethics policy which is provided to all associated employees?
NOTES:
Financial Management, Systems and Personnel
Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?
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6 Does the entity have sufficient internal controls related to the subaward funds?
7 Does the entity have sufficient cash flow to carry out the subaward terms?
NOTES:
Experience with Other Federal Grants
1 Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.
What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.
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Audits
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Indirect Rate Information
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NOTES:
Overall Risk Assessment
1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?
What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)
NOTES: 1.34
Final Score/Notes
Final Score 4
NOTES:

Deaf Refugee Advocacy

 ID
 ARPA ID
 Done?
 Score

 16
 199
 yes
 80

Company NameDeaf Refugee Advocacy

Project Name

Deaf Refugee Advocacy Community Connections

Sc	oring	
1	Is the agency authorized to do business in New York State?	Υ
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
Ge	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	2
NO	DTES:	
Fi	nancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	5
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5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	2
6	Does the entity have sufficient internal controls related to the subaward funds?	5
7	Does the entity have sufficient cash flow to carry out the subaward terms?	5
N	OTES:	202
E	perience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
N	OTES:	
A	udits	dride.
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	5
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	5
N	OTES:	
In	direct Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	OTES:	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	5
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	5
N	OTES: 89%	
Fi	inal Score/Notes	3,100
	Final Score	80
N	OTES:	

Healthy Baby Network

 ID
 ARPA ID
 Done?
 Score

 15
 222
 yes
 44

Company NameHealthy Baby Network

Project Name

Making Meaningful Community Change

1 is the agency authorized to do business in New York State? 2 Does this proposal qualify for funding under ARPA requirements? 3 Does the project advance one of the 3 goals outlined by Morrac County's Recovery Agenda and one of the 6 metrics? 3 Does the project advance one of the 3 goals outlined by Morrac County's Recovery Agenda and one of the 6 metrics? 4 Is the Notat Collection Form on Federal Audit Clearinghouse (#AC) been reviewed? (https://facveb.census.gov/uploadpdf.aspx) 2 Is the whitely adopted and implemented all required furform Guidance policies and procedure? 3 Is the entity adopted and implemented all required furform Guidance policies and procedure? 4 Is the entity adopted and implemented all required furform Guidance policies consistent with the ARP/CSLERF award terms? 5 Does the entity have a Code of Ethics policy which is provided to all associated employees? 5 Does the entity have a Code of Ethics policy which is provided to all associated employees? 6 Does the entity have a formal amangement system that provides records that can identify the sources and application of funds for subaward funded activities? 6 Does the entity have a formal amangement system provide for the control and accountability of project funds, property, and other assets? 7 Does the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 6 What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 7 Does the entity have afformation with a different activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget. 8 Does the entity have afformation with the federal government? If yes, please list the last three agencies and award periods. 9 Does the entity have afformation in the federal government? If yes, please list the last three agenci	Sc	coring	,
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NOTES: Audits 1 Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency. 2 Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section. 3 If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain. NOTES: Entity has not had an audit since 2018. Indirect Rate Information 1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. 5 NOTES: Overall Risk Assessment 1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? 2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk: 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score/Notes	3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	
Audits Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency. 1 Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section. 3 If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain. NOTES: Entity has not had an audit since 2018. Indirect Rate Information	4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	3
Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency. Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section. If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain. NOTES: Entity has not had an audit since 2018. Indirect Rate Information Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. SOTES: Overall Risk Assessment Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score/Notes	N	IOTES:	
2 Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section. 3 If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain. NOTES: Entity has not had an audit since 2018. Indirect Rate Information 1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. NOTES: Overall Risk Assessment 1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? 2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score 44	A	udits	N.
section. If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain. NOTES: Entity has not had an audit since 2018. Indirect Rate Information Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. NOTES: Overall Risk Assessment Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score/Notes	1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
yes, please provide a copy of these statements for the last three years. If no, please explain. NOTES: Entity has not had an audit since 2018. Indirect Rate Information 1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. Solverall Risk Assessment 1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? 2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score/Notes	2		3
Indirect Rate Information 1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply. NOTES: Overall Risk Assessment 1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? 2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score 44	3		3
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NOTES: Overall Risk Assessment 1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? 2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score 44	li	ndirect Rate Information	ARMON .
Overall Risk Assessment 1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? 2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%; low risk; 34%-66%; moderate risk; 67%-100%; high risk) NOTES: 44 Final Score/Notes Final Score 44	1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward? What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score 44	N	IOTES:	23311
What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk) NOTES: 44 Final Score/Notes Final Score 44	C	Overall Risk Assessment	
risk) NOTES: 44 Final Score/Notes Final Score 44	ī	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	2
Final Score/Notes Final Score 44	2		3
Final Score 44	N	IOTES: 44	2.1
	F	inal Score/Notes	
NOTES:		Final Score	е 44
	N	IOTES:	

Baden Street Settlement of Rochester, Inc

ID	ARPA ID	Done?	5core
14	233	yes	42

Company Name

Baden Street Settlement of Rochester, Inc.

Proiect Name

Baden Street Settlement: Convening to Fill Mental Health Service Gaps for Black and Latinx Community Members

Sc	oring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	Y
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	DTES:	
FI	nancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	5
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	5
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES: need to check 4 against the budget which has not been provided yet.	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	4
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	•
N	OTES:	
lr	ndirect Rate Information	ПН
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
-	OTES:	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	5
⊢	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	2
u	OTES: 26 - They did not provide information timely and when we asked for clarification they argued that their survey was clear enough, that we were in neasonable in our ask because they know the fed govt does not need what we are asking for, such as what is 2 million dollars going to pay for other to construction costs". We were also told that we filled out the survey wrong.	being than
F	inal Score/Notes	
	Final Score	e 42
N	OTES:	
_		

Department of Pediatrics UR Medicine and Rochester Regional Health

ID	ARPA ID	Done?	Score
13	236	yes	22

Company Name

Department of Pediatrics UR Medicine and Rochester Regional Health

Project Name

Enhanced Access to Behavioral Health and Medical Care for All Rochester City School District Students

Sco	pring	
1	Is the agency authorized to do business in New York State?	Υ
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	Υ
Ge	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
NC	DTES:	
Fi	nancial Management, Systems and Personnel	1
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits. (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES:	
E	perience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	1
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	OTES:	
Ir	ndirect Rate Information	-33
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	1
N	OTES: 54%	
0	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1
N	OTES:	
F	inal Score/Notes	223
	Final Score	22
N	OTES:	

St. Joseph's Neighborhood Center

ID	ARPA ID	Done?	Score
12	266	yes	65

Company Name

St. Joseph's Neighborhood Center

Project Name

Healthcare Transformation through Education, Outreach, and Engagement

Scoring	
1 Is the agency authorized to do business in New York State?	Y
2 Does this proposal qualify for funding under ARPA requirements?	Y
3 Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4 Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
General Assessments	
1 Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2 Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3 Does the entity have a Code of Ethics policy which is provided to all associated employees?	
NOTES:	
Financial Management, Systems and Personnel	
Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	5
2 Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	5
3 What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	3
What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	
Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6 Does the entity have sufficient internal controls related to the subaward funds?	5
7 Does the entity have sufficient cash flow to carry out the subaward terms?	5
NOTES:	
Experience with Other Federal Grants	
1 Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	f 5
3 Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4 Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
NOTES:	
Audits	
1 Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2 Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
NOTES: CANT FIND SINGLE AUDIT ONLINE.	
Indirect Rate Information	- 3
1 Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
NOTES:	
Overall Risk Assessment	15 2
1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	[3
What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: his risk)	gh 2
NOTES: 30	
Final Score/Notes	П
Final Sco	ore 65
NOTES:	

Multicraft Apprenticeship Preparation Program, Inc.

 ID
 ARPA ID
 Done?
 Score

 11
 295
 yes
 67

Company Name

Multicraft Apprenticeship Preparation Program, Inc.

Project Name

MAPP / PROJECT PHOENIX

Sc	oring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
Fi	nancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	5
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	5
6	Does the entity have sufficient internal controls related to the subaward funds?	3
7	Does the entity have sufficient cash flow to carry out the subaward terms?	4
	OTES: The experience of the staff is program related, this grant is to obtain a building in some form to expand training space. This team does not have experience in this. NEED FINANCIAL SYSTEM INFO	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
N	OTES:	
A	udits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	5
N	OTES:	
li	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	OTES:	
O	verall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	5
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	3
N	OTES: 35	
F	inal Score/Notes	0
	Final Score	67
N	OTES:	

Monroe Community College

 ID
 ARPA ID
 Done?
 Score

 10
 305
 no
 0

Company Name

Monroe Community College

Project Name

Transforming Lives through Nursing Pathways

76	oring
1	Is the agency authorized to do business in New York State?
2	Does this proposal qualify for funding under ARPA requirements?
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)
G	aneral Assessments
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?
N	DTES:
Fi	nancial Management, Systems and Personnel
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?
6	Does the entity have sufficient internal controls related to the subaward funds?
7	Does the entity have sufficient cash flow to carry out the subaward terms?
N	OTES:
E	xperience with Other Federal Grants
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.
4	ts the entity experienced in managing federal funds of the scope of this proposed subaward?
N	OTES:
A	udits
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes please provide a copy of these statements for the last three years. If no, please explain.
N	OTES:
In	Idirect Rate Information
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.

1 Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?

risk)

NOTES:

Final Score/Notes

2 What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high

Final Score 0

Urban League of Rochester, NY, Inc.

ID	ARPA ID	Done?	Score
9	316	no	22

Company Name

Urban League of Rochester, NY, Inc.

Project Name

Urban League of Rochester Workforce Development Program for Under and Unemployed Individuals

S	coring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	
G	ieneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
N	OTES:	
F	inancial Management, Systems and Personnel	I
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	IOTES:	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	2
N	IOTES:	
A	audits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	IOTES:	
li	ndirect Rate Information	N. V.
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	1
N	OTES: 34.31	
O	Overall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	1
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	
N	IOTES:	
F	inal Score/Notes	
1	Final Score	22
N	IOTES:	

YMCA of Greater Rochester

 ID
 ARPA ID
 Done?
 Score

 8
 318
 yes
 52

Company Name YMCA of Greater Rochester

Project NameNeighborhood Resource Centers

C	pring	
ı	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
ī	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
Ge	eneral Assessments	
ı	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	1
_	DTES:	
Fi	nancial Management, Systems and Personnel	
	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	1
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	1
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	5
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	1
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES: resumes not provided on time.	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	5
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	5
N	OTES:	
A	udits I I I I I I I I I I I I I I I I I I I	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	IOTES:	
le	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
N	IOTES:	
C	Overall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	3
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	1 1
N	4OTES: 1.8	
F	Inal Score/Notes	
	Final Score	e 52
N	NOTES:	

The Research Foundation for SUNY Brockport

 ID
 ARPA ID
 Done?
 Score

 7
 322
 yes
 25

Company Name

The Research Foundation for SUNY Brockport

Project Name

Rochester Educational Opportunity Center (REOC) Mobile Welding Lab

Sc	oring	
1	Is the agency authorized to do business in New York State?	Y
2	Does this proposal qualify for funding under ARPA requirements?	Y
3	Does the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4	Has the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
G	eneral Assessments	
1	Has the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2	Has the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3	Does the entity have a Code of Ethics policy which is provided to all associated employees?	
N	OTES:	
Fi	nancial Management, Systems and Personnel	
1	Does the entity have a financial management system that provides records that can identify the sources and application of funds for subaward funded activities?	
2	Does the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	
3	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	1
4	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be funded in the program budget.	
5	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) Nondiscrimination, (e) Nepotism, (f) Conflict of Interest?	
6	Does the entity have sufficient internal controls related to the subaward funds?	1
7	Does the entity have sufficient cash flow to carry out the subaward terms?	3
N	OTES:	
E	xperience with Other Federal Grants	
1	Has the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	1
2	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If the entity has received a negative past performance, please explain.	1
3	Identify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	1
4	Is the entity experienced in managing federal funds of the scope of this proposed subaward?	2
N	OTES:	
A	audits	W_
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
2	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	1
3	If the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	1
N	IOTES:	
l	ndirect Rate Information	
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	1
N	IOTES: 55%	
C	Overall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	3
2	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	
N	JOTES: 1	
F	inal Score/Notes	
	Final Score	25
N	IOTES:	

Rochester ENergy Efficiency & Weatherization (RENEW)

 ID
 ARPA ID
 Done?
 Score

 6
 324
 yes
 68

Company Name

Rochester ENergy Efficiency & Weatherization (RENEW)

Project Name

Rochester ENergy Efficiency and Weatherization (RENEW)

Scor	ing	_
1 Is	the agency authorized to do business in New York State?	Y
2 D	oes this proposal qualify for funding under ARPA requirements?	Y
3 D	oes the project advance one of the 3 goals outlined by Monroe County's Recovery Agenda and one of the 6 metrics?	Y
4 H	as the Data Collection Form on Federal Audit Clearinghouse (FAC) been reviewed? (https://facweb.census.gov/uploadpdf.aspx)	N
Gen	erai Assessments	
1 H	as the entity adopted and implemented all required Uniform Guidance policies and procedures?	1
2 H	as the entity adopted and implemented records retention policies consistent with the ARP/CSLFRF award terms?	1
3 D	oes the entity have a Code of Ethics policy which is provided to all associated employees?	1
тои	ES:	
Fina	ancial Management, Systems and Personnel	
	loes the entity have a financial management system that provides records that can identify the sources and application of funds for subaward unded activities?	5
2 [loes the entity's financial management system provide for the control and accountability of project funds, property, and other assets?	5
3 V	What has been the overall staff turnover in the last 2 years? Please highlight any changes to the entity's senior management.	2
	What is the entity's staff's experience in performing stated activities in the proposed subaward? Please provide resumes of senior staff that will be unded in the program budget.	1
	Does the entity have a formal, written personnel policy that addresses: (a) Pay rates & benefits, (b) Time & attendance, (c) Leave, (d) dondiscrimination, (e) Nepotism, (f) Conflict of Interest?	1
6 [Does the entity have sufficient internal controls related to the subaward funds?	5
7 [Ooes the entity have sufficient cash flow to carry out the subaward terms?	5
	TES: Entity did not explain the financial system, therefore unable to determine internal controls and assess the system. have 2021 Financial Stateme refore unable to determine cash flow.	nts
Exp	perience with Other Federal Grants	
1	las the entity previously received grants from the federal government? If yes, please list the last three agencies and award periods.	5
	What is the entity's past performance on meeting federal program outcomes and managing federal funds in compliance with federal regulations? If he entity has received a negative past performance, please explain.	5
3 1	dentify any other monitoring interventions the entity is currently subject to related to other federal grant awards.	5
4 1	s the entity experienced in managing federal funds of the scope of this proposed subaward?	5
NO.	TES: unsure how to grade 3 given that they have had no previous federal grant experience	
Au	dits	
1	Does the entity have a designated federal cognizant audit agency? If yes, please provide the name of the audit agency.	1
	Has the entity completed a Single Audit in the past five years? If yes, please provide a copy of the audit and do not complete the rest of the Audit section.	5
	f the entity has not had an audit, do they have annual financial statements that have been reviewed and audited by an independent audit firm? If yes, please provide a copy of these statements for the last three years. If no, please explain.	2
NO	TES:	
Ind	lirect Rate Information	_
1	Does the entity have a negotiated federal indirect/F&A rate? If yes, what is the rate? If no, indicate the de minimis 10% indirect rate will apply.	5
NO	TES:	
Ov	erall Risk Assessment	
1	Based on the overall assessment, does the reviewer anticipate any implementation problems with the proposed subaward?	3
	What percentage of the entity's overall annual budget will this subaward comprise? (Below 33%: low risk; 34%-66%: moderate risk; 67%-100%: high risk)	5
NO	TES: Entity may have difficulties gathering necessary demographic data for reporting. Unable to tell what percentage without more recent financials	
Fir	nal Score/Notes	
	Final Score	68
NO	TES:	