|  |  |
| --- | --- |
| **General Information** |  |
| 1. Does your organization have its financial statements reviewed by an independent public accounting firm? ***(Provide a link to your Website or enclose a copy of the most recent financial statements for your organization, audited or unaudited.)*** | □ Yes □ No |
| 1. Are duties separated so that no one individual has complete authority over an entire financial transaction? | □ Yes □ No |
| 1. Does your organization have controls to prevent expenditure of funds in excess of approved, budgeted amounts?   ***If yes, how long have they been in place?* □ *< 3 years* □ *> 3 years*** | □ Yes □ No |
| 1. Other than financial statements, has any aspect of your organization’s activities been audited within the last 2 years by a governmental agency or independent public accountant?   ***(Provide a copy of any recent external audit report.)***  ***If yes, explain:*** | □ Yes □ No |
| **Cash Management** |  |
| 1. Are all disbursements properly documented with evidence of receipt of goods or performance of services? | □ Yes □ No |
| 1. Are all bank accounts reconciled monthly? | □ Yes □ No |
| **Payroll** |  |
| 1. Do you have written policy that addresses pay rates, benefits, time and attendance, and leave? | □ Yes □ No |
| 1. Are payroll charges checked against program budgets? | □ Yes □ No |
| 1. Does your organization use a system to control paid time, especially time charged to sponsored agreements? ***If yes, what system and provide a brief explanation:*** | □ Yes □ No |
| **Procurement of Goods and Services** |  |
| 1. Are written procedures to ensure procurement of goods and services at competitive prices? ***If yes, attach written procedures or provide a link to the website:*** | □ Yes □ No |
| 1. Is there a system of authorization and approval of capital equipment? ***If yes, explain:*** | □ Yes □ No |
| 1. Is there a system of authorization and approval of travel? ***If yes, explain:*** | □ Yes □ No |

**Exhibit 1**

**New Mexico Institute of Mining and Technology**

**Subrecipient Pre-Award Status Questionnaire For: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Organization/Company Name**

***Instructions***: This form is to be completed by an authorized business official of organizations that may be entering into a Subrecipient relationship with NMIMT. Return your response (including required attachments at the end of this form) by either E-mail or fax to the NMIMT Principal Investigator or his/her designee.

**Signature of Person Completing this form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone & Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Property Management** |  |
| 1. Are detailed records of individual capital assets kept and annually balanced with the general ledger accounts? | □ Yes □ No |
| 1. Are there procedures for authorizing and accounting for the disposal of property and equipment? | □ Yes □ No |
| 1. Are detailed property records checked by physical inventory at least annually? | □ Yes □ No |
| 1. Does your organization have a policy concerning capitalization and depreciation?   ***If yes, provide a copy of policy or link to the website:*** | □ Yes □ No |
| **Cost Transfers** |  |
| 1. Does the organization ensure that all cost transfers are legitimate and appropriate?   ***If yes, explain:*** | □ Yes □ No |
| **Indirect Costs** |  |
| 1. Does the organization have an indirect cost allocation plan or a negotiated indirect cost rate? ***If yes, provide a copy of any negotiated indirect cost rate agreement or link to the website***: | □ Yes □ No |
| **Cost Sharing** |  |
| 1. How does the organization determine that it has met cost sharing goals? ***Explain***: | □ Yes □ No |
| **Compliance** |  |
| 1. Does your organization have a written policy of nondiscrimination and a system for complying with Federal civil rights requirements? | □ Yes □ No |
| 1. Does your organization have a written policy that addresses conflict of interest? | □ Yes □ No |
| 1. Does the organization have procedures that provide assurance that consistent treatment is applied in the distribution of costs to all grants, contracts and cooperative agreements? ***If yes, explain***: | □ Yes □ No |
| 1. Does your organization have a system for subrecipient monitoring? ***If yes, explain***: | □ Yes □ No |
| 1. Does your organization have a cash forecasting process which will minimize the time elapsed between the disbursement of funds and the requesting of funds? | □ Yes □ No |
| 1. Has your organization received grants, contracts or cooperative agreements from NMIMT?   ***If yes, list on a separate page awards of similar scope and nature within the past 5 years (include award title, amount, project period, and NMIMT Principal Investigator).*** | □ Yes □ No |
| **Attachments (Unless Website has been provided above)** |  |
| 1. Report of Financial Statements, Audited or Unaudited | □ Yes □ No |
| 1. External Review or Audited Report of Recent Financial Statements | □ Yes □ No |
| 1. Indirect Cost Rate Agreement | □ Yes □ No |
| 1. List of Awards from NMIMT | □ Yes □ No |