Beginning in FY 2024, every OJP applicant (other than an individual applying in his or her personal capacity) is required to complete the web-based OJP Financial Management and System of Internal Controls Questionnaire form in JustGrants<sup>1</sup>. Following are screen images of the JustGrants instructions and questions to familiarize users with the web-based form.

#### 1. Background

cial Manageme	ent and System	n of Internal C	ontrols (FI-36) NEW					
1. Background	2. Audit Information	3. Auditor's Opinion	4. Accounting System	5. Property Standards and Procurement Standards	6. Travel Policy	7. Subrecipient Management and Monitoring	8, Designation as High Risk by Other Federal Agencies	9. Certification on Behalf of the Applicant Entity
Background								
Financial Capability	Questionnaire							
Recipients' financial r	nanagement systems a	nd internal controls mus	t meet certain requirements,	including those set out in the "Part 200 Uniform Re	quirements" (2.C.F.R. Part	: 2800).		
Including at a minimu	m, the financial manag	gement system of each O	JP award recipient must prov	ide for the following:				
(1) Identification, in i	ts accounts, of all Fede	ral awards received and	expended and the Federal pr	ograms under which they were received. Federal pr	ogram and Federal award	identification must include, as applicable, the	CFDA title and number, Federal award identification num	ber and year, and the name of the Federal agenc
(2) Accurate, current,	and complete disclosu	re of the financial results	of each Federal award or pr	ogram.				
(3) Records that ident	ify adequately the sou	rce and application of fu	nds for Federally funded activ	ities. These records must contain information perta	ining to Federal awards, a	uthorizations, obligations, unobligated balance	s, assets, expenditures, income, and interest, and be supp	orted by source documentation.
(4) Effective control o	ver, and accountability	for, all funds, property, a	nd other assets. The recipier	t must adequately safeguard all assets and assure t	hat they are used solely fo	or authorized purposes.		
(5) Comparison of exp	enditures with budget	amounts for each Feder	al award.					
(6) Written procedure	s to document the rec	eipt and disbursement of	f Federal funds including pro	edures to minimize the time elapsing between the	transfer of funds from the	United States Treasury and the disbursement i	by the OJP recipient.	
(7) Written procedure	s for determining the	allowability of costs in ac	cordance with both the term	s and conditions of the Federal award and the cost p	principles to apply to the I	Federal award.		
(8) Other important r	equirements related to	retention requirements	for records, use of open and	machine-readable formats in records, and certain F	ederal rights of access to	award-related records and recipient personnel.		
Unique Entity Identif	er (UEI) Number: *							
Value cannot be blank								
Is the applicant entity	/ a nonprofit organiza	tion (including a nonprot	fit institution of higher educa	tion) as described in 26 U.S.C. 501(c)(3) and exe	mpt from taxation under	26 U.S.C. 501(a)?*		
Select				$\sim$				
Select Yes								
No								

<sup>&</sup>lt;sup>1</sup> For a limited number of solicitations, applicants will be instructed in the solicitation to attach a completed PDF form for the Financial Management and System of Internal Controls Questionnaire, instead of completing the web-based form. Those applicants should download, complete, and submit the **OJP Financial Management and System of Internal Controls Questionnaire**—**ARCHIVED**, **located at** <u>https://www.ojp.gov/funding/apply/forms</u>.

If **Yes** to nonprofit question, then:

#### 2. Audit Information

al Management and System of Int	ernal Controls (	(FI-36) NEW					
✓ 1. Background 2. Audit	3. Auditor's	4. Accounting	5. Property Standards and Procurement	6. Travel Policy	7. Subrecipient Management and	8. Designation as High Risk by Other Federal	9. Certification on Behalf of the A
		System	Standards	- natori onoj	Monitoring	Agencies	Entity
Audit Information				Select		$\sim$	
Does the applicant nonprofit organization maintain offe	shore accounts for the pu	urpose of avoiding payir	ng the tax described in 26 U.S.C. 511(a)?*	Select Yes			
Select		~		No			
Value cannot be blank							
With respect to the most recent year in which the appl	icant nonprofit organizatio	ion was required to file a	a tax return, does the applicant nonprofit organi	ation believe (or assert) that it	satisfies the requirements of 26 C.F.R. 53.45	58-6 (which relate to the reasonableness of compensation	on of certain individuals)?*
					· · · · · · · · · · · · · · · · · · ·		
Select		~					
Value cannot be blank	onducted by an indeper		or using generally accepted auditing standar		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Select Value cannot be blank For purposes of this questionnaire, an "audit" is c Has the applicant entity undergone any of the followin Select All		ndent, external audito			ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is c Has the applicant entity undergone any of the followin	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is c Has the applicant entity undergone any of the followin Select All	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is c Has the applicant entity undergone any of the followin Select All 'Single Audit' under OMB A-133 or Subpart F of	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is c Has the applicant entity undergone any of the followin Select All 'Single Audit' under OMB A-133 or Subpart F of Financial Statement Audit	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is o Has the applicant entity undergone any of the followin Select All 'Single Audit' under OMB A-133 or Subpart F of Financial Statement Audit Defense Contract Agency Audit (DCAA)	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is o Has the applicant entity undergone any of the followin Select All 'Single Audit" under OMB A-133 or Subpart F of Financial Statement Audit Defense Contract Agency Audit (DCAA) Other Audit and Agency	g types of audit(s)? Pleas	ndent, external audito	or using generally accepted auditing standar Select Select Yes No		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is of Has the applicant entity undergone any of the followin Select All 'Single Audit' under OMB A-133 or Subpart F of Financial Statement Audit Defense Contract Agency Audit (DCAA) Other Audit and Agency None	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes No Select		ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is of Has the applicant entity undergone any of the followin Select All 'Single Audit' under OMB A-133 or Subpart F of Financial Statement Audit Defense Contract Agency Audit (DCAA) Other Audit and Agency None None	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes No Select Select Vector	s last 12 months	ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	
Value cannot be blank For purposes of this questionnaire, an "audit" is of Has the applicant entity undergone any of the following Select All 'Single Audit' under OMB A-133 or Subpart F of Financial Statement Audit Defense Contract Agency Audit (DCAA) Other Audit and Agency None Most Recent Audit Report Issued: * Select	g types of audit(s)? Pleas	ndent, external audito	r using generally accepted auditing standar Select. Yes No Select Select Vector	e last 12 months e last 2 years	ernmental Auditing Standards (GAGAS), a	nd results in an audit report with an opinion.	

If **No** to nonprofit question, then:

Audit Information

ial Management and	I System of	Internal Contro	IS (FI-36) NEW				
	Audit nformation	3. Auditor's Opinion	4. Accounting System	5. Property Standards and Procurement Standards	6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other Fede Agencies
Audit Information							
For purposes of this question	nnaire, an "audit"	is conducted by an in	dependent, external auditor	using generally accepted auditing standards (GA	AS) or Generally Govern	nmental Auditing Standards (GAGAS), an	d results in an audit report with an opinion.
Has the applicant entity underg Select All	jone any of the follo	owing types of audit(s)?	Please check all that apply:				
"Single Audit" under OMB	A-133 or Subpart	F of 2 C.F.R. Part 200					
Financial Statement Audit							
Defense Contract Agency	Audit (DCAA)						
Other Audit and Agency							
None				Select		$\checkmark$	
Most Recent Audit Report Issue	ed:*			Select Within the last 12 months			
Select			~	Within the last 2 years Over 2 years ago			
Name of Audit Agency/Firm:*				N/A			
				1			
L				J			

## 3. Auditor's Opinion

1. Background	<ul> <li>2. Audit</li> <li>Information</li> </ul>	3. Auditor's Opinion	4. Accounting System	5. Property Standards and Procurement Standards	6. Travel Policy	7. Subrecipient Management Monitoring
Auditor's Opinio						
	udit, what was the auditor	's opinion?*		Select		~
Select	findings (if none, enter "0")	<b>[*</b>	~	Select Unqualified Opinion Qualified Opinion Disclaimer, Going Concern, or Adverse Opinio N/A: No audits as described above	ons	
Enter the dollar amo	unt of questioned costs (if	none, enter "0"): *		Select		~

## 4. Accounting System

ncial Manageme	nt and System o	of Internal Contro	IS (FI-36) NEW					
<ul> <li>1. Background</li> </ul>	✓ 2. Audit Information	✓ 3. Auditor's Opinion	4. Accounting System	5. Property Standards and Procurement Standards	6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other Federal Agencies	9. Certification on Behalf of the Applican Entity
					_			
					-	Select		$\checkmark$
Accounting Syste						elect		
Which of the following	) best describes the appli	cant entity's accounting sys	tem:*			lanual Nutomated		
Manual			~			Combination of manual and automated		
Deep the employed on	titula annualian availant l	have the encodelity to identify	f. the receipt and evenediture a	f award funds separately for each Federal award?*				I
	inty's accounting system	have the capability to identi		i award iunus separately for each rederar award?*				
No			~			Select		$\sim$
Does the applicant en	tity's accounting system	have the capability to record	d expenditures for each Federal	award by the budget cost categories shown in the appro	wed budget?*	Select		
Yes			~			Yes		
165			·			No Not Sure		
Does the applicant en	tity's accounting system	have the capability to record	d cost sharing ("match") separa	tely for each Federal award, and maintain documentation	to support recorded	1		
No			~					
	tity's accounting system applicant employee?*	have the capability to accur	ately track employees actual tin	ne spent performing work for each federal award, and to	accurately allocate ch	arges for employee salaries and wages for eac	h federal award, and maintain records to support the actu	al time spent and specific allocation of charges
No			~					
Does the applicant en	tity's accounting system	include budgetary controls t	to preclude the applicant entity t	rom incurring obligations or costs that exceed the amour	nt of funds available u	nder a federal award (the total amount of the av	vard, as well as the amount available in each budget cost	category)?*
Yes			~					
	iliar with the "cost princip	les" that apply to recent and	d future federal awards, includin	g the general and specific principles set out in 2 C.F.R P	art 200?*			
Yes			~					

## 5. Property Standards and Procurement Standards

<ol> <li>Background</li> </ol>	2. Audit Information	✓ 3. Auditor's Opinion	4. Accounting					
			System	5. Property Standards and Procurement Standards	6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other Federal Agencies	9. Certification on Behalf of the Applie Entity
roperty Standards a	nd Procurement	Standards						
					of the property; (2) an ident	ification number; (3) the source of funding fo	the property, including the award number; (4) who holds t	itle; (5) acquisition date; (6) acquisition cost;
iare of the acquisition co Select	st; (8) location and co	ondition of the property; (9)	ultimate disposition informatio	n?*				
Select re the applicant entity's p	rocurement policies a	and procedures designed t	o ensure that procurements an	e conducted in a manner that provides full and open c	ompetition to the extent prac	ticable, and to avoid practices that restrict co	mpetition?*	
Select			~					
o the applicant entity's pr	rocurement policies a	nd procedures require doc	umentation of the history of a	procurement, including the rationale for the method pro	ocurement, selection of cont	ract type, selection or rejection of contractors	, and basis for the contract price?*	
Select			~					
pes the applicant entity h spended/debarred sub-g			o prevent the applicant entity f	om entering into a procurement contract under a feder	al award with any entity/indi	vidual that is suspended/debarred from such	contracts, including provisions for checking the "Excluded	Parties List" system (www.sam.gov) for
Select			~		Se	lect		$\sim$
					Sel Yes No	ect		

6. Travel Policy

1. Background	✓ 2. Audit Information	✓ 3. Auditor's Opinion	✓ 4. Accounting System	5. Property Standards and Procurement Standards
Travel Policy			Select Select Yes	~
-	ntity maintain a standard t	travel policy?*	Yes No	
Select			~	

## 7. Subrecipient Management and Monitoring

cial Managemo	ent and System o	of Internal Contro	DIS (FI-36) NEW					
1. Background	✓ 2. Audit Information	✓ 3. Auditor's Opinion	✓ 4. Accounting System	<ul> <li>5. Property Standards and Procurement Standards</li> </ul>	🗸 6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other Federal Agencies	9. Certification on Behalf of the Applica Entity
	nagement and Monito	-						
Does the applicant er	ntity have written policies, j	procedures, and/or guidance	e designed to ensure that any since $\sim$	ubawards made by the applicant entity under a federal a	ward (1) clearly document a	oplicable federal requirements, (2) are appropriat	ely monitored by the applicant, and (3) comply with the req	uirements in 2 CFR Part 200 (see 2 CFR 200.33:
Is the applicant entity	aware of the differences b	etween subawards under fe	deral awards and procurement	contracts under federal awards, including the different r	roles and responsibilities assoc	iated with each?*		
Select			~					
Does the applicant er	ntity have written policies a	nd procedures designed to p	prevent the applicant entity fro	m making a subaward under a federal award to any entit	y or individual is suspended o	debarred from such subawards?*		
Select			~			<b></b>		
						Select		$\sim$
						Select Yes		
						No		
						Not Sure		
						N/A - Applicant does not make sub	awards under any OJP awards	

## 8. Designation as High Risk by Other Federal Agencies

ai Managemei	nt and System o	of Internal Contro	ols (FI-36) NEW				
1. Background	<ul> <li>2. Audit Information</li> </ul>	✓ 3. Auditor's Opinion	✓ 4. Accounting System	<ul> <li>5. Property Standards and Procurement Standards</li> </ul>	✓ 6. Travel Policy	<ul> <li>7. Subrecipient Management and Monitoring</li> </ul>	<ol> <li>Designation as High Risk by Other Feder Agencies</li> </ol>
Designation as Hi	gh Risk by Other Fe	deral Agencies					
-		deral Agencies y a federal grant-making ag	ency outside of DOJ?*				
-		-	jency outside of DOJ?*	1			
Is the applicant entity Select		-	jency outside of DOJ?* ~	]			
Is the applicant entity		-	jency outside of DOJ?*	]			
Is the applicant entity Select Select		-	ency outside of DOJ?*	]			

If **yes** to "high risk" designation, then:

#### 8. Designation as High Risk by Other Federal Agencies

1. Background 2 Ir 2 lr Designation as High Risk sthe applicant entity designat Yes Name(s) of the federal awardir Date(s) the agency notified the Name: *	ted <sup>"</sup> high risk" by a fer ng agency: ★	ederal grant-making age	~	✓ 5. Property Standards and Procurement Standards	✓ 6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other F Agencies
Ir Designation as High Risk s the applicant entity designat Yes Name(s) of the federal awardir Date(s) the agency notified the	nformation k by Other Federa ted "high risk" by a fer ng agency: *	Opinion al Agencies ederal grant-making age	system	✓ 5. Property Standards and Procurement Standards	✓ 6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other F Agencies
Ir Designation as High Risk s the applicant entity designat Yes Name(s) of the federal awardir Date(s) the agency notified the	nformation k by Other Federa ted "high risk" by a fer ng agency: *	Opinion al Agencies ederal grant-making age	system	5. Property Standards and Procurement Standards	✓ 6. Travel Policy	7. Subrecipient Management and Monitoring	8. Designation as High Risk by Other F Agencies
s the applicant entity designat Yes Name(s) of the federal awardin Date(s) the agency notified the	ted <sup>"</sup> high risk" by a fer ng agency: ★	ederal grant-making age	~	]			
s the applicant entity designat Yes Name(s) of the federal awardin Date(s) the agency notified the	ted <sup>"</sup> high risk" by a fer ng agency: ★	ederal grant-making age	~	]			
s the applicant entity designat Yes Name(s) of the federal awardin Date(s) the agency notified the	ted <sup>"</sup> high risk" by a fer ng agency: ★	ederal grant-making age	~	]			
Yes Name(s) of the federal awardin Date(s) the agency notified the	ng agency: *		~				
Name(s) of the federal awardin Date(s) the agency notified the		he "high risk" designatio	> n°:*				
Date(s) the agency notified the		he "high risk" designatio	י":*				
Date(s) the agency notified the		he "high risk" designatio	on": *				
	e applicant entity of th	he "high risk" designatio	Dn". *				
	e applicant entity of th	he "high risk" designatio	on":*				
	e applicant entity of th	he "high risk" designatio	on":*				
iame: *							
lame: *							
Vallic. *							
hone:*							
Email: *							
Reason for "high risk" status a	is set out by the feder	eral agency:*					

# 9. Certification on Behalf of the Applicant Entity

ial Managemer	it and System o	of Internal Contro	IS (FI-36) NEW				
1. Background	✓ 2. Audit Information	✓ 3. Auditor's Opinion	✓ 4. Accounting System	5. Property Standards and Procurement Standards	🗸 6. Travel Policy	<ul> <li>7. Subrecipient Management and Monitoring</li> </ul>	✓ <sup>8.</sup> Designal Agencies
	half of the Applicar	-	ector, chief financial officer	; designated authorized representative ("AOR"), (	or other official with the re	enuisite knowledge and authority.	
On behalf of the applic	ant entity, I certify to the	U.S. Department of Justice	e that the information provide	d above is complete and correct to the best of my kn	owledge. I have the requisit	e authority to make this certification on behal	f of the applicant entit
Name: *							
Date:*				The Name and Title fields provided the data to com			
Title:*							
Select			~	Select	~	]	
Phone: *				Select Executive Director Chief Financial Officer Chairman Other			
						-	