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INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

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We have performed the procedures enumerated below, which were agreed to by the Ohio Department of Education ("the Department"), Ohio Auditor of State, and the United States Department of Education, to assist the Department in fulfilling its oversight responsibilities related to the application and selection of subgrant recipients, subgrant recipient claims and payments, and monitoring and performance for the Charter Schools Program for the year ending June 30, 2019.

The Department's management is responsible for the application and selection of subgrant recipients, subgrant recipient claims and payments, and monitoring and performance for the Charter Schools Program. The sufficiency of these procedures is solely the responsibility of the Ohio Department of Education, Ohio Auditor of State, and the United States Department of Education. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose. The procedures and associated findings are as follows:

1. Application & Selection of Subgrant Recipients

1.1 Eligibility

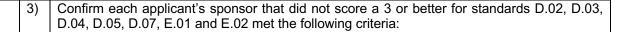
(/	(A)	(1)	Obta	ain a list of sponsors rated "effective" or "exemplary" overall
		(2)	Con	npare the list of CSP applicants with results of the sponsor evaluation.
			(a)	Confirm each applicant's sponsor is rated "effective" or "exemplary" overall.
				Finding – We compared the list of CPS applicants with the results of the sponsor evaluation. We confirmed each CSP applicant's sponsor was rated "effective" or "exemplary" overall.
		(b)	Confirm each applicant's sponsor received a score of three or higher on the standards "D.02 Enrollment and Financial Reviews, D.03 On-site Visits, D.04 Site Visit Reports, D.05 Performance Monitoring, D.07 Annual Performance Reports, E.01 Renewal Application and E.02 Renewal and Non-Renewal Decisions" of the quality practices rubric.	
				Finding – We confirmed one applicant's sponsor received a score of three or higher on the standards "D.02 Enrollment and Financial Reviews, D.03 On-site Visits, D.04 Site Visit Reports, D.05 Performance Monitoring, D.07 Annual Performance Reports, E.01 Renewal Application and E.02 Renewal and Non-Renewal Decisions" of the quality practices rubric. The remaining four sponsors did not meet all of the above criteria.

Independent Accountant's Report on Applying Agreed-upon Procedures

Charter Schools Program

Monitoring Period: July 1, 2018 to June 30, 2019

Page 2 of 21



- a) Sponsor received an overall rating of Effective or Exemplary for the three most recent Sponsor Evaluations or for the 2017-2018 Sponsor Evaluation. Or, Sponsor scored a 3 or higher for four or more of standards D.02, D.03, D.04, D.05, D.07, E.01 and E.02.
- b) Confirm that an applicant's sponsor met the eligibility criteria to submit a corrective action plan (CAP) for standards the sponsor did not score a 3 or higher from the standards outlined and b) that applicant's sponsor submitted a CAP and received approval within the prescribed timeframe based on successful implementation of the CAP.

Finding – We confirmed each of the four sponsors that did not score a 3 or better for standards D.02, D.03, D.04, D.05, D.07, E.01 and E.02 met the eligibility criteria to submit a corrective action plan (CAP). In addition, we confirmed each of the four sponsors submitted a CAP and received approval within the prescribed timeframe based on successful implementation of the CAP.

1.2 Public Awareness

(A)	(1)	Obta	ain copies of communications sent to stakeholders and observe the website.
		(a)	Confirm communications were sent to multiple stakeholders and document in the finding the types of stakeholders (e.g., sponsors, schools, or other organizations).
			Finding – We confirmed communications were sent to multiple stakeholders. The Department's EdConnection newsletter is emailed to various subscriber groups. In addition, the Department emailed various Ohio Ed updates to Community School Principals, Sponsors, Superintendents, and Treasurers. The Department's website and social media accounts are available to any stakeholders who view or subscribe to them.
		(b)	Confirm communications were made available through a variety of means and document in the finding which means the Department used.
			Finding – We confirmed communications were made available through a variety of means, including the Department's website, various Ohio Ed Updates sent via email, and the Department's, Twitter, and LinkedIn accounts.
		(c)	Confirm the date of the communications' release is at least six to eight weeks prior to the deadline for applicants to prepare and submit applications.
			Finding – We confirmed the above communications were released starting at least six to eight weeks prior to the May 24, 2019 deadline for applicants to prepare and submit applications.
		(d)	Confirm CSP information is posted on the Department's website.
			Finding – We observed the Department's website and confirmed CSP information is posted.

Monitoring Period: July 1, 2018 to June 30, 2019

Page 3 of 21

(B)	(1)	Obta	ain the training schedule and observe the Department's website for posted webinars.
		(a)	Confirm the training schedule and webinars were posted.
			Finding – We confirmed the Department posted information regarding the April 18, 2019 in-person application training it offered. The Department also posted the Powerpoint slide presentations for the in-person training to its website. The Department had several Grant Training Videos posted to its website.
	(2)	Obta	nin the STARS registration information
		(a)	Confirm in-person trainings were offered (not mandatory for potential applicants).
			Finding – We inspected training registration documentation and confirmed the April 18, 2019 in-person application training was offered.

1.3 **Peer Reviewer Selection and Training**

(A)	(1)		ain the minimum and preferred qualifications used to rank Peer Reviewers as specified in Call for Peer Reviewers.
	(2)	Obta	ain additional information if applicable used to vet the applicants.
	(3)	Obta	ain a list of selected Peer Reviewers.
		(a)	Confirm the use of a resume review team to select reviewers.
			Finding – We confirmed the Department used a resume review team to select Peer Reviewers.
		(b)	Confirm Peer Reviewers were selected using minimum and/or preferred qualifications.
			Finding – We confirmed the resume review team used minimum and preferred qualifications to select Peer Reviewers.
		(c)	Confirm receipt of conflict of interest statements for each selected Peer Reviewer.
			Finding – We confirmed each selected Peer Reviewer provided the Department with a signed conflict of interest statement.
		(d)	Inspect each conflict of interest statement and, based on the information included, confirm no conflicts exist for each selected Peer Reviewer.
			Finding – We inspected each conflict of interest statement. Based on the information included, we confirmed no conflicts of interest existed for 18 of the 22 Peer Reviewers. Of the four Peer Reviewers with conflicts of interest, only one had a conflict related to one of the grant applicants for the current round of grants under review.

Monitoring Period: July 1, 2018 to June 30, 2019

Page 4 of 21

(B)	(1)	Obta	Obtain a list of selected Peer Reviewers.			
	(2)	Obta	Obtain a list of trainings required by the Department and log-in information.			
		(a)	Confirm that all Peer Reviewers attended the required webinar(s).			
			Finding – We confirmed each selected Peer Reviewer attended the training required by the Department.			

Application Reviewer and Scoring 1.4

(A)	(A) (1) Obtain the Department's established technical review procedures		ain the Department's established technical review procedures	
		(a)	Confirm the Department completed a technical review for each CSP subgrant applicant.	
			Finding – We confirmed the Department completed a technical review for each CSP subgrant applicant.	
		(b)	Confirm the accuracy of the technical review of all subgrantees to determine eligibility.	
			Finding – We confirmed the accuracy of the technical review of all subgrantees to determine eligibility.	
(B)	(B) (1) Obtain the Peer Reviewer's scoring rubric for each CSP applicant away		in the Peer Reviewer's scoring rubric for each CSP applicant awarded a subgrant.	
		(a)	Confirm the Peer Reviewer rated the applicant using the Department's CSP subgrant evaluation rubric.	
			Finding – We confirmed the Peer Reviewers rated each applicant using the Department's CSP subgrant evaluation rubric.	
		(b)	Confirm the accuracy of the scoring rubric by recalculating scoring data used by the Department for awarding purposes	
			Finding – We confirmed the accuracy of the scoring rubric by recalculating scoring data used by the Department for awarding purposes.	
(c)	(1)		ig the Technical Review rubric and the Peer Reviewer's scoring rubric in (B), confirm the g indicates that the budget review was completed.	
			Finding – Using the Technical Review and Peer Reviewer's scoring rubrics, we confirmed the budget review was completed for each of the subgrant applicants.	

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 5 of 21

1.5 **Grant Selection and Award**

(A)	(1)	subg Find	By inspecting meeting minute notes, confirm the Data Governance Committee reviewed the subgrantee selection process. Finding – We inspected meeting minute notes and confirmed the Data Governance Committee reviewed the subgrantee selection process.			
	(2)	Confirm the amount awarded is in accordance with the established amounts for the ty grant awarded (planning, implementation year 1, implementation year 2, expansion year expansion year 2) Finding – We confirmed the amount awarded during the monitoring period to each subgraves in accordance with the established amounts for the type of grant awarded.				
(B)	(1)	Obtain the training registration lists.				
		(a)	Confirm that each awarded subgrantee attended a training session. Finding – We confirmed one or more representatives from each awarded subgrantee attended a CSP grant awardee training session.			

Monitoring Period: July 1, 2018 to June 30, 2019

Page 6 of 21

2. Grant Recipient Claims and Payments

2.1 **Grant Recipient Claims – Allowable Activities**

(A)	(1)	max	ain payment cash requests to include at least one PCR for each subgrantee; 100% or a imum of 60 PCRs, whichever is lower, from the CCIP to determine documentation of ibursement.
		Find	ling – Based on the above criteria, we selected 12 PCRs.
		(a)	Inspect budget to ensure program approval.
			Finding – We inspected the budget for each subgrant to ensure program approval.
		(b)	Inspect documentation for program expenditures as selected in part 2 below to confirm that educational services that were approved in the budget were provided.
			Finding – For each PCR selected, we inspected documentation for program expenditures and confirmed that educational services that were approved in the budget were provided.
		(c)	Trace the amounts reported on the PCR to the district's accounting system report. Determine that the amounts reported on the PCR are supported by subrecipient accounting records.
			Finding – Aside from the exception noted below, for each PCR selected, we traced the amounts reported on the PCR to the subgrantee's accounting system report, and we determined that the amounts reported on the PCR were supported by subrecipient accounting records.
			For one of the subgrantees, we were unable to obtain a vendor invoice for two expenditures totaling \$58,660 for computer equipment from Apple, Inc. Thus, we were unable to determine the obligation date for these expenditures. Thus, the expenditures were not adequately supported by subrecipient accounting records.
	(2)	to at	the subrecipient's accounting record obtained in (1c) above, select expenditures equal least 50% of the requested amount from each of the selected PCRs to determine whether subgrantee charged allowable costs in accordance with 2 CFR 200 and 20 USC 7221 to program, including:
		(a)	For payroll charges,
			i. Confirm whether the subgrantee maintained time and effort documentation for split funded employees in accordance with 2 CFR 200.
			Finding – For payroll charges, we confirmed the subgrantee maintained time and effort documentation for split funded employees in accordance with 2 CFR 200.
		(b)	Confirm the subgrantee spent funds on activities supported in the approved application and whether the transaction was within the budgeted time frame. (i.e., did not incur expenses prior to a budget revision).
			Finding – We confirmed the subgrantee spent funds on activities supported in the approved application and the transaction was within the budgeted time frame.

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 7 of 21

	(c)	Confirm whether the activities served the planning, program design or initial implementation of the charter school as indicated in the approved application.
		Finding – We confirmed the activities served the planning, program design or initial implementation of the charter school as indicated in the approved application.
	(d)	Confirm whether the expenditure served a proper public purpose as established by the allowable program costs described in 20 USC 7221.
		Finding – We confirmed the expenditure served a proper public purpose as established by the allowable program costs described in 20 USC 7221.
	(e)	Confirm whether the expenditure charged to the proper fund (fund 599), function and object.
		Finding – We confirmed the expenditure was charged to the proper fund (fund 599), function and object within the subgrantee's accounting system.
	(f)	Confirm whether the expenditure conformed to standard cost principles pursuant to 2 CF 200, such as:
		 i. Necessary and reasonable for the performance of the Federal award and allocable under the principles of 2 CFR part 200, subpart E. ii. Conform to any exclusions or limitations set forth in 2 CFR part 200, subpart E, or in the Federal award as to the types or amount of cost items. iii. Consistent with policies and procedures that apply uniformly to both federally financed and other state or local activities iv. Accorded consistent treatment. Costs were not assigned to a Federal award as a direct cost if any other cost incurred for the same purpose in like circumstances was allocated to the Federal award as an indirect cost. v. Not included as a cost of any other federally financed program in either the
		current or a prior period. vi. Not used to meet the cost-sharing or matching requirements of another Federal program, except those authorized by Federal statute. vii. Adequately documented.
		Finding – Aside from the exception noted below, we confirmed the expenditures conformed to standard cost principles pursuant to 2 CFR 200, as listed in the procedure above.
		For one of the subgrantees, we were unable to obtain a vendor invoice for two expenditures totaling \$58,660 for computer equipment from Apple, Inc. Thus, the expenditures were not adequately documented.
(3)		the expenditure comply with specific allowable costs requirement under the Charter ool Program, 20 USC 7221, such as:
	a)	Post Award Planning costs which may include:
	ω,	A refinement of the desired educational results,
		II. Developing methods for measuring progress toward achieving those results,
		III. Professional development of teachers and other staff who will work in the charter school.
	b)	Initial implementation costs which may include:
		I. Informing the community about the school,

Independent Accountant's Report on Applying Agreed-upon Procedures

Charter Schools Program

(4)

CSP project.

3314.03(A)(31).

Monitoring Period: July 1, 2018 to June 30, 2019

Page 8 of 21

II. Acquire necessary equipment and educational materials and supplies, and				
III. Acquiring or developing curriculum materials.				
c) Other initial operational costs that cannot be met from State or local sources:				
 Costs associated with creating and implementing office functions, such as accounting systems, attendance and registration systems, and human resources policies, 				
 Costs associated with the installation of computers, data systems, networks, and telephones, 				
III. Personnel expenses incurred either before or after the school's opening, provided that these expenses are associated with initial implementation activities,				
IV. If Personal expenses were incurred did the charter school maintain accurate time and effort records in accordance with the school's established (and, if applicable approved by the Department) time and effort reporting system.				
 V. Rental or occupancy costs for the school facility for a reasonable period of time (July 1, or the subgrant award date, through September 30 of the same year) ir preparation for the school's opening. 				
VI. If equipment was purchased, confirm it was included in the approved application and budget for the grant.				
Finding – We confirmed the expenditure complied with specific allowable costs requirements under the Charter School Program, 20 USC 7221, such as post award planning costs, initial implementation costs, or other initial operational costs that cannot be met from State or local sources, as described in the procedure above.				
A non-profit charter school receiving CSP may enter into a contract with a for profit CMO or EMO; ensure, the following were in place,				

Obtain and inspect the contract, determine if the non-profit charter school is the subgrant recipient and directly administers or supervises the administration the CSP project.

Finding – We inspected each contract and determined the non-profit charter school was the subgrant recipient, which directly administers or supervises the administration of the

The Department verified that members of the charter's school's governing board are not

Finding – As part of its compliance monitoring review, the Department verified that members of the charter school's governing board were not selected by or include

The Department verified the charter school's attorney, accountant and audit firm are independent from the for-profit CMO or EMO in accordance with Ohio Revised Code

Finding – As part of its compliance monitoring review, the Department verified the charter school's attorney, accountant, and audit firm (if selected) were independent from the for-profit CMO or EMO in accordance with Ohio Revised Code 3314.03(A)(31).

Grantee must avoid apparent and actual conflicts of interests when administering grants. A charter school must maintain independence from the for-profit management company and

sponsor, determine whether the Department documented the following.

employees of the for-profit CMO or EMO.

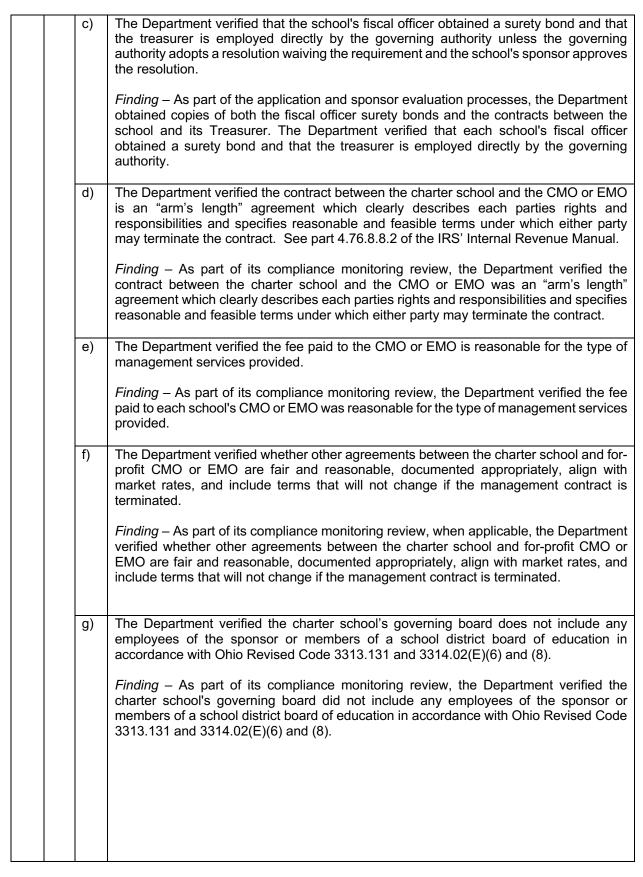
selected by or includes employees of the for-profit CMO or EMO.

Independent Accountant's Report on Applying Agreed-upon Procedures

Charter Schools Program

Monitoring Period: July 1, 2018 to June 30, 2019

Page 9 of 21



Monitoring Period: July 1, 2018 to June 30, 2019

Page 10 of 21

(B)	Per	iod of Availability – Using the PCRs selected for (A)(1) above determine that:
	Find	ding – Using the PCRs selected for (A)(1) above, we determined the following:
	(1)	Obligations (as defined in the Department of Education Cross-Cutting Section of the OMB Compliance Supplement) were incurred after the initial substantial approval date.
		Finding – Aside from the exception noted below, we determined obligations (as defined in the Department of Education Cross-Cutting Section of the OMB Compliance Supplement) were incurred after the initial substantial approval date.
		For one of the subgrantees, we were unable to obtain a vendor invoice for two expenditures totaling \$58,660 for computer equipment from Apple, Inc. Thus, we were unable to determine the obligation date for these expenditures.
	(2)	Obligations were incurred before the end of the project period. (June 30 or other ending date specified in the project application).
		Finding – Aside from the exception noted below, we determined obligations were incurred before the end of the project period. (June 30 or other ending date specified in the project application).
		For one of the subgrantees, we were unable to obtain a vendor invoice for two expenditures totaling \$58,660 for computer equipment from Apple, Inc. Thus, we were unable to determine the obligation date for these expenditures.
	(3)	Obligation was liquidated not later than 60 days after the end of the project (for paper projects) or 90 days after the end of the period for CCIP projects.
		Finding – We determined obligations were liquidated not later than 60 days after the end of the project (for paper projects) or 90 days after the end of the period for CCIP projects. All were CCIP projects.
	(4)	For activities revised after the approved original budget, the obligation occurred subsequent to the approval by the Department for the revision.
		Finding – We determined there were no revisions to the approved original budget for any of the subgrantees; thus, this procedure is not applicable.
	(5)	Based on the procedures performed, report all discrepancies noted on the Exception listing for the on-site review.
		Finding – Based on the procedures performed, there were no other discrepancies noted on the Exception listing for the on-site review.
(C)	(1)	 Obtain and inspect all the subgrantees' procurement policies and standards. Determine if the policy incudes: a) Procurement Standards of Conduct for Recipients b) Procurement Standards of Conduct for Non-Federal Entities, including subrecipients c) Procurement procedures includes required standards outlined in 2CFR 200.317 thru 200.326.
		Finding – We inspected each subgrantee's procurement policy and standards in place during the monitoring period. None of the three procurement policies contained specific procurement standards of conduct and none included the required standards outlined in 2 CFR 200.317

Independent Accountant's Report on Applying Agreed-upon Procedures

Charter Schools Program

Monitoring Period: July 1, 2018 to June 30, 2019

Page 11 of 21

thru 200.326. One subgrantee submitted a revised procurement policy that included the required standards outlined in 2 CFR 200.317 thru 200.326, but it was not approved and implemented until May 2018, which was part way through the monitoring period. Obtain a list of subgrantees who contract with an operator (Management Company). Confirm that the subgrantee implemented its procurement policy. Finding - Each of the three subgrantees contracted with an operator (Management Company); however, none of the subgrantees implemented their procurement policy. Obtain each subgrantee's budget from the CCIP. Confirm whether funds were budgeted for (3) Purchased services. Finding – We confirmed all three subgrantees had funds budgeted for purchased services. If applicable, select procurements for purchased services equal to at least 50% of requested amount for each of the previously selected PCRs, a) Confirm procurement policies were followed b) Was conflict of interest considered c) Full and Open Competition d) Methods of procurement followed e) Cost or price analysis completed Finding – The procurement policies for two of the subgrantees only required the schools to seek bids on purchases of more than \$25,000 for a single item. From the selected PCRs, we did not identify any procurement transactions exceeding this \$25,000 threshold. The procurement policy for the third subgrantee did not include any requirement to seek bids. Accordingly, for the three subgrantees, we were unable to confirm procurement policies were

2.2 Cash Management

cost or price analysis.

(A) (1) Obtain and inspect the Department's Office of Payment and Analysis Cash Management Policy. Determine if it is current to the requirements set forth in the Uniform Guidance (2 CFR 200).

Finding – We inspected the Department's Cash Management Policy and determined it is current with the requirements set forth in the Uniform Guidance (2 CFR 200).

followed in regard to conflict of interest, full and open competition, method of procurement, or

(B) From the PCRs selected in section 2.1 (A)(1) complete the following steps:

Finding – Using the same PCRs we previously selected for section 2.1, we performed the following:

(1) Observe the "Fiscal Information as of date" on the PCRs to determine when the expenses were incurred.

Finding – We observed the "Fiscal information as of date" on each PCR to determine when the expenses were incurred.

(2) Inspect the uploaded support documentation to ensure the expenses were incurred.

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 12 of 21

			ding – We inspected the uploaded support documentation to ensure the expenses were rred.	
	(3)	repo	be the total expenditures amounts to the entity's records and confirm the expenditures orted are traceable to the entity's accounting system as of the date noted on the payment in request.	
	Finding – We traced the total expenditure amounts to the entity's records and confi expenditures reported are traceable to the entity's accounting system as of the date the PCR.			
(C)	(1)		t a representative number to include at least one for each subgrantee; 100% or a simum of 60 whichever is lower, for CSP federal draws from the State's accounting system.	
		Find	ding – Based on the above criteria, we selected 15 CSP federal draws.	
		a)	Obtain a copy of the draw documentation that has been scanned and attached to the deposit in the State's accounting system.	
			Finding – We determined draw documentation was scanned and attached to the deposit in the State's accounting system.	
		b)	Obtain a copy of the general ledger that shows the draw (revenue) and corresponding vouchers (payments) to confirm funds were deposited and disbursed.	
			Finding – From the copy of the general ledger that shows the draw (revenue) and corresponding vouchers (payments), we confirmed funds were deposited and disbursed.	
		c)	Obtain a screen shot for the vouchers showing the "payment date" from the accounting system.	
	(2)	Compare the "treasurer approved date" on the deposit documentation with the relate voucher's "payment date", the difference should be five days or less. The Auditor of Stat (AOS) uses the payment date to measure compliance with CMIA.		
		rela	ding – We compared the "treasurer approved date" on the deposit documentation with the ted voucher's "payment date" from the accounting system. In all cases, we determined the erence was five days or less.	
(D) (1) Observe the Department's federal draw policies and procedures to endata is recorded, reported and properly authorized.		erve the Department's federal draw policies and procedures to ensure accurate financial a is recorded, reported and properly authorized.		
		Finding – We observed the Department's federal draw policies and procedures to accurate financial data is recorded, reported, and properly authorized.		
	(2)	Use the CSP draws selected in (C) (1) above attached to the deposit in the State's accounting system, and		
			ding – Using the CSP draws we selected in (C) (1) above, and documentation attached to deposit in the State's accounting system, we performed the following:	
		a)	Inspect documents for completeness and compliance with document procedures.	
			Finding – We inspected documents for each draw and determined they were complete and in compliance with document procedures.	

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 13 of 21

	b)	Inspect documents for appropriate authorization in accordance with the Department's federal draw policies and procedures.
		Finding – We inspected documents for each draw and determined there was appropriate authorization in accordance with the Department's federal draw policies and procedures.
(3)	for t	ain a copy of the daily federal draw reconciliation for draws pulled after October 1, 2018 he process review in step 2 above. Inspect for completeness and accuracy. Confirm that repancies were reported to the proper manager and issues were corrected.
	unal 2 ab prion the Dep subj and	ding – For three of the draws we selected, all dated prior to October 1, 2018, we were ble to obtain and inspect daily federal draw reconciliations for the process review in step bove. In order to comply with a previous High-Risk Special Condition, the Department, or to October 1, 2018 removed the CSP draws from the standard draw process to facilitate "route payment" requirement for USDE approval. Effective October 1, 2018, the artment removed the "route payment" requirement, and, thus, draws after that date were ect to the standard draw process. We inspected the 12 draws dated after October 1, 2018 confirmed they were complete and accurate, and, if applicable, discrepancies were proted and corrected.

Monitoring Period: July 1, 2018 to June 30, 2019

Page 14 of 21

3. Monitoring and Performance

3.1 **Sponsor's Monitoring of the Subgrantee**

(A)	(1)	Cont	firm whether the Department obtained a list of all subgrantees and their sponsors.				
		Finding – We confirmed the Department obtained a list of all subgrantees and their sponsors.					
	(2)	the r	Confirm whether the Department reviewed the Sponsor Evaluation summary worksheet for the most recent annual sponsor evaluation to identify subgrant awardee sponsors that did not meet at least the 3-Point Requirements for Standard D.02 (Enrollment and Financial Reviews) of the sponsor quality practices rubric.				
		work spor	Finding – We confirmed the Department reviewed the Sponsor Evaluation summary worksheet for the most recent annual sponsor evaluation to identify subgrant awardee sponsors that did not meet at least the 3-Point Requirements for Standard D.02 (Enrollment and Financial Reviews) of the sponsor quality practices rubric.				
			e subgrantee sponsors did not meet the 3-Point Requirements for Standard D.02 ollment and Financial Reviews) of the quality practices rubric for the most recent annual nsor evaluation:				
		a)	Confirm whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary communication.				
			Finding – We confirmed whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary communication. There were no deficient subgrantee sponsors.				
		b)	Confirm whether the Department sent each deficient sponsor the corrective action plan and summary letter via email.				
			Finding – We confirmed whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary letter. There were no deficient subgrantee sponsors.				
(B)	(1)	Con	firm whether the Department obtained a list of all subgrantees and their sponsors.				
		Finding – We confirmed the Department obtained a list of all subgrantees and their sponsors.					
	(2)	Confirm whether the Department reviewed the Sponsor Evaluation summary worksheet f the most recent annual sponsor evaluation to identify subgrant awardee sponsors that did n meet at least the 3-Point Requirements for Standards D.02 (Enrollment and Financi Reviews) and D.05 (Performance Monitoring) of the sponsor quality practices rubric.					
		Finding — We confirmed the Department reviewed the Sponsor Evaluation summar worksheet for the most recent annual sponsor evaluation to identify subgrant awarde sponsors that did not meet at least the 3-Point Requirements for Standard D.02 (Enrollment and Financial Reviews) and D.05 (Performance Monitoring) of the sponsor quality practice rubric.					

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 15 of 21

	(3)	If the subgrantee sponsors did not meet the 3-Point Requirements for Standards D.02 (Enrollment and Financial Reviews) and D.05 (Performance Monitoring) of the quality practices rubric for the most recent annual sponsor evaluation:	
		Confirm whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary communication.	
		Finding – We confirmed whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary communication. There were no deficient subgrantee sponsors.	
		b) Confirm whether the Department sent each deficient sponsor the corrective action plan and summary letter via email.	
		Finding – We confirmed whether the Department sent each deficient sponsor the corrective action plan and summary letter via email. There were no deficient subgrantee sponsors.	
(C)	(1)	Confirm whether the Department obtained a list of all subgrantees and their sponsors.	
		Finding – We confirmed the Department obtained a list of all subgrantees and their sponsors.	
	(2) Confirm whether the Department reviewed the Sponsor Evaluation summary we the most recent sponsor evaluation to identify subgrant awardee sponsors that a at least the 3-Point Requirements for Standards D.03 (Onsite Visits) and D.0 Reports) of the quality practices rubric.		
		Finding – We confirmed the Department reviewed the Sponsor Evaluation summary worksheet for the most recent annual sponsor evaluation to identify subgrant awardee sponsors that did not meet at least the 3-Point Requirements for Standards D.03 (Onsite Visits) and D.04 (Site Visit Reports) of the sponsor quality practices rubric.	
	(3)	If the subgrantee sponsors did not meet the 3-Point Requirements for Standards D.03 (Onsite Visits) and D.04 (Site Visit Reports) of the quality practices rubric for the most recent annual sponsor evaluation:	
		Confirm whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary communication.	
		Finding – One subgrantee sponsor, St. Aloysius Orphanage, did not meet the 3-Point Requirements for Standard D.03. We confirmed the Department drafted an individualized corrective action plan and summary letter for the D.03 standard for this sponsor.	
		b) Confirm whether the Department sent each deficient sponsor the corrective action plan and summary letter via email.	
		Finding – One subgrantee sponsor, St. Aloysius Orphanage, did not meet the 3-Point Requirements for Standard D.03 (Site Visit Reports) of the quality practices rubric for the most recent annual sponsor evaluation. We confirmed the corrective action plan and summary letter were sent via email for the D.03 standard for this sponsor.	

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program
Monitoring Period: July 1, 2018 to June 30, 2019

Page 16 of 21

(D)	(1)	Con	Confirm whether the Department obtain a list of all subgrantees and their sponsors.				
		Fina	Finding – We confirmed the Department obtained a list of all subgrantees and their sponsors.				
	(2)	the i	Confirm whether the Department reviewed the Sponsor Evaluation summary worksheet for the most recent sponsor evaluation to identify subgrant awardee sponsors that did not meet at least the 3-Point Requirements for Standard D.07 (Reports) of the quality practices rubric.				
		Finding – We confirmed the Department reviewed the Sponsor Evaluation summar worksheet for the most recent annual sponsor evaluation to identify subgrant awards sponsors that did not meet at least the 3-Point Requirements for Standard D.07 (Reports) the sponsor quality practices rubric.					
	(3)		If the subgrantee sponsors did not meet the 3-Point Requirements for Standard D.07 (Reports) of the quality practices rubric for the most recent annual sponsor evaluation:				
		a) Confirm whether the Department drafted individualized corrective action plans for ea deficient sponsor, including a summary letter.					
			Finding – We confirmed whether the Department drafted individualized corrective action plans for each deficient sponsor, including a summary communication. There were no deficient subgrantee sponsors.				
		b)	Confirm whether the Department sent each deficient sponsor the corrective action plan and summary letter via email.				
			Finding – We confirmed whether the Department sent each deficient sponsor the corrective action plan and summary letter via email. There were no deficient subgrantee sponsors.				

Subgrantee Monitoring 3.2

(A)	(1)	Obta	ain a copy of the Department's Charter School Program subrecipient listing.
			n the Charter School Program listing, select 100% of schools receiving the CSP grant. ermine the following:
		a)	Confirm whether the Department imposed reimbursement as a specific subaward condition. (Reimbursement) Go to the school PCR Summary page within the CCIP.
			Finding – The Department did not formally impose reimbursement as a specific subaward condition within the CCIP. According to the Department "Ohio's High-Risk Special Condition #1 requires that all requests be on route payment, which requires additional steps/time in order to process PCRs for CSP subgrantees. Although, there is not a formalized process to impose reimbursement only, the practice (given route payment) had that effect."
			i. For the previously selected PCRs, determined if the schools submitted documentation with each Cash Request before request is approved.
			Finding – For the previously selected PCRs, we determined the schools submitted documentation with each PCR before the request was approved.

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 17 of 21

(B)	Trace each school listed on the subrecipient list to the Department's Compliance System and determine the following,							
		Finding –We traced each school on the subrecipient list to the Department's Compliance System and determined the following:						
	(1)	(1) Document the status of the fall desk review or spring site visit.						
		Finding – Both the fall desk review and spring site visits were completed for all three subgrantees on the subrecipient list.						
	(2)	Confirm whether the monitoring protocol was followed in terms of identifying the universe/sample.						
		Finding – We confirmed the Department followed the monitoring protocol.						
	(3)	Confirm whether a monitoring review was scheduled and completed.						
		Finding – We confirmed monitoring reviews were scheduled and completed for all three subgrantees on the subrecipient list.						
	(4)	Confirm whether the school uploaded the required support documentation as indicated in the Compliance system for each item for review.						
	Finding – We confirmed each of the schools uploaded the required support documentar indicated in the Compliance system for each item for review.							
	(5)	Confirm whether the monitoring review noted issues that require a Corrective Action Plan (CAP).						
	Finding – We confirmed the monitoring review noted issues that require a C Plan for two of the three subgrantees.							
	(6) Confirm whether or not technical assistance was noted and/or provided during the so, confirm there is evidence the technical assistance was completed.							
		Finding – We confirmed technical assistance was noted and provided for two of the three subgrantees, and we confirmed the technical assistance was completed.						
(C)	Trac	be each school listed on the subrecipient list to the Department's Compliance System and						
		Finding – We traced each school on the subrecipient list to the Department's Compliance System and confirmed the following:						
	(1)	Confirm the Department received a copy of the annual financial audit and noted such within the Compliance system. If applicable, confirm the Department verified the Single Audit was submitted to the Federal Audit Clearinghouse.						
		Finding – As part of the fall desk review, the Department requires schools to submit a copy of their most recent financial audit. However, as of the time the fall desk reviews were completed, none of the three school's financial audits for fiscal year 2018 (the schools' initial year of operation) had been completed.						

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program
Monitoring Period: July 1, 2018 to June 30, 2019

Page 18 of 21

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	(2)	(GA	GAS)	thether audit findings were reported. If so confirm the Department identified financial or Uniform Guidance findings accurately within the Compliance system and ed a management decision on the finding(s) and any necessary follow-up action.			
		Finding – As part of the fall desk review, the Department requires schools to submit a copy of their most recent financial audit. However, as of the time the fall desk reviews were completed, none of the three school's financial audits for fiscal year 2018 (the schools' initial year of operation) had been completed.					
	(3)			hether a Corrective Action Plan was completed, if required. If a refund was required, hether it was submitted.			
		their none	most of the	As part of the fall desk review, the Department requires schools to submit a copy of recent financial audit. However, as of the time the fall desk reviews were completed, ne three school's financial audits for fiscal year 2018 (the schools' initial year of had been completed.			
(D)	(1)	Obta the I	ain a li ist to t	or the Planning Subgrantees: ist of all planning subgrantees and their sponsors. Crossmatch the subgrantees on the Departments Compliance System. Inspect the fall desk reviews and spring site all planning subgrantees and determine,			
				We reviewed the list of subgrantees and determined there were no planning es, so this procedure is not applicable.			
		a)	narra	firm whether the Department collected evidence from multiple sources (e.g., atives, uploaded documentation, interviews, etc.) when completing the program uation rubric to confirm that the subgrantee is doing the following:			
				ling – We reviewed the list of subgrantees and determined there were no planning grantees, so this procedure is not applicable.			
		b)	i.	implementing the grant activities as measured by the program evaluation rubric;			
				Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.			
			ii.	complying with agreed upon assurances in the grant;			
				Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.			
			iii.	using financial controls to successfully manage the grant program; and,			
				Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.			
			iv.	making progress in meeting grant goals and objectives.			
				Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.			

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program Monitoring Period: July 1, 2018 to June 30, 2019 Page 19 of 21

c)		firm whether the Department reviewed data in the planning evaluation rubric to irm the subgrantee:
	a.	Involved parents of potential future students and other community members were involved in the planning and program design of the school;
		Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.
	b.	Informed the students in the community about the school; and
		Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.
	C.	Avoided apparent and actual conflicts of interest when administering the grant.
		Finding – We reviewed the list of subgrantees and determined there were no planning subgrantees, so this procedure is not applicable.
d)		e Department noted deficiencies, confirm whether a formal follow-up or corrective on plan was required of the subgrantee.
		ling – We reviewed the list of subgrantees and determined there were no planning grantees, so this procedure is not applicable.
subjand Find Sys	grante sprinç ding –	list of all Year 1 and Year 2 subgrantees and their sponsors. Crossmatch the res on the list to the Departments Compliance System. Inspect the fall desk reviews g site visits from all implementation grantees and determine, We crossmatched the subgrantees on the list to the Department's Compliance and inspected the fall desk reviews and spring site visits from all implementation res.
a)	narra	firm whether the Department collected evidence from multiple sources (e.g., atives, uploaded documentation, interviews, etc.) when completing the ementation rubric to confirm that the subgrantee is doing the following:
		ling – We confirmed the Department collected evidence from multiple sources when pleting the implementation rubric.
	i.	implementing the subgrantee activities as measured by the implementation rubric;
		Finding – The Department confirmed each subgrantee was implementing the subgrantee activities as measured by the implementation rubric.
	ii.	complying with agreed upon assurances in the grant;
		Finding – The Department confirmed each subgrantee was complying with agreed upon assurances in the grant.
	iii.	using financial controls to successfully manage the grant program; and,
		Finding – The Department confirmed each subgrantee was using financial controls to successfully manage the grant program.

Independent Accountant's Report on Applying Agreed-upon Procedures Charter Schools Program
Monitoring Period: July 1, 2018 to June 30, 2019

Page 20 of 21

	iv. making progress in meeting grant goals and objectives.
	Finding – The Department confirmed each subgrantee was making progress in meeting goals and objectives.
b)	Confirm whether the Department reviewed data in the implementation rubric to confirm the subgrantee:
	 i. Parents of potential future students and other community members were involved in the planning program design of the school;
	ii. Informed the students in the community about the school;
	iii. The school's management operates as described in the CSP application; and iv. Avoids apparent and actual conflicts of interest when administering the grant.
	Finding – We confirmed the Department reviewed data in the implementation rubric during monitoring reviews to confirm each subgrantee: i. Involved parents of potential future students and other community members were involved in the planning program design of the school; ii. Informed the students in the community about the school; iii. The school's management operates as described in the CSP application; and iv. Avoids apparent and actual conflicts of interest when administering the grant.
c)	Confirm whether the Department intervened with a formal follow-up action, if the Department identified deficiencies.
	Finding – We confirmed the Department intervened with a formal follow-up action, if the Department identified deficiencies.

3.3 **Subgrantee Annual Grant Activities Report**

(A)	(1)	Use	Use the sample of planning and Year 1 and Year 2 subgrantees selected in Table 3.2			
	(2)	(2) Obtain the Department's written directions and guidance to subgrantees about annual activities reports				
		a.	Confirm whether the grant monitoring reports were submitted timely, in accordance with the Department's requirements, by the subgrantee.			
			Finding – We confirmed the grant monitoring reports were submitted timely, in accordance with the Department's requirements, by all subgrantees.			

Monitoring Period: July 1, 2018 to June 30, 2019

Page 21 of 21

3.4 Department Performance Reports

(A)	(1)		ain the Department's procedures regarding submitting performance reports and iniannual reports to USDoE, and for submitting the WestEd Data Collection form to WestEd.		
	(2)	Obta	ain copies of each submitted report.		
		a)	Confirm whether the Department has processes and procedures in place to ensure that the submitted report is accurate and complete.		
			Finding – We confirmed the Department has written processes and procedures in place to ensure that submitted reports are accurate and complete.		
		b)	Confirm whether each report was submitted timely (extensions considered).		
			Finding – We confirmed each report was submitted timely.		
		c)	Confirm whether each report included all required information.		
			Finding – We confirmed each report included all required information.		

This agreed-upon procedures engagement was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants and applicable attestation engagement standards included in the Comptroller General of the United States' *Government Auditing Standards*. We were not engaged to and did not conduct an examination or review, the objective of which would be the expression of an opinion or conclusion, respectively, on the application and selection of subgrant recipients, subgrant recipient claims and payments, and monitoring and performance for the Charter Schools Program. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report only describes the agreed-upon procedures we performed and our findings. Accordingly, this communication is not suitable for any other purpose.

KENNEDY COTTRELL RICHARDS LLC

Columbus, Ohio November 15, 2019