

# How To: Complete FMS (Financial Management Self-Assessment) Report

All TxCDBG Grant Recipients must demonstrate sound financial management to receive and manage the grant.

To complete this report, the most current annual audit should be on hand. Sections to be completed is determined by the age of the annual audit and responses to questions.

- Step**
- 1** **Authorization for Direct Deposit:** Upload current Direct Deposit form.  
To request warrant payments in lieu of direct deposit, upload form 74-176 marked "Warrant Only"

## Authorization for Direct Deposit: Updated Form

To be completed only if banking instructions are updated during the grant period.

- 2** **Annual Audit:** Answer Yes/No.  
Provide FYE date of the most recent annual audit, upload the most recent audit and upload any audit findings or material noncompliance within the last five years. **Note the information highlighted in blue.**

## A If you answered NO to Annual Audit:

**Federal, state, or program policy: Accounting Systems:** Provide more information about your local Accounting Systems and upload any written procedures from your locality.

## B If you answered NO to Annual Audit:

**Federal, state or Program policy: Personal Ethics and Fraud Prevention training:** Answer Yes/No.

	<div> <div>Performance Report</div> <div>Financial Management System Self-Assessment</div> </div>	<div>Federal, state, or program policy: Personal Ethics and Fraud Prevention Training</div> <div> <div>Grant Recipient requires mandatory personnel ethics training required for all staff with access to local funds.</div> <div>Grant Recipient requires mandatory fraud prevention training required for all staff with access to local funds.</div> </div>
3		<div>Federal, state or program policy: Controls and safeguards to prevent fraud, abuse and waste: Answer Yes/No.</div>
A	<div> <div>Performance Report</div> <div>Financial Management System Self-Assessment</div> </div>	<div>Federal, state, or program policy: Controls and safeguards to prevent fraud, abuse, and waste</div> <div> <div>Grant Recipient requires fidelity bond or employee dishonesty coverage in place for staff with access to project funds.</div> <div>Grant Recipient requires local governing body (city Council, or County Commissioner's Court) approval of disbursements.</div> </div> <div> <div>If you answered NO to Local Governing Body Approval:</div> <div>Oversight Responsibility: Provide the name and job title of the individual(s) responsible for oversight of person(s) that handle local funds on a daily basis.</div> </div>
4	<div> <div>Forms</div> <div>Performance Report</div> <div>Financial Management System Self-Assessment</div> </div>	<div>Grant Recipient requires local governing body (City Council, or County Commissioners Court) approval of disbursements.</div> <div>No</div> <div> <div>Oversight Responsibility</div> <div>Name</div> <div>Job Title</div> <div>Name of individual responsible for oversight of person(s) that handle local funds on a daily basis</div> </div>
5		<div>Federal, state or program policy: Segregation of Duties: Local staff and officers who have the accounting responsibility to sign checks should be listed. Use the + icon to add a new row for any additional signatories.</div>
	<div> <div>Forms</div> <div>Performance Report</div> <div>Financial Management System Self-Assessment</div> </div>	<div>Federal, state, or program policy: Segregation of Duties</div> <div> <div>Accounting Responsibility</div> <div>Name of Individual Staff/Official</div> <div>Title</div> <div>Sign checks (at least two signatures required)</div> <div>Sign checks (at least two signatures required)</div> </div>
6		<div>Disbursement Process: Answer all questions including the name and job title of individual responsible for identification of receipt of local funds.</div> <div>NOTE: By submitting you acknowledge your understanding: If local processes include formal approval steps that will prevent you from dispersing funds prior to 5 days after receiving TDA deposit, you must plan your process ahead of time.</div>
	<div> <div>Forms</div> <div>Performance Report</div> <div>Financial Management System Self-Assessment</div> <div>Status Options</div> <div>Submit Report</div> <div>Tools</div> </div>	<div>Disbursement Process</div> <div> <div>Do you pay vendors prior to requesting funds from TDA?</div> <div>How often does local staff check the bank account to ensure that all grant funds are disbursed to service providers within 5 business days of being deposited?</div> <div>Identify local staff responsible for identification of receipt of grant funds into local accounts:</div> <div>Name</div> <div>Job Title</div> </div> <div>By submitting you acknowledge your understanding:</div> <div>If local processes include formal approval steps that will prevent you from dispersing funds prior to 5 days after receiving TDA deposit, you must plan your process ahead of time.</div>
6		<div>Certification: Local staff with authority by resolution to sign contractual agreements, environmental reviews and payment requests should mark the field. (Authorized official, project director or payment requestor in TDA-GO.) The name, title and date will autofill once the mark is made.</div>
	<div> <div>Financial Management System Self-Assessment</div> <div>Status Options</div> </div>	<div>Always SAVE changes (top right) and SUBMIT when complete (left navigation pane under 'Status Options')</div> <div>By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)</div> <div> <div>Certified By</div> <div>Title</div> <div>Date</div> </div>
7		<div>SAVE: Click Save in the upper right corner to lock in details and certification.</div>

CDV25-0013-  
FMS-01

Forms

Performance  
Report

# Financial Management System Self- Assessment

New Note | Print | **Save** | Delete

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**SUBMIT:** The certifier of the FMS report will **click the Submit Report** button on the left navigation bar.

Financial Management  
System Self-  
Assessment

Status Options

Submit Report

Tools

Description of Document

Upload Document

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)

Certified By

Title

Date

**OPTIONAL: Additional Documentation:** Upload any additional relevant documentation regarding your financial management practices.

Performance  
Report

Financial  
Management System  
Self-Assessment

Status Options

Additional Documentation

Description of Document

Browse

Drag Files Here

Upload Document