



Subrecipient Monitoring Risk Assessment Tool				
Subrecipient Name: _____		Grant Award Number: _____		
Cayuse Number: _____		Lead PI: _____		
Monitoring Stage (i.e. Yr1, Yr2, etc.) _____				
No. of Attributes	Risk Factor	Risk Score		Score
1	New Subrecipient to TTUHSCEP	Yes (2) No (0)		
2	Other Subrecipient Consideration	Subawardee has been in business less than 5 years (2) Subawardee has been in business more than 5 years (0)		
4	Other Subrecipient Consideration	Subawardee is Foreign (2) Subawardee is Domestic (0)		
3	Other Subrecipient Consideration	Sub PI or Co-Principals Investigators of the organization appear on the federal Debarment and Suspension; verify sam.gov (If yes, subaward will not be issued.)		
4	Independent Single Audit	No and Federal expenditures ≥ \$750,000 (2) No and Federal expenditures < \$750,000 (1) Yes (0)		
5	Single Audit Opinion	Adverse, Disclaimer, On Going Concern (2) Qualified (1) Unqualified (0)		
6	Award Amount	Subaward budget exceeds \$250, 000 (2) Subaward budget is greater than \$100,000, but less than \$250,000 (1) Subaward budget is less than \$100,000 (0)		
7	Pass Through Percentage	More than 30% of award is passed to subaward (2) Between 10% and 30% of award is passed through to subawardee (1) Less than 10% of award is passed through to subawardee (0)		

8	Complexity of Project	Complex Project (Matching Funds, Program Income, Equipment Costs, Travel Costs) (2) Moderately Complex Project (at least 1 indicator listed above) (1) Simple Project (no complicating indicators) (0)		
Complete additional questions if additional risk monitoring has been identified for prior subaward.				
9	Invoice Compliance	2 Untimely Submissions (2) 1 Untimely Submission (1) 0 Untimely Submission (0)		
10	Progress Reports Compliance	2 Untimely Submissions (2) 1 Untimely Submission (1) 0 Untimely Submission (0)		
Total Risk Score:				
<i>Based on the resulting risk score, a monitoring plan can be developed to address any concerns.</i>				
Risk Score Agenda 0 - 4: Low Risk 5 - 9: Moderate Risk 10 +: High Risk				
Signed by Research Administrator: _____ Date: _____ Signed by PI: _____ Date: _____ Verified By: _____ Date: _____				