Floyd County, Georgia

Report of Independent Certified Public Accountants in Accordance with the Uniform Guidance and Government Auditing Standards

For the Year Ended December 31, 2023

FOR THE YEAR ENDED DECEMBER 31, 2023

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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Board of Commissioners of Floyd County, Georgia Rome, Georgia

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing* Standards issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, the discretely presented component unit, each major fund, and the aggregate remaining fund information of Floyd County, Georgia (the "County") as of and for the year ended December 31, 2023, and the related notes to the financial statements, which collectively comprise the County's basic financial statements, and have issued our report thereon dated June 27, 2024. Our report includes a reference to other auditors who audited the financial statements of the Floyd County Health Department as described in our report on the County's financial statements. This report does not include the results of the other auditors' testing of internal control over financial reporting or compliance and other matters that are reported on separately by those auditors.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the County's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

A *deficiency in internal* control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed an instance of noncompliance or other matters that are required to be reported under *Government Auditing Standards* and which are described in the accompanying schedule of findings and questioned costs as items 2023-001.

Floyd County, Georgia's Response to Finding

Mauldin & Jenkins, LLC

Government Auditing Standards requires the auditor to perform limited procedures on the County's response to the findings identified in our audit and described in the accompanying schedule of findings and questioned costs. The County's response was not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the County's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Atlanta, Georgia June 27, 2024





INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

Board of Commissioners of Floyd County, Georgia Rome, Georgia

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Floyd County, Georgia's (the "County") compliance with the types of compliance requirements described in the OMB *Compliance Supplement* that could have a direct and material effect on each of the County's major federal programs for the year ended December 31, 2023. The County's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the County complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2023.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America ("GAAS"); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* ("Uniform Guidance"). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Floyd County, Georgia and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of the County's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to the County's federal programs.

Other Matter - Federal Expenditures Not Included in the Compliance Audit

The County's basic financial statements include the operations of the Floyd County Health Department, which expended \$6,732,072 in federal awards which is not included in the County's schedule of expenditures of federal awards. Our compliance audit, described in the "Opinion on Each Major Federal Program," does not include the operations of the Floyd County Health Department because other auditors have been engaged by the Floyd County Health Department to perform the audit of compliance.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the County's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the County's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, Government Auditing Standards, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the County's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.



Obtain an understanding of the County's internal control over compliance relevant to the audit in order to
design audit procedures that are appropriate in the circumstances and to test and report on internal control
over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an
opinion on the effectiveness of the County's internal control over compliance. Accordingly, no such
opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.



Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the financial statements of the governmental activities, the business-type activities, the discretely presented component unit, each major fund, and the aggregate remaining fund information of Floyd County, Georgia as of and for the year ended December 31, 2023, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon, dated June 27, 2024, which contained unmodified opinions on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

Atlanta, Georgia June 27, 2024

Mauldin & Jankins, LLC

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Schedule of Expenditures of Federal Awards For Year Ended December 31, 2023

Federal Grantor/Pass Through Grantor/Program Title	Federal Assistance Listing Number	Pass-Through Grantor's Number	Total Expenditures	
U.S. Department of Justice				
Passed Through the Criminal Justice Coordinating Council: Bulletproof Vest Partnership Program	16.607	2021BUBX21025654	\$	1,867
Edward Byrne Memorial Justice Assistance Grant	16.738	JAG	<u> </u>	14,534
				16,401
Alien Prisoner Program	16.606	SCAAP Award 2021		7,838
Alien Prisoner Program	16.606	SCAAP Award 2022		6,701
Alien Prisoner Program	16.606	SCAAP Award 2023	-	8,991 23,530
VOCA Grant for Victim Witness	16.575	C22-8-076 / C18-5-556		116,114
VOCA Grant for Victim Witness Subtotal for Crime Victim Assistance Grants:	16.575	C23-8-101		14,759 130,873
Total for U.S. Department of Justice			\$	170,804
-				
U.S. Department of the Treasury Coronavirus State and Local Fiscal Recovery Funds	21.027	N/A	\$	677,441
Total U.S. Department of the Treasury			\$	677,441
U.S. Department of Homeland Security				
Passed through Georgia Emergency Management Agency: Emergency Management Performance Grant	97.042	EMA-2023-EP	\$	26,066
Passed through Georgia Emergency Management Agency:				
Electronic Crimes Task Force	97.067	N/A		3,000
Homeland Security Grant Program Homeland Security Grant Program	97.067 97.067	EMW-2022-SS-00048 EMW-2022-SS-00048		1,652 49,700
Homeland Security Grant Program	97.067	EMW-2021-SS-00080		1,461
Subtotal for Homeland Security Grant Program Grants:				55,813
Total U.S. Department of Homeland Security			\$	81,879
U.S. Department of Transportation				
Passed through the Georgia Department of Transportation:				
Airport Improvement Program - Fencing Design	20.106	AP021-9046-41 (115)	\$	8,060
Total U.S. Department of Transportation			\$	8,060
Governor's Office of Highway Safety Passed through the Georgia Governor's Office of Highway Safety:				
HEAT Grant	20.600	GA-2023-402 PT-029	\$	114,612
HEAT Grant	20.600	GA-2024-402 PT-029		32,592
Total Governor's Office of Highway Safety			\$	147,204
U.S. Department of the Interior Payments in Lieu of Taxes Program	15.226	N/A	\$	16,252
Total U.S. Department of the Interior			\$	16,252
Office of National Drug Control Policy				
Passed Through Atlanta- Carolinas HIDTA:				
High Intensity Drug Trafficking Areas	95.001	G21GA0011A	\$	3,500
High Intensity Drug Trafficking Areas High Intensity Drug Trafficking Areas	95.001 95.001	G22GA0011A G23GA0011A		113,052 385
Total Office of National Drug Control Policy	75.001		\$	116,937
Total Expenditures of Federal Awards			<u> </u>	1,218,577
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NOTE TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED DECEMBER 31, 2023

(1) Summary of Significant Accounting Policies

Basis of Presentation and Accounting

The accompanying Schedule of Expenditures of Federal Awards is presented using the modified accrual basis of accounting. Under the modified accrual basis of accounting, expenditures are recognized when the related liability is incurred.

In instances where the grant agreement requires the County to match grant awards with local funds, such matching funds are excluded in the accompanying Schedule of Expenditures of Federal Awards.

Federal grant programs which are administered through State agencies (pass-through awards) have been included in this report. These programs are operated according to Federal regulations promulgated by the Federal agency providing the funding.

The information in this schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of the financial statements.

The County did not utilize the 10% de minimus indirect cost rate permitted by the Uniform Guidance.

SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2023

SECTION I SUMMARY OF AUDITOR'S RESULTS

Financial Statements Type of report the auditor issued on whether the financial statements audited were prepared in accordance with GAAP: Unmodified Internal control over financial reporting: Material weakness(es) identified? yes X no Significant deficiency(ies) identified? yes X none reported Noncompliance material to financial statements noted? X yes no Federal Awards Internal control over major programs: Material weaknesses identified? ____ yes <u>X</u> no Significant deficiencies identified? ____ yes X none reported Type of auditor's report issued on compliance for Unmodified major federal programs Any audit findings disclosed that are required to be reported in accordance with ____ yes __X_ no 2 CFR 200.516(a)? Identification of major programs: Federal Assistance Listing Number Name of Federal Program or Cluster 21.027 Coronavirus State and Local Fiscal Recovery Funds Dollar threshold used to distinguish between Type A and Type B programs: \$750,000

____ yes <u>X</u> no

Auditee qualified as low-risk auditee?

SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2023

SECTION II FINANCIAL STATEMENT FINDINGS

2023-001 Collateralization of Cash

Criteria: Policies should be in place requiring all financial institutions holding cash deposits to be properly insured and/or collateralized at all times throughout the fiscal year. State statutes required deposits of public funds to be insured or collateralized at a rate of at least 110 percent of the deposit amount.

Condition: As of December 31, 2023, the County had approximately \$972,436 in deposits with the Sheriff accounts which were not properly collateralized at 110% or included in the Georgia State Collateralization Pool in accordance with the Official Code of Georgia Annotated ("OCGA") Section 45-8-12(c).

Context/Cause: The Sheriff accounts are not set up as public funds at the financial institution and should be set up as such to ensure accounts are collateralized and secured.

Effects: The failure of the institution to fully collateralize or insure the County's deposits could result in financial loss to the County.

Recommendation: We recommend the County monitor its deposits on an ongoing basis and correspond with the respective financial institutions to ensure that all deposits over the federal depository insurance coverage limit are properly collateralized in accordance with state statutes.

Auditee's Response: We concur with the finding. We have taken action with our financial institution to have deposits added to the list of collateralized funds.

SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2023

SECTION III FEDERAL AWARDS FINDINGS AND QUESTIONED COSTS

None noted.

SECTION IV SCHEDULE OF PRIOR YEAR FINDINGS

None noted.



BOARD OF COMMISSIONERS

TWELVE EAST 4TH AVENUE, SUITE 209 • ROME, GEORGIA 30161 PHONE: 706.291.5110 • FAX: 706.291.5248 • www.romefloyd.com

MANAGEMENT'S CORRECTIVE ACTION PLAN FOR THE YEAR ENDED DECEMBER 31, 2023

2023-001 Collateralization of Cash

Contact Person Responsible for the Corrective Action Plan: Susie Gass, Finance Director/Comptroller

Corrective Action Plan: The County is planning to make the necessary changes to properly collateralize cash.

Anticipated Completion Date: December 31, 2024