



AUDITOR PREPARED SCHEDULE OF FINDINGS AND QUESTIONED COSTS

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Summary of Auditor's Results

Financial Statements

Type of auditor's report issued:

Unmodified

Internal control over financial reporting:

Material weaknesses identified?

Significant deficiencies identified?

Noncompliance material to financial statements noted?

Federal Awards

Internal control over major programs:

Material weaknesses identified?

Significant deficiencies identified?

Type of auditor's report issued on compliance for major programs

Unmodified

Any audit findings disclosed that are required to be reported in

accordance with 2 CFR 200.516(a)?

Identification of major federal programs:

Assistance

93.323

969)
,

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

93.558	Temporary Assistance for Needy Families
93.563	Child Support Services
93.568	Low-Income Home Energy Assistance
97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)
97.067	Homeland Security Grant Program

Dollar threshold used to distinguish between Type A and Type B programs - \$10,000,000

Auditee Qualified as low-risk auditee?

No

SOUTH DAKOTA INVESTMENT COUNCIL

CURRENT AUDIT FINDING AND RECOMMENDATION

Financial Statement Audit Finding:

Finding No. 2024-001: Ineffective Internal Controls over Financial Reporting

Type of Finding: Material Weakness

Criteria:

Properly designed controls over financial reporting prevent and detect misstatements in the financial statements and accompanying notes to the financial statements to ensure they are materially accurate.

Condition:

The South Dakota Investment Council incorrectly reported the earnings distribution payable and related expense of the Cash Flow Portfolio.

<u>Cause</u>:

The South Dakota Investment Council did not appropriately update the "Earnings Distribution-declared" or the "Statutorily Required Distributions" from the prior year's amounts causing an understatement of both amounts on the Cash Flow Portfolio financial statements.

Effect:

The Cash Flow Portfolio Statement of Net Position and the Statement of Changes in Net Position were materially misstated.

Repeat Finding from Prior Year:

No.

Recommendation:

We recommend that controls be evaluated to ensure that they are able to prevent material misstatements from occurring.

Views of Responsible Officials:

The South Dakota Investment Council concurs with this finding.

DEPARTMENT OF REVENUE

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-002: Incorrect Interpretation of SDCL 32-9-15

Type of Finding: State Compliance

Criteria:

South Dakota Codified Law (SDCL) 32-9-15 defines commercial motor vehicle registration fees and states, in part:

In consideration of the unusual use of the public highways, each person, except as otherwise provided in this chapter, desiring to operate a motor vehicle, trailer, or semitrailer, upon the public highways of this state as a motor carrier, shall annually pay the commercial motor vehicle fee as follows, to the county treasurer of the county of which the person is a resident, if a carrier of property; or to the Department of Revenue, if the person is not a resident of this state:...

- (10) For each additional 2,000 pounds or major fraction thereof in excess of 20,000 pounds, forty dollars.
- (11) For each vehicle or combination of vehicles as defined in § 32-22-10 with a gross weight in excess of 78,000 pounds, seven dollars in addition to the fee schedule above.

SDCL 32-5-6.3 defines noncommercial vehicle registration fees for other than automobiles, pickup trucks, or vans and states, in part:

License fees on a noncommercial motor vehicle which is not an automobile, pickup truck, or van licensed pursuant to § 32-5-6 shall be determined by the gross weight of the motor vehicle as defined by subdivision 32-9-1(6), and based on the following:...

(3) For a vehicle in excess of 20,000 pounds...On and after July 1, 2016, the total license fee shall be eighty percent of the total license fee established for commercial vehicles of equivalent weight pursuant to § 32-9-15.

Condition:

The Department of Revenue (DOR) uses fee tables in the SDCars system to calculate registration fees applicable per SDCL 32-9-15 and 32-5-6.3.

Prior to July 1, 2022, the application of the fee related to SDCL 32-9-15 (11) was a flat seven dollars applied for all vehicles weighing over 78,000 pounds. The fee tables were changed in the SDCars system as of July 1, 2022, which changed the fee to an additional seven dollars per 2,000 pounds above the 78,000 pound threshold which is how the registration fees were calculated in FY 2024. SDCL 32-9-15 (11) has not changed since it was added to the SDCL during the 1982 legislative session.

DEPARTMENT OF REVENUE (Continued)

Cause:

Incorrect interpretation of SDCL 32-9-15 (11) beginning on July 1, 2022.

Effect:

As a result of the DOR's incorrect interpretation of SDCL 32-9-15 (11), approximately \$530,000 in commercial and noncommercial motor vehicle registration fees were collected in excess of the statutorily allowed amount in FY 2024.

Repeat Finding from Prior Year:

No.

Recommendation:

We recommend correction of the fee tables to ensure registration fees are calculated and collected in compliance with SDCL.

Views of Responsible Officials:

The Department of Revenue (DOR) concurs with this finding.

DEPARTMENT OF REVENUE (Continued)

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-003: Inadequate Internal Controls over the SDCars system

Type of Finding: Significant Deficiency

Criteria:

The Government Accountability Office – Standards for Internal Control in the Federal Government defines internal control as:

... a process effected by an entity's oversight body, management, and other personnel that provides reasonable assurance that the objectives of an entity will be achieved.

The Government Accountability Office – Standards for Internal Control in the Federal Government principles of internal control 10 through 12 states:

- 10. Management should design control activities to achieve objectives and respond to risks.
- 11. Management should design the entity's information system and related control activities to achieve objectives and respond to risks.
- 12. Management should implement control activities through policies.

Condition:

The SDCars system is used to title and register vehicles for the Department of Revenue (DOR) in compliance with South Dakota Codified Law (SDCL). SDCars calculates all fees and maintains documentation for titles and registrations.

Former employees at the DOR used the SDCars system to create inappropriate titles or inappropriately manipulate fees.

Cause:

Internal controls over titling and registering vehicles were inadequate, which included the lack of adequate controls for preventative internal controls in the SDCars system and detective internal controls at the DOR.

Effect:

Former employees were able to use the SDCars system for personal reasons and process transactions or fees inappropriately.

Repeat Finding from Prior Year:

No.

DEPARTMENT OF REVENUE (Continued)

Recommendation:

We recommend the detective internal controls implemented by the DOR since the control deficiencies were discovered be continued until the new motor vehicle system is implemented (605Drive). Additionally, we recommend that the DOR implement a thorough review of the preventative controls imbedded within the 605Drive system to determine if additional detective controls will be needed to ensure that risks are mitigated to an acceptable level. These controls should be monitored and reviewed regularly to evaluate their results.

Views of Responsible Officials:

The Department of Revenue (DOR) concurs with this finding.

STATEWIDE FINANCIAL REPORTING PROCESS

CURRENT AUDIT FINDING AND RECOMMENDATION

Financial Statement Audit Finding:

Finding No. 2024-004: Ineffective internal controls over financial reporting

Type of Finding: Material Weakness

Criteria:

In order for the State to compile the needed information for the State's financial statements, including the notes to the financial statements, the Bureau of Finance and Management (BFM) issued a policies and procedures manual to be used while preparing year-end entries and disclosures. From these broad guidelines, each agency develops specific policies and procedures as well as various internal control procedures to properly report its portion of the year-end entries and disclosures to BFM.

From the year-end entries and disclosure information provided by the agencies and consultants under contract with the State, the State's financial statements and applicable note disclosures are prepared by the BFM's Accounting Analysis and Financial Reporting Division. The BFM has implemented controls to detect and correct reporting errors in the agency or consultant provided information to ensure the State's financial statements are accurate and reported in accordance with Generally Accepted Accounting Principles.

Condition:

The internal controls implemented by the agencies and BFM did not adequately detect and correct all of the reporting errors. Audit adjustments were proposed, some of which were material, and posted to the financial statements and notes to the financial statements by management.

Cause:

In certain instances, the internal controls implemented by the agencies and BFM were not fully effective, and as a result, the financial statements and notes to the financial statements had material reporting errors that needed to be corrected during our audit.

<u> Effect:</u>

Because the internal controls of the State were not fully effective in identifying and correcting material misstatements, there existed an increased risk for inaccurate financial reporting.

Repeat Finding from Prior Year:

Yes.

Recommendation:

We recommend the BFM and State agencies continue to review and improve internal control procedures to identify and correct weaknesses that are resulting in reporting errors.

STATEWIDE FINANCIAL REPORTING PROCESS (Continued)

<u>Views of Responsible Officials:</u>
The Bureau of Finance and Management (BFM) concurs with this finding.

DEPARTMENT OF SOCIAL SERVICES

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Federal Compliance Audit Finding:

Finding No. 2024-005: Inadequate controls over the payment of claims.

Type of Finding: Material Weakness

Assistance Listing Title: Temporary Assistance for Needy Families (TANF)

Assistance Listing Number: 93.558

Federal Award Numbers: 2201SDTANF, 2301SDTANF, 2401SDTANF

Federal Award Years: 2022, 2023, 2024

Federal Agency: Department of Health and Human Services

Category of Finding: Activities Allowed or Unallowed

Criteria:

Title 45 of the Code of Federal Regulations (CFR), Section 263.11(a)(2) allows states to use Federal TANF funds for emergency services "For which the State was authorized to use IV-A or IV-F funds under prior law, as in effect on September 30, 1995 (or, at the option of the State, August 21, 1996)."

45 CFR 75.303 requires the non-Federal entity to:

(a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in "Standards for Internal Control in the Federal Government," issued by the Comptroller General of the United States or the "Internal Control Integrated Framework," issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).

45 CFR 75.403(g) requires costs to be adequately documented to be allowable under Federal awards.

The Family and Child Information System (FACIS) is utilized to process TANF emergency assistance payments. Approximately \$6.8 million in federal TANF emergency assistance claims were processed on the FACIS system during FY24.

Chapter XIII of the FACIS Manual states:

"Any claims entered on the New Claim Entry screen require supervisor approval before payment is made. The claims entered by Batch also require supervisor approval."

DEPARTMENT OF SOCIAL SERVICES (Continued)

Condition:

Out of 77 TANF emergency assistance paid claims tested, we identified the following:

Claim Approval

There was no evidence on the FACIS system of more than one person being involved with the authorization or payment of 45 claims. Sixteen of these 45 claims were "batch" claims for monthly foster care maintenance type payments and there was no documentation of claim payment approval on the FACIS system. Twenty-three of these 45 claims were miscellaneous type claims with no documentation of claim payment approval on the FACIS system. These 39 claims were entered and paid prior to DSS adding a field on the FACIS system in January of 2024 to document claim payment approval. Six claims were paid after this field was added to the FACIS system in January of 2024 and were approved for payment by the same person that entered the claim.

• Payment Exceeding Authorized Amount

For one client, the monthly amount authorized for daycare was exceeded in the month related to the claim tested, resulting in an overpayment of \$380.00. In this instance two separate claims were paid in the same month for foster parent daycare. Each claim was below the total authorized monthly amount of \$1,000 for this client. However, in total these two claims in the amounts of \$600 and \$780 exceeded the monthly authorized amount and the FACIS system allowed payment of both claims.

Inadequate Supporting Documentation

Two claims were not adequately supported. These claims were for foster parent day care. Invoices attached to the CP-522 claim forms did not include provider names, dates of service, and/or the number of hours the child was in care. For one of these claims, the CP-522 claim form was not signed by the claimant but rather was signed by the DSS caseworker who also entered and approved the claim on the FACIS system.

Cause:

Controls in the FACIS system were not adequate to prevent the person entering a claim for payment in the system to also approve the claim for payment with no further review. For those claims that were subject to secondary review, no documentation of that review and approval was maintained in the system.

Controls in the FACIS system were not adequate to prevent paying claims in excess of authorized monthly amounts when billed by more than one provider.

Controls were not adequate to prevent paying claims without proper supporting documentation.

Effect:

As a result of these deficiencies, there was increased risk of improper payments being made from grant funds.

DEPARTMENT OF SOCIAL SERVICES (Continued)

Questioned Costs:

\$2,327.50.

Further Information:

A sample of 77 claims amounting to \$95,309.52 was tested out of 14,024 total claims paid on the FACIS system during State Fiscal Year 2024. These claims were paid with a combination of Federal TANF and state general funds. The total dollar amount of claims paid for Emergency Assistance in FY24 was \$14,127,248.26, of which \$6,817,450.60 was Federal. Questioned costs reported include only the federal share of claims found to be improperly paid and/or improperly supported.

Repeat Finding from Prior Year:

Yes.

Recommendation:

We recommend internal controls be strengthened over the initiation and approval of claims on the FACIS system. These controls should ensure that claim reviews and approvals are being performed by at least one individual other than the person entering the claim on the FACIS system. We also recommend adequate documentation be maintained to identify the individual who approved the claim and the date it was approved.

We recommend that internal controls be strengthened within the FACIS system to prevent overpayments when multiple claims are submitted for the same services in any given month.

We recommend that internal controls be strengthened to ensure that adequate documentation is obtained and retained to support the claims paid.

Views of Responsible Officials:

The Department of Social Services concurs with the finding.

DEPARTMENT OF SOCIAL SERVICES (Continued)

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Federal Compliance Audit Finding:

Finding No. 2024-006: Inadequate Internal Controls over Special Tests and Provisions

Type of Finding: Significant Deficiency and Non-compliance

Assistance Listing Title: Medicaid Cluster (State Medicaid Fraud Control Units, State Survey and Certification of Health Care Providers and Suppliers, and Medical Assistance Program)

Assistance Listing Numbers: 93.775, 93.777, 93.778
Federal Award Numbers: 2305SD5MAP, 2405SD5MAP

Federal Award Years: FFY2023, FFY2024

Federal Agency: Department of Health and Human Services

Category of Finding: Special Tests and Provisions

COVID-19 Funding: Cluster includes some COVID-19 funding to an existing program

Criteria:

Title 45 of the Code of Federal Regulations (CFR), Section 95.605 defines automated data processing (ADP) as "data processing performed by a system of electronic or electrical machines so interconnected and interacting as to minimize the need for human assistance or intervention."

45 CFR 95.621(f) states:

(1) ADP System Security Requirement. State agencies are responsible for the security of all ADP projects under development, and operational systems involved in the administration of HHS programs. State agencies shall determine the appropriate ADP security requirements based on recognized industry standards or standards governing security of Federal ADP systems and information processing."

. . . .

(3) ADP System Security Reviews. State agencies shall review the ADP system security of installations involved in the administration of HHS programs on a biennial basis. At a minimum, the reviews shall include an evaluation of physical and data security operating procedures, and personnel practices.

Condition:

The Department of Social Services (DSS) did not perform the required biennial ADP risk analysis and system security review in FY24. The last such review was completed in FY22.

Cause:

Controls were not adequate to ensure that the required ADP risk analysis and system security review was performed biennially.

DEPARTMENT OF SOCIAL SERVICES (Continued)

Effect:

As a result of this control deficiency, the DSS was not in compliance with HHS requirements for performing ADP risk analysis and system security reviews. Without the required reviews the DSS was exposed to increased risk related to ADP system security and potential sanctions from the federal awarding agency.

Questioned Costs:

None reported.

Repeat Finding from Prior Year:

No.

Recommendation:

We recommend that internal controls be strengthened over the initiation and completion of a biennial ADP system security review.

Views of Responsible Officials:

The Department of Social Services concurs with the finding.

DEPARTMENT OF PUBLIC SAFETY

CURRENT AUDIT FINDING AND RECOMMENDATION

Federal Compliance Audit Finding:

<u>Finding No. 2024-007</u>: Inadequate Internal Controls over Monitoring of Subrecipient Audits

Type of Finding: Significant Deficiency and Non-Compliance

Assistance Listing Title: Disaster Grants - Public Assistance (Presidentially Declared Disasters)

Assistance Listing Number: 97.036

Federal Award Number: 4155DRSDP00000001,4440DRSDP00000001,4463DRSDP00000001,4467DRSDP00000001,4469DRSDP00000001,4527DRSDP00000001,4656DRSDP00000001,4664DRSDP00000001,

4689DRSDP00000001, and 4718DRSDP00000001

Federal Award Year: 2019, 2020, 2021, 2022, 2023, and 2024

Federal Agency: Department of Homeland Security Category of Finding: Subrecipient Monitoring

Criteria:

2 CFR section 200.332 requires, among other things, that a pass-through entity verify that subrecipients receive Single Audits as required by 2 CFR 200.501(a), follow-up to ensure that the subrecipient takes timely and appropriate action on audit findings, and issue a management decision on applicable audit findings pertaining to the subaward. 2 CFR 200.521(d) requires this management decision to be issued within six months of acceptance of the audit report by the Federal Audit Clearinghouse (FAC).

Condition:

The Department of Public Safety (DPS) receives funding under *ALN 97.036*, *Disaster Grants - Public Assistance (Presidentially Declared Disasters)* (Public Assistance) and makes subawards to local governments and private nonprofit entities to respond to and recover from presidentially declared disasters. During FY24, DPS did not have adequate controls in place to ensure that Single Audits were obtained for all applicable subrecipients within the required time frame, that those audits were reviewed to ensure timely and appropriate action was taken on any findings, and that a management decision was issued by DPS within the six-month time frame required by federal regulations.

Based on our review of funding amounts passed through by DPS, there were seven subrecipients receiving Federal grant payments that would require a Single Audit for the auditee's fiscal year 2023. These subrecipients had received the required audits and their audit reports were accepted by the FAC, however, two of the audits were not reviewed timely by DPS. Of those two subrecipient audits, one had an audit finding pertaining to the Public Assistance program and DPS had not issued a management decision within the time frame required by 2 CFR 200.521.

Cause:

Controls were not adequate to identify when subrecipient audits were due and obtain all required audits off the FAC in a timely manner. While DPS personnel did track expenditures to

DEPARTMENT OF PUBLIC SAFETY (Continued)

determine which subrecipients were required to have audits under 2 CFR 200.501(a), failure to monitor subrecipient year-ends and the related audit deadlines resulted in some audits not being obtained and reviewed in a timely manner.

Effect:

This resulted in noncompliance with subrecipient monitoring requirements and increased the risk of subrecipient audit findings not being corrected in a timely manner.

Questioned Costs:

None.

Repeat Finding from Prior Year:

No.

Recommendation:

We recommend the Department implement controls to ensure that audits of subrecipients are obtained and followed up on in a timely manner and that management decisions are issued within the required time frame for all audit findings pertaining to DPS subawards.

Views of Responsible Officials:

The Department of Public Safety concurs with the audit finding.

DEPARTMENT OF TRANSPORTATION

CURRENT AUDIT FINDING AND RECOMMENDATION

Federal Compliance Audit Finding:

<u>Finding No. 2024-008</u>: Unallowable cost reimbursement under the Highway Planning and Construction Program

Type of Finding: Noncompliance

Assistance Listing Title: Highway Planning and Construction Program

Assistance Listing Number: 20.205

Federal Award Number: 693JJ22230000Y236SD2042029

Federal Award Year: 2022

Federal Agency: Department of Transportation Category of Finding: Activities Allowed or Unallowed

Criteria:

Title 23 of the Code of Federal Regulations Part 1.9(a) states:

Federal-aid funds shall not participate in any cost which is not incurred in conformity with applicable Federal and State law, the regulations in this title, and policies and procedures prescribed by the Administrator. Federal funds shall not be paid on account of any cost incurred prior to authorization by the Administrator to the State highway department to proceed with the project or part thereof involving such cost.

Condition:

Construction costs on projects performed under the Highway Planning and Construction program are tracked using a Construction Pay Estimate (CPE). Costs included in a project but not related to the federal portion of the project are coded on the CPE as "nonparticipating". Projects may be broken into different segments and tracked under different project numbers but still have costs accumulated together on one CPE. In such instances, a manual process is necessary to break out nonparticipating costs when costs are posted to the Construction Billing system for reimbursement.

A federal reimbursement of Project Number NH 2042(29) PCN 06YQ included CPE 28 totaling \$955,373.74 in costs for the period. Of these costs, \$21,625.00 were related to "Concrete Sidewalk" and were coded as "nonparticipating". When posting the expenditures to the Construction Billing system, the accountant erroneously used the total CPE expenditures instead of the "participating" federal portion of \$933,748.74 resulting in \$21,625 in "nonparticipating" costs being charged to the program.

Projects are paid according to the approved bid and federal reimbursements may only be drawn up to the federal award amount. After a project is completed, a review is performed to reconcile costs incurred to the awarded amount, as modified by Construction Change Orders, and federal reimbursements. During this process, the error identified during the audit would have likely been caught and corrected.

DEPARTMENT OF TRANSPORTATION (Continued)

<u>Cause</u>:

System limitations and human error led to this finding.

Effect:

As a result, there was improper reimbursement of federal funds for nonparticipating costs and an increased risk that the improper reimbursement would not be properly identified and corrected during subsequent project closeout.

Questioned Costs:

\$17,721.69.

Further Information:

The questioned costs above were calculated by multiplying the nonparticipating portion of project costs by the project's federal participation rate of 81.95%.

An error rate of .013% was calculated by dividing the \$17,721.69 found to be in error by the \$140,595,557.09 total dollar amount of reimbursements tested. This error rate was then applied to untested reimbursements of \$393,336,560 resulting in total projected errors of \$49,579.00.

Recommendation:

We recommend nonparticipating costs drawn be credited back to the federal project and future nonparticipating costs not be claimed for reimbursement.

Views of Responsible Officials:

The Department of Transportation concurs with the audit finding.

SOYBEAN RESEARCH AND PROMOTION COUNCIL

The following was issued under a separate audit of the South Dakota Soybean Research and Promotion Council by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

<u>Finding No. 2024-009</u>: Preparation of Financial Statements with Material Audit Adjustments

Type of Finding: Material Weakness

Criteria:

Proper controls over financial reporting include the ability to prepare financial statements and accompanying notes to the financial statements that are materially correct.

Condition:

We were requested as auditors to draft the financial statements and accompanying notes to the financial statements. As auditors, we proposed various closing entries including adjusting the investment in state treasury cash management pool and the equity interest in joint venture. These proposed adjustments may not have been identified as a result of the Council's existing internal controls.

Cause:

The Council does not have an internal control system designed to provide for the preparation of the financial statements being audited.

Effect:

This deficiency results in a reasonable possibility that the Council would not be able to draft the financial statements and accompanying notes to the financial statements that are correct without the assistance of the auditors. As auditors, we proposed adjustments in an amount that may not have been identified as a result of the Council's existing internal controls.

Recommendation:

While we recognize that this condition is not unusual for an organization of your size, it is important that you be aware of this condition for financial reporting purposes. Management and the Board should continually be aware of the financial accounting and reporting requirements of the Council, as well as changes in these requirements.

Views of Responsible Officials:

We have designated a member of management to review the propriety of the draft financial statements and accompanying notes to the financial statements.

SOYBEAN RESEARCH AND PROMOTION COUNCIL (Continued)

The following was issued under a separate audit of the South Dakota Soybean Research and Promotion Council by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-010: Segregation of Duties

Type of Finding: Material Weakness

Criteria:

An effective system of internal controls depends on an adequate segregation of duties with respect to the execution and recording of transactions, as well as the custody of an entity's assets. Accordingly, an effective system of internal control will be designed such that these functions are performed by different employees, so that no one individual handles a transaction from its inception to its completion.

Condition:

The Council had turnover of an office personnel, which prevented an ideal segregation of duties for controls over financial reporting. The oversight and review process by management for various account reconciliations is not formally documented.

Cause:

Management oversight is done on an informal basis.

<u>Effect:</u>

The lack of segregation of duties increases the risk of fraud related to misappropriation of assets, financial statement misstatement, or both.

Recommendation:

Management and the Board should continually be aware of the financial accounting and reporting requirements of the Council. Under this situation, the most effective control is the board's oversight and knowledge of matters relating to the operations of the Council.

Views of Responsible Officials:

The Board of Directors performed various oversight roles throughout the year but is aware of the risk relating to the limited staff performing the daily activities and is in the process of reviewing internal controls.

CORN UTILIZATION COUNCIL

The following was issued under a separate audit of the South Dakota Corn Utilization Council by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-011: Preparation of Financial Statements

Type of Finding: Material Weakness

Criteria:

Proper controls over financial reporting include the ability to prepare financial statements and accompanying notes to the financial statements that are materially correct.

Condition:

The Council does not have an internal control system designed to provide for the preparation of the financial statements being audited. We were requested to draft the financial statements and accompanying notes to the financial statements.

Cause:

The Council does not have an internal control system designed to provide for the preparation of the financial statements being audited.

Effect:

This deficiency results in a reasonable possibility that the Council would not be able to draft the financial statements and accompanying notes to the financial statements that are correct without the assistance of the auditors.

Recommendation:

While we recognize that this condition is not unusual for an organization of your size, it is important that you be aware of this condition for financial reporting purposes. Management and the Board should continually be aware of the financial accounting and reporting requirements of the Council as well as changes in these requirements.

Views of Responsible Officials:

Management and the Board of Directors will review for propriety the draft financial statements and accompanying notes to the financial statements.

CORN UTILIZATION COUNCIL (Continued)

The following was issued under a separate audit of the South Dakota Corn Utilization Council by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-012: Segregation of Duties

Type of Finding: Material Weakness

Criteria:

An effective system of internal controls depends on an adequate segregation of duties with respect to the execution and recording of transactions, as well as the custody of an entity's assets. Accordingly, an effective system of internal control will be designed such that these functions are performed by different employees, so that no one individual handles a transaction from its inception to its completion.

Condition:

The Council has a limited number of office personnel, which prevents an ideal segregation of duties for controls over financial reporting. The oversight and review process by management for various account reconciliations is not formally documented.

Cause:

Management oversight is done on an informal basis.

<u>Effect:</u>

The lack of segregation of duties increases the risk of fraud related to misappropriation of assets, financial statement misstatement, or both.

Recommendation:

Management and the Board should continually be aware of the financial accounting and reporting requirements of the Council. Under this situation, the most effective control is the board's oversight and knowledge of matters relating to the operations of the Council.

Views of Responsible Officials:

The Board of Directors performed various oversight roles throughout the year but is aware of the risk relating to the limited staff performing the daily activities and is in the process of reviewing internal controls.

WHEAT UTILIZATION, RESEARCH AND MARKET DEVELOPMENT COMMISSION

The following was issued under a separate audit of the South Dakota Wheat Utilization, Research and Market Development Commission by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-013: Grant Expense Over Approved Budgeted Amount

Type of Finding: Significant Deficiency

Criteria:

Internal controls over disbursement are to be designed to provide reasonable assurance regarding prevention or timely detection of duplicate transactions.

Condition:

The Commission made a fiscal year 2024 disbursement to SDSU for purchase of pathology microscopes that was a duplicate payment of a fiscal year 2023 disbursement.

Cause:

The Board of Commissioners had approved support to SDSU for the purchase of pathology microscopes. The Commission had provided the support to SDSU in the prior year. The Commission received an additional invoice in the current year from SDSU; and, as the Commission saw the approval within the minutes, they made a duplicate disbursement to SDSU.

Effect:

Duplicate transactions occurred resulting in disbursements that were not approved by the Board of Commissioners.

Recommendation:

Management should implement controls in place to ensure all disbursements are properly approved and are not duplicate transactions.

Views of Responsible Officials:

Management and the Board will ensure expenditures are properly approved and will set controls in place designed to detect or prevent duplicate transactions.

WHEAT UTILIZATION, RESEARCH AND MARKET DEVELOPMENT COMMISSION (Continued)

The following was issued under a separate audit of the South Dakota Wheat Utilization, Research and Market Development Commission by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-014: Preparation of Full Disclosure Financial Statements

Type of Finding: Significant Deficiency

Criteria:

Proper controls over financial reporting include the ability to prepare the financial statements with accompanying notes to the financial statements that are materially correct and include all required disclosures.

Condition:

The Commission does not have an internal control system designed to provide for the preparation of the financial statements being audited. As auditors, we were requested to draft the financial statements and accompanying notes to the financial statements.

<u>Cause</u>:

The Commission has limited staff. They cannot justify having an individual on staff preparing the draft financial statements and accompanying notes to the financial statements.

Effect:

Inadequate controls over financial reporting of the Commission could result in the likelihood that the Commission would not be able to draft the financial statements with accompanying notes to the financial statements without the assistance of the auditors.

Recommendation:

While we recognize that this condition is not unusual for an organization of your size, it is important that you be aware of this condition for financial reporting purposes. Management and the Board should continually be aware of the financial accounting and reporting requirements of the Commission as well as changes in these requirements.

Views of Responsible Officials:

Since it is not cost-effective for an organization of our size to have an individual on staff to prepare audit-ready financial statements, we have chosen to hire Eide Bailly, a public accounting firm, to prepare our financial statements as part of the annual audit. Management and the board of directors will review for propriety the draft financial statements and accompanying notes to the financial statements.

WHEAT UTILIZATION, RESEARCH AND MARKET DEVELOPMENT COMMISSION (Continued)

The following was issued under a separate audit of the South Dakota Wheat Utilization, Research and Market Development Commission by Eide Bailly, LLP.

CURRENT AUDIT FINDINGS AND RECOMMENDATIONS

Financial Statement Audit Finding:

Finding No. 2024-015: Lack of Proper Segregation of Duties

Type of Finding: Significant Deficiency

Criteria:

In order to achieve a high level of internal control, the functions of executing transactions, recording transactions and maintaining accountability for assets should be performed by different employees or be maintained under dual control.

Condition:

The Commission did not have an internal control system to allow for the proper segregation of duties in certain areas of the accounting function. The oversight and review process by management, such as the monthly bank reconciliation and monthly financial reports, is not formally documented.

Cause:

The Commission has limited staff and cannot justify hiring an additional individual in order to better segregate accounting duties. Management oversight is done on an informal basis.

Effect:

Proper segregation of duties helps to minimize the chance of undetected errors or defalcations, since the work of one person is reviewed by the work of another.

Recommendation:

Due to the small size of the office, the Commission is limited in the options available to them. Under this situation, the most effective control is management and the board's oversight and knowledge of matters relating to the operations of the Commission.

Views of Responsible Officials:

We have evaluated the segregation of duties over the receipts function and over the disbursement function. Management and the board of directors will exercise oversight of the accounting functions, which we believe mitigates the risk of material misstatement to an acceptable level.



AUDITEE PREPARED CORRECTIVE ACTION PLANS



AUDITEE PREPARED CORRECTIVE ACTION PLANS

STATE OF SOUTH DAKOTA AUDITEE PREPARED CORRECTIVE ACTION PLANS For the Fiscal Year Ended June 30, 2024

SOUTH DAKOTA INVESTMENT COUNCIL

Finding No. 2024-001: Ineffective Internal Controls over Financial Reporting

Corrective Action Plan: Immediately upon notification of the identified misstatement, financial statements were corrected from the prior year number to the calculated amount provided separately to Bureau of Finance & Management (BFM). Two controls have been implemented when preparing the financial statements: 1) to confirm the "Earning Distribution-declared" agrees with the separate calculation of the amount within the same spreadsheet and 2) to compare prior year financials with current year financials to confirm the amount is not the same as the prior year.

Contact Person: Samantha Rains, Chief Financial Officer

Anticipated Completion Date: The controls have been added and will be utilized when the financial statements are prepared.

DEPARTMENT OF REVENUE

Finding No. 2024-002: Incorrect Interpretation of SDCL 32-9-15

Corrective Action Plan: The Department of Revenue (DOR) will correct the programming in the SDCars system to comply with SDCL 32-9-15 and calculate these fees based on the correct interpretation of the law.

Contact Person: Rosa Yaeger, Director of Motor Vehicles

Anticipated Completion Date: This corrective action plan was completed December 2, 2024.

Finding No. 2024-003: Inadequate Internal Controls over SDCars system

Corrective Action Plan: DOR will continue to utilize the detective internal controls that were implemented when the control deficiencies were discovered. DOR will be implementing a new motor vehicle administration system (605Drive) in February 2025. The new system contains preventative controls such as:

- Fee overrides will require approval
- Security roles
- Secure external access
- · Automated reports for specific transactions
- Detailed audit trails
- Automatic alerts on certain customer accounts
- Automatic stops to prevent employee access to personal accounts

Further, DOR will hire an Internal Control Officer who will be tasked with a thorough review of 605Drive and current motor vehicle processes to determine if additional detective controls are needed.

STATE OF SOUTH DAKOTA AUDITEE PREPARED CORRECTIVE ACTION PLANS For the Fiscal Year Ended June 30, 2024

DEAPRTMENT OF REVENUE

(Continued)

Contact Person: Rosa Yaeger, Director of Motor Vehicles

Anticipated Completion Date: 605Drive goes live on February 17, 2025; however, internal review of controls and processes will be ongoing.

STATEWIDE FINANCIAL REPORTING PROCESS

Finding No. 2024-004: Ineffective Internal Controls over Financial Reporting

Corrective Action Plan: The State has a robust internal control framework that supports the operational, reporting, and compliance objectives of the State, including the commitment to timely and accurate financial reporting. This framework is designed to provide reasonable assurance those objectives are met. Internal controls are continuously evaluated and improved to ensure the State is effectively and efficiently meeting these objectives. Most of the audit adjustments that led to the audit finding are manual processes which are inherently susceptible to human error. The State is currently implementing Project BISON, a new statewide accounting system that will help automate many of the manual processes and strengthen the accounting and financial reporting internal controls. Project BISON's is expected to go live on July 1, 2026.

Contact Person: Keith Senger, Director of Financial Reporting, Bureau of Finance and Management

Anticipated Completion Date: Ongoing

DEPARTMENT OF SOCIAL SERVICES

Finding No. 2024-005: Inadequate Controls over the Payment of Claims

Corrective Action Plan: The Department of Social Services is committed to improving internal controls within the division of Child Protection Services (CPS). Over the past year, the division has made enhancements to the FACIS system that achieve segregation in duties during the prior authorization and claims entry processes. These enhancements include the creation of an audit trail for authorizations and claims in FACIS. The FACIS system will also be updated to restrict claim submissions so as to disallow exceeding the amount authorized by policy. This measure is meant to prevent the disbursement of payments that exceed amounts authorized by policy and/or the supervisor. Design of additional enhancements surrounding CPS's use of the CP-522 forms and inclusion of necessary supporting documentation will also be implemented in this current fiscal year. This enhancement will have the effect of requiring all payments issued from FACIS to include the same level of documentation as is required for the state's accounting system. Included with the soon-tobe added documentation requirement will also be a process requirement that applies to billing requirements from vendors that invoice the division regularly. This change applies to regular services providers that send itemized receipts that will accompany the CP-522 forms.

STATE OF SOUTH DAKOTA AUDITEE PREPARED CORRECTIVE ACTION PLANS

For the Fiscal Year Ended June 30, 2024

DEPARTMENT OF SOCIAL SERVICES

(Continued)

Contact Person: Jason Simmons, Chief Financial Officer

Anticipated Completion Date: In the fiscal year 2025, discussions and policy updates with CPS and Finance continued. The anticipated completion date for the corrective action plan is set for June 30, 2025.

Finding No. 2024-006: Inadequate Internal Controls over Special Tests and Provisions

Corrective Action Plan: The Department of Social Services remains committed to a process of regularly updating internal controls across its divisions. The federal oversight requirement of having to pass system security audits has been documented in the department's risk and control matrix. These risks will be evaluated annually, and control owners will attest to their review of both periodic, such as in this instance, and ongoing control activities twice per year. Department leadership will use the attestations to monitor compliance and verify the completion of such activities.

Contact Person: Jason Simmons, Chief Financial Officer

Anticipated Completion Date: The required biennial ADP risk analysis and system security review is in progress and will be completed by June 30, 2025.

DEPARTMENT OF PUBLIC SAFETY

Finding No. 2024-007: Inadequate Internal Controls over Monitoring of Subrecipient

Corrective Action Plan: The following are the actions that have been taken to come into compliance with monitoring subrecipient audits:

- Office of Emergency Management's, Recovery Branch Chief has reviewed the outstanding audit finding and issued the management letter resolving the issue on March 12, 2025.
- The Assistant Finance Officer reviewed FAC.gov for outstanding subrecipient audits in February of 2025. At this time, we discovered the two audits in question were not received through the Department of Legislative Audit (DLA). We have updated our process to review the subrecipient audit report tracking spreadsheet at least semi-annually, which will also include a review of FAC.gov to locate audit reports not submitted to DLA so that we can manage the timeliness of our review process and issue management letters, if required, within the 180-day period.
- The Director of Administrative Services approved the updated process on March 14, 2025.

Contact Person: Angie Lemieux, Director of Administrative Services

Anticipated Completion Date: Issued management letter resolving the issue on March 12, 2025.

STATE OF SOUTH DAKOTA AUDITEE PREPARED CORRECTIVE ACTION PLANS For the Fiscal Year Ended June 30, 2024

DEPARTMENT OF TRANSPORTATION

<u>Finding No. 2024-008</u>: Unallowable Cost Reimbursement under the Highway Planning and Construction Program

Corrective Action Plan: Internal Controls will be strengthened to ensure accurate review of vouchers and construction pay estimates. Accountant II corrected the expense and the draw in August 2024. It is important to note that this would have been identified at the close of the project as the Department has a process in place to verify all amounts out of CM&P against the states accounting system. It is at that time the correction would have occurred.

Contact Person: Patricia Devitt, Accounting Manager II

Anticipated Completion Date: Fiscal year 2025

SOUTH DAKOTA SOYBEAN RESEARCH AND PROMOTIONAL COUNCIL

The following was issued under a separate audit of the South Dakota Soybean Research and Promotional Council by Eide Bailly, LLP.

<u>Finding No. 2024-009</u>: Preparation of Financial Statements with Material Audit Adjustment

Corrective Action Plan: We have designated a member of management to review the propriety of the draft financial statements and accompanying notes to the financial statements.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.

Finding No. 2024-010: Segregation of Duties

Corrective Action Plan: The Board of Directors performed various oversight roles throughout the year but is aware of the risk relating to the limited staff performing the daily activities and is in the process of reviewing internal controls.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.

STATE OF SOUTH DAKOTA AUDITEE PREPARED CORRECTIVE ACTION PLANS

For the Fiscal Year Ended June 30, 2024

SOUTH DAKOTA CORN UTILIZATION COUNCIL

The following was issued under a separate audit of the South Dakota Corn Utilization Council by Eide Bailly, LLP.

Finding No. 2024-011: Preparation of Financial Statements

Corrective Action Plan: Management and the board of directors will review for propriety the draft financial statements and accompanying notes to the financial statements.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.

Finding No. 2024-012: Segregation of Duties

Corrective Action Plan: The Board of Directors performed various oversight roles throughout the year but is aware of the risk relating to the limited staff performing the daily activities and is in the process of reviewing internal controls.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.

SOUTH DAKOTA WHEAT UTILIZATION, RESEARCH AND MARKET DEVELOPMENT COMMISSION

The following was issued under a separate audit of the South Dakota Wheat Utilization, Research and Market Development Commission by Eide Bailly, LLP.

Finding No. 2024-013: Grant Expense Over Approved Budgeted Amount

Corrective Action Plan: Management and the Board will ensure expenditures are properly approved and will set controls in place designed to detect or prevent duplicate transactions.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.

STATE OF SOUTH DAKOTA AUDITEE PREPARED CORRECTIVE ACTION PLANS For the Fiscal Year Ended June 30, 2024

SOUTH DAKOTA WHEAT UTILIZATION, RESEARCH AND MARKET DEVELOPMENT COMMISSION

(Continued)

Finding No. 2024-014: Preparation of Full Disclosure Financial Statements

Corrective Action Plan: Since it is not cost-effective for an organization of our size to have an individual on staff to prepare audit-ready financial statements, we have chosen to hire Eide Bailly, a public accounting firm, to prepare our financial statements as part of the annual audit. Management and the board of directors will review for propriety the draft financial statements and accompanying notes to the financial statements.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.

Finding No. 2024-015: Lack of Proper Segregation of Duties

Corrective Action Plan: We have evaluated the segregation of duties over the receipts function and over the disbursement function. Management and the board of directors will exercise oversight of the accounting functions, which we believe mitigates the risk of material misstatement to an acceptable level.

Contact Person: No contact person was listed in the separately issued audit report.

Anticipated Completion Date: No anticipated completion date was listed in the separately issued audit report.



AUDITEE PREPARED SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS



AUDITEE PREPARED SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

STATE OF SOUTH DAKOTA SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS For the Fiscal Year Ended June 30, 2024

DEPARTMENT OF AGRICULTURE AND NATURAL RESOURCES

Finding No. 2023-001: Inadequate Internal Controls over Financial Reporting

Initial Year of Finding: Fiscal Year 2023

Status: Fully Corrected - Corrective Action was Taken

STATEWIDE FIANCIAL REPORTING PROCESS

Finding No. 2023-002: Ineffective Internal Control over Financial Reporting

Initial Year of Finding: Fiscal Year 2023

Status: Repeat audit finding issued in Fiscal Year 2024 Single Audit – see Finding No. 2024-004

Reason for Recurrence: Agencies had ACFR errors and BFM did not catch or correct all those errors leading to audit adjustments. Additionally, BFM had errors ourselves. The combination of all these lead to DLA issuing audit adjustments that exceeded their materiality thresholds.

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-004

DEPARTMENT OF PUBLIC SAFETY

<u>Finding No. 2023-003:</u> Inadequate Internal Controls over Federal Funding Accountability and Transparency Act (FFATA) Reporting

Initial Year of Finding: Fiscal Year 2023

Status: Fully Corrected – Corrective Action was Taken

DEPARTMENT OF SOCIAL SERVICES

Finding No. 2023-004: Inadequate Controls over the Payment of Claims

Initial Year of Finding: Fiscal Year 2023

Status: Repeat audit finding in Fiscal Year 2024 Single Audit – see Finding No. 2024-005

Reason for Recurrence: The issuance of the audit finding was near the end of the state's fiscal year; therefore, system changes were not able to be corrected and tested before the next fiscal year began.

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-005

STATE OF SOUTH DAKOTA SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

For the Fiscal Year Ended June 30, 2024

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION UNEMPLOYMENT INSURANCE FUND

The following was issued under a separate audit of the South Dakota Department of Labor and Regulation Unemployment Insurance Fund by Eide Bailly, LLP.

Finding No. 2023-005: Internal Control over Compliance

Initial Year of Finding: Fiscal Year 2023

Status: Fully Corrected – Corrective Action was Taken

Finding No. 2023-006: Internal Control over Compliance – Special Tests and Provisions

Initial Year of Finding: Fiscal Year 2023

Status: Fully Corrected – Corrective Action was Taken

SOUTH DAKOTA SOYBEAN RESEARCH AND PROMOTION COUNCIL

The following was issued under a separate audit of the South Dakota Soybean Research and Promotion Council by Eide Bailly, LLP.

Finding No. 2023-007: Preparation of Financial Statements

Initial Year of Finding: Fiscal Year 2010

Status: Repeat audit finding issued in Fiscal Year 2024 Single Audit – see Finding No. 2024-009

Reason for Recurrence: No reason given

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-009

SOUTH DAKOTA CORN UTILIZATION COUNCIL

The following was issued under a separate audit of the South Dakota Corn Utilization Council by Eide Bailly, LLP.

Finding No. 2023-008: Preparation of Financial Statements

Initial Year of Finding: Fiscal Year 2010

Status: Repeat audit finding issued in Fiscal Year 2024 Single Audit – see Finding No. 2024-011

Reason for Recurrence: No reason given

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-011

STATE OF SOUTH DAKOTA SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

For the Fiscal Year Ended June 30, 2024

SOUTH DAKOTA CORN UTILIZATION COUNCIL

(Continued)

Finding No. 2023-009: Segregation of Duties

Initial Year of Finding: Fiscal Year 2021

Status: Repeat audit finding issued in Fiscal Year 2024 Single Audit – see Finding No. 2024-012

Reason for Recurrence: No reason given

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-012

SOUTH DAKOTA WHEAT UTILIZATION, RESEARCH AND MARKET DEVELOPMENT COMMISSION

The following was issued under a separate audit of the South Dakota Wheat Utilization, Research and Market Development Commission by Eide Bailly, LLP.

Finding No. 2023-010: Preparation of Full Disclosure Financial Statements

Initial Year of Finding: Fiscal Year 2021

Status: Repeat audit finding issued in Fiscal Year 2024 Single Audit – see Finding No. 2024-014

Reason for Recurrence: No reason given

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-014

Finding No. 2023-011: Lack of Proper Segregation of Duties

Initial Year of Finding: Fiscal Year 2021

Status: Repeat audit finding issued in Fiscal Year 2024 Single Audit – see Finding No. 2024-015

Reason for Recurrence: No reason given

Corrective Action Planned: See Corrective Action Plan for Finding No. 2024-015



