The Texas A&M University System Internal Audit Department



Monthly Audit Report January 12, 2022

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System Internal Audit
THE TEXAS A&M UNIVERSITY SYSTEM

TEXAS A&M UNIVERSITY

QATAR - EXPENDITURES

January 12, 2022

Charlie Hrncir, CPA Chief Auditor

Project #20220208



Overall Conclusion

Internal controls over expenditures at Texas A&M University at Qatar are operating as intended and in compliance with applicable laws and policies. Texas A&M University at Qatar had \$67.5 million of expenditures during fiscal year 2021.

Summary Table

| Audit Areas | Controls Assessment | |
|--|-----------------------------|--|
| Management Fee Revenue | Effective – No Observations | |
| Payroll and Payroll Allowance Transactions | Effective – No Observations | |
| Procurement Card Transactions | Effective – No Observations | |
| Purchase Voucher Transactions | Effective – No Observations | |
| Travel Card/Voucher Transactions | Effective – No Observations | |

Basis of Audit

Objective, Scope, & Methodology

The overall objective of this audit was to assess internal controls over expenditures at Texas A&M University at Qatar to determine if expenditure processes are operating as intended and in compliance with applicable laws and policies.

The audit focused on the following areas:

- Management fee revenue \$8,153,333
- Payroll and payroll allowance transactions \$35,796,799
- Procurement card transactions \$1,214,656
- Purchase voucher transactions \$30,171,148
- Travel card/voucher transactions \$282,013

The audit period was primarily September 1, 2020 to August 31, 2021. Management fee revenue, payroll expenditures, and payroll allowance expenditures were tested for Texas A&M University at Qatar's most recently completed fiscal year which was January 1, 2020 to December 31, 2020. Fieldwork was conducted from October to December 2021.

Our audit methodology included interviews, observation of processes, review of documentation, and testing of data using sampling as follows:

| Audit Objective | Methodology | | |
|--|---|--|--|
| Management Fee Revenue | Auditors compared all management fee | | |
| | payments received for calendar year | | |
| Determine whether management fee | 2020 to the calculated management fee | | |
| payments received are in compliance | amount in accordance with the | | |
| with the university's academic agreement | university's academic agreement with the | | |
| with the Qatar Foundation. | Qatar Foundation. | | |
| | | | |
| Payroll and Payroll Allowance | Auditors performed data analysis on the | | |
| <u>Transactions</u> | entire population of payroll transactions | | |
| | for calendar year 2020 to identify the | | |
| Determine whether payroll and payroll | following subsets of data for further | | |
| allowance transactions are reasonable | review: | | |
| and in compliance with procedures. | | | |
| | Payroll allowances by account | | |
| | Payroll allowances by expense code | | |

| Audit Objective | Methodology |
|---|---|
| | Top employee payroll amounts Supplemental compensation amounts |
| | Auditors judgmentally selected payroll and payroll allowance transactions from each subset and reviewed supporting documentation and/or obtained further explanation from the client as needed to ensure the appropriateness of the transactions and activities. |
| | Auditors judgmentally selected 15 employees with the largest payroll allowances received for each of the five largest payroll allowances paid and reviewed for compliance with applicable payroll allowance requirements. |
| Procurement Card Transactions | Auditors performed data analysis on the |
| Determine whether procurement card transactions are reasonable and in compliance with procedures. | entire population of procurement card transactions during the audit period to identify the following subsets of data for further review: |
| | Procurement card transactions by account Procurement card transactions by expense code Purchases exceeding card transaction limits Procurement cards with largest amounts of purchases Potential duplicate transactions Potential split transactions |
| | Auditors judgmentally selected procurement card transactions from each subset and reviewed supporting documentation and/or obtained further explanation from the client as needed to |

| Audit Objective | Methodology |
|------------------------------------|---|
| Addit Objective | ensure the appropriateness of the |
| | transactions and activities. |
| | transactions and activities. |
| | Auditors randomly selected 30 |
| | procurement card transactions and |
| | reviewed for compliance with selected |
| | procurement card requirements. |
| | |
| | Auditors reviewed unassigned and |
| | outstanding procurement card |
| | transactions that were more than 45 days |
| | past the transaction posted date for |
| | reasonableness. |
| | |
| Purchase Voucher Transactions | Auditors performed data analysis on the |
| | entire population of purchase voucher |
| Determine whether purchase voucher | transactions during the audit period to |
| transactions are reasonable and in | identify the following subsets of data for |
| compliance with procedures. | further review: |
| | Purchase vouchers with largest |
| | amounts of purchases |
| | Purchase vendors with largest |
| | amounts of purchases |
| | Potential duplicate transactions |
| | Potential split transactions |
| | |
| | Auditors judgmentally selected purchase |
| | voucher transactions from each subset |
| | and reviewed supporting documentation |
| | and/or obtained further explanation |
| | from the client as needed to ensure the |
| | appropriateness of the transactions and |
| | activities. |
| | Auditors randomly selected 50 numbers |
| | Auditors randomly selected 50 purchase |
| | voucher transactions and judgmentally |
| | selected an additional 10 purchase voucher transactions related to food |
| | |
| | purchases and reviewed for compliance |
| | with selected purchasing requirements. |

Controls Assessment Classification

Audit areas highlighted in red in the Summary Table are considered to have significant weaknesses in internal controls. Significant weaknesses include errors, deficiencies, or conditions which result in one or more violations of internal controls, laws, A&M System policies, or member rules. These violations have a

high probability for legal consequences, financial consequences, or negative impacts to the organization's reputation. These are situations in which a CEO, provost, vice president, dean, or director need to be involved in the problem resolution.

Audit areas highlighted in yellow in the Summary Table are considered to have notable weaknesses in internal controls. Notable weaknesses include errors, deficiencies or conditions which result in minor to moderate noncompliance with internal controls, laws, A&M System policies, or member rules. These are situations which can and should be corrected at the department or supervisor level.

Audit areas highlighted in green in the Summary Table are considered to have effective internal controls.

Items that were not significant or notable were communicated to management during the course of the audit.

<u>Criteria</u>

Our audit was based upon standards as set forth in the following:

- Texas A&M University System Policies and Regulations
- Texas A&M University Rules and Procedures
- Agreement to Continue to Operate the Undergraduate and Graduate Programs at Texas A&M University at Qatar
- Other sound administrative practices

The audit was conducted in conformance with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*. Additionally, we conducted the audit in accordance with generally accepted government auditing standards (GAGAS). Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our findings and conclusions based on performation of the standards is for findings and conclusions based on the standards for internal Audit is independent per the GAGAS standards for internal auditors.

Audit Team

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System Internal Audit THE TEXAS A&M UNIVERSITY SYSTEM

TEXAS A&M UNIVERSITY-CORPUS CHRISTI

LEARNING MANAGEMENT SYSTEM

January 12, 2022

Charlie Hrncir, CPA Chief Auditor

Project #20221501



Overall Conclusion

Internal controls over the learning management system at Texas A&M University-Corpus Christi are operating as intended and in compliance with applicable laws and policies.

Texas A&M University-Corpus Christi had an undergraduate enrollment of 8,483 as of fall semester 2020. The university contracts with Blackboard to provide its learning management system to students, faculty, and staff using cloud hosting services.

Summary Table

| Audit Areas | Controls Assessment |
|--------------------------|-----------------------------|
| Change Management | Effective – No Observations |
| High Risk Role Access | Effective – No Observations |
| New User Access | Effective – No Observations |
| Password Settings | Effective – No Observations |
| Privileged User Accounts | Effective – No Observations |
| Terminated User Access | Effective – No Observations |
| User Access Review | Effective – No Observations |
| Vendor Agreement | Effective – No Observations |

Basis of Audit

Objective, Scope, & Methodology

The overall objective of this audit was to determine if internal controls were in place to ensure the confidentiality, integrity, and availability of the learning management system at Texas A&M University-Corpus Christi.

The audit focused on the following areas:

- Change management
- High risk role access
- New user access
- Password settings
- Privileged user accounts
- Terminated user access
- User access review
- Vendor agreement

The audit period was primarily September 1, 2020 to August 31, 2021. Fieldwork was conducted from October 2021 to December 2021.

Our audit methodology included interviews, observation of processes, review of documentation, and testing of data using sampling as follows:

| Audit Objective | Methodology |
|---|---|
| Change Management | Auditors selected a sample of recent |
| Determine if change management processes and controls are appropriate. | changes to the application and related system to determine whether the process operated as intended and appropriate segregation of duties was used. |
| High Risk Role Access | Auditors determined the roles within the application considered to be |
| Determine if controls for high risk role access are in place and appropriate to secure the application. | higher risk. Auditors determined that access to those roles was appropriate based on position responsibilities. |
| New User Access | Auditors obtained a list of new users |
| | to the application added during the |

| Audit Objective | Methodology |
|--|--|
| Determine if controls for new user | audit period and selected a sample of |
| access and new user training are in | users in order to determine if |
| place and appropriate to secure the | documentation supported the access |
| application. | was properly approved. |
| | |
| Password Settings | Auditors gained an understanding of |
| | how application users were |
| Determine if controls for password | authenticating into the hosted |
| settings are in place and appropriate | environment and obtained |
| to secure the application. | documentation of the password |
| | settings. Auditors determined if the |
| | password settings were compliant |
| | with university procedures. |
| Privileged User Accounts | Auditors obtained a list of employees |
| <u>i invitegeu öser needunts</u> | with administrator rights to the |
| Determine if controls for privileged | application and determined whether |
| user accounts are in place and | this access aligned with vendor |
| appropriate to secure the application. | agreement expectations and was |
| | appropriate based upon job duties. |
| | |
| Terminated User Accounts | Auditors gained an understanding of |
| | the process for removing access to the |
| Determine if controls for terminated | application. For the high risk role |
| user access are in place and | access, auditors determined that all |
| appropriate to secure the application. | active accounts were appropriate. |
| | |
| User Access Review | Auditors obtained the most recent |
| | user access review and determined |
| Determine if controls for the user | whether the review was completed |
| access review are in place and | timely and appropriately. |
| appropriate to secure the application. | |
| Vendor Agreement | Auditors obtained and reviewed the |
| | vendor agreements and inquired of |
| Determine if a vendor agreement is in | vendor controls reports available. |
| place for the hosting and management | Auditors determined if key processes |
| of the learning management system | performed by the vendor were |
| and that it clearly defines | documented in the vendor contract |
| responsibilities of each party. | terms and whether appropriate |

| Audit Objective | Methodology |
|-----------------|--|
| | reviews and approvals were obtained for the agreement. |

Controls Assessment Classification

Audit areas highlighted in red in the Summary Table are considered to have significant weaknesses in internal controls. Significant weaknesses include errors, deficiencies, or conditions which result in one or more violations of internal controls, laws, A&M System policies, or member rules. These violations have a high probability for legal consequences, financial consequences, or negative impacts to the organization's reputation. These are situations in which a CEO, provost, vice president, dean, or director need to be involved in the problem resolution.

Audit areas highlighted in yellow in the Summary Table are considered to have notable weaknesses in internal controls. Notable weaknesses include errors, deficiencies or conditions which result in minor to moderate noncompliance with internal controls, laws, A&M System policies, or member rules. These are situations which can and should be corrected at the department or supervisor level.

Audit areas highlighted in green in the Summary Table are considered to have effective internal controls.

Items that were not significant or notable were communicated to management during the course of the audit.

<u>Criteria</u>

Our audit was based upon standards as set forth in the following:

- Texas A&M University System Policies and Regulations
- Texas A&M University-Corpus Christi University Rules and Standard Administrative Procedures
- Executed agreement between The Texas A&M University System and Blackboard Inc.
- Other sound administrative practices

The audit was conducted in conformance with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*. Additionally, we conducted the audit in accordance with generally accepted government auditing standards (GAGAS). Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our findings and conclusions based on perform the formation of the provides a reasonable basis for our findings and conclusions based on our findings and conclusions based on performation.

Audit Team

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System Internal Audit
THE TEXAS A&M UNIVERSITY SYSTEM

THE TEXAS A&M UNIVERSITY SYSTEM

COMPLIANCE WITH BENEFITS PROPORTIONAL BY FUND REQUIREMENTS – FISCAL YEAR 2020

January 12, 2022

Charlie Hrncir, CPA Chief Auditor

Project #20220101



Overall Conclusion

The Texas A&M University System members generally comply with provisions in Article IX, Section 6.08 of the General Appropriations Act in fiscal year 2020. The act requires that benefits paid from General Revenue funds be proportional to the salary and wages paid with General Revenue funds.

Summary Table

| Audit Areas | Controls Assessment |
|---|-----------------------------|
| Benefits Proportional by Fund Report Accuracy | Effective – No Observations |
| Employee Eligibility for General Revenue Funding | Effective – No Observations |
| General Revenue Fund Deposits and Transfers | Effective – No Observations |

The A&M System received \$234 million from the Legislature for fiscal year 2020 benefit expenses attributable to employees paid on General Revenue funds. The A&M System also received a net amount of \$61 million in General Revenue-Dedicated funds attributable to employees paid on General Revenue-Dedicated funds. General Revenue-Dedicated funds are set aside by law for a particular purpose or entity. These funds consist of Educational and General funds (specifically, tuition and fees) and interest earned on State Treasury deposits. In addition, the A&M System received \$20 million for benefit expenses attributable to employees paid on other appropriated funds. Other appropriated funds include the available university fund, as well as, patient and lab revenues collected by the system members.

Overall, the A&M System received \$17,453 less in General Revenue than was available to them. This is 0.006% of the appropriated benefits received by the A&M System members for the time period reviewed. While members were generally in compliance with the proportionality requirements, the following was noted:

- One member received \$4 in excess General Revenue. The Comptroller's Office has indicated the \$4 is immaterial and does not require a revised report or repayment to the state.
- One member received \$17,457 less in General Revenue than was available to them. Since the completion of fieldwork, the member has submitted a revised report to the Comptroller's Office for final approval.

The Texas State Auditor's Office methodology requires that our audit report disclose the aggregate dollar amount of all instances of noncompliance with the proportionality requirements identified during the audit, regardless of materiality.

Detailed Results

The following table compares the total benefits paid from appropriated funds to the benefits allowed to be paid from appropriated funds for fiscal year 2020.

| Member Name | Appropriated Benefits Allowed | Appropriated Benefits Paid | Excess (Deficit) of Appropriated | % |
|----------------------|----------------------------------|-------------------------------|-------------------------------------|---------|
| | Per State Guidelines | (APS011) | Benefits | 70 |
| A&M System Offices | 4,276,722 | 4,276,722 | _ | 0.00% |
| Texas A&M | 112,789,591 | 112,789,591 | - | 0.00% |
| Tarleton | 15,505,514 | 15,505,514 | - | 0.00% |
| PVAMU | 13,698,514 | 13,681,057 | (17,457) | -0.13% |
| AgriLife Research | 14,651,888 | 14,651,888 | - | 0.00% |
| AgriLife Extension | 20,031,130 | 20,031,130 | - | 0.00% |
| TEES | 4,665,839 | 4,665,839 | - | 0.00% |
| TEEX | 8,714,609 | 8,714,609 | - | 0.00% |
| TAMUG | 4,515,378 | 4,515,378 | - | 0.00% |
| TFS | 8,862,602 | 8,862,602 | - | 0.00% |
| TTI | 2,389,972 | 2,389,972 | - | 0.00% |
| A&M-Corpus Christi | 14,341,706 | 14,341,706 | - | 0.00% |
| TAMIU | 8,298,796 | 8,298,796 | - | 0.00% |
| Texas A&M-Kingsville | 12,608,179 | 12,608,179 | - | 0.00% |
| WTAMU | 12,458,116 | 12,458,116 | - | 0.00% |
| TVMDL | 3,142,162 | 3,142,162 | - | 0.00% |
| A&M-Commerce* | 14,866,582 | 14,866,582 | - | 0.00% |
| TAMUT | 4,376,838 | 4,376,838 | - | 0.00% |
| TAMHSC | 23,913,961 | 23,913,961 | - | 0.00% |
| A&M-Central Texas | 2,503,012 | 2,503,012 | - | 0.00% |
| A&M-San Antonio | 6,835,769 | 6,835,773 | 4 | 0.00% |
| TDEM | 1,187,531 | 1,187,531 | - | 0.00% |
| Total A&M System | 314,634,411 | 314,616,958 | (17,453) | -0.006% |

*Audited by the Texas State Auditor's Office.

Basis of Audit

Objective, Scope, & Methodology

The audit focused on ensuring that A&M System members paid employee benefits on appropriated funds proportional to the source of funds for fiscal year 2020. The areas audited included:

- Benefits Proportional by Fund Report accuracy
- Employee eligibility for General Revenue funding
- General Revenue Fund deposits and transfers

Fieldwork was conducted from August 2021 to November 2021.

Our audit procedures were consistent with the methodology prescribed by the Texas State Auditor's Office to comply with Article III, Rider 8 of the General Appropriations Act (87th Legislature). These procedures included the review of the following:

- Accuracy of information and proportional funding calculations included in the Benefits Proportional by Fund Reports submitted to the State Comptroller's Office
- Eligibility of employee benefits paid with appropriated funds
- Appropriateness of transfers and deposits into members' General Revenue funds

State entities are required to pay for employee benefits in proportion to their method of finance to ensure that the General Revenue fund is not disproportionally used to fund employee benefits. An entity's method of finance refers to the sources and amounts authorized to finance certain expenses or appropriations made in the General Appropriations Act and may include General Revenue, General Revenue-Dedicated, federal funds, and other funds. Employee benefits included on the Benefits Proportional by Fund Reports are the state employer match for Social Security, Group Insurance Premiums, Teacher Retirement System, and Optional Retirement Program.

The State Comptroller's Office developed the Benefits Proportional by Fund Report to provide guidance and a reporting mechanism for state entities to demonstrate benefits proportionality. The report calculates the percentage of total funding for each appropriated fund and then uses those percentages to determine the amount of benefits that should be paid by each appropriated fund. State entities that have multiple appropriated funds complete the Benefits Proportional by Fund Report annually and submit it to the State Comptroller's Office on or before November 19. Any adjustments required based on the report are to be made in the Uniform Statewide Accounting System (USAS) to ensure that actual expenses match the calculated proportional benefits.

Controls Assessment Classification

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Audit areas highlighted in green in the Summary Table are considered to have effective internal controls.

Items that were not significant or notable were communicated to management during the course of the audit.

<u>Criteria</u>

Our audit was based upon standards as set forth in the following:

- The State of Texas General Appropriations Act for the 2022-2023 Biennium (87th Legislature); Rider 8, page III-46
- The State of Texas General Appropriations Act for the 2020-2021 Biennium (86th Legislature); Article IX, Section 6.08, page IX-28
- Office of the Comptroller of Public Accounts' Fiscal Policies and Procedures
- Texas A&M University System Policies and Regulations
- Texas A&M University System Best Practices for the APS011 Benefits Proportional by Fund Beginning in Fiscal Year 2014 (Edited July 2020)
- Texas A&M University System members' rules and procedures
- Other sound administrative practices

The audit was conducted in conformance with the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*. Additionally, we conducted the audit in accordance with generally accepted government auditing standards (GAGAS). Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our findings and conclusions based on performation of the standards for the formation of the standards for internal Audit is independent per the GAGAS standards for internal auditors.

Audit Team

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Ms. Teresa Edwards, Controller
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