

COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
STATE SINGLE AUDIT REPORT
DECEMBER 31, 2023



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**COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
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Board of Directors
Community Renewal Team, Inc. and Affiliates
Hartford, Connecticut

Report on Compliance for Each Major State Program

Opinion on Each Major State Program

We have audited the Community Renewal Team, Inc. and Affiliates' compliance with the types of compliance requirements identified as subject to audit in the Office of Policy and Management's *Compliance Supplement* that could have a direct and material effect on each of the Community Renewal Team, Inc. and Affiliates' major state programs for the year ended December 31, 2023. The Community Renewal Team, Inc. and Affiliates' major state programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, the Community Renewal Team, Inc. and Affiliates 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 state programs for the year ended December 31, 2023.

Basis for Opinion on Each Major State 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 State Single Audit Act (C.G.S Sections 4-230 to 4-236). Our responsibilities under those standards and the State Single Audit Act are further described in the Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Community Renewal Team, Inc. and Affiliates 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 state program. Our audit does not provide a legal determination of the Community Renewal Team, Inc. and Affiliates' 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 Community Renewal Team, Inc. and Affiliates state programs.

Auditors' 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 Community Renewal Team, Inc. and Affiliates' 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 State Single Audit 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 Community Renewal Team, Inc. and Affiliates' compliance with the requirements of each major state program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the State Single Audit Act, 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 Community Renewal Team, Inc. and Affiliates' 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 Community Renewal Team, Inc. and Affiliates' 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 State Single Audit Act, but not for the purpose of expressing an opinion on the effectiveness of the Community Renewal Team, Inc. and Affiliates' 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 state 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 state 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 state 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.

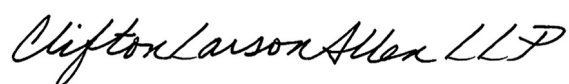
Our consideration of internal control over compliance was for the limited purpose described in the Auditors' Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant 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 State Single Audit Act. Accordingly, this report is not suitable for any other purpose.

Report on Combined Schedule of Expenditures of State Financial Assistance Required by the State Single Audit Act

We have audited the combined financial statements of the Community Renewal Team, Inc. and Affiliates as of and for the year ended December 31, 2023, and have issued our report thereon dated January 2, 2025, which contained an unmodified opinion on those combined financial statements. Our audit was performed for the purpose of forming an opinion on the combined financial statements as a whole. The accompanying combined schedule of expenditures of state financial assistance is presented for purposes of additional analysis as required by the State Single Audit Act and is not a required part of the combined 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 combined financial statements. The information has been subjected to the auditing procedures applied in the audit of the combined financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the combined financial statements or to the combined 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 state financial assistance is fairly stated in all material respects in relation to the financial statements as a whole.



CliftonLarsonAllen LLP

West Hartford, Connecticut
January 2, 2025

COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
Combined Schedule of Expenditures of State Financial Assistance
For the year ended December 31, 2023

Grantor; Pass-through Grantor; Grantee; Program Title	Grant Number	State Grant Program Core - CT Number	Grant Period Ending	Grant Expenditures
Nonexempt Programs				
Department of Social Services				
Direct:				
Human Service Infrastructure	22DSS1501EW	11000-DSS61000-16118	9/23	\$ 177,053
Human Service Infrastructure - Community Services	22DSS1501EW	11000-DSS61000-16160	9/23	124,305
Human Service Infrastructure	22DSS1501EW	11000-DSS61000-16174	9/23	477,543
Human Service Infrastructure	22DSS1501EW	11000-DSS61000-16174	9/24	181,294
Fatherhood Initiative	23DSS1401EW	11000-DSS61000-16174	9/24	752
Passed through the Connecticut Association for Community Action, Inc.:				
Fatherhood Initiative Program Strategic Prevention Framework	None	11000-DSS61000-16174	3/23	23,465
				<u>683,054</u>
				<u>984,412</u>
Department of Children and Families				
Direct:				
Child Welfare Support Services - DCF Chaps	-	11000-DCF91110-16120	9/23	41,417
Child Welfare Support Services - DCF Chaps	-	11000-DCF91110-16120	9/24	19,299
				<u>60,716</u>
Department of Housing				
Direct:				
East Hartford Family Shelter Capital Needs	FX1804309	12065-DOH46900-40240	12/23	12,027
McKinney Shelter Capital Needs	FX2106408	12065-DOH46900-40240	12/24	965,098
				<u>977,125</u>
HOPWA (McKinney) - DOH	19DOH0101AS	11000-DOH46000-16149-1200902	6/23	32,269
HOPWA (McKinney) - DOH	19DOH0101AS	11000-DOH46000-16149-1200902	12/23	43,168
				<u>75,437</u>
East Hartford Shelter	19DOH0101AS	11000-DOH46920-16149-1200901	6/23	11,964
East Hartford Shelter	19DOH0101AS	11000-DOH46920-16149-1200901	12/23	13,582
Passed through the City of Hartford:				
McKinney Shelter	5744 HHS 2023-10	11000-DOH46920-16149-1200901	6/23	478,747
McKinney Shelter	HHS 2024-26	11000-DOH46920-16149-1200901	12/23	452,210
				<u>956,503</u>
Passed through Journey Home, Inc.:				
Youth Homelessness	2022-021	11000-DOH46920-16149-1200909	10/23	9,088
Youth Homelessness	2023-YHDP-CRT	11000-DOH46920-16149-1200909	10/24	1,988
				<u>11,076</u>
				<u>2,020,141</u>

The accompanying note is an integral part of this schedule.

COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
Combined Schedule of Expenditures of State Financial Assistance (continued)
For the year ended December 31, 2023

Grantor; Pass-through Grantor; Grantee; Program Title	Grant Number	State Grant Program Core - CT Number	Grant Period Ending	Grant Expenditures
Department of Mental Health and Addiction Services				
Direct:				
Clinical Homeless Outreach	23MHA2121	11000-MHA53000-16053	6/23	\$ 18,694
Clinical Homeless Outreach	23MHA2121	11000-MHA53000-16053	6/24	<u>13,325</u>
Total Mental Health Services				<u>32,019</u>
Offender Re-entry Transitional Housing	23MHA2121	11000-MHA53000-12601	6/23	24,508
Offender Re-entry Transitional Housing	23MHA2121	11000-MHA53000-12601	6/24	22,477
Transitional Case Management	23MHA2121	11000-MHA53000-12601	6/23	105,298
Transitional Case Management	23MHA2121	11000-MHA53000-12601	6/24	<u>129,254</u>
Total Forensic Services				<u>281,537</u>
Managed Service System - Asian Mental Health Outpatient	23MHA2121	11000-MHA53000-12157	6/23	51,969
Managed Service System - Asian Mental Health Outpatient	23MHA2121	11000-MHA53000-12157	6/24	<u>46,954</u>
Total Managed Service System				<u>98,923</u>
Substance Abuse	23MHA2121	11000-MHA53000-16003	6/23	53,754
Substance Abuse	23MHA2121	11000-MHA53000-16003	6/24	<u>45,766</u>
Total Grants for Substance Abuse Services				<u>99,520</u>
Next Step Supportive Housing	23MHA2121	11000-MHA53000-12035	6/23	44,840
Next Step Supportive Housing	23MHA2121	11000-MHA53000-12035	6/24	<u>22,603</u>
Total Housing Supports and Services				<u>67,443</u>
Total Department of Mental Health and Addiction Services				<u>579,442</u>
Office of Early Childhood				
Direct:				
Child Day Care	22OECDC01CRT	11000-OEC64845-16274-83012	6/23	654,176
Child Day Care	22OECDC01CRT	11000-OEC64845-16274-83012	6/24	657,533
Child Day Care - Ritter Center Classroom Expansion	-	11000-OEC64845-16274-83012	6/23	225,000
Child Day Care - Douglas Street Classroom Expansion	-	11000-OEC64845-16274-83012	6/24	<u>17,827</u>
Total Child Day Care				<u>1,554,536</u>
Passed through the City of Hartford:				
School Readiness in Priority School Districts	None	11000-OEC64845-16274-83014	6/23	348,033
School Readiness in Priority School Districts	None	11000-OEC64845-16274-83014	6/24	<u>322,408</u>
Total School Readiness in Priority School Districts				<u>670,441</u>
Total Office of Early Childhood				<u>2,224,977</u>

The accompanying note is an integral part of this schedule.

COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
Combined Schedule of Expenditures of State Financial Assistance (continued)
For the year ended December 31, 2023

Grantor; Pass-through Grantor; Grantee; Program Title	Grant Number	State Grant Program Core - CT Number	Grant Period Ending	Grant Expenditures
State Department of Education				
Direct:				
Regional School Choice Office Satellite Grant	-	11000-SDE64000-99999	6/23	\$ 4,000
Department of Corrections				
Direct:				
Nonresidential Program - Scattered Site Supportive Housing	22DOC0108AA	11000-DOC88000-16173	6/23	434,927
Nonresidential Program - Scattered Site Supportive Housing	22DOC0108AA	11000-DOC88000-16173	6/24	382,736
Total Department of Corrections				<u>817,663</u>
Total State Financial Assistance				<u>\$ 6,691,351</u>

The accompanying note is an integral part of this schedule.

COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
NOTES TO COMBINED SCHEDULE OF EXPENDITURES OF STATE FINANCIAL ASSISTANCE
YEAR ENDED DECEMBER 31, 2023

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

The accompanying combined schedule of expenditures of state financial assistance (the Schedule) includes the state grant activity of Community Renewal Team, Inc. and Affiliates, under programs of the State of Connecticut for the year ended December 31, 2023. Various departments and agencies of the State of Connecticut have provided financial assistance through grants and other authorizations in accordance with the General Statutes of the State of Connecticut. Because the Schedule presents only a selected portion of the operations of the Community Renewal Team, Inc. and Affiliates, it is not intended to, and does not, present the financial position, changes in net assets or cash flows of the Community Renewal Team, Inc. and Affiliates.

Basis of Accounting

The accounting policies of the Community Renewal Team, Inc. and Affiliates, conform to accounting principles generally accepted in the United States of America as applicable to governmental organizations. The information in the Schedule is presented based upon regulations established by the State of Connecticut, Office of Policy and Management.

Expenditures reported on the Schedule are presented on the accrual basis of accounting. In accordance with Section 4-236-22 of the Regulations to the State Single Audit Act, certain grants are not dependent on expenditure activity and, accordingly, are considered to be expended in the fiscal year of receipt. These grant program receipts are reflected in the expenditures column of the Schedule.



**INDEPENDENT AUDITORS' 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 Directors
Community Renewal Team, Inc. and Affiliates
Hartford, Connecticut

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 combined financial statements of the Community Renewal Team, Inc. and Affiliates, which comprise the combined statement of financial position as of December 31, 2023 and the related combined statements of activities, functional expenses and cash flows for the year then ended and the related notes to the combined financial statements, which collectively comprise the Community Renewal Team, Inc. and Affiliates' basic financial statements, and have issued our report thereon dated January 2, 2025.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the combined financial statements, we considered the Community Renewal Team, Inc. and Affiliates' internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the combined financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Community Renewal Team, Inc. and Affiliates' internal control. Accordingly, we do not express an opinion on the effectiveness of the Community Renewal Team, Inc. and Affiliates' 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 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 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.

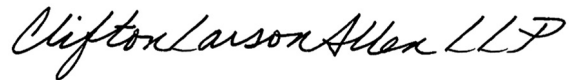
Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not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

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Community Renewal Team, Inc. and Affiliates' combined 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 determination of financial statement amounts. 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 no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

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 Community Renewal Team, Inc. and Affiliates' internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Community Renewal Team, Inc. and Affiliates' internal control and compliance. Accordingly, this communication is not suitable for any other purpose.



CliftonLarsonAllen LLP

West Hartford, Connecticut
January 2, 2025

**COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
YEAR ENDED DECEMBER 31, 2023**

Section I – Summary of Auditors’ Results

Financial Statements

1. Type of auditors’ report issued: Unmodified
2. Internal control over financial reporting:
- Material weakness(es) identified? _____ yes x no
 - Significant deficiency(ies) identified? _____ yes x none reported
3. Noncompliance material to financial statements noted? _____ yes x no

State Financial Assistance

1. Internal control over state projects:
- Material weakness(es) identified? _____ yes x no
 - Significant deficiency(ies) identified that are not considered to be material weakness(es)? _____ yes x none reported
2. Type of auditors’ report issued on compliance for state projects: Unmodified
3. Any audit findings disclosed that are required to be reported in accordance with state requirements? _____ yes x no

Identification of Major State Projects

State Core-CT Number	Name of State Project
11000-OEC64845-16274-83012	Child Day Care
11000-MHA53000-12601	Forensic Services
11000-DOH46920-16149-1200901	Emergency Shelter Services
11000-DSS61000-16174	Human Service Infrastructure

Dollar threshold used to distinguish between Type A and Type B state projects: \$ 200,000

**COMMUNITY RENEWAL TEAM, INC. AND AFFILIATES
SCHEDULE OF FINDINGS AND QUESTIONED COSTS (CONTINUED)
YEAR ENDED DECEMBER 31, 2023**

Section II – Financial Statement Findings

Our audit did not disclose any matters required to be reported in accordance with *Government Auditing Standards*.

Section III – Findings and Questioned Costs – State Financial Assistance

Our audit did not disclose any matters required to be reported in accordance with the State Single Audit Act.



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