

# **Compliance Gap Analysis Template**

1 Oct 2024 / Theodore Lebsack

Complete

Score	15 / 17 (88.24%)	Flagged items	11	Actions	2
Conducted o	on				01.10.2024 13:30 PST
Prepared by					Theodore Lebsack
Location				2415 N Bui	rdick St, Kalamazoo, MI 49007, USA (42.3157036, -85.58445019999999)

Flagged items & Actions	11 flagged, 2 actions
Flagged items	11 flagged, 0 actions
Regulatory/Compliance Requirements / Regulations / Regulations 1  Current Compliance Status	Partially Compliant
Regulatory/Compliance Requirements / Regulations / Regulations 2  Current Compliance Status	Non-Compliant
Regulatory/Compliance Requirements / Regulations / Regulations 3	
Current Compliance Status	Partially Compliant
Risk Management / Risks / Risks 1  Risk Impact	High
Risk Management / Risks / Risks 1	
Likelihood	High
Risk Management / Risks / Risks 1	
Priority	High
Risk Management / Risks / Risks 2  Risk Impact	High
Risk Management / Risks / Risks 2	
Likelihood	High
Risk Management / Risks / Risks 2  Priority	High
Risk Management / Risks / Risks 3 <b>Likelihood</b>	High
Risk Management / Risks / Risks 3 <b>Priority</b>	High
Other actions	2 actions

Risk Management / Action Plan / Action Plan 1

#### **Responsible Department/Person**

Finance, Internal Audit

**To do** | Assignee: Latte Norwich | Priority: High | Due: 11.10.2024 12:00 PST | Created by: SafetyCulture Staff

### Comprehensive review of all controls

Hi Norwich, please make sure to forward your findings by our meeting next week.

Risk Management / Action Plan / Action Plan 3

#### **Corrective Action**

Enforce record retention policies with periodic audits of both physical and electronic records.

**To do** | Assignee: SafetyCulture Staff | Priority: High | Due: 04.10.2024 12:00 PST | Created by: SafetyCulture Staff

### Digitize files

Hi Admin Staff, please digitize the remaining files in the filing room.

Regulatory/Compliance Requirements	3 flagged, 0 / 2 (0%)
Regulations	3 flagged, 0 / 2 (0%)
Regulations 1	1 flagged, 0 / 1 (0%)

#### **Requirements (Attach file if needed)**

CEO/CFO must certify the accuracy of financial reports and internal controls over financial reporting (ICFR).

#### Source of Requirements (Regulation/Policy/Standard)

Sarbanes-Oxley Act Section 302

#### **Relevant Department/s**

Finance, Executive Management

#### **Current Compliance Status**

Partially Complian

#### **Current State**

The CFO certifies the accuracy of financial reports, but ICFR documentation is incomplete in some areas.

#### **Required State**

Full documentation of ICFR controls, including all critical reporting areas.

Regulations 2 1 flagged

#### Requirements (Attach file if needed)

Company must have internal controls for financial reporting, audited by an independent external auditor and certified by management.

#### Source of Requirements (Regulation/Policy/Standard)

Sarbanes-Oxley Act Section 404

#### **Relevant Department/s**

Finance, Internal Audit

### **Current Compliance Status**

Non-Compliant

#### **Current State**

Internal audit department lacks a formal ICFR framework; external audit team identified deficiencies.

#### **Required State**

Establish a formal ICFR framework, and address deficiencies found in external audit.

Regulations 3 1 flagged, 0 / 1 (0%)

#### Requirements (Attach file if needed)

The company must retain all audit, financial, and electronic records for at least seven years.

#### Source of Requirements (Regulation/Policy/Standard)

Sarbanes-Oxley Act Section 802

#### **Relevant Department/s**

IT, Legal

Involve manpower from the Admin Team to do the scanning of physical documents

#### **Current Compliance Status**

Partially Compliant

#### **Current State**

Records retention policy exists but lacks enforcement in the IT department; some electronic records are missing.

#### **Required State**

Enforce stricter records retention policies, especially for digital files across all departments.

Risk Management	8 flagged, 2 actions, 12 / 12 (100%)
Risks	8 flagged, 9 / 9 (100%)
Risks 1	3 flagged, 3 / 3 (100%)

### **Compliance Gap**

Incomplete internal control documentation: Financial reports may be inaccurate, leading to potential restatements, penalties, and loss of investor trust.

Risk Impact	High
Likelihood	High
Priority	High
Risks 2	3 flagged, 3 / 3 (100%)

### **Compliance Gap**

Lack of formal ICFR framework: Inadequate oversight of financial reporting could result in undetected fraud or material misstatements.

Risk Impact	High
Likelihood	High
Priority	High
Risks 3	2 flagged, 3 / 3 (100%)

#### **Compliance Gap**

Missing electronic records: Missing records could lead to compliance violations, fines, and reputational damage.

Risk Impact	Medium
Likelihood	High
Priority	High
Action Plan	2 actions, 3 / 3 (100%)
Action Plan 1	1 action, 1 / 1 (100%)

#### **Gap Identified**

Incomplete internal control documentation.

#### **Corrective Action**

Conduct a comprehensive review of all internal controls and finalize documentation for all critical areas.

#### **Responsible Department/Person**

Finance, Internal Audit

**To do** | Assignee: Latte Norwich | Priority: High | Due: 11.10.2024 12:00 PST | Created by: SafetyCulture Staff

#### Comprehensive review of all controls

Hi Norwich, please make sure to forward your findings by our meeting next week.

StatusIn ProgressDeadline for Resolution11.10.2024 12:00 PST

Action Plan 2 1 / 1 (100%)

#### **Gap Identified**

Lack of formal ICFR framework.

#### **Corrective Action**

Implement a formal internal control over financial reporting (ICFR) framework and provide employee training.

#### **Responsible Department/Person**

Internal Audit, Finance

StatusPendingDeadline for Resolution30.10.2024 12:00 PSTAction Plan 31 action, 1/1 (100%)

#### **Gap Identified**

Missing electronic records of documents located in the filing room



Photo 1

#### **Corrective Action**

Enforce record retention policies with periodic audits of both physical and electronic records.

**To do** | Assignee: SafetyCulture Staff | Priority: High | Due: 04.10.2024 12:00 PST | Created by: SafetyCulture Staff

### Digitize files

Hi Admin Staff, please digitize the remaining files in the filing room.

### **Responsible Department/Person**

IT, Legal

Status	Pending
Deadline for Resolution	30.10.2024 12:00 PST

Monitoring and Review	3 / 3 (100%)
Compliance Tracking	3 / 3 (100%)
Compliance Tracking 1	1 / 1 (100%)

### **Monitoring Plan**

Audits of internal controls and record-keeping by the Internal Audit team, with corrective actions documented

Review Frequency	Monthly
Compliance Tracking 2	1 / 1 (100%)

#### **Monitoring Plan**

External audit conducted annually to evaluate compliance with SOX Sections 302 and 404 requirements

Review Frequency	Bianually
Compliance Tracking 3	1 / 1 (100%)

### **Monitoring Plan**

IT department to conduct regular checks of electronic records to ensure compliance with retention policies.

Review Frequency	Quarterly
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### Sign-off

### **Compliance Gap Analysis Template Reviewed By**

Angelica Gaylord

Angelica Gaylord 18.10.2024 14:56 PST

#### **Designation of the Reviewer**

**Chief Compliance Officer** 

#### **Reviewer's Comment or Feedback**

Hi Theo, thanks for working on this. Please see my detailed feedback and let's schedule a meeting to discuss it it further. Thanks

Compliance Gap Analysis Feedback.pdf

**Date Reviewed** 18.10.2024 14:30 PST

# Media summary



Photo 1

# File summary

Compliance Gap Analysis Feedback.pdf