WEBER COUNTY, UTAH

SINGLE AUDIT REPORT AND REPORT IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Year Ended December 31, 2024

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Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

The Board of County Commissioners Weber County

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, discretely presented component units, each major fund, and the aggregate remaining fund information of Weber County (the County), as of and for the year ended December 31, 2024, and the related notes to the financial statements, which collectively comprise the County's basic financial statements, and have issued our report thereon dated May 27, 2025.

Internal Control over Financial Reporting

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

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified. We did identify certain deficiencies in internal control, described in the accompanying schedule of findings and questioned costs as items 2024-001 that we consider to be a material weakness.

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Compliance and Other Matters

As part of obtaining reasonable assurance about whether the County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

The County's Response to Findings

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

Purpose of this Report

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

Squirze : Company, PC

Orem, Utah May 27, 2025



Independent Auditor's Report on Compliance for Each Major Federal Program; Report on Internal Control over Compliance; and Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

The Board of County Commissioners Weber County

Report on Compliance for Each Major Federal Program

Opinion on Each Major Program

We have audited Weber County (the County)'s compliance with the types of compliance requirements described in the OMB Compliance Supplement that could have a direct and material effect on each of the County's major federal programs for the year ended December 31, 2024. The County's federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the County complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2024.

Basis for Opinion on Each Major Federal Program

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

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

Responsibilities of Management for Compliance

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

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Auditor's Responsibilities for the Audit of Compliance

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the County's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the County's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Report on Internal Control Over Compliance

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

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

material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

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

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

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

We have audited the governmental activities, the business-type activities, the discretely presented component units, each major fund, and the aggregate remaining fund information of Weber County as of and for the year ended December 31, 2024, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated May 27, 2025, which contained unmodified opinions on those basic financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

Squire : Company, PC

Orem, Utah May 27, 2025

WEBER COUNTY CORPORATION

Schedule of Expenditures of Federal Awards

For the Year Ended December 31, 2024

| | | | | | Provided to | |
|-----------|---|---------------------------|-----------------------|--------------|---------------|--------|
| ALN | Name | Pass Through Entity | Award | Expenditures | Subrecipients | Agency |
| U.S. Depa | artment of Agriculture, Food, and Nutrition Service | | | | | |
| 10.557 | WIC - Administration | Utah Department of Health | 20-2700361/25-2700613 | \$ 1,120,309 | \$- | WMHD |
| 10.557 | WIC - Administration (Noncash Vouchers) | Utah Department of Health | 20-2700361/25-2700613 | 3,447,147 | - | WMHD |
| | | | | 4,567,456 | - | - |
| 10.559 | Summer Food Service (Child Nutrition Cluster) | Utah Department of Health | 23-2702087 | 230 | - | WMHD |
| | WIC - BFPC Bonus | Utah Department of Health | 20-2700361 | 13,679 | | WMHD |
| | Secure Rural Schools (Forest Service Schools and Roads Cluster) | State of Utah | 23DB001014 | 31,280 | | County |
| | Pineview Reservoir Recreation Complex Reconstruction | | 21-CS-11041906-062 | 3,870 | | County |
| | NRCS UTABA Rehabilitation Watershed Plan | | NR228D43XXXXC012 | 297,287 | | County |
| | Total U.S. Department of Agriculture, Food, and Nutrition Service | | | 4,913,803 | | - ' |
| U.S. Depa | artment of Health and Human Services | | | | | |
| 93.268 | VFC IMMUNIZATIONS | Utah Department of Health | 19-2701016 | 105,593 | - | WMHD |
| 93.268 | COVID-19 VACCINE DISSEMINATION | Utah Department of Health | 21-2701522 | 49,603 | - | WMHD |
| | | | | 155,196 | - | - |
| 93.323 | EPI DREAM OUTBREAK | Utah Department of Health | 20-2700515 | 56,566 | - | WMHD |
| 93.323 | COVID-19 PPPHEA | Utah Department of Health | 21-2702399 | 21,615 | - | WMHD |
| 93.323 | ELC HOMELESSNESS | Utah Department of Health | 22-2701231 | 15,405 | - | WMHD |
| 93.323 | COVID-19 PPPHEA EXPANSION | Utah Department of Health | 21-2702399 | 796,967 | - | WMHD |
| | | | | 890,552 | - | |
| 93.994 | MCH BLOCK | Utah Department of Health | 21-2700503 | 110,754 | - | WMHD |
| 93.994 | VIPP MCH INJURY | Utah Department of Health | 23-2700596 | 36,974 | - | WMHD |
| | | | | 147,728 | - | |
| 93.008 | MRC STRRONG | Utah Department of Health | 24-2700263 | 125,939 | - | WMHD |
| 93.069 | | Utah Department of Health | 22-2700231/24-2701376 | 497,396 | - | WMHD |
| 93.092 | PERSONAL RESPONSIBILITY EDUCATION | Utah Department of Health | 23-2701069 | 96,738 | - | WMHD |
| 93.103 | NEHA | Utah Department of Health | | 12,500 | - | WMHD |
| 93.116 | TB ELIMINATION | Utah Department of Health | 20-2700586 | 8,600 | - | WMHD |
| 93.136 | RAPE PREVENTION EDUCATION | Utah Department of Health | 19-2700953 | 11,290 | - | WMHD |
| 93.184 | DISABILITY/MOBILITY | Utah Department of Health | 24-2700329 | 7,370 | - | WMHD |
| | CHILDHOOD LEAD POISONING PREVENTION | Utah Department of Health | 22-2700406 | 19,448 | | WMHD |
| | SEXUAL RISK AVOIDANCE EDUCATION | Utah Department of Health | 23-2701053 | 62,043 | | WMHD |
| | ENHANCED ACUTE HCV & HBV | Utah Department of Health | 21-2702419 | 9,061 | | WMHD |
| | TOBACCO PROGRAM CDC | Utah Department of Health | 21-2700222 | 25,092 | | WMHD |
| | CRISIS WORKFORCE | Utah Department of Health | 22-2700706 | 172,664 | | WMHD |
| | HEALTH DISPARITIES/HEALTH EQUITY | Utah Department of Health | 22-2700214 | 133,249 | | WMHD |
| 93.426 | COMMUNITY & CLINICAL CARDIO | Utah Department of Health | 24-2700001 | 52,967 | - | WMHD |

| | Nama | Dass Through Entity | Award | Evenenditures | Provided to | 1 |
|---------|--|---------------------------------------|---------------------------------|---------------|---------------|------|
| | Name | Pass Through Entity | Award | Expenditures | Subrecipients | Agen |
| | SPAN | Utah Department of Health | 19-2700384 | 35,807 | | WMH |
| | INTEGRATED COMM. ACTION NOW | Utah Department of Workforce Services | 23-DWS-0067 | 812,667 | | WMH |
| | TCM (Medicaid Cluster) | Utah Department of Health | | 75,655 | | WMH |
| | PHEP MRC | Utah Department of Health | 22-2700231/24-2401376 | 11,181 | | WMH |
| | CANCER SCREENING | Utah Department of Health | 21-2702461 | 22,926 | | WMH |
| | HIV PREVENTION | Utah Department of Health | 23-2701213 | 35,630 | | WMF |
| | PH INFRASTRUCTURE | Utah Department of Health | 23-2701316 | 285,093 | | WMF |
| 93.977 | | Utah Department of Health | 19-2700677 | 58,465 | | WMF |
| | COMMUNITY & CLINICAL DIABETES | Utah Department of Health | 24-2700001 | 48,776 | | WMF |
| 93.991 | PREVENTATIVE BLOCK GRANT | Utah Department of Health | 23-2700434 | 127,109 | | _WMF |
| | Total U.S. Department of Health and Human Services | | | 3,941,143 | | _ |
| S. Depa | artment of Homeland Security | | | | | |
| 97.067 | Homeland Security 2021 SHSP | Utah Division of Emergency Management | DEM-2021-SHSP-001 | 20,675 | - | Coun |
| 97.067 | Homeland Security 2022 SHSP | Utah Division of Emergency Management | EMW-2022-S00013-029 | 56,097 | - | Coun |
| 97.067 | Homeland Security 2023 SHSP | Utah Division of Emergency Management | DEM-2023-SHSP-031 | 133,096 | - | Cour |
| 97.067 | Homeland Security 2024 SHSP | Utah Division of Emergency Management | DEM-2024-SHSP-036 | 20,681 | - | Coun |
| | | | | 230,549 | - | _ |
| 97.042 | Emergency Mgmt. Performance Grant | Utah Division of Emergency Management | DEM-EMPG-2022-057 | 51,000 | - | Cour |
| 97.042 | Emergency Mgmt. Performance Grant | Utah Division of Emergency Management | DEM-EMPG-2024-008 | 6,201 | - | Cour |
| | | | | 57,201 | - | - |
| 97.132 | TARGETED VIOLENCE & TERRORISM PREVENTION | | EMW-2024-GR-05357 | 19,181 | - | WM |
| | Total U.S. Department of Homeland Security | | | 306,931 | - | _ |
| S. Depa | artment of Housing and Urban Development (HUD) | | | | | |
| 14.871 | Section 8 Housing Choice Vouchers | | UT022 | 2,316,276 | - | WHA |
| 14.879 | Mainstream Vouchers | | UT022 | 954,599 | - | WHA |
| | Total Housing Voucher Cluster | | | 3,270,875 | - | _ |
| 14.181 | Supportive Housing for Persons with Disabilities | Utah Department of Workforce Services | UT0082L8T032110/UT0082L8T032211 | 265,697 | - | WHA |
| 14.913 | HEALTHY HOMES HUD GRANT | | FR-6700-N-44 | 163,590 | | WM |
| | Total U.S. Department of Housing and Urban Development (HUD) | | | 3,700,162 | | _ |
| S. Depa | artment of Justice | | | | | |
| 16.606 | FY23 SCAAP | | | 1,096 | - | Coun |
| 16.738 | 2023 JAG GRANT | Ogden City | | 17,298 | - | Coun |
| 16.812 | Second Chance Act Reentry Initiative - 2019 WARP | | 2019-RW-BX-0004 | 108,735 | 38,071 | Coun |
| 16.838 | Comprehensive Opioid Stimulant and Substance Abuse | | 15PBJA-22-GG-04447-COAP | 380,447 | - | Coun |
| | Total U.S. Department of Justice | | | 507,575 | 38,071 | _ |
| S. Depa | artment of Transportation | | | | | |
| | HIGHWAY BIKE PED (Highway Safety Cluster) | Utah Highway and Safe Kids | | 29,470 | - | WM |
| | HIGHWAY SAFETY | Utah Highway and Safe Kids | PS240710 | 10,000 | - | WM |
| | | | | 39,470 | | _ |

| | | | | | Provided to | |
|------------|--|--|--------------|--------------|---------------|--------|
| ALN | Name | Pass Through Entity | Award | Expenditures | Subrecipients | Agenc |
| 20.703 | HMEP 2024 | Utah Division of Emergency Management | WBCE-24 HMEP | 3,200 | - | County |
| | Total U.S. Department of Transportation | | | 42,670 | | |
| J.S. Envii | ronmental Protection Agency | | | | | |
| 66.032 | DEQ RADON | Utah Department of Environmental Quality | / | 5,000 | - | WMHE |
| 66.956 | VRRAP- TARGETED AIRSHED GRANT | Utah Department of Environmental Quality | / 201050 | 319,831 | - | WMH |
| | Total U.S. Environmental Protection Agency | | | 324,831 | - | _ |
| J.S. Depa | artment of the Treasury | | | | | |
| 21.027 | COVID-19 Coronavirus State and Local Fiscal Recovery | | 21-2701522 | 31,915 | - | WMH |
| 21.027 | COVID-19 Coronavirus State and Local Fiscal Recovery SDOH ARPA | | 21-2700425 | 214,153 | - | WMH |
| 21.027 | COVID-19 ARPA | | | 13,280,488 | 7,250,229 | Count |
| 21.027 | COVID-19 ARPA | State of Utah | | 1,900,000 | - | Count |
| 21.027 | COVID-19 ARPA | Farr West City | | 22,352 | - | Count |
| 21.027 | COVID-19 ARPA | Harrisville City | | 39,116 | - | Count |
| 21.027 | COVID-19 ARPA | Hooper City | | 23,150 | - | Count |
| 21.027 | COVID-19 ARPA | Huntsville Town | | 7,500 | - | Count |
| 21.027 | COVID-19 ARPA | Marriott-Slaterville City | | 7,500 | - | Count |
| 21.027 | COVID-19 ARPA | Morgan County | | 40,713 | - | Count |
| 21.027 | COVID-19 ARPA | Ogden City | | 621,075 | - | Count |
| 21.027 | COVID-19 ARPA | North Ogden City | | 94,997 | - | Count |
| 21.027 | COVID-19 ARPA | Plain City | | 42,309 | - | Count |
| 21.027 | COVID-19 ARPA | Pleasant View City | | 50,293 | - | Count |
| 21.027 | COVID-19 ARPA | Riverdale City | | 62,267 | - | Count |
| 21.027 | COVID-19 ARPA | Roy City | | 142,895 | - | Count |
| 21.027 | COVID-19 ARPA | South Ogden City | | 67,855 | - | Count |
| 21.027 | COVID-19 ARPA | Uintah City | | 7,500 | - | Count |
| 21.027 | COVID-19 ARPA | Washington Terrace City | | 69,452 | - | Count |
| 21.027 | COVID-19 ARPA | West Haven City | | 87,813 | - | Count |
| | | | | 16,813,342 | 7,250,229 | _ |
| 21.032 | COVID-19 ARPA LATCF | | | 22,500 | - | Count |
| | Total U.S. Department of the Treasury | | | 16,835,842 | 7,250,229 | _ |

WEBER COUNTY, UTAH NOTES TO SUPPLEMENTARY SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

For the Year Ended December 31, 2024

1. **Purpose of the Schedule** – The accompanying Schedule of Expenditures of Federal Awards (Schedule) is a supplementary schedule to the County's basic financial statements and is presented for purposes of additional analysis. The Schedule is required by Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).

2. Basis of Presentation -

- a. The Schedule includes the federal grant activity of Weber County under programs of the federal government for the year ended December 31, 2024. Because the Schedule presents only a selected portion of the operations of Weber County, it is not intended to and does not present the financial position, changes in net position, or cash flows of Weber County.
- b. The County's reporting entity is fully described in Footnote 1 of the County's basic financial statements.

3. Summary of Significant Accounting Policies -

- a. Basis of accounting Federal financial assistance programs included in the Schedule are primarily reported in the County's basic financial statements as grants and contributions in the entity-wide Statement of Activities and as intergovernmental revenue in the fund financial statements. The Schedule is presented using the same basis of accounting as that used in reporting the expenditures of the related funds in the County's basic financial statements. The basis of accounting used for each fund is described in Footnote 1 of the County's basic financial statements.
- b. Pass-through entity identifying numbers are presented where available.
- c. Matching costs The Schedule does not include matching expenditures.
- d. The County has elected to use the 10% de minims cost rate. The Weber Housing Authority, and Weber Area Dispatch, discrete component units of Weber County, have also elected to use the 10% de minis cost rate. The Weber Morgan Health Department, a separate discrete component unit of the County, has not elected to use the de minimis rate.
- 4. **Noncash Federal Awards** Noncash federal awards represent commodities consumed during the year, expressed at market value. The State of Utah estimates the per unit fair market value of these commodities, Noncash federal financial assistance is calculated by multiplying the per unit fair market value by the net commodities consumed.
- 5. **Reconciliation of Expenditures to Federal Revenues** Expenditures reported in the Schedule agree with the federal revenues reported in the County's basic financial statements with the following reconciling items:

| Intergovernmental Revenue Per the Financial Statements | |
|---|--------------------|
| Governmental Funds | \$ 25,057,875 |
| | |
| Discrete Component Units | |
| Weber Morgan Health Department | 11,240,029 |
| Weber Housing Authority | 3,958,566 |
| Weber Area Dispatch | 445,041 |
| Total Intergovernmental Revenue | \$ 40,701,511 |
| | |
| Less: | |
| Grants Received from the State of Utah | \$ (5,346,267) |
| Grants and Contributions received from Local and Other Agencies | (4,782,287) |
| Other Miscellaneous Reconciling Items, net | |
| | \$ (10,128,554) |
| Total Federal Expenditures from the Schedule | \$ 30,572,957 |

WEBER COUNTY Summary Schedule of Prior Audit Findings Year Ended December 31, 2024

Tear Ended December 51, 2024

2023-001 Special assessment receivable and revenue recognition.

The County has addressed and resolved this finding from the prior year.

WEBER COUNTY Schedule of Findings and Questioned Costs Year Ended December 31, 2024

SECTION I – SUMMARY OF AUDITOR'S RESULTS

Financial Statements

| Type of auditor's report issued: | Unmodified |
|--|----------------------|
| Internal control over financial reporting: Material weakness identified Significant deficiency identified | Yes None reported |
| Noncompliance material to financial statements noted? | No |
| Federal Awards | |
| Internal control over major federal programs: Material weakness identified Significant deficiency identified | No None reported |
| 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 Uniform Guidance 2 CFR 200.516(a): | No |
| Identification of Major Federal Programs | |
| Name of Federal Program (ALN Number) | |
| Housing Voucher Cluster: Section 8 Housing Choice Vouchers (14.871) Mainstream Vouchers (14.879) Coronavirus State and Local Fiscal Recovery Funds (21.027) | |
| Dollar threshold used to distinguish between type A and type B programs: | \$917,189 |
| Auditee qualified as low-risk auditee? | Yes |

SECTION II – FINANCIAL STATEMENT FINDINGS

2024-001 – Unrecorded liability

Criteria Consistent with the government accounting standards, contractual obligations should be reported as liabilities when the obligation exists at the balance sheet date. A deposit received from a developer is a liability because the County has a future contractual obligation to refund the deposit.

| Condition | During our audit of the 2024 financial statements, we noted that the County did not recognize a liability of \$1.5 million due to a developer as part of a special assessment project as well as \$0.1 million of interest earned on that deposit. |
|-----------------------------------|--|
| Cause | The County did not have controls in place related to the special assessment project to identify all liabilities or amounts owed back to developer upon completion of the project. |
| Effect | As a result, the financial statements for the year ended December 31, 2024, were restated to reflect the full amount due to the developer. |
| Recommendation | We recommend management ensure reliable external financial reports are prepared in accordance with accounting principles generally accepted in the United States of America. |
| Views of responsible officials | We appreciate your recommendations. We have reviewed these items and will make necessary changes |

SECTION III – FEDERAL AWARD FINDINGS AND QUESTIONED COSTS

No matters were reported.



Independent Auditor's Report on Compliance and Report on Internal Control over Compliance Required by the *State Compliance Audit Guide*

The Board of County Commissioners Weber County

Report on Compliance

Opinion

We have audited Weber County's (the County) compliance with the following applicable state compliance requirements described in the *State Compliance Audit Guide*, issued by the Office of the Utah State Auditor, for the year ended December 31, 2024:

Budgetary Compliance Fund Balance Restricted Taxes and Other Related Restricted Revenue Fraud Risk Assessment Government Fees Cash Management Enterprise Fund Transfers, Reimbursements, Loans, and Services Tax Levy Revenue Recognition Impact Fees

In our opinion, Weber County complied, in all material respects, with the state compliance requirements referred to above for the year ended December 31, 2024.

Basis for Opinion

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the *State Compliance Audit Guide*, issued by the Office of the Utah State Auditor. Our responsibilities under those standards and the *State Compliance Audit Guide* are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the County 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. Our audit does not provide a legal determination of the County's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the state compliance requirements referred to above.

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Orem Office 801.225.6900 1329 South 800 East Orem, UT 84097 Squire is a dba registered to Squire & Company, PC, a certified public accounting firm

Auditor's Responsibilities for the Audit of Compliance

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

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the *State Compliance Audit Guide*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the County's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the County's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the *State Compliance Audit Guide*, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control over compliance. Accordingly, no such opinion is expressed.

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

Other Matters

The results of our auditing procedures disclosed instances of noncompliance, which are required to be reported in accordance with the *State Compliance Audit Guide* and which are described below. Our opinion on compliance is not modified with respect to these matters.

Government Fees – We noted three instances that fees were assessed at rates exceeding the approved rates or were incorrectly calculated based on the approved formulas. We recommend all fees charges should follow approved rates and formulas.

Views of Responsible Officials – We appreciate your recommendations. We have reviewed these items and will make necessary changes.

The County's response to the noncompliance findings identified in our audit is described above. The County's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

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 state compliance requirement 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 state compliance requirement 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 state compliance that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

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

Squirze : Company, PC

Orem, Utah May 27, 2025