FLORIDA STATE UNIVERSITY

BOARD OF TRUSTEES

Audit and Compliance Committee

MEETING MINUTES

Tuesday, February 24, 2026
1:30 p.m. – 2:37 p.m.
FSU Westcott Building Conference Room 214-D
222 South Copeland Street
Tallahassee, FL 32306

Attended (committee):	Trustee Peter Jones – Committee Chair Trustee Jim Henderson Chairman Peter Collins
Absent (committee):	None
Staff (committee):	Robert Large, Chief Compliance Officer Undra Baldwin, Chief Audit Officer
Other Trustees in Attendance:	Trustee Brian Murphy
Others in attendance:	Richard McCullough, FSU President Kyle Clark, Senior Vice President for Finance &Administration Michael Williams, Associate VP for Finance & Administration Renisha Gibbs, Assoc. VP for Human Resources/Chief of Staff for Finance & Administration Jonathan Fozard, Associate VP & Chief Information Officer Dawn Snyder, Assistant Dean and Chief Financial Officer Paul Douglas, Information Technology (IT) Audit Partner, EisnerAmper

I. Call to Order and Welcome

Trustee Peter Jones, Audit and Compliance Committee Chair

Committee Chair Peter Jones called the meeting to order at 1:30 p.m. and recognized that Trustee Henderson was present and that there was a quorum. Chairman Collins arrived later in the meeting.

II. Approval of Minutes

October 30, 2025, Meeting Minutes

Chair Jones moved to approve the committee meeting minutes from October 30, 2025. Trustee Henderson seconded the motion, and the minutes were approved unanimously by all present at the meeting.

III. Office of Audit and Advisory Services

Action Items for Consideration of Recommendation to the Board of Trustees

Mr. Undra Baldwin, Chief Audit Officer

A. <u>Action Item I</u>: Request for Approval: State University System Performance Audits: Performance-Based Funding Metrics

B. <u>Action Item II</u>: Request for Approval: State University System Performance Audits: Preeminent Research University Funding Metrics

Mr. Baldwin provided an overview of the Performance-Based Funding (PBF) Metrics and the Preeminent Research University Funding (PRF) Metrics used to conduct the audits. He reported that OAAS did not identify any internal control weaknesses or audit findings during the PBF and PRF Metrics reviews and that adequate controls and processes have been established to ensure the completeness, accuracy, and timeliness of data submissions and to affirm the representations in the Data Integrity Certification Letter.

Mr. Baldwin requested approval of the PBF and PRF audit results and requested the inclusion of both items on the full Board of Trustees (BOT) agenda as consent items. He also stated that, based on the audit results, approval should be given to the President and the BOT Chairman to proceed with signing the Data Integrity Certification Letter affirming the representations.

Chair Jones asked if there were any questions before the vote. There were none.

Chairman Collins moved to approve the Performance-Based Funding Metrics Audit Results and the Preeminent Research University Funding Metrics Audit Results, and to authorize the execution of the Data Integrity Certification Letter. Trustee Henderson seconded the motion, and the motion passed unanimously by all present at the meeting.

C. <u>Action Item III</u>: Request for Approval: New External Auditor for Florida Medical Practice Plan, Inc.

Next, Mr. Baldwin presented the Florida Medical Practice Plan (FMPP) request to hire Crowe, LLC under a 5-year term contract, and requested that this item be included as a consent item on the full board of Trustees' agenda.

Chair Jones asked if there were any questions before the vote. There were no questions.

Chairman Collins moved to approve the request to hire Crowe, LLC for a 5-year term contract. Trustee Henderson seconded the motion, and the motion was approved unanimously by all present at the meeting.

IV. Office of Audit and Advisory Services Informational Items and Updates

Mr. Undra Baldwin, Chief Audit Officer

Informational Items

- Status Update – FY2025-2026 Audits and Activities
  - Operational Audits
  - IT Audits

Mr. Baldwin provided a status update on the Operational and IT audits and activities, including those completed and those still in progress.

In Summary:

i. 4 Operational Audits have been completed
ii. 7 Operational Audits are in progress, including one Advisory Project
iii. 4 IT Audits have been completed
iv. 7 IT Audits are in progress, including one Advisory Project

Mr. Baldwin introduced Paul Douglas, a partner with EisnerAmper. Mr. Douglas discussed his focus on IT risk advisory, data privacy and security strategies, and IT compliance, serving clients in higher education, healthcare, public companies, and the technology industry. He noted that his team has supported OAAS by performing IT audits for the past 2.5 years.

Next, Mr. Baldwin expanded on the completed audits, focusing on the Northwest Regional Data Center (NWRDC) Audit Follow-Up, providing a timeline of events. On June 30, 2025, NWRDC reported that the audit findings had been fully remediated.

OAAS asked the Auditor General on Dec. 15, 2025, if they would rely on OAAS' retesting fieldwork and results and not perform any additional follow-up retesting. On Jan. 21, 2026, OAAS received an email from the AG IT Audit Manager stating that approval had been given regarding the reliance on OAAS' retesting of NWRDC audit findings.

V. Office of Compliance and Ethics Informational Items and Updates

Mr. Robert Large, Chief Compliance & Ethics Officer

A. External review follow-up
B. Ombuds update
C. Clery compliance update
D. Conflict of interest disclosure update
E. Foreign gifts and contracts reporting

A. External Review Follow-Up

Mr. Large provided an update on implementation efforts, including selection of a Policy Platform vendor. Compliance and Ethics Training Modules are in development and nearing release. Revisions to the Compliance and Ethics Program Plan are under review.

B. Ombuds Update

The Ombuds Annual Report was submitted to the President and Provost. Recommended policy and procedure updates for academic leadership were identified based on frequently encountered issues. The Ombuds Office continues to offer assistance to the Provost's Office and Faculty Development and Advancement in its review and any implementation of any recommendations.

C. Clery Compliance Update

Mr. Large reported on Clery Act compliance efforts, including crime statistics reporting, fire safety reporting, and emergency notifications. Comprehensive training was conducted on February 3–4 with campus partners and law enforcement.

D. Conflict of Interest Disclosure Update

Mr. Large provided an update on efforts to enhance the conflict-of-interest disclosure process and discussed compliance rates for both faculty and staff. The Committee briefly discussed strategies to improve compliance.

E. Foreign Gifts and Contracts Reporting

Mr. Large reported on the foreign gifts and contracts that were reported in the January 2026 cycle. The number of reportable contracts was similar to prior recent contract cycles. Mr. Large relayed that there are no reportable agreements involving foreign countries of concern.

VI. Open Forum for Trustees

Trustee Peter Jones, Chair

Chair Jones opened the floor for discussion of any additional items.

There were no further items for discussion.

VII. Adjournment

Trustee Peter Jones, Chair

There being no additional topics for discussion, Chair Jones adjourned the meeting at 2:37 p.m.