

Internal Audit Department
NeighborWorks® America

Audit Review of Project Reinvest Wind-Down

Project Number: NW.NI.WINDDOWN.2020

Audit Review of Project Reinvest Wind-Down

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July 1, 2021

To: NeighborWorks America Audit Committee

Subject: **Audit Review of Project Reinvest Wind-Down**

Attached is our draft audit report for Project Reinvest Wind-Down review. Please contact me with any questions you might have.

Thank you.

Frederick Udochi
Chief Audit Executive

Attachment

cc: M. Rodriguez
S. Ifill
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**Function Responsibility and Internal Control Assessment
Audit Review of Project Reinvest Wind-Down**

Business Function Responsibility	Report Date	Period Covered
National Initiatives	July 1, 2021	April 2018 – March 2020
Assessment of Internal Control Structure		
Effectiveness and Efficiency of Operations	Generally Effective¹	
Reliability of Financial Reporting	Not Applicable	
Compliance with Applicable Laws and Regulations	Not Applicable	

This report was reissued February 15, 2024 in accordance with a recommendation by the Government Accountability Office (GAO-23-105944, June 14, 2023).

¹ **Legend for Assessment of Internal Control Structure:** **1. Generally Effective:** The level and quality of the process is satisfactory. Some areas still need improvement. **2. Inadequate:** Level and quality of the process is insufficient for the processes or functions examined and require improvement in several areas. **3. Significant Weakness:** Level and quality of internal controls for the processes and functions reviewed are very low. Significant internal control improvements need to be made.

Executive Summary of Observations, Recommendations and Management Responses

Summarized Observation Risk Rating	Management Agreement with Observation (Yes/ No)	Internal Audit Recommendation Summary	Accept IA Recommendation (Yes/ No)	Management’s Response to IA Recommendation	Estimated Date of Implementation (Month/Year)	Internal Audit Comments on Management Response
<p>Observation 1: Measurement of Quality / Compliance:</p> <p>For client cases within the Financial² and Homeownership³ components, Internal Audit was unable to identify corresponding documentation that would adequately support Cured cases which management had initially considered as Non-Compliant. Additionally, in some instances client files⁴ were subjected to changes by grantees after they were notified by Management that these files were selected for quality control testing.</p> <p>Risk Rating: (b) (5)</p>	Yes	<p>Recommendation 1:</p> <p>For <i>future programs</i>, ensure that client case compliance and related Cures are efficiently evidenced and centrally documented to enable effective third-party verification. These records should be preserved in-line with the Corporation’s document retention policy and made easily accessible.</p>	Yes	<p>Management will ensure a centralized system of documenting all compliance records, whether managed by program or compliance staff and retain records in accordance with the Corporation’s document retention policy.</p> <p>With regard to the observation that client files were subjected to changes by grantees, the Event of Default and Remedies policy afforded grantees assistance to take corrective action and make changes, where appropriate. Hence, we do not concur with that observation.</p>	September 2021	<p>Our understanding is that the Events of Default and Remedies Policy (05 Dec 2016) allows grantees during the Cure Process to submit omitted client counseling Service-related⁵ documentation (created at the time that services were delivered).</p> <p>If Management will allow grantees to make certain “changes” then these allowances should be defined within the policy. Currently, the policy allows corrective action to address:</p>

² For 10 of the 18 sample Financial Capability client case files.

³ For 10 of the 12 sample Homeownership client case files.

⁴ For 8 of the 25 sample Financial Capability client case files.

⁵ Grantee Training Materials prepared by Management (13 Mar 2018), *Service-related Requirements* for Financial Capability component include the following documentation: Intake, Assessment, Financial Well-being Measurement, Credit Report, Budget, Action Plan, Financial Education, Referrals, Follow-up.

Summarized Observation Risk Rating	Management Agreement with Observation (Yes/ No)	Internal Audit Recommendation Summary	Accept IA Recommendation (Yes/ No)	Management's Response to IA Recommendation	Estimated Date of Implementation (Month/Year)	Internal Audit Comments on Management Response
						<ul style="list-style-type: none"> • Missing required documentation. • Missing required language. • Non-conformity with guidelines. <p>Therefore, any additional allowances within the provided 15-calendar days, to address "Findings" should be included within the policy.</p> <p>However, accepting documentation created⁶ only after the grantee was notified of quality control testing should be considered non-compliant.</p>

⁶ For example, (1) a grantee generated the required updated credit report on April 17, 2018, 11 calendar days after the grantee was notified that the file had been selected for quality control testing. The date of counseling was provided on February 16, 2018. (2) Grantee provided Updated Action Plan dated April 23, 2018, 17 calendar days after the grantee was notified that the file had been selected for quality control testing. The last date of counseling was provided on February 16, 2018.

Summarized Observation Risk Rating	Management Agreement with Observation (Yes/ No)	Internal Audit Recommendation Summary	Accept IA Recommendation (Yes/ No)	Management's Response to IA Recommendation	Estimated Date of Implementation (Month/Year)	Internal Audit Comments on Management Response
<p>Observation 2: Incommensurate Recapture Values:</p> <p>To promote adherence to quality standards, Project Reinvest implements Recaptures of funds, which act as financial penalties to grantees for identified Un-Cured Findings. However, the calculation approach is conceptually flawed in that resulting Recapture values are based only on the sample items that are deemed Un-Cured as opposed to projecting an Exception / Defect rate to the entire population. Thus, the penalties are not commensurate with the Estimated Value of Non-Compliance⁷ for each grantee.</p> <p>Risk Rating: (b) (5)</p>	No	<p>Recommendation 2:</p> <p>Management should state the methodology employed to include some rationale or justification to facilitate a common understanding to all affected grantees. The methodology should determine Recapture values that are commensurate with the Estimated Values of Non-Compliance. Management might also consider formulating alternative methods to substantively promote compliance with quality standards.</p>	No	For future programs, Management will state the recapture methodology and rationale employed for each respective grant opportunity when required.	September 2021	Internal Audit recommended projecting the value of non-compliance based on the sampling management conducts and due to the lack of any documented rationale of its methodology. The purpose of using a sampling technique is to draw conclusions about a population. However, if going forward, management will be stating their recapture methodology and rationale for future programs the corrective action meets the spirit of the recommendation.

⁷ Based on the grantee's percentage of client files with Un-Cured Findings multiplied by the dollar value of the grantee's Financial Capability Award.

Risk Rating Legend

Risk Rating: High

A serious weakness which significantly impacts the Corporation from achieving its corporate objectives, financial results, statutory obligations or that may otherwise impair the Corporation's reputation.

Risk Rating: Moderate

A control weakness which could potentially undermine the effectiveness of the existing system of internal controls and/or operational efficiency, integrity of reporting and should therefore be addressed.

Risk Rating: Low

A weakness identified which does not seriously detract from the system of internal control and or operational effectiveness/efficiency, integrity of reporting but which should nonetheless be addressed by management.

Management Responses to The Audit Review of: Project Reinvest Wind-Down		
# Of Responses	Response	Recommendation #
1	Agreement with the recommendation(s)	1
1	Disagreement with the recommendation(s)	2

Background:

In 2014, Bank of America reached a settlement with the U.S. Department of Justice, the States of California, Delaware, Illinois, Maryland, and New York, and the Commonwealth of Kentucky. In 2016, NeighborWorks America (NWA) received \$122.54 million from the proceeds of this settlement for the purpose of “providing housing counseling, neighborhood stabilization, foreclosure prevention or similar programs.”⁸

The Corporation, in turn, channeled most of these funds to nonprofit organizations and other qualified entities inside and outside the NeighborWorks network, to perform three underlying program activities:

- Homeownership: To support down-payment lending to low- and moderate-income individuals;
- Neighborhoods: To promote stabilization and revitalization in areas hit by foreclosure; and
- Financial Capability: To assist individuals to stabilize their finances, rebuild credit and establish savings.

NWA administered the program, including the oversight of the execution of these activities, the usage of funds and related quality and compliance monitoring.

Objectives:

The objective of this review was to assess the design and execution of the process to close out the Project Reinvest program.

Scope:

The scope of the review included the following aspects, among others:

- Project Reinvest Close-Out Plan; and
- Recaptures and related quality control activities under the program⁹.

Methodology:

The methodology for conducting the review comprised the following:

- Review of Project Reinvest policies and procedures;
- Budget Execution:
 - Review the distribution of awards;
 - Assess whether all funds received have been employed and accounted for (including those pertaining to Recaptures);
- Data Security: Review data security measures over information stored in any systems supporting Project Reinvest;

⁸ <http://inside.nw.org/NIAR/PR/Pages/default.aspx>

⁹ This element reflects a scope increase that followed a preliminary assessment of Recapture activities undertaken within the program.

- Data Retention: Verify that the Corporation’s data retention policies are adhered to information systems supporting Project Reinvest;
- Review Management’s reports on quality control supporting the program and verify consistency with detailed findings; and
- Evaluate samples of client files for Homeownership and Financial Capability components:
 - Cases that had a broad range of Findings / Exception¹⁰ types and outcomes;
 - Measure compliance against program’s documented requirements and in terms of their consistent application across grantees / cases.

Observations:

General Observation:

A key focus of Internal Audit’s review was on Management’s plan to wind down and close out the Project Reinvest program. This plan involved a wide range of activities, such as finalizing reporting on the execution of the program and its budget, deactivation of user access profiles on various information systems supporting the administration of the program, notifications to grantees of their respective close-outs from the program, and the contractual stipulation of requirements to vendors on the security and retention of program-related data that was processed and stored in supporting information systems. We are of the opinion that the wind-down close-out plan, was for the most part, successfully executed. We have, however, made note of some specific observations that are intended to be directed towards *future* similar programs and activities.

Observation 1 - Measurement of Quality / Compliance:

For client cases that Management initially considered Non-Compliant, Internal Audit was unable to identify corresponding documentation that would adequately support these cases as having been Cured:

a. Unsupported Cures:

Regarding the Financial Capability component, Management initially flagged 45% of the sample client files that it had examined, for program quality control purposes, as having had compliance findings/exceptions or defects¹¹. Of these flagged files, 88% were eventually determined by Management as having been Cured of Findings / Exceptions.

However, Internal Audit found that client files¹² that had been determined to have been Cured lacked required documentation¹³ that would support such action. Internal Audit also

¹⁰ For purposes of this review, the terms Exceptions, Findings, Non-Conformities and Defects are used interchangeably and represent occurrences that are Non-Compliant or that otherwise do not satisfy quality requirements.

¹¹ Referred to by the program as “Management’s Initial Findings”.

¹² For 10 of the 18 sample Financial Capability client files reviewed that had been determined by Management to have been Cured, Internal Audit found that there was insufficient evidence to support Management’s revised ascertainment.

¹³ Based on the program’s documented requirements, such as those laid out in the Funding Announcement, in training materials that differentiate Service-related vs. Non-Service-related requirements, and detailed

observed that some client files with the same types of Findings / Exceptions were treated differently by Management.

Similar observations were made with respect to the Homeownership component of the program, in that client files¹⁴ that had initially been flagged with compliance findings/exceptions did not have supporting documentation justifying the Cured state. Management indicated that this could be attributed to the temporary staff leaving the necessary documentation on their laptops when they departed at the close of the program.

b. Grantee Changes to Sample Files after Selection:

Although the program allows grantees to locate missing documentation related to Non-Service-related requirements, client files¹⁵ were subjected to substantive changes¹⁶ by grantees after they were notified by Management that these files had been selected for quality control testing. In some instances, these changes were made after Management had flagged the corresponding client files as initial Findings / Exceptions. Variations of these substantive changes included:

- i** Updated Credit Reports that were produced only after the grantee was notified that the corresponding client files had been selected for quality control review¹⁷;
- ii** Budgets that appear to have been updated after the files were flagged for Management Findings; and
- iii** Updated Action Plans and Cover Sheets¹⁸ that were modified or replaced during the Appeal / Cure period.

Recommendation 1:

Internal Audit recommends that, for *future programs* administered by the Corporation and subject to quality control processes, Management should ensure that its determinations and measurements of client case compliance (and related Cures) are efficiently evidenced and centrally documented to enable effective third-party verification. These records should be preserved in-line with the Corporation's document retention policy and made easily accessible.

Observation 2 - Incommensurate Recapture Values:

To promote adherence to quality standards, Project Reinvest implements Recaptures of funds, which act as financial penalties to grantees for identified Un-Cured Findings. However, the

interpretations that resulted in Management Findings or that resulted in actual Recaptures. These requirements are itemized in Attachment A.

¹⁴ For 10 of the 12 sample Homeownership case files that had been determined by Management to have been Cured, Internal Audit found that there was insufficient evidence to support Management's revised ascertainment.

¹⁵ Eight of the 25 sample Financial Capability client case files that were reviewed by Internal Audit.

¹⁶ In this context, these changes pertain to Service-related (as opposed to Non-Service-related) requirements.

¹⁷ While there was allowance within the program for clients to take to the counseling sessions credit reports that they might have had produced independently, the client files would have been expected to document such an event.

¹⁸ Management asserted that the provision of Cover Sheets in client files were optional, however, Internal Audit could not confirm that any such option was specified in any of the documented requirements or guidelines.

calculation approach is conceptually flawed in that resulting Recapture values are based only on the sample items that are deemed Un-Cured, as opposed to projecting an Exception / Defect rate to the entire population that had been billed by the given grantee. Thus, the dollar values of these penalties are not commensurate¹⁹ with the Estimated Value of Non-Compliance²⁰ for each grantee. The risk stemming from this flaw is augmented by an absence of any documented rationale or justification of its methodology.

Recommendation 2:

To the extent that Management intends to continue to employ Recaptures to promote compliance with quality standards, Internal Audit recommends that Management state the methodology employed to include some rationale or justification in order to facilitate a common understanding to all affected grantees. The current methodology should determine Recapture values that are commensurate with the Estimated Values of Non-Compliance. Management might also consider formulating alternative methods to substantively promote compliance with quality standards.

Conclusion:

The Project Reinvestment Wind-Down audit review identified opportunities for improvement in National Initiative's Quality Control & Compliance program. However, the other areas (i.e., data security, data retention, etc.) reviewed by Internal Audit were found to be properly executed as per the per the wind-down plan. On a final note, we would like to take this opportunity to extend our thanks to National Initiative's Quality Control & Compliance (QC&C) team and leadership for its excellent collaboration and support throughout this review.

¹⁹ The Recaptures were 2-3 orders of magnitude smaller actually and reflect an inverse (rather than positive) relationship. For example, grantee Unidos-US was awarded a \$1.6 million grant and 20% of its sample client cases (which could be projected to \$324,000 throughout its population of billed cases) were deemed defective by Management; yet Unidos-US was subjected to only \$572 in Recaptures.

²⁰ Based on the grantee's percentage of client files with Un-Cured Findings multiplied by the dollar value of the grantee's Financial Capability Award.

Attachment A

Recaptures and Quality Control:

One component inherent in the budget execution and close-out of the program is that of Recaptured funds. Such Recaptures of funds from grantees can occur either because grantees do not perform services for awarded number of program clients / beneficiaries or because of their non-compliance with the program's quality control requirements²¹. Non-compliance was measured by the quality control processes executed by National Initiative's Quality Control & Compliance (QC&C) and National Homeownership Program teams for the Financial Capability and Homeownership components, respectively.

Financial Capability Component:

The Financial Capability program awarded to grantees a certain number of counseling units (each representing a package of counseling work for a homeowner) for Tier 1A and Tier 1B services. It also trained the grantees on the requirements²² that the deliverables for Tier 1A and 1B, respectively, must satisfy, and the penalties for lack of such adherence. From a quality control standpoint, not only is it important for the grantee to demonstrate that the activities were performed at the time that services were delivered, but that supporting documentation existed from the time-of-service delivery.

After grantees deliver the services to homeowners, they periodically report²³ and invoice the Project Reinvest program, accordingly.

The QC&C unit randomly selects a sample of typically 10 Tier 1A and Tier 1B client cases from each grantee and notifies the grantee that it must present (within 15 days) the complete client files for review.

After the sample files are received, QC&C subjects each file to examination against numerous defined requirements / criteria established by the program. These requirements are shown in Attachment B.

Sample client files that are deemed in any way defective are treated as findings/exceptions and are reported to the grantees, who are then given five additional days to cure the defects, by presenting evidence, from their case files, that the requirements had actually been satisfied at the time-of-service delivery. If a grantee is not able to Cure the Defects for a given client file within

²¹ In this latter scenario, the Recapture amount is determined by summing the dollar value of all billed / reported cases that were identified as Non-Compliant.

²² The requirements are defined in the Funding Announcement, as well as training materials that were presented to grantees.

²³ To the Data Collection System and subject to various additional compliance requirements defined in the Funding Announcement.

that additional time period, then the program imposes a compliance Recapture for the value of that one unit (starting at \$150 and \$300 for Tier 1B and 1A, respectively²⁴).

Internal Audit compiled all documented program requirements for client files, from the Funding Announcement and training materials and confirmed with Management that they were complete. For each requirement, it also identified specific examples of how the requirement was enforced (e.g., through Recaptures) and the corresponding interpretation of the requirement in these circumstances.

Internal Audit reviewed a sub-sample of 25 client files (for which it then identified 74 underlying compliance observations²⁵) that had been examined by QC&C to assess the accuracy and consistency of its findings and final determinations. Initial and Final Management Findings were compiled from QC&C correspondence with the grantees. Based on its own review of a given client file, Internal Audit either preliminarily concurred (“Agreed”) with a given Management finding or “Disagreed” with it and documented its basis. Internal Audit presented its initial observations for all the files that it had reviewed to QC&C management for its input²⁶. Internal Audit then reassessed findings for all observations that QC&C commented upon, adjusted, and finalized its observations.

Homeownership Component:

For the Homeownership Component, Internal Audit referred to the Agreed-Upon Procedures provided to the contractors to perform the quality control activities.

Internal Audit reviewed Management’s findings against the evidence available in a sample of 20²⁷ borrower / homebuyer files and then presented its preliminary observations to QC&C. Upon receiving comments from QC&C, Internal Audit reassessed and finalized its observations.

²⁴These values are increased somewhat to cover Program Support (20%) and Operational Oversight (7%), as applicable.

²⁵ Any given FinCap client file must satisfy multiple requirements, as reflected in Attachment A.

²⁶This step was especially valuable in helping to ensure that Internal Audit was not omitting any important consideration.

²⁷ Eight of these sample homeowner files were excluded from testing because Internal Audit did not receive information (e.g., lists of eligible originators, mortgage lenders and Homebuyer Education Providers).

Attachment B

The Funding Announcement for Project Reinvest - Financial Capability includes the following “... **requirements for documentation** that Grantees (and, if applicable, Sub - grantees, Branches, Affiliates, and CCEs) must maintain in each clients file...” for each of the services pertaining to Tiers 1A and 1B, accordingly.

Project Reinvest Documentation Requirements

Tier	Activity	Funding Announcement: Counseling / Coaching	Funding Announcement: Counseling / Coaching File Documentation Required	Service-Related (or Not)
1A	Intake	“Collect key client information, such as: name, address, contact information and basic demographic information.”	“Documentation of the completed client Intake.”	Yes
1A	Authorization			No
1A	Privacy Policy			No
1A	Assessment	“Conduct a complete Assessment of the client’s needs and goals at the initial Tier 1A session.”	“Documentation of the completed Assessment may be a separate document OR Grantees may combine an Assessment and the Action Plan into one document, if that approach is aligned with their existing Financial Capability program design.”	Yes
1A	Financial Well-Being Measurement	“Administer CFPB Financial Well-Being Scale Questionnaire at the <i>initial</i> Tier 1A session.”	Completed CFPB Financial Well-Being Questionnaire (pre-counseling/coaching).	Yes
1A	Credit Report	“Review and discuss client’s credit report. <i>The counselor / coach may pull the credit report, or the client may bring in a recent copy of the credit report, that has been pulled within the last 60 days.</i> ”	“A copy of the client’s credit report.”	Yes
1A	Budget	Create a budget for the client.	“Documentation of client’s current	Yes

Tier	Activity	Funding Announcement: Counseling / Coaching	Funding Announcement: Counseling / Coaching File Documentation Required	Service-Related (or Not)
			budget, clearly indicating the client for whom the budget was created. ²⁸	
1A	Action Plan	“Create an Action Plan for the client. The Action Plan should clearly state the client’s goal(s), timeline, and action steps the client must take to help them achieve the goal(s). The Action Plan must also indicate the results of the Assessment made by the counselor/coach.”	“Documentation of an Action Plan that clearly states the client’s goal(s), timeline, and action steps the client must take to help them achieve the goal(s). The Action Plan must also indicate the results of the Assessment made by the counselor/coach.”	Yes
1A	Financial Education	“Provide financial education to the client, based on client’s needs and goals.”	“Documentation of the financial education provided, to include the topics, format and date provided. Notes from the Client Management System will suffice.”	Yes
1A	Referrals	“Provide referrals to resources that can help the client adhere to the Action Plan steps in order to reach stated financial goals (in cases where the client’s needs cannot fully be addressed by the Grantee; may not be applicable for all clients).”	“If applicable (if referrals were provided to the client) - a copy of the referral form provided to the client, or documentation of the referral(s) provided to the client.”	Yes
1A	Follow Up	“Follow-up with the client at least once following the Tier 1A session. This follow-up can be an email, phone call, face-to-	“Documentation of follow-up contact with the client including, at minimum, date and method of follow-up contact and response (or non-response, if applicable)	Yes

²⁸ Project Reinvest: Financial Capability does not require Grantees to collect documentation of income and expenses (e.g. pay stubs, tax returns, bank statements) from counseling/coaching clients as part of creating the budget; for NeighborWorks America’s purposes, a budget based on the client’s oral representation of their income and expenses is sufficient. However, Applicants whose existing financial capability program design does request such documentation from clients may continue to follow their own program design and organizational policies. Please also note that the budget developed for the client file must be the client’s current budget—i.e. what the client is actually earning in income and spending in expenses at the point in time of the counseling/coaching session—not a “spending plan”-style budget that illustrates what the client should earn/spend in order to meet financial goals (although counselors/coaches, at their discretion, may also work with clients to develop a spending plan in addition to the budget that is required for Project Reinvest).

Tier	Activity	Funding Announcement: Counseling / Coaching	Funding Announcement: Counseling / Coaching File Documentation Required	Service-Related (or Not)
		face meeting, or letter to client."	from client. Client file notes from the client management system is acceptable."	
1B	Authorization			No
1B	Assessment	"N/A; Assessment is completed during Tier 1A session."	"N/A; Assessment is completed during Tier 1A session."	Yes
1B	Financial Well-Being Measurement	"Administer CFPB Financial Well-Being Scale Questionnaire at the initial Tier 1B session."	"Completed CFPB Financial Well-Being Questionnaire (post-counseling/coaching)."	Yes
1B	Updated Credit Report	<p>"Review and discuss client's subsequent / updated credit report if the Action Plan established in Tier 1A includes working on credit.</p> <p>The counselor / coach may pull the credit report, or the client may bring in a recent copy of the credit report that was pulled subsequent to the credit report provided in the Tier 1A session."</p>	"Copy of the client's subsequent/updated report (from the same credit bureau as the initial report, if the counselor/coach pulled it), if the client established working on credit as one of their goals in their Tier 1A Action Plan."	Yes
1B	Updated Budget	"Create an updated budget for the client."	"Documentation of client's updated budget, clearly indicating the client for whom the budget was created. ²⁹ "	Yes
1B	Updated Action Plan	"Create a progress Action Plan for the client. This Action Plan must clearly state the progress the client has taken since the initial Action Plan was developed, indicate any new goals, new timelines and	"Documentation of an updated Action Plan that clearly states the progress the client has taken since the initial Action Plan was developed, as well as any new goals, new timelines and action steps the client must take to	Yes

²⁹ As with the Tier 1A budget, the Tier 1B budget must be the client's actual earnings in income and spending in expenses at the point in time of the Tier 1B counseling/coaching session. A budget based on the client's oral representation of their income and expenses is sufficient.

Tier	Activity	Funding Announcement: Counseling / Coaching	Funding Announcement: Counseling / Coaching File Docu- mentation Required	Service-Related (or Not)
		action steps the client must take to further help them achieve the existing or new goal(s).	further help them achieve the existing or new goal(s)."	
1B	Financial Education	N/A	N/A	Yes
1B	Referrals	"Provide updated referrals to resources, as needed (in cases where the client's needs cannot fully be addressed by the Grantee; may not be applicable for all clients)."	"If applicable (if referrals were provided to the client) - a copy of the referral form provided to the client, or documentation of the referral(s) provided to the client."	Yes
1B	Follow Up	"Follow up with client at least once following the Tier 1B session. This follow-up can be an email, phone call, face-to-face meeting or letter to client."	"Documentation of follow-up contact with the client including, at minimum, date and method of follow-up contact and response (or non-response, if applicable) from client. Client file notes from the client management system is acceptable."	Yes