FORM SF-SAC XX/XX/2016 U.S. Dept. of Comm Econ a	nd Stat Admin - LLS Consus Rureau									
ORM SF-SAC XX/XX/2016 U.S. Dept. of Comm Econ and Stat Admin U.S. Census Bureau OMB No. 0348-0057 ACTING AS COLLECTING AGENT FOR OFFICE OF MANAGEMENT AND BUDGET										
	Form for Reporting on									
	MENTS AND NON-PROFIT ORGANIZATIONS									
	ng on or after December 26, 2014									
PART I: GENERAL INFORMATION	REPORT ID: VERSION:									
1. Fiscal Period End Date	2. Type of Uniform Guidance Audit									
//	☐ Single Audit									
MM / DD / YYYY	Program-specific audit									
3. Audit Period Covered										
Annual										
Biennial										
Other- If Other, Number of months:										
4. Auditee Identification Numbers										
a. Auditee Employer Identification Number (EIN)	d. Auditee Data Universal Numbering System (DUNS) Number									
·										
b. Are multiple EINS covered in this report?	e. Are multiple DUNS covered in this report?									
Yes If Yes, complete Part I, Item 4c:	Yes If Yes, complete Part I, Item 4f:									
Auditee EIN Continuation Sheet	Auditee DUNS Continuation Sheet.									
No 5. Auditee Information	No									
a. Auditee name	Primary Auditor Information Audit Firm/Organization Name									
a. Additee Hallie	a. Addit Fiffin Organization Name									
b. Auditee address (Number and street)	b. Audit Firm/Organization EIN									
arriagines and ess (riamizer and esteet)	-									
	c. Audit Firm/Organization address (Number and street)									
Auditee City	Audit Firm/Organization City									
Auditee State	Audit Firm/Organization State									
Auditee ZIP Code	Audit Firm/Organization ZIP Code									
c. Auditee Contact Name	d. Primary Auditor Contact Name									
Availage Court of Title	Dailes - ma Avadita a Carata at Titala									
Auditee Contact Title	Primary Auditor Contact Title									
d. Auditee Contact Telephone	e. Primary Auditor Contact Telephone									
a. Additee contact relephone	c. Timary Additor Contact Telephone									
e. Auditee Contact Fax	f. Primary Auditor Contact FAX									
and the contact have	The state of the s									
f. Auditee Contact E-mail	g. Primary Auditor Contact E-mail									
	7. Was a secondary auditor used?									
	Yes- If Yes, Complete Part I, Item 8 on the									
	Secondary Auditor Contact Information Sheet									
	□ No									

FORM SF-	DRM SF-SAC REPORT ID: VERSION:																
Part II: I	art II: FEDERAL AWARDS													Part III: INFORMATION FROM THE SCHEDULE OF FINDINGS AND QUESTIONED COSTS			
1. FEDERA															INFORMA [*] FINDINGS	PROGRAM FION AND A	AUDIT
	(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n)														(a)	(b)	(c)
	CFDA N	umber						Loan, Guara			Federal Award Source				MAJOR P	ROGRAM	
Row Number (Auto-Generated)	Federal Awarding Agency Prefix 1	CFDA Three Digit Extension ²	Additional Award Identification³(Optional)	Name of Federal program	Amount Expended (\$)	Cluster Identification (N, R, S, #, X) 4	Federal Program Total or Cluster Total ⁵	Loan/Loan Guarantee 홋	If column (h) is "Y", the End of the Audit Period Outstanding Loan Balance ⁶	Direct Award \$\frac{2}{5}	If column (j) is "N", list Name of Pass-through Entity	If column (j) is "N", list identifying number assigned by the Pass-through Entity	Federal Award Passed Through to Subrecipients	If column (m) is "V", Provide Total Amount Passed Through	Major Program (Y.)	If column (a) is "Y", type of audit report on Major Program ⁷	Number of Audit Findings
								(1714)		(1714)			(1/11)		(1/11)		
															-		
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			1 1														
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							A										
TOTAL FEE	DERAL AWA	RDS EXPEND	DED	\rightarrow	\$.00	1											

See Appendix I of instructions for valid Federal Awarding Agency two-digit prefixes.

² Three digit CFDA extensions listed in the Catalog of Federal Domestic Assistance (CFDA). If the extension is unknown, see instructions.

³ Used to collect other data used to identify the award which is not a CFDA number, Federal Award Identification Number (FAIN), or Procurement Instrument Identifier (e.g., program year, contract number).

⁴ Cluster Identifier (N = No, R = Research & Development, S = Student Financial Aid, # = 5-Digit Cluster Number, X = State)

⁵ The system will provide total Federal awards expended for each Federal program by summing the individual CFDA lines which have the same CFDA number.

⁶ Used to collect the loan or loan guarantee (loan) balances outstanding at the end of the audit period for loan programs as identified in Part III, Item 5(j) (2 CFR 200.510(b)(5))

If major program is marked "yes," enter only one letter (U = Unmodified opinion, Q = Qualified opinion, A = Adverse opinion, D = Disclaimer of opinion) corresponding to the type of audit report in the adjacent box. If major program is marked "No," leave the type of audit report box blank.

Form SF-SAC	REPORT II	D: VERSION:
Part III: INFORMATION FROM THE SCHEDULE OF FINDINGS AN	ND QUEST	TIONED COSTS - Continued
2. FINANCIAL STATEMENTS		
a. Financial Statement Information		
i. What were the results of the auditor's determination of whether th		
were prepared in accordance with generally accepted accounting prin	nciples (GA	AAP):
Mark either: Unmodified opinion OR ANY COMBINATION OF:	- Ousli	fied eninion
Unmodified opinion OR ANY COMBINATION OF:		fied opinion rse opinion
		aimer of opinion
If the financial statements of the auditee were prepared in accordance		•
Financial statements were not prepared in accordance w		
in accordance with a special purpose framework.		out were propured
ii. What was the special purpose framework? (Select only one)		
Cash basis		
☐ Tax basis		
Regulatory basis		
Contractual basis		
Other basis		
iii. Was the special purpose framework used a basis of accounting		
required by state law?	Yes	■No
iv. What was the auditor's opinion on the special purpose frameworl		
Unmodified opinion OR ANY COMBINATION OF:		fied opinion
		rse opinion
	□ Discla	aimer of opinion
b. Is a "going concern" emphasis-of-matter paragraph included in	□Vaa	□Ne.
the auditor's report?	Yes	No
c. Is a significant deficiency in internal control disclosed?	Yes	No
c. is a significant deficiency in internal control disclosed:		110
d. Is a material weakness in internal control disclosed?	Yes	No
e. Is a material noncompliance disclosed?	Yes	No
	_	_
3. FEDERAL PROGRAMS		
a. Does the auditor's report include a statement that the auditee's		
financial statements include departments, agencies, or other		
organizational units expending \$750,000 or more in Federal awards		
that have separate Uniform Guidance audits which are not included		
in this audit? (AICPA Audit Guide)		
	☐ Yes	□No
b. What is the dollar threshold used to distinguish Type A and Type		
B programs? (Uniform Guidance § 200.518(b)(1))	\$	
c. Did the auditee qualify as a low-risk auditee?	□ Vos	□\la
(Uniform Guidance § 200.520)	Yes	No
 d. Indicate which Federal Agency(ies) have prior audit findings shown 	in the Su	mmary Schedule of Prior Audit
Findings related to <u>direct</u> funding. <i>Mark (X) all that apply or None</i> .	i iii tile Jul	minary Schedule of Frior Addit
ranago related to direct randing. Wark (N) an that apply of None.		
If an agency has been selected (see the full list of agencies in Append		**
list in this section. For example, if 39. General Services Administration		
of Art, and 07. Office of National Drug Control Policy are selected, the	e list will a	ppear in this section as "39, 99
68, 07".		

FOR	VI SF-	SAC							REP	ORT IE) :	VERS	ION:	
Part III: INFORMATION FROM THE SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued														
4. FEDERAL AWARD AUDIT FINDINGS														
Schedule of Findings and Questioned Costs														
	(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l)											(m)	(n)	
Internal														
								liance		l Audit				
	Π		<u> </u>				Audit F	indings	FINO	ings				
Repeat Audit Findings ² Other Audit Findings ² Significant Deficiency Material Weakness Other Matters Other Matters Other Matters Other Matters Type(s) of Compliance (Optional) Federal Awarding Agency Prefix Audit Findings Fi											If column (m) is "Y", provide Prior Year Audit Finding Reference Numbers			
Thes	e colu	ımns are	populate	d automatically from Part II, Item 1,										
colur	nns a	, b, c, and	d d on rov	vs with findings.										
For e	ach a	ward wit	h findings	s, one row is created for each finding										
repo	rted o	on Part II	l, Item 1c.											
This	page	cannot b	e used if r	no findings are reported on Part III, Item										
1c.		- 3												
<u> </u>														
-														
 														
				f compliance requirement(s) that apply to audit find CFR 200.516(a)) reported for each Federal program.		nt deficiency (including ma	terial w	eaknes	ses,), qu	estione	d costs,	fraud,		
A. <i>A</i>	ctivitie	s allowed or	unallowed	F. Equipment and real propert	y management	K. Reserved								
		le costs/cost	principles	G. Matching, level of effort, ea	armarking	L. Reporting								
C. C	ash ma	nagement		H. Period of performance (or a	availability) of Federal funds	M. Subrecipient monitoring								
	eserved			Procurement and suspension	n and debarment	N. Special tests and provisions								
E. Eligibility J. Program income P. Other														
² The	re are 9	valid combi	inations of "C	Compliance Audit Findings," "Internal Control Audit Findings	s," and "Other Audit Findings" for each	ederal program with audit fin	dings. (S	See chart	in instru	ctions - I	tem 8)			

FORM SF-SAC	REPORT ID: VERSION:
Part IV: CERTIFICATIONS	
1. Auditee Certification Statement	2. Auditor Statement
This is to certify that, to the best of my knowledge and belief the	The data elements and information included in this form are limited to
following is true and correct. The auditee has:	those prescribed by the Uniform Guidance. Except for Part II, Items 1 and
 ensured that the Form SF-SAC and reporting package does not 	2, Part III, Item 3(d), and, when audit findings are reported, Part III, Items
include protected personally identifiable information (Protected PII) (2	4(a)-4(c), and Part IV, the information included in Parts II, III and IV of this
CFR 200.79 and 2 CFR 200.82), or if it does, the Federal Audit	form was transferred from the auditor's report(s) for the period described
. ,,	in Part I, Items 1 and 3, and is not a substitute for such reports. The auditor
this Form SF-SAC and the audit report;	has not performed any auditing procedures since the date of the auditor's
ensured that the Form SF-SAC and reporting package does not	report(s). A copy of the reporting package required by the Uniform
include business identifiable information (BII) as defined below*, or if it	Guidance, which includes the complete auditor's report(s), is available in
does, the Federal Audit Clearinghouse is authorized to publicly post all	its entirety from the auditee at the address provided in Part I of this form.
information contained in this Form SF-SAC and the audit report;	As required by the Uniform Guidance, the information in Parts II, III and IV, excluding Part II, Items 1 and 2, Part III, Items 4(a)-4(c), and Part IV of this
	form was entered in this form by the auditor based on information
complied with the requirements of 2 CFR Part 200 specific to the	included in the reporting package. The auditor has not performed any
auditee;	additional auditing procedures in connection with the completion of this
prepared the data in this form in accordance with 2 CFR Part 200 and the accompanying instructions to this form;	form.
included all information required to be reported in this form in its	
entirety and such information is accurate and complete;	
entirety and saem information is accurate and complete,	
engaged an auditor to perform an audit in accordance with 2 CFR	
Part 200.500 for the period described in Part I, Items 1 and 3;	
ensured the auditor has completed such audit and presented a	
signed audit report which states that the audit was conducted in	
accordance with the provisions of the Uniform Guidance; and	
authorized the FAC to make the Form SF-SAC and reporting	
package publically available on a Web site	
*DUi-to	rcial or financial information obtained from a person [that is] privileged or confidential." (5 U.S.C.552(b)(4)).
	onfined to records that reveal "basic commercial operations" but includes any records or information in which
the submitter has a commercial interest, and can include information submitted by a nonprofit entity.	
Auditee Certification	Auditor Signature
(Date of Electronic Signature)	(Date of Electronic Signature)
Name of certifying official	
Title of certifying official	
The or certifying official	

FORM SF-SAC	REPORT ID: VERSION:
Part IV: CERTIFICATIONS	
1. Auditee Certification Statement	2. Auditor Statement
This is to certify that, to the best of my knowledge and belief the	The data elements and information included in this form are limited to
following is true and correct. The auditee has:	those prescribed by the Uniform Guidance. Except for Part II, Items 1 and
qualified as an Indian Tribe or Tribal Organization (as defined in	2, Part III, Item 3(d), and, when audit findings are reported, Part III, Items
the Indian Self-Determination, Education and Assistance Act (ISDEAA),	4(a)-4(c), and Part IV, the information included in Parts II, III and IV of this
25 U.S.C 450b(I)) and opts not to authorize the FAC to make the	form was transferred from the auditor's report(s) for the period described
reporting package publically available (tribes selecting this option must	in Part I, Items 1 and 3, and is not a substitute for such reports. The auditor
submit the reporting package to pass-through entities as described in 2	has not performed any auditing procedures since the date of the auditor's
CFR 200.512(b)(2));	report(s). A copy of the reporting package required by the Uniform
	Guidance, which includes the complete auditor's report(s), is available in
ensured that the Form SF-SAC and reporting package does not	its entirety from the auditee at the address provided in Part I of this form.
include protected personally identifiable information (Protected PII) (2	As required by the Uniform Guidance, the information in Parts II, III and IV,
CFR 200.79 and 2 CFR 200.82), or if it does, the Federal Audit	excluding Part II, Items 1 and 2, Part III, Items 4(a)-4(c), and Part IV of this
Clearinghouse is authorized to publicly post all information contained in	form was entered in this form by the auditor based on information
the Form SF-SAC;	included in the reporting package. The auditor has not performed any
ensured that the Form SF-SAC and reporting package does not	additional auditing procedures in connection with the completion of this
include business identifiable information (BII) as defined below*, or if it	form.
does, the Federal Audit Clearinghouse is authorized to publicly post all	
information contained in the Form SF-SAC;	
complied with the requirements of 2 CFR Part 200 specific to the	
auditee;	
prepared the data in this form in accordance with 2 CFR Part 200	
and the accompanying instructions to this form;	
included all information required to be reported in this form in its	
entirety and such information is accurate and complete;	
engaged an auditor to perform an audit in accordance with 2 CFR	
Part 200.500 for the period described in Part I, Items 1 and 3;	
ensured the auditor has completed such audit and presented a	
signed audit report which states that the audit was conducted in	
accordance with the provisions of the Uniform Guidance; and	
authorized the FAC to make the Form SF-SAC publically available	
on a Web site	
*BII consists of information defined in the Freedom of Information Act (FOIA) as "trade secrets and comme	rcial or financial information obtained from a person [that is] privileged or confidential." (5 U.S.C.552(b)(4)).
This information is exempt from automatic release under the (b)(4) FOIA exemption. "Commercial" is not or	onfined to records that reveal "basic commercial operations" but includes any records or information in which
the submitter has a commercial interest, and can include information submitted by a nonprofit entity.	
	A disease control
Auditee Certification	Auditor Signature (Date of Electronic Signature)
(Date of Electronic Signature) Name of certifying official	(Dute of Electronic Signature)
ivanie of certifying official	
Title of certifying official	
Thie of certifying official	

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	ART I, ITEN							
ist the mul	ltiple Employ	er Identific	ation Nur	nbers (Ell	Ns) cover	ed in this	report.	
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FORM SF-SA	AC .			REPOR	T ID:	VER	SION:		
PART I, Item	ո 4f. AUԸ	DITEE D	UNS CO	DNTINU	JATION	SHEET			
(FROM PAR	T I, ITEM	l 4e)							
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RM SF-SAC REPORT ID: VERSION:												
art I, Item 8, SECONDARY AUDITORS' CONTACT INFORMATION												
Auditor Firm name (a)	Auditor EIN (b)	Auditor address (Number and street)	City (d)	State (e)	ZIP (f)	Contact Name (g)	Title (h)	Auditor contact telephone (i)	Auditor contact FAX (j)	Auditor contact E-mail (k)		
				V								
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