FORM SF-SAC 06/02/2016 U.S. Dept. of 0	Comm Econ and Stat Admin U.S. Census Bureau
OMB No. 0348-0057: Approval Expires XX/XX/XXXX ACTING AS COLLECTING AGENT	FOR OFFICE OF MANAGEMENT AND BUDGET
Data Co	llection Form for Reporting on
Audits of States, Local Governments, Indian T	ribes, Institutions of Higher Education and Nonprofit Organizations
For Fiscal Periods	Beginning 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	□ No
5. Auditee Information	6. Primary Auditor Information
a. Auditee name	a. Audit Firm/Organization Name
b. Auditee address (Number and street)	b. Audit Firm/Organization EIN
	·_
	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
- Auditor Cristiant Name	d Drives and Auditor Courts at Name
c. Auditee Contact Name	d. Primary Auditor Contact Name
Auditee Contact Title	Drimary Auditor Contact Title
Additee Contact Title	Primary Auditor Contact Title
d. Auditee Contact Telephone	e. Primary Auditor Contact Telephone
a. Additee contact relephone	c. Trimary Additor Contact relephone
e. Auditee Contact E-mail	f. 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-SAC REPORT ID:													VERSION:					
Part II:															FROM TH	INFORMA HE SCHEDU S AND ONED COST	ULE OF	
1. FEDER	FEDERAL AWARDS EXPENDED DURING FISCAL YEAR															PROGRAM	AUDIT	
	Londition															(a)	(b)	(c)
	CFDA N	lumber							Loan, Guara			Federal Award Source				MAJOR P	ROGRAM	
Row Number (Auto-Generated)	Federal Awarding Agency Prefix ¹	CFDA Three Digit Extension ²	Additional Award Identification	Name of Federal Award	Amount Expended (\$)	Cluster Name	Federal Program Total ⁴	Cluster Total ⁵	Loan/Loan Guarantee 홋	If column (i) is "Y", the End of the Audit Period Outstanding Loan Balance ⁶	Direct Award	If column (k) is "N", list Name of Pass-through Entity	If column (k) is "N", list identifying number assigned by the Pass-through Entity, if assigned ⁷	Federal Award Passed Through to Subrecipients	If column (n) is "v", Provide Amount Passed Through	Major Program (홋	If column (a) is "Y", type of audit report on Major Program ⁸	Number of Audit Findings
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TOTAL FE	DERAL AWA	RDS EXPEN	DED		\$.00													
					٠.00													

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 (e.g., program year, contract number). This item is optional if Item 1(b) has a valid CFDA Extension.

⁴ The system will provide total Federal Awards expended for each Federal program by summing the individual CFDA lines which have the same CFDA number.

⁵ The system will provide total Federal awards expended for each cluster of programs by summing the individual CFDA lines which have the same Cluster Name. If the program is not part of a cluster, select "N/A", otherwise select the cluster name.

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 II, Item 1(i) (2 CFR 200.510(b)(5))

If no identifying number was assigned, enter "N/A".

If major program is marked "Yes," enter only one letter (U = Unmodified opinion, Q = Qualified 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 ID: VERSION:
Part III: INFORMATION FROM THE SCHEDULE OF FINDINGS AT	ND QUESTIONED 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 pri	inciples (GAAP):
Select any combination:	
Unmodified opinion	Qualified opinion
	Adverse opinion
	Disclaimer of opinion
If the financial statements of the auditee were prepared in accordanc Financial statements were not prepared in accordance w	
in accordance with a special purpose framework.	vith GAAP but were prepared
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 or tribal law?	Yes No
iv. What was the auditor's opinion on the special purpose framewor	
Unmodified opinion	Qualified opinion
	Adverse opinion
	Disclaimer of opinion
b. Is a "going concern" emphasis-of-matter paragraph included in	
the auditor's report?	Yes No
a la a significant deficiency in internal control disclosed?	□Yes □No
c. Is a significant deficiency in internal control disclosed?	Yes No
d. Is a material weakness in internal control disclosed?	Yes No
u. 13 d 11.d.cd. 11.d.c	
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))	\$
and the second s	
c. Did the auditee qualify as a low-risk auditee?	Yes No
(Uniform Guidance § 200.520)	Les Lvo
d. Indicate which Federal Agency(ies) have prior audit findings shown	n in the Summary Schedule of Prior Audit
Findings related to direct funding. <i>Mark (X) all that apply or None</i> .	Thir the Summary Schedule of Thor Addit
Thrombo Terated to arrest randing. Wark fry an indicapply of None:	
If an agency has been selected (see the full list of agencies in Append	dix I of the instructions), it will appear in a
list in this section. For example, if 39. General Services Administration	n, 99. Miscellaneous, 68. National Gallery
of Art, and 07. Office of National Drug Control Policy are selected, the	e list will appear in this section as "39, 99,
68, 07".	

FORI	DRM SF-SAC REPORT ID: VERSION									ION:				
Part III: INFORMATION FROM THE SCHEDULE OF FINDINGS AND QUESTIONED COSTS - Continued 4. FEDERAL AWARD AUDIT FINDINGS														
4. FI	DER	AL AWAR	D AUDIT											
					dule of Findings and Questi	oned Costs (f)								
	(a)	(b)	(c)	(d)	(e)	(g)	(h)	(i)	(j)	(k)	(I)	(m)	(n)	
								Internal						
							•	Compliance Control Audit Audit Findings ² Findings ²						
Row Number from Part II, Item 1	Federal Awarding Agency Prefix	CFDA Three Digit Extension	Additional Award Identification (Optional)	Name of Federal program	Audit Finding Reference Number (YYYY-###)	Type(s) of Compliance Requirement(s) ¹	Other Matters		Material Weakness	Significant Deficiency	Other Audit Findings ²	Questioned Costs	Repeat Audit Finding from Prior Year 🔶	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,										
colui	nns a	, b, c, and	d d on rov	ws with findings.										
For e	ach a	ward wit	h finding	s, one row is created for each finding										
			, Item 1c											
	page	cannot b	e used if	no findings are reported on Part III, Item										
1c.			ı											
<u> </u>														
and o A. A B. A C. C D. R	ther ite activitie Illowab	ems report s allowed or le costs/cost nagement	ed under 2 unallowed	of compliance requirement(s) that apply to audit finc CFR 200.516(a)) reported for each Federal program. F. Equipment and real propert G. Matching, level of effort, ea H. Period of performance (or a I. Procurement and suspension J. Program income	y management Irmarking Ivailability) of Federal funds	nt deficiency (including ma K. Reserved L. Reporting M. Subrecipient monitoring N. Special tests and provision P. Other		eaknes	 ses,), qu	estione	ed costs	, fraud,		
² The	re are 9	valid combi	nations of "C	Compliance Audit Findings," "Internal Control Audit Findings	s," and "Other Audit Findings" for each	Federal program with audit fin	dings. (S	ee chart	in instru	ctions - I	tem 4k)			

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. The information in Part II of
ensured that the Form SF-SAC and reporting package does not	this form is the responsibility of the auditee and is based on information
include protected personally identifiable information (Protected PII) (2	included in the reporting package required by the Uniform Guidance. The
CFR 200.79 and 2 CFR 200.82), or if it does, the Federal Audit	information included in Part III of this form, except for Part III Item 2(a)(iii),
Clearinghouse is authorized to publicly post all information contained in	Item 3(d), and Items 4(a) – (d) (when there are audit findings), was
this Form SF-SAC and the audit report;	transferred by the auditor from the auditor's report(s) for the period
ensured that the Form SF-SAC and reporting package does not	described in Part I, Items 1 and 3, and is not a substitute for such reports.
include business identifiable information (BII) as defined below*, or if it	The auditor has not performed any auditing procedures since the date of
does, the Federal Audit Clearinghouse is authorized to publicly post all	the auditor's report(s) or any additional auditing procedures in connection
information contained in this Form SF-SAC and the audit report;	with the completion of this form. A copy of the reporting package required
	by the Uniform Guidance, which includes the complete auditor's report(s),
complied with the requirements of 2 CFR Part 200 Subpart F	is required to be made available by the FAC on the FAC web site. It is also
specific to the auditee;	available in its entirety from the auditee at the address identified in Part I
prepared the data in this form in accordance with 2 CFR Part 200	of this form and on the FAC web site.
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 issued the	
signed audit report required by 200.515 which states that the audit has	
conducted in accordance with the audit requirements of the Uniform	
Guidance; and	
authorized the FAC to make the Form SF-SAC and reporting	
package publicly 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 co	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	

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. The information in Part II of
qualified as an Indian Tribe or Tribal Organization (as defined in	this form is the responsibility of the auditee and is based on information
the Indian Self-Determination, Education and Assistance Act (ISDEAA),	included in the reporting package required by the Uniform Guidance. The
25 U.S.C 450b(I)) and opts not to authorize the Federal Audit	information included in Part III of this form, except for Part III Item 2(a)(iii),
Clearinghouse to make the reporting package publicly available (tribes	Item 3(d), and Items 4(a) – (d) (when there are audit findings), was
selecting this option must submit the reporting package to pass-	transferred by the auditor from the auditor's report(s) for the period
through entities as described in 2 CFR 200.512(b)(2));	described in Part I, Items 1 and 3, and is not a substitute for such reports.
	The auditor has not performed any auditing procedures since the date of
ensured that the Form SF-SAC and reporting package does not	the auditor's report(s) or any additional auditing procedures in connection
include protected personally identifiable information (Protected PII) (2	with the completion of this form. A copy of the reporting package required
CFR 200.79 and 2 CFR 200.82), or if it does, the Federal Audit	by the Uniform Guidance, which includes the complete auditor's report(s),
Clearinghouse is authorized to publicly post all information contained in	is required to be made available by the FAC on the FAC web site. It is also
the Form SF-SAC;	available in its entirety from the auditee at the address identified in Part I
ensured that the Form SF-SAC and reporting package does not	of this form and on the FAC web site.
include business identifiable information (BII) as defined below*, or if it	
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 Suppart F	
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 issued the	
signed audit report required by 200.515 which states that the audit has	
conducted in accordance with the audit requirements of the Uniform	
Guidance; and	
authorized the FAC to make the Form SF-SAC publicly available	
on a Web site	
*BIL 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)).
	onfined to records that reveal "basic commercial operations" but includes any records or information in which
	omined 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	
The second secon	
Title of certifying official	

FORM:	FORM SF-SAC REPORT ID: VERSION:												
PART I,	PART I, Item 4c. AUDITEE EIN CONTINUATION SHEET												
	PART I												
List the r	nultiple E	mployer	Identifica	tion Nun	nbers (EIN	ls) covere	ed in this	report.					
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	FORM SF-SAC REPORT ID: VERSION:												
PART I, Item 4f. AUDITEE DUNS CONTINUATION SHEET													
(FROM	1 PART	I, ITEM	4e)										
List the	multip	le DUNS	covere	d in this	report	•							
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FORM SF-SAC	RM SF-SAC REPORT ID: VERSION:												
Part I, Item 8, SECONDARY AUD	art I, Item 8, SECONDARY AUDITORS' CONTACT INFORMATION												
Auditor Firm name (a)	Auditor EIN (b)	Auditor address (Number and street) (c)	City (d)	State (e)	ZIP (f)	Contact Name (g)	Title (h)	Auditor contact telephone (i)	Auditor contact FAX (j)	Auditor contact E-mail (k)			