

# PRB Commercial Audit Reporting Portal Screenshots

Health and Human Services

HRSA

Health Resources & Services Administration

Username: sadafmakhzan+1@gdit.com.audit.usat  
Last Login Date: 2023-07-12T17:03:33.000Z

Edit Two-Factor Authentication Preference

Logout

Commercial Audit

Welcome to the PRB Commercial (For-Profit Entities) Audit Reporting Portal. Your reports are listed below. Reports can be viewed by clicking the fiscal year.

Create a new Commercial Audit

In-progress Reports

Submitted Reports

Canceled Reports

| Fiscal Year | Status      | Provider | Created Date             |                         |
|-------------|-------------|----------|--------------------------|-------------------------|
| FY2021      | In Progress | Testing1 | 11/13/2023, 03:20 PM EST | Cancel Audit Submission |

Contact [ProviderReliefContact@hrsa.gov](mailto:ProviderReliefContact@hrsa.gov) for any questions.

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U.S. Department of Health and Human Services

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Italiano

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한국어

OMB Control Number: 0906-XXXX  
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## PRB Commercial Audit Reporting Portal Screenshots

← ↻ https://hrsac19--uat.sandbox.my.site.com/prbcommercialauditreporting/s/commercial-audit-flow?auditid=a0Z3R0000018VgWUAU&acctId=0013R000000CLYHCQA5 🔍 🗑️ A ☆ 📧 🔄 📄 ☆ 📁 🔄 ...

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### Commercial Audit Submission

#### General Information

Note: Fields marked with asterisk (\*) are required.

\* Fiscal Year ⓘ  
FY2021 ▼

\* Fiscal Year Start Date ⓘ  
Nov 5, 2022 📅

\* Fiscal Year End Date ⓘ  
Nov 6, 2022 📅

\* Type of Audit ⓘ  
Financial related audit ▼

\* Audit Period Covered ⓘ  
Biennial ▼

\* TIN Number ⓘ  
888555000

\* Type Of TIN ⓘ  
TIN ▼

\* Multiple TINs Covered ⓘ  
No ▼

DUNS Number ⓘ

\* Multiple DUNS Numbers Covered? ⓘ  
No ▼

UEI Number ⓘ

\* Are multiple UEI numbers covered in this? ⓘ  
No ▼

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## PRB Commercial Audit Reporting Portal Screenshots

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**Health and Human Services**  
**HRSA**  
Health Resources & Services Administration

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**Commercial Audit Submission**

**Auditee Contact Information**

Note: Fields marked with asterisk (\*) are required.

\* Auditee Name  
Sadaf

\* Auditee Address  
Makhzan

\* Auditee Contact Name  
Sadaf

\* Auditee Contact Title  
Tester

\* Auditee Contact Telephone ⓘ  
7039011633

\* Auditee Contact E-mail ⓘ  
sadaf.makhzan@gdit.com

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**Commercial Audit Submission**

**Auditor Contact Information**

Note: Fields marked with asterisk (\*) are required.

\* Primary Auditor - Audit Firm Name

\* Primary Auditor - Audit Firm EIN

\* Primary Auditor - Audit Firm Address

\* Primary Auditor - Contact Name

\* Primary Auditor - Contact Title

\* Primary Auditor - Contact Telephone 📞

\* Primary Auditor - Contact E-mail 📧

\* Was a secondary auditor used?

No

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← ↻ 🔍 PRB Commercial Audit Reporting Portal is only compatible with the latest stable desktop version of Edge, Chrome and Mozilla Firefox.



# Health and Human Services

## HRSA

Health Resources & Services Administration

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### Commercial Audit Submission

#### Federal Awards

| List of Federal Awards      |                          |                              |                                 |                 |                                                                                     |
|-----------------------------|--------------------------|------------------------------|---------------------------------|-----------------|-------------------------------------------------------------------------------------|
| Name                        | AL # - Fed Agency Prefix | AL # - Three-Digit Extension | Additional Award Identification | Amount Expensed | Delete                                                                              |
| <a href="#">FA-00000272</a> | 55                       | 666                          | 999999                          | \$750,000.00    |  |

[Add Federal Award](#)

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**For additional information, refer to the applicable Compliance Supplement on OMB's website.**

**Note:** Fields marked with asterisk (\*) are required.

**Schedule of Expenditures of Federal Awards**

\* AL # - Fed Agency Prefix

\* AL # - Three-Digit Extension

\* Additional Award Identification

\* Federal Program Name

\* Amount Expensed

Cluster Name

\* Loan/Loan Guarantee

\* Direct Award

\* Sub recipients

**Major Program Information and Audit Findings**

\* Major Program (MP)

**Notes to the Schedule of Expenditures of Federal Awards (SEFA)**

\* Did the auditee use the de Minimis cost rate? (2 CFR 200.414(f))

\* Describe the significant accounting policies used in preparing the SEFA (please explain in detail). (2 CFR 200.510(b)(6))

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Expiration Date: MM/DD/20XX

## PRB Commercial Audit Reporting Portal Screenshots

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### Audit Findings

| Name                                   | Audit Finding Reference Number | Related Federal Award | Type of Compliance Requirement | Modified Opinion | Delete |
|----------------------------------------|--------------------------------|-----------------------|--------------------------------|------------------|--------|
| No Audit Findings have been added yet. |                                |                       |                                |                  |        |

#### Add Audit Finding

**Note:** Fields marked with asterisk (\*) are required.

**General Information**

\* Related Federal Award ⓘ

--None--

\* Audit Finding Reference Number ⓘ

2021-

\* Type of Compliance Requirement

--None--

**Audit Findings**

\* Modified Opinion

--None--

\* Other Matters

--None--

\* Material Weakness

--None--

\* Significant Deficiency

--None--

\* Other Audit Findings

--None--

\* Questioned Costs

--None--

Audit Finding Text

**Repeat Audit Finding**

\* Repeat Audit Finding from Prior Year

--None--

**Corrective Action**

\* Corrective Action Plan Text

Cancel

+Add Audit Finding

# PRB Commercial Audit Reporting Portal Screenshots

Commercial Audit Submission

Audit Info

Note: Fields marked with asterisk (\*) are required.

\* What were the results of the auditor's determination of whether the financial statements of the auditee were prepared in accordance with generally accepted accounting principles (GAAP)? (Select only one)

Adverse opinion

\* What was the special purpose framework used? (Select only one)

Tax basis

\* Was the special purpose framework used as a basis of accounting required by state law?

No

\* What was the auditor's opinion on the special purpose framework? (Select any combination)

Qualified opinion

\* Is a "Going Concern" emphasis-of-matter paragraph included in the auditor's report?

No

\* Is a significant deficiency in internal control disclosed?

No

\* Is a material weakness in internal control disclosed?

Yes

\* Is a material noncompliance disclosed?

No

\* Did the auditee qualify as a low-risk auditee? (2 CFR 200.520)

No

\* Does the auditor's report include a statement that the auditee's financial statements include departments, agencies, or other organizational units expending Federal awards which are not included in this audit? (AICPA Audit Guide)

No

\* What is the dollar threshold used to distinguish Type A and Type B programs? (2 CFR 200.518(b)(1))

\$5,767,676.00

\* Indicate which Federal Agency(ies) have prior audit findings shown in the Summary Schedule of Prior Audit Findings related to direct funding. List the appropriate Federal agency prefix(es), or enter 'None'.

Describe the significant accounting policies used in preparing the SEFA (please explain in detail). (2 CFR 200.510(b)(6))

\*Describe the significant accounting policies used in preparing the SEFA (please explain in detail). (2 CFR 200.510(b)(6))

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Health Resources & Services Administration

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**Commercial Audit Submission**

### Upload Documents

Upload your Commercial Audit and supporting documents (Accepted Formats: .xlsx, .xls, .docx, .doc, .pdf)

[Upload Files](#) Or drop files

| List of Uploaded Documents                           |           |                        |
|------------------------------------------------------|-----------|------------------------|
| Document Name                                        | Size      | Delete                 |
| Multiple Issues on the Review and submit screen.docx | 383.41 KB | <a href="#">Delete</a> |

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Commercial Audit Submission

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[Collapse All](#)

General Information

\* Fiscal Year ⓘ  
FY2021

\* Fiscal Year Start Date  
11/6/2022

\* Fiscal Year End Date  
11/6/2022

\* Type of Audit ⓘ  
Financial related audit

\* Audit Period Covered ⓘ  
Biennial

\* TIN Number ⓘ  
888555000

\* Type Of TIN ⓘ  
TIN

\* Multiple TINs Covered ⓘ  
No

DUNS Number ⓘ

\* Multiple DUNS Numbers Covered? ⓘ  
No

UEI Number ⓘ

\* Are multiple UEI numbers covered in this?  
No

## PRB Commercial Audit Reporting Portal Screenshots

### ▼ Auditee Contact Information

- \* Auditee Name  
Sadaf
- \* Auditee Address  
Makhzan
- \* Auditee Contact Name  
Sadaf
- \* Auditee Contact Title  
Tester
- \* Auditee Contact Telephone  
7039011633
- \* Auditee Contact E-mail  
✉ sadaf.makhzan@gdl.com

### ▼ Auditor Contact Information

- \* Primary Auditor - Audit Firm Name  
Test
- \* Primary Auditor - Audit Firm EIN  
67777777
- \* Primary Auditor - Audit Firm Address  
6565
- \* Primary Auditor - Contact Name  
Sadaf
- \* Primary Auditor - Contact Title  
Tester
- \* Primary Auditor - Contact Telephone  
(702) 903-1233
- \* Primary Auditor - Contact E-mail  
✉ sdaf.makhzan@test.com
- \* Was a secondary auditor used?  
No

## PRB Commercial Audit Reporting Portal Screenshots

### Federal Awards

#### FA-00000279

##### Schedule of Expenditures of Federal Awards

|                                             |                                       |
|---------------------------------------------|---------------------------------------|
| * AL # - Fed Agency Prefix<br>55            | * AL # - Three-Digit Extension<br>666 |
| * Additional Award Identification<br>999999 | * Federal Program Name<br>Sadaf       |
| * Amount Expended<br>\$750,000.00           | Cluster Name                          |
| * Loan/Loan Guarantee<br>No                 | * Direct Award<br>Yes                 |
| * Sub recipients<br>No                      |                                       |

##### Major Program Information and Audit Findings

\* Major Program (MP)  
No

##### Notes to the Schedule of Expenditures of Federal Awards (SEFA)

|                                                                          |                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| * Did the auditee use the de Minimis cost rate? (2 CFR 200.414(f))<br>No | * Describe the significant accounting policies used in preparing the SEFA (please explain in detail). (2 CFR 200.510(b)(6))<br>Describe the significant accounting policies used in preparing the SEFA (please explain in detail). (2 CFR 200.510(b)(6))<br>*Describe the significant accounting policies used in preparing the SEFA (please explain in detail). (2 CFR 200.510(b)(6)) |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Audit Findings

## PRB Commercial Audit Reporting Portal Screenshots

▼ Audit Info

\* What were the results of the auditor's determination of whether the financial statements of the auditee were prepared in accordance with generally accepted accounting principles (GAAP)? (Select only one)  
[Adverse opinion](#)

\* What was the special purpose framework used? (Select only one)  
[Tax basis](#)

\* Was the special purpose framework used as a basis of accounting required by state law?  
[No](#)

\* What was the auditor's opinion on the special purpose framework? (Select any combination)  
[Qualified opinion](#)

\* Is a "Going Concern" emphasis-of-matter paragraph included in the auditor's report?  
[No](#)

\* Is a significant deficiency in internal control disclosed?  
[No](#)

\* Is a material weakness in internal control disclosed?  
[Yes](#)

\* Is a material noncompliance disclosed?  
[No](#)

\* Did the auditee qualify as a low-risk auditee? (2 CFR 200.520)  
[No](#)

\* Does the auditor's report include a statement that the auditee's financial statements include departments, agencies, or other organizational units expending Federal awards which are not included in this audit? (AICPA Audit Guide)  
[No](#)

\* What is the dollar threshold used to distinguish Type A and Type B programs? (2 CFR 200.518(b)(1))  
[\\$5,767,676.00](#)

\* Indicate which Federal Agency(ies) have prior audit findings shown in the Summary Schedule of Prior Audit Findings related to direct funding. List the appropriate Federal agency prefix(es), or enter 'None'.  
[Describe the significant accounting policies used in preparing the SEFA \(please explain in detail\). \(2 CFR 200.510\(b\)\(6\)\)](#)  
[Describe the significant accounting policies used in preparing the SEFA \(please explain in detail\). \(2 CFR 200.510\(b\)\(6\)\)](#)  
[Describe the significant accounting policies used in preparing the SEFA \(please explain in detail\). \(2 CFR 200.510\(b\)\(6\)\)](#)  
[Describe the significant accounting policies used in preparing the SEFA \(please explain in detail\). \(2 CFR 200.510\(b\)\(6\)\)](#)

▼ Delinquent Reports

**Note:** Fields marked with asterisk (\*) are required.

\* Are you submitting your report the earlier of 30 calendar days after the receipt of the audit or 9 months after the end of your fiscal year?  
[No](#)

\* Are you using an OMB extension?  
[Yes](#)

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