

PRB Commercial Audit Reporting Portal Screenshots

Health and Human Services

HRSA

Health Resources & Services Administration

Username: sadafmakhan+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 for any questions.

Viewers & Players

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Disclaimers

Accessibility

Freedom of Information Act

EEO/No Fear Act

U.S. Department of Health and Human Services

USA.gov

Whitehouse.gov

Language Assistance

Deutsch

English

Español

Français

Italiano

Kreyòl Ayisyen

Polski

Português

Tagalog

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Πρωταβλή

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اقرسي

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繁體中文

한국어

OMB Control Number: 0906-XXXX
Expiration Date: MM/DD/20XX

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 4, 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 ▼

[Save & Next](#)

OMB Control Number: 0906-XXXX
Expiration Date: MM/DD/20XX

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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Contact ProviderReliefContact@hrsa.gov for any questions.

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**HRSA**
Health Resources & Services Administration

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Commercial Audit Submission

Auditor Contact Information

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

* Primary Auditor - Audit Firm Name
Test

* Primary Auditor - Audit Firm EIN
677777777

* Primary Auditor - Audit Firm Address
6565

* Primary Auditor - Contact Name
Sadaf

* Primary Auditor - Contact Title
Tester

* Primary Auditor - Contact Telephone 📞
7029031233

* Primary Auditor - Contact E-mail 📧
sdafmakhzan@test.com

* Was a secondary auditor used?
No

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Contact ProviderReliefContact@hrsa.gov for any questions.

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PRB Commercial Audit Reporting Portal Screenshots

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

**Health and Human Services**

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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
FA-00000272	55	666	999999	\$750,000.00	

[Add Federal Award](#)

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Contact ProviderReliefContact@hrsa.gov for any questions.

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Tagalog	Tiếng Việt	Πρωσσικά	العربية	فارسی	日本語	繁體中文	한국어

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PRB Commercial Audit Reporting Portal Screenshots

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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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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 and Human Services**


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	Delete

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Commercial Audit Submission

Review & Submit

[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

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Expiration Date: MM/DD/20XX

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

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PRB Commercial Audit Reporting Portal Screenshots

Federal Awards

FA-00000279

Schedule of Expenditures of Federal Awards

* AL # - Fed Agency Prefix 55	* AL # - Three-Digit Extension 666
* Additional Award Identification 999999	* Federal Program Name Sadaf
* Amount Expended \$750,000.00	Cluster Name
* Loan/Loan Guarantee No	* Direct Award Yes
* Sub recipients 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)) No	* 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))
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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\(b\)\(6\)\)](#)
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[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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Submit

Public Burden Statement: The purpose of this information collection is to follow 45 CFR 75 Subpart F for Provider Relief Program funding. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB Control Number for this information collection is 0906-XXXX and is valid until MM/DD/20XX. Public reporting burden for this collection of information is estimated to average xx hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

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