

Instructions: See page 2.

Organization

NAME		FEIN	NYS VENDOR ID	FISCAL YEAR END DATE MM / DD / YYYY
STREET ADDRESS		TYPE OF ENTITY (check one) <input type="checkbox"/> Government <input type="checkbox"/> Not for Profit <input type="checkbox"/> For Profit		
CITY	STATE	ZIP	CONTACT NAME	
TELEPHONE () -	FAX () -		TITLE	
DATE MM / DD / YYYY		CONTACT EMAIL		

Auditor

FIRM NAME				
CPA's NAME		NEW YORK STATE LICENSE NUMBER		
TELEPHONE () -		EMAIL		
FAX () -				
ENGAGEMENT LETTER DATE (Attach copy) MM / DD / YYYY	TOTAL AUDIT FEES \$	TOTAL NON-AUDIT FEES \$	CONSECUTIVE YEARS ENGAGED	

Audit Report (Choose only ONE: A or B)

		ORIGINAL DUE DATE*	REQUESTED DUE DATE
A	A-133	FISCAL YEAR END DATE: MM / DD / YYYY FEDERAL OVERSIGHT AGENCY: TOTAL FEDERAL EXPENDITURES: \$	MM / DD / YYYY MM / DD / YYYY
	B	Entity Wide YELLOW BOOK	FISCAL YEAR END DATE: MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY

* Fiscal Year End Date Plus Nine Months. (NOTE: The request must be filed in advance of the due date.)

**Attach engagement letter,
draft financial statements,
reason for request, and email to:**

Email: fmgau@health.state.ny.us

NEW YORK STATE DEPARTMENT OF HEALTH
AUDIT SERVICES CLEARINGHOUSE
2560 Corning Tower
Albany, NY 12237-0041

Tel: (518) 473-3920
Fax: (518) 473-4610

Instructions

Federal agencies state, and the New York State Department of Health (Department) concurs, only rare, unusual, and identifiable circumstances should precipitate the need to extend an audit report deadline.

A. A-133 Audit Report Extension Request:

1. Contact your organization's Federal Cognizant Agency and request an extension of the due date to submit the A-133 report to the Federal Clearinghouse and to the Department's Audit Services Clearinghouse.
2. Obtain written approval for the extension from the Federal Cognizant Agency either on their Agency letterhead, or as an email directly from their office and copied to the Department at the address provided below. It should state whether the request is approved or denied, with a new due date, if applicable. The correspondence must state it is from the Federal Cognizant Agency and it must contain the name, title, and telephone number of the person granting or rejecting the request.
3. Complete all information on this form.
4. Email this completed form and a scanned copy (PDF format) of the correspondence from the Federal Cognizant Agency, if a postal mailed letter, to the email address below.

The organization's Federal Cognizant Agency is most likely the one providing the greatest portion of Federal funding. A "contacts" link is provided on the Federal Audit Clearinghouse's web site, <https://harvester.census.gov/fac/>

B. Entity Wide Yellow Book Audit Report Extension Request:

1. Complete all fields on this Audit Report Extension Request Form.
2. Obtain and attach a scanned copy (PDF format) of the Auditor's Engagement Letter. The letter must reference the report type, scope, and intended completion date.
3. Prepare a separate letter (to be emailed as an attachment in PDF format) describing the good cause reason for the request. The letter must specifically explain why the report will not be completed by the due date. If the organization is unprepared, the letter must include a list of tasks yet to be completed. If the auditor is unavailable, the request must include a copy of the unaudited financial statements. The letter must be typed on the organization's letterhead, addressed to the Department, including a commitment to meet the revised date, and including the signature of the agency official responsible for preparing the financial statements.
4. Email a PDF format version of this form and the documents described in numbers B2 and B3 above to this office using the email address below.

The Department's Audit Services Clearinghouse will notify your organization if the request is approved.

Email: fmgau@health.state.ny.us

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