FORM SF-SAC (03/25/2019)	U.S. Dept. of Commerce - Economics and Statistics Administration - U.S. Census Bureau
OMB No. 0607-0518. Approval Expires 03/31/2022	ACTING AS THE COLLECTING AGENT FOR OFFICE OF MANAGEMENT AND BUDGET
Data Collection For	rm for Reporting on
AUDITS OF STATES, LOCAL GO	OVERNMENTS, INDIAN TRIBES,
INSTITUTIONS OF HIGHER EDUCATIO	N, AND NONPROFIT ORGANIZATIONS
for Fiscal Period Ending Da	ates in 2019, 2020, or 2021
PART I: GENERAL INFORMATION	REPORT ID: 837828 VERSION: 1
1. Fiscal Period 2. Type of Uniform Guida	ance Audit 3. Audit Period Covered
a. Start Date 7/1/2018 X Single audit Program-spec	X Annual ific audit Biennial
b. End Date 6/30/2019 (MM/DD/YYYY)	Other: Number of Months
4. Auditee Identification Numbers	
a. Auditee Employer Identification Number (EIN)	d. Auditee Data Universal Numbering System (DUNS) Number
59-3652684	83-981-8502
b. Are multiple EINs covered in this report?	e. Are multiple DUNS numbers covered in this report?
Yes X No	Yes X No
c. If Part I, Item 4b is Yes, complete the attached Auditee EIN Continuation Sheet	f. If Part I, Item 4e is Yes, complete the attached Auditee DUNS Continuation Sheet
5. Auditee Information	6. Primary Auditor Information
a. Auditee Name	a. Audit Firm/Organization Name
	PURVIS, GRAY
	b. Audit Firm/Organization EIN
NORTH FLORIDA WORKFORCE DEVELOPMENT BOARD	59-0548468
b. Auditee Address	c. Audit Firm/Organization Address
Number and Street	Number and Street
705 E. BASE STREET	2347 SE 17TH STREET
City State Zip Code	City State Zip Code
MADISON FL 32340	OCALA FL 34476
c. Auditee Contact	d. Auditor Contact
Name	Name
DIANE HEAD Title	HELEN Y. PAINTER Title
EXECUTIVE DIRECTOR	AUDIT PARTNER
d. Auditee Contact Telephone	e. Auditor Contact Telephone
(850)973-2672	(352)732-3872
e. Auditee Contact E-mail	f. Auditor Contact E-mail
DIANE.HEAD@CAREERSOURCENORTHFLORIDA.COM	HELENP@PURVISGRAY.COM
	g. Was a secondary auditor used?
	Yes X No
	h. If Part I, Item 6g is Yes, complete the attached Secondary Auditors'

Contact Information Sheet

FORM	1 SF-SAC														Report ID: 837	828	Version:	1
			AWARDS	ring Fiscal Period												FROM OF FI	T III: INFO M THE SCH INDINGS A STIONED (ajor Progr	AND COSTS
1.10	uciai	Awaius	Expended Du	illig riscai reliou													mation a	nd Audit
	а	b	С	d	e	Schedule of Expendito	I	l Awards h	i		k	1	m	n	0	Findi a	ngs b	С
	_	DA#	· ·	u	е	'	g	"	_	an Programs	, ,	Federal Award			sed Through		r Program	Č
Row Number (auto-generated)	Federal Awarding Agency Prefix	CFDA Three-Digit Extension	Additional Award Identification	Federal Program Name	Amount Expended	Cluster Name	Federal Program Total ⁴ (auto-generated)	Cluster Total ⁵ (auto-generated)	Loan/Loan Guarantee (Loan)	If Loan, the End of the Audit Period Outstanding Loan Balance ⁶	Direct Award (Direct)	If not Direct, list Name of Pass- through Entity	If not Direct, list Identifying Number Assigned by the Pass- through Entity, if assigned ⁷	Federal Award Passed Through to Subrecipients	If Passed Through, provide Amount Passed Through	Major Program (MP)	if MP, Type of Audit Report 8	Number of Audit Findings
3)	efix 1	n 2) 3		(\$)		(\$)	(\$)	Y/N	(\$)	Y/N	ass-	ng ass- d ⁷	Y/N	(\$)	Y/N	۳.	
1	10	561		STATE ADMINISTRATIVE MATCHING GRANTS FOR THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM	\$88,942	N/A	\$88,942		N	0	N	FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		N		0
2	17	277		WORKFORCE INVESTMENT ACT (WIA) NATIONAL EMERGENCY GRANTS	\$13,624	N/A	\$13,624		N		N	FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		N		0
3	17	207		EMPLOYMENT SERVICE/WAGNER- PEYSER FUNDED ACTIVITIES	\$124,084	EMPLOYMENT SERVICE CLUSTER	\$124,084	\$132,104	N		N	FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		N		0
4	17	801		DISABLED VETERANS' OUTREACH PROGRAM (DVOP)	\$8,020	EMPLOYMENT SERVICE CLUSTER	\$8,020	\$132,104	N		N	FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		N		0
5	17	225	7	UNEMPLOYMENT INSURANCE	\$23,239	N/A	\$23,239		N		N	FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		N		0
6	17	258		WIA ADULT PROGRAM	\$314,710	WIOA CLUSTER	\$314,710	\$1,499,939	N		N	FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		Υ	U	0

	- 1	17	259	WIA YOUTH ACTIVITIES	\$409,022	WIOA CLUSTER	\$409,022	\$1,499,939	N		FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		Y	U	0
8	1	17	278	WIA DISLOCATED WORKER FORMULA GRANTS	\$776,207	WIOA CLUSTER	\$776,207	\$1,499,939	N		FLORIDA DPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		Y	U	0
9	1	17	245	TRADE ADJUSTMENT ASSISTANCE	\$19,767	N/A	\$19,767		N		FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY		N	0	N		0
10	S	93	558	TEMPORARY ASSISTANCE FOR NEEDY FAMILIES	\$294,444	N/A	\$294,444		N		FLORIDA DEPARTMENT OF ECONOMIC OPPORTUNITY	N/A	N		N		0

- 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 beta.sam.gov). If the extension is unknown, see instructions.
- 3. Used to collect other data or information to identify the award which is not a CFDA number (e.g., program year, contract number). This item is optional if Part II, 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.
- 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)). Enter "N/A" for loans made to students of an institution of higher education (IHE) where the IHE does not make the loans (2 CFR 200.502(c)).
- 7. If no identifying number was assigned, enter "N/A".
- 8. If Major Program is marked "Y", enter only one letter (U = Unmodified opinion, Q = Qualified opinion, A = Adverse opinion, D = Disclaimer of opinion) corresponding to the type of audit report. If Major Program is marked "N", leave item blank.

FORM SF-SAC Report ID: 837828	Version: 1
PART II: FEDERAL AWARDS - Continued	
2. Notes to the Schedule of Expenditures of Federal Awards (SEFA)	
Note 1: Describe the significant accounting policies used in preparing the SEFA. (2 CFR 200.510(b)(6))	
The accounting policies and presentation of the Schedule of Expenditures of Federal Awards of Career Source North Florida (the Organization) have been designed to conform to generally accepted counting principles as applicable to governmental entities, including the reporting and compliance requirements described in the OMB Compliance Supplement, Title 2 U.S. Code of Federal Regulation Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Reporting Entity The reporting entity consists of the Organization the primary government. Management has determined that there are no component units. Basis of Accounting Basis of accounting refers to when revenues and expenditures or expenses are recognized in the accounts and reported of financial statements. Basis of accounting related to the timing of the measurements made, regardless of the measurement focus. The modified accrual basis of accounting is followed in the Schedule of Expenditures of Federal Awards, under the modified accrual basis, revenues are recognized when they become measurable and available. Revenues are considered to be available when they are collectible within the current period or soonenough thereafter to pay liabilities of the current period. For this purpose, the Organization considers revenues are recognized when they become measurable and available. Revenues are considered to be available when they are collectible within the current period or soon enough thereafter to pay liabilities of the current period. For this purpose the Organization considers revenues to be available if they are collected within 60 days after the end of the current fiscal period. Expenditures generally are recordedwhen a liability is incurred, as under accrual accounting	ng
Note 2: Did the auditee use the de minimis cost rate? (2 CFR 200.414(f))	
Yes	
X No	
Both Please explain.	
The auditee did not use the de minimis cost rate.	7
	4,000 characters

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FORM SF-SAC	Report ID: 837828	Version: 1
PART III: INFORMATION FROM THE SCHEDULE OF FINDINGS AND QUESTIONED COST	ΓS - Continue	d
2. Financial Statements		
a. What were the results of the auditor's determination of whether the financial statements of the auditee generally accepted accounting principles (GAAP)?	were prepared ii	n accordance with
Select any combination of the following five options:		
X Unmodified opinion		
Qualified opinion		
Adverse opinion		
Disclaimer of opinion		
Financial statements were not prepared in accordance with GAAP but were prepared in accorda	nce with a specia	al purpose framework
If the financial statements of the auditee were prepared in accordance with GAAP, proceed to question	ı b.	
i. What was the special purpose framework used? (Select only one)		
Cash basis		
Tax basis		
Regulatory basis		
Contractual basis		
Other basis		
ii. Was the special purpose framework used as a basis of accounting required by state law?	Yes	No
iii. What was the auditor's opinion on the special purpose framework? (Select any combination)		
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	X No
c. Is a significant deficiency in internal control disclosed?	Yes	X No
d. Is a material weakness in internal control disclosed?	Yes	X No
e. Is a material noncompliance disclosed?	Yes	X 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 Federal awards which are not included in this audit? (AICPA Audit Guide)	Yes	X No
in this addit: (Alci A Addit Odide)		
b. What is the dollar threshold used to distinguish Type A and Type B programs? (2 CFR 200.518(b)(1))	\$750,000	
c. Did the auditee qualify as a low-risk auditee? (2 CFR 200.520)	X Yes	No
d. Indicate which Federal Agency(ies) have prior audit findings shown in the Summary Schedule of Prior Aud List the appropriate Federal agency prefix(es), or enter "None".	dit Findings relat	ed to direct funding.
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FORM SF-SAC												Report ID:	837828	Version: 1
PART III:	: INFORM	ATION FROM	THE SCHEDULE OF FIND	INGS AND Q	UESTIONED (OSTS - Continue	d							
4. Feder	al Award	Audit Finding	s											
						Schedule of F	indings and C	Questioned Cos	sts					
	а	b	С	d	e	f	g	h	i	j	k	I	m	n
								Тур	pe of Audit Findi	ng ³			Rep	peat Audit Finding
Row Number from Part	CFDA Number ¹	Additional	Fadaral Danasara Nasara	Amount Expended	Audit Finding Reference	Type(s) of	Compliance	Audit Findings	Internal Contro	ol Audit Findings	Other Audit	Questioned Costs	Repeat Audit	If Repeat Finding, provide
II, Item 1	Number	Award Identification	Federal Program Name	Experided	Number	Compliance Requirement(s) ²	Modified Opinion	Other Matters	Material Weakness	Significant Deficiency	Findings	Costs	Finding from Prior Year	Prior Year Audit Finding Reference Number(s)
	XX.XXX			(\$)	YYYY-###		Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	YYYY-###,YYYY-###,etc.
2. Enter th	e letter for	each type of com	ral agency two-digit prefix an pliance requirement that app pliance requirement(s) the au	lies to the audit	findings (i.e., no	ncompliance, signific	,	<i>'</i> '		osts, fraud, and	other items rep	orted under 2 C	FR 200.516(a)) re	ported for each Federal
A. Activit	ies allowed	or unallowed		F. Equipment	and real propert	y management		K. Reserved						
B. Allowa	ble costs/co	ost principles		G. Matching, le	evel of effort, ea	rmarking		L. Reporting						
C. Cash n	nanagement	t		H. Period of pe	erformance (or a	vailability) of Federal	funds	M. Subrecipier	nt monitoring					
D. Reserv	red			I. Procuremen	nt and suspensio	n and debarment		N. Special test	s and provisions					
E. Eligibil	ity			J. Program inc	come			P. Other						
3. There a	re 9 valid co	mbinations of "Co	ompliance Audit Findings", "Ir	nternal Control A	Audit Findings", a	and "Other Audit Find	lings" for each f	ederal program	with audit findi	ngs. <i>(See chart i</i>	n instructions a	fter Part III, Item	4(k))	

Snb.

FORM SF-SAC		Report ID: 837828 Version: 1
PART III: INFORMATION FROM THE SCHE	DULE OF FINDINGS AND QUESTIONED COSTS - Continued	
5. Text of the Audit Findings		
a. Audit Finding Reference Number	b. Audit Finding Text	



FORM SF-SAC	Report ID: 837828 Version: 1
PART IV: CORRECTIVE ACTION PLAN	
1. Audit Finding Reference Number	2. Text of the Corrective Action Plan



FORM SF-SAC	Report ID: 837828 Version: 1
Part V: CERTIFICATIONS	
1. Auditee Certification Statement	2. Auditor Statement
I certify that, to the best of my knowledge and belief, the auditee has:	I acknowledge that:
X ensured that the Form SF-SAC data and reporting package do not include protected personally identifiable information (Protected PII) ¹ , or if they do , the Federal Audit Clearinghouse (FAC) is authorized to publicly post all information contained in	X the data elements and information included in this Form SF-SAC are limited to those prescribed by the Office of Management and Budget;
the Form SF-SAC data and the reporting package;	X the information in Part II of this Form SF-SAC is the responsibility of the auditee and is based on information
x ensured that the Form SF-SAC data and reporting package do not include business identifiable information (BII) ² , or if they do , the FAC is authorized to publicly post all information	included in the reporting package required by the Uniform Guidance;
contained in the Form SF-SAC data and the reporting package;	X the information included in Part III of this Form SF-SAC, except for Part III, Item 3(d), and Items 4(a)-(d) (when there are
X complied with the requirements of 2 CFR Part 200 Subpart F specific to the auditee;	audit findings), was transferred by the auditor from the auditor's report(s) for the period described in Part I, Items 1 and 3, and is
X prepared the data in this Form SF-SAC in accordance with 2 CFR Part 200 Subpart F and the accompanying instructions to this Form SF-SAC;	not a substitute for such reports; X the auditor has not performed any auditing procedures since the date of the auditor's report(s) or any additional
X included all information required to be reported in this Form SF-SAC in its entirety and such information is accurate and	auditing procedures in connection with the completion of this Form SF-SAC; and
complete;	X a copy of the reporting package required by the Uniform
X engaged an auditor to perform an audit in accordance with 2 CFR Part 200 Subpart F for the period described in Part I, Items 1 and 3;	Guidance, which includes the complete auditor's report(s), may be made available by the Federal Audit Clearinghouse (FAC) on the FAC website or from the auditee at the address listed in Part I of this Form SF-SAC.
X ensured the auditor has completed such audit and issued the signed audit report required by 2 CFR 200.515 which states that the audit was conducted in accordance with the audit requirements of the Uniform Guidance; and	
X authorized the FAC to make the Form SF-SAC data and reporting package publicly available on a website.	
Auditee Certification Date 3/31/2020 (MM/DD/YYYY)	Auditor Signature Date
Name of certifying official	3/31/2020
DIANE HEAD	(MM/DD/YYYY)
Title of certifying official	
EXECUTIVE DIRECTOR	
1 2 CEP 200 70 and 2 CEP 200 92	

^{2.} BII consists of information defined in the Freedom of Information Act (FOIA) as "trade secrets and commercial 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 confined 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.

Part 1: GENERAL INFORMATION - Continued 4.c. Auditee EIN Continuation Sheet 1. 41. 81. 121. 2. 42. 82. 122. 3. 43. 83. 123. 4. 44. 84. 124.	161. 162. 163.
1. 41. 81. 121. 2. 42. 82. 122. 3. 43. 83. 123.	162. 163.
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FORM SF-SAC			Report ID: 837828	Version: 1
Part 1: GENERAL INFO	ORMATION - Continued			
4.f. Auditee DUNS Cor	ntinuation Sheet			
1.	41.	81.	121.	161.
2.	42.	82.	122.	162.
3.	43.	83.	123.	163.
4.	44.	84.	124.	164.
5.	45.	85.	125.	165.
6.	46.	86.	126.	166.
7.	47.	87.	127.	167.
8.	48.	88.	128.	168.
9.	49.	89.	129.	169.
10.	50.	90.	130.	170.
11.	51.	91.	131.	171.
12.	52.	92.	132.	172.
13.	53.	93.	133.	173.
14.	54.	94.	134.	174.
15.	55.	95.	135.	175.
16.	56.	96.	136.	176.
17.	57.	97.	137.	177.
18.	58.	98.	138.	178.
19.	59.	99.	139.	179.
20.	60.	100.	140.	180.
21.	61.	101.	141.	181.
22.	62.	102.	142.	182.
23.	63.	103.	143.	183.
24.	64.	104.	144.	184.
25.	65.	105.	145.	185.
26.	66.	106.	146.	186.
27.	67.	107.	147.	187.
28.	68.	108.	148.	188.
29.	69.	109.	149.	189.
30.	70.	110.	150.	190.
31.	71.	111.	151.	191.
32.	72.	112.	152.	192.
33.	73.	113.	153.	193.
34.	74.	114.	154.	194.
35.	75.	115.	155.	195.
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38.	78.	118.	158.	198.
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40.	80.	120.	160.	200.

	litors' Contact	Information Sheet							
i	ii	iii	iv	v	vi	vii	viii	ix	х
Audit Firm/ rganization Name	Audit Firm/ Organization EIN	Audit Firm/ Organization Address (Number and Street)	Audit Firm/ Organization City	Audit Firm/ Organization State	Audit Firm/ Organization Zip Code	Contact Name	Contact Title	Contact Phone Number	Contact E-ma
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FORM SF-SAC	Report ID: 837828 Version: 1				
FAC Determined Data					
Type of Entity	Non-profit				
Current Year Direct Findings	No				
Current Year Indirect Findings	No				
Cognizant (C) or Oversight (O) Agency	Oversight				
Cognizant or Oversight Federal Agency Name	17 - Department of Labor				
Type of Audit Report on Major Program (MP)					
Compliance (All MP compliance opinions combined)	Unmodified				