

**SAM Search Results**  
**List of records matching your search for :**

**Search Term :**  
**Functional Area: Entity Management, Performance Information**  
**Record Status: Active**  
**DUNS Number: 119744100**

<b>ENTITY</b>	Point Reyes Bird Observatory	Status:Active
DUNS: 119744100	+4:	CAGE Code: 1KRM6 DoDAAC:
Expiration Date: Sep 24, 2014	Has Active Exclusion?: No	Delinquent Federal Debt?: No
Address: 3820 Cypress Dr No 11		
City: Petaluma	State/Province: CALIFORNIA	
ZIP Code: 94954-6964	Country: UNITED STATES	

## Results from Query of Single Audit Database

The following is a key for the status field

P = The FAC is processing the audit.  
W = The FAC is waiting for the auditee to send additional information. (see below)

- W-1 = Missing Form.
- W-2 = Missing Components/Form Errors.
- W-3 = Missing Components.
- W-4 = Form Errors.
- W-5 = Form Errors - Audit package forwarded to Federal Agencies for follow-up.
- W-6 = Pending Cognizant Agency Assessment.

C = The audit is complete.

Your search has produced 14 records

These results are based on the following search criteria:

☐ EIN: 941594250.

EIN	Auditee Name	Fiscal Year End Date	Status	Street 1	Street 2	City	State	Zip Code	Initial Date Received	Form Date Received	Component Date Received	FAC Accepted Date
941594250	<a href="#">PRBO</a>	12/31/1997	C	4990 SHORELINE HWY		STINSON BEACH	CA	94970	05/11/1998	03/08/1999		03/08/1999
941594250	<a href="#">POINT REYES BIRD OBSERVATORY</a>	12/31/1998	C	4990 SHORELINE HWY		STINSON BEACH	CA	94970	04/23/1999	04/23/1999		04/23/1999
941594250	<a href="#">POINT REYES BIRD OBSERVATORY</a>	12/31/2001	C	4990 SHORELINE HIGHWAY		STINSON BEACH	CA	94970	04/30/2002	04/30/2002		04/30/2002
941594250	<a href="#">POINT REYES BIRD OBSERVATORY</a>	12/31/2002	C	4990 SHORELINE HIGHWAY		STINSON BEACH	CA	94970	04/07/2003	04/07/2003		04/07/2003
941594250	<a href="#">POINT REYES BIRD OBSERVATORY</a>	12/31/2003	C	4990 SHORELINE HIGHWAY		STINSON BEACH	CA	94970	04/23/2004	04/23/2004		04/23/2004
941594250	<a href="#">POINT REYES BIRD OBSERVATORY</a>	12/31/2004	C	4990 SHORELINE HIGHWAY		STINSON BEACH	CA	94970	05/31/2005	05/31/2005	05/31/2005	05/31/2005
941594250	<a href="#">POINT REYES BIRD OBSERVATORY</a>	3/31/2007	C	3820 CYPRESS DRIVE # 11		PETALUMA	CA	94954	07/30/2007	02/15/2008	02/15/2008	02/15/2008
941594250	<a href="#">POINT REYES BIRD OBSERVATORY DBA PRBO CONSERVATION SCIENCE</a>	3/31/2008	C	3820 CYPRESS DRIVE #11		PETALUMA	CA	949546964	09/11/2008	09/11/2008		09/11/2008
941594250	<a href="#">POINT REYES BIRD OBSERVATORY DBA PRBO CONSERVATION SCIENCE</a>	3/31/2009	C	3820 CYPRESS DRIVE #11		PETALUMA	CA	949546964	08/06/2009	08/06/2009		08/06/2009
941594250	<a href="#">POINT REYES BIRD OBSERVATORY DBA PRBO CONSERVATION SCIENCE</a>	3/31/2010	C	3820 CYPRESS DRIVE #11		PETALUMA	CA	949546964	08/11/2010	08/11/2010		08/11/2010
941594250	<a href="#">POINT REYES BIRD OBSERVATORY DBA PRBO CONSERVATION SCIENCE</a>	3/31/2011	C	3820 CYPRESS DRIVE #11		PETALUMA	CA	949546964	07/13/2011	07/13/2011		07/13/2011
941594250	<a href="#">POINT REYES BIRD OBSERVATORY DBA PRBO CONSERVATION SCIENCE</a>	3/31/2012	C	3820 CYPRESS DRIVE #11		PETALUMA	CA	949546964	08/02/2012	08/02/2012		08/02/2012

941594250	<a href="#">POINT REYES BIRD OBSERVATORY/PRBO</a>	12/31/1999	C	4990 SHORELINE HIGHWAY		STINSON BEACH	CA	94970	07/10/2000	07/10/2000		07/10/2000
941594250	<a href="#">POINT REYES BIRD OBSERVATORY/PRBO</a>	12/31/2000	C	4990 SHORELINE HIGHWAY		STINSON BEACH	CA	94970	03/31/2001	03/31/2001		03/31/2001

[Return to Status Entity Search](#)

**Data Collection Form for Reporting on  
AUDITS OF STATES, LOCAL GOVERNMENTS, AND NON-PROFIT ORGANIZATIONS  
for Fiscal Year Ending Dates in 2010, 2011, or 2012**

▶ Complete this form, as required by OMB Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

**PART I****GENERAL INFORMATION (To be completed by auditee, except for Items 6, 7, and 8)****1. Fiscal period ending date for this submission**

Month	Day	Year
03	31	2012

**2. Type of Circular A-133 audit**

- 1 ☒ Single audit  
2 ☐ Program-specific audit

**3. Audit period covered**

- 1 ☒ Annual 3 ☐ Other —  Months  
2 ☐ Biennial

**4. Auditee Identification Numbers****a. Primary Employer Identification Number (EIN)**

9	4	1	5	9	4	2	5	0
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**b. Are multiple EINs covered in this report?** 1 ☐ Yes 2 ☒ No**c. If Part I, Item 4b = "Yes," complete Part I, Item 4c on the continuation sheet on Page 4.****d. Data Universal Numbering System (DUNS) Number**

1	1	9	7	4	4	1	0	0
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**e. Are multiple DUNS covered in this report?** 1 ☐ Yes 2 ☒ No**f. If Part I, Item 4e = "Yes," complete Part I, Item 4f on the continuation sheet on Page 4.****5. AUDITEE INFORMATION****a. Auditee name**

POINT REYES BIRD OBSERVATORY DBA PRBO CONSERVATION SCIENCE

**b. Auditee address (Number and street)**

3820 CYPRESS DRIVE #11

City

PETALUMA

State

CA

ZIP + 4 Code

9 4 9 5 4 - 6 9 6 4

**c. Auditee contact**

Name

LAURIE TALCOTT

Title

CHIEF FINANCIAL OFFICER

**d. Auditee contact telephone**

(707) 781 — 2555

**e. Auditee contact FAX**

(707) 765 — 1685

**f. Auditee contact E-mail**

LTALCOTT@PRBO.ORG

**g. AUDITEE CERTIFICATION STATEMENT** — This is to certify that, to the best of my knowledge and belief, the auditee has: (1) engaged an auditor to perform an audit in accordance with the provisions of OMB Circular A-133 for the period described in Part I, Items 1 and 3; (2) the auditor has completed such audit and presented a signed audit report which states that the audit was conducted in accordance with the provisions of the Circular; and, (3) the information included in **Parts I, II, and III** of this data collection form is accurate and complete. I declare that the foregoing is true and correct.

Auditee certification

Date

ELECTRONICALLY CERTIFIED

8/2/2012

Name of certifying official

LAURIE TALCOTT

Title of certifying official

CHIEF FINANCIAL OFFICER

**6. PRIMARY AUDITOR INFORMATION**

(To be completed by auditor)

**a. Primary auditor name**

PEROTTI AND CARRADE CPAS

**b. Primary auditor address (Number and street)**

1100 LARKSPUR LANDING CIRCLE, SUITE 358

City

LARKSPUR

State

CA

ZIP + 4 Code

9 4 9 3 9 -

**c. Primary auditor contact**

Name

DAVID E. PEROTTI

Title

PARTNER

**d. Primary auditor contact telephone**

(415) 461 — 8500

**e. Primary auditor contact FAX**

(415) 461 — 6342

**f. Primary auditor contact E-mail**

DAVE@PC-CPAS.COM

**g. AUDITOR STATEMENT** — The data elements and information included in this form are limited to those prescribed by OMB Circular A-133. The information included in Parts II and III of the form, except for Part III, Items 7, 8, and 9a-9g, was transferred from the auditor's report(s) for the period 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 the auditor's report(s). A copy of the reporting package required by OMB Circular A-133, which includes the complete auditor's report(s), is available in its entirety from the auditee at the address provided in Part I of this form. As required by OMB Circular A-133, the information in **Parts II and III** of this form was entered in this form by the auditor based on information included in the reporting package. The auditor has not performed any additional auditing procedures in connection with the completion of this form.

**7a. Add Secondary auditor information? (Optional)**

- 1
- ☐
- Yes 2
- ☒
- No

**b. If "Yes," complete Part I, Item 8 on the continuation sheet on page 5.**

Auditor certification

Date

ELECTRONICALLY CERTIFIED

8/2/2012

**PART II****FINANCIAL STATEMENTS (To be completed by auditor)****1. Type of audit report**

Mark either: 1 ☒ Unqualified opinion **OR**  
any combination of: 2 ☐ Qualified opinion 3 ☐ Adverse opinion 4 ☐ Disclaimer of opinion

**2.** Is a "going concern" explanatory paragraph included in the audit report? 1 ☐ Yes 2 ☒ No

**3.** Is a significant deficiency disclosed? 1 ☐ Yes 2 ☒ No

**4.** Is a material weakness disclosed? 1 ☐ Yes 2 ☒ No

**5.** Is a material noncompliance disclosed? 1 ☐ Yes 2 ☒ No

**PART III****FEDERAL PROGRAMS (To be completed by auditor)**

**1.** Does the auditor's report include a statement that the auditee's financial statements include departments, agencies, or other organizational units expending \$500,000 or more in Federal awards that have separate A-133 audits which are not included in this audit? (AICPA Audit Guide, Chapter 13) 1 ☐ Yes 2 ☒ No

**2.** What is the dollar threshold to distinguish Type A and Type B programs? (OMB Circular A-133 § .520(b)) \$ 300,000

**3.** Did the auditee qualify as a low-risk auditee? (§ .530) 1 ☒ Yes 2 ☐ No

**4.** Is a significant deficiency disclosed for any major program? (§ .510(a)(1)) 1 ☐ Yes 2 ☒ No

**5.** Is a material weakness disclosed for any major program? (§ .510(a)(1)) 1 ☐ Yes 2 ☒ No

**6.** Are any known questioned costs reported? (§ .510(a)(3) or (4)) 1 ☐ Yes 2 ☒ No

**7.** Were Prior Audit Findings related to **direct** funding shown in the Summary Schedule of Prior Audit Findings? (§ .315(b)) 1 ☐ Yes 2 ☒ No

**8.** Indicate which **Federal** agency(ies) have current year audit findings related to **direct** funding or prior audit findings shown in the Summary Schedule of Prior Audit Findings related to **direct** funding. (Mark (X) *all that apply or None*)

- |  |   |  |   |
|--|---|--|---|
| 98 <input type="checkbox"/> U.S. Agency for International Development      | 39 <input type="checkbox"/> General Services Administration               | 89 <input type="checkbox"/> National Archives and Records Administration | 19 <input type="checkbox"/> U.S. Department of State  |
| 10 <input type="checkbox"/> Agriculture                                    | 93 <input type="checkbox"/> Health and Human Services                     | 05 <input type="checkbox"/> National Endowment for the Arts              | 20 <input type="checkbox"/> Transportation  |
| 23 <input type="checkbox"/> Appalachian Regional Commission                | 97 <input type="checkbox"/> Homeland Security                             | 06 <input type="checkbox"/> National Endowment for the Humanities        | 21 <input type="checkbox"/> Treasury  |
| 11 <input type="checkbox"/> Commerce                                       | 14 <input type="checkbox"/> Housing and Urban Development                 | 06 <input type="checkbox"/> National Endowment for the Humanities        | 64 <input checked="" type="checkbox"/> Veterans Affairs   |
| 94 <input type="checkbox"/> Corporation for National and Community Service | 03 <input type="checkbox"/> Institute of Museum and Library Services      | 47 <input type="checkbox"/> National Science Foundation                  | 00 <input checked="" type="checkbox"/> <b>None</b>  |
| 12 <input type="checkbox"/> Defense  | 15 <input type="checkbox"/> Interior                                      | 07 <input type="checkbox"/> Office of National Drug Control Policy       | <input type="checkbox"/> Other – Specify: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px; vertical-align: middle;"></span> |
| 84 <input type="checkbox"/> Education                                      | 16 <input type="checkbox"/> Justice                                       | 59 <input type="checkbox"/> Small Business Administration                | <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px; vertical-align: middle;"></span>   |
| 81 <input type="checkbox"/> Energy   | 17 <input type="checkbox"/> Labor   | 96 <input type="checkbox"/> Social Security Administration               |   |
| 66 <input type="checkbox"/> Environmental Protection Agency                | 09 <input type="checkbox"/> Legal Services Corporation                    |  |   |
|  | 43 <input type="checkbox"/> National Aeronautics and Space Administration |  |   |



## **FAC DETERMINED DATA**

\* FAC DETERMINED TYPE OF ENTITY:

\* FAC DETERMINED CURRENT YEAR DIRECT FINDINGS: **NO**

\* FAC DETERMINED COGNIZANT (C) OR OVERSIGHT (O) AGENCY\*: **O**  
(Please refer to the FAQ's for definitions)

\* FAC DETERMINED COGNIZANT OR OVERSIGHT AGENCY FEDERAL AGENCY PREFIX: **15**

\* FAC DETERMINED TYPE OF AUDIT REPORT ON MAJOR PROGRAM COMPLIANCE  
BASED ON 1997 – 2003 SF-SAC FORM INSTRUCTIONS: **U**

\* The items above are not reported on the Form SF-SAC, but are determined by the FAC