New York State Office of Addiction Services and Supports Service Provider Fiscal Viability Information Form

Service Provider Legal Name	Provider Number			
Street Address				
City	State		Zip Code	
PLEASE RESPOND TO ALL QUESTIONS				
1. Organization's annual operating period: Calendar fiscal year ending				
2. Organization type:				
3. If not-for-profit, is organization registered with the NYS Office of the Attorney General - Charities Bureau?				
If yes, what fiscal year was covered by the last annual financial report filed with the Office of the Attorney General – Charities Bureau? ATTACH A COPY OF THE LAST ANNUAL REPORT.				
[Enter Period]	to			
4. Is an independent audit of the organization's annual financial statements conducted? If yes, ATTACH A COPY OF THE AUDITOR'S REPORT AND AUDITED FINANCIAL STATEMENTS.				
5. If question 3 and 4 were answered "No" ATTACH COPIES OF THE ORGANIZATION'S PREPARED ANNUAL FINANCIAL STATEMENTS (ENTITY-WIDE BALANCE SHEET AND INCOME STATEMENT), FOR THE LAST COMPLETED FISCAL YEAR.				
6. Complete an unaudited Entity-Wide Pro Forma Balance Sheet (see page 2 of this Form), as of the most recent month end.				
7. Is the ratio of current assets to current liabilities, reflected in either the audited balance sheet for the last completed fiscal year or the Entity-Wide Pro Forma Balance Sheet for the most recent month end, less than .90 to 1.00 (minimum acceptable current ratio)?				
			🗌 Yes 🗌 No	
(Example: current assets = \$1,000; current liabilities = \$2,000;	current ratio = .50 to 1.0	0 [below m	inimum acceptable]).	
8. Is the ratio of total assets to total liabilities, reflected in either the audited balance sheet for the last completed fiscal year or the Entity-Wide Pro Forma Balance Sheet for the most recent month end , less than 1.00 to 1.00 (minimum acceptable overall ratio)?				
(Example: total assets = \$8,000; total liabilities = \$10,000;	total ratio = .80 to 1.00 [b	elow minim	num acceptable]).	
If the answer to either question 7 or 8 is Yes, you must submit a financial recovery plan, specifying your organization's planned actions/activities and related timeframe, to upgrade the current ratio and/or total ratio to at least the minimum acceptable levels in the current and, if necessary, succeeding fiscal year. In addition, the financial recovery plan should address any other condition(s) known to management that may have a negative impact on the organization's financial viability.				
ATTACH A COPY OF THE FINANCIAL RECOVERY	PLAN AND INITIAL HE	ERE	[]	
CERTIFICATION STATEMENT				
I certify that the questions and Entity-Wide Balance Sheet, comprising this Form, as well as the attached Financial Statements (if submitted in response to question No. 5) and Financial Recovery Plan (if required), have been completed fully and correctly, to the best of my knowledge and belief.				
Chief Financial Officer Name/Title (Print)				
Signature	Date	Te	elephone Number	
Chief Executive Officer Name/Title (Print)				
Signature	Date	Te	elephone Number	

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Service Provider Legal Name	Information Submitted as of:		
ASSETS			
Cash in Bank	\$		
Grants/Funds Receivable (Attach Account Detail)			
Other Accounts Receivable (Attach Account Detail)			
Other Current Assets (Attach Account Detail)	\$		
Total Current Assets			
Security Deposits			
Fixed Assets (Net of Depreciation)			
Other Non-Current Assets (Attach Account Detail)			
Total Assets	\$		

LIABILITIES AND NET ASSETS/EQUITY		
Payroll Taxes Payable - Federal	\$	
Payroll Taxes Payable - NYS & local		
Accounts Payable & Accrued Expenses (Attach Account Detail)		
Other Current Liabilities (i.e., Notes Payable, Current Portion of Long Term Debts, etc.) (Attach Account Detail)		
Total Current Liabilities	\$	
Long-Term Notes Payable (Attach Account Detail)		
Mortgage Payable		
Other Long-Term Liabilities (Attach Account Detail)		
Total Liabilities	\$	
Net Assets/Equity		
Total Liabilities and Fund Balance/Equity	\$	

Note (1) Current, as used above in conjunction with assets and liabilities, means resources available for use (assets) or amounts coming due (liabilities) within the next 12 month period.

(2) If the accrual basis of accounting is not used, accurate receivable and payable account balances should be reported based on management's best knowledge and belief.