The State University of New York
Office of the University Controller
Chart of Account Request Form

Type of Request:	☐New Account	☐Change	☐Close

Campus:		Fiscal Year:	
Account Number:		Account Title:	
Account Manager:		Authorized Signature:	
Comments:			

Fund:		NACUBO Function:	

Usage Indicators:	☐ Transactional	☐ Utility	☐ Fund Override

For System Admin Use Only:	Lump Sum (Y, N, U) _____	Cost Center Override ☐ _____

Justification for establishing new account. Please specify what type of expenditures will be charged to this account in order to properly assign a NACUBO function for GL reporting purposes.

Please complete these required fields for all IFR (0R, TR, 5R, SD, SF) accounts:

Admin Overhead Rate:		Comments:	
Maintenance & Operations Rate:		Comments:	
*Fringe Benefit Rate:		Comments:	
☐ SUTRA Summer/Winter Session			

Note: Fringe Benefit Revenue Rate defaults to the standard yearly rate. If non-standard rate is desired, please attach approval email from the SUNY Budget Office. Rate must be specified for each sub-account.

IFR Restricted:	☐ Restricted	☐ Reserved	Note: Defaults to not restricted unless otherwise indicated (justification must be provided below)

Requested By:	
Date Submitted:	

Please send all Chart of Account requests to UCO-COA@suny.edu

 Account Code

Reporting Level 1
Reporting Level 2
Reporting Level 3
Reporting Level 4
Reporting Level 5