1. Based on your Proposal, will a contract award for the Performance described in Section III be for $250,000.00 or more?

   ___ Yes  ___ No

*If your response to question 1 is “No,” please ensure you have so indicated above, disregard the remaining questions and sign at the end of the Exhibit.

2. What percentage of your gross revenue involved the use of minority- or woman-owned business enterprise subcontracts for rendering services, manufacturing products or performing contracts during the last year? ________________

3. What percentage of your gross revenue involved the use of joint ventures, partnerships, or other similar agreements with certified minority- or woman-owned business enterprises during the last year? ________________

4. What percent of your gross revenue involving the use of government or private sector contracts included minority-or woman-owned business enterprise requirements? ________________

5. What percentage of your gross revenue did you pay to certified minority- or woman-owned business enterprise subcontractors? ________________

   What percentage of your gross revenues did you pay to certified minority- or woman-owned business enterprise joint ventures, partnerships or other similar agreements? ________________

6. What percentage of your overhead expenses for the prior year of business activities were certified minority- or woman-owned business enterprise expenditures? ________________

7. What training or mentoring programs do you provided for minority- and woman-owned business enterprises?

   ____________________________________________________________

   ____________________________________________________________

   ************************************************************************** *
   additional space to describe your diversity programs, please attach a separate page.

   8. What financial assistance do you provide to certified minority- and woman-owned business enterprises?

   ____________________________________________________________

   ____________________________________________________________

   ************************************************************************** *
   additional space to describe your diversity programs, please attach a separate page.

   9. Do you have any supplier or subcontractor diversity goals for your own procurements?

   ______________________

   If you do have diversity goals for your own procurements, please provide examples of your goals.

   ____________________________________________________________

   ************************************************************************** *
10. For your suppliers, what are your diversity goals for certified minority- and woman-owned business enterprises? _______________________________________________________________, or
    What is the percentage of your total purchasing budget allocated to certified minority- and woman-owned business enterprises? __________________________________________________________.
*Please attach a copy of relevant policies or statements of established goals, if any, to this form.

11. Please provide any other information that demonstrates your commitment to diversity practices or information explaining why your proposal should be exempt from a diversity practices evaluation.
    __________________________________________________________________________
    __________________________________________________________________________
    __________________________________________________________________________
    __________________________________________________________________________
    __________________________________________________________________________

The following documents are attached to this Exhibit:
    __________________________________________________________________________
    __________________________________________________________________________
    __________________________________________________________________________
    __________________________________________________________________________
    __________________________________________________________________________

Date: ________________

Signature: ________________________________

Company Name: ________________________________

Name and Title: ________________________________