

**CONTRACT NUMBER TIRNO-11-D-000XX
PART III– LIST OF DOCUMENTS, EXHIBITS, AND OTHER ATTACHMENTS
SECTION J – LIST OF ATTACHMENTS**

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J.1 GENERAL FINANCIAL AND ORGANIZATIONAL INFORMATION

Offerors are requested to provide information regarding the following items in sufficient detail to allow a full and complete business evaluation. If the question indicated is not applicable or the answer is none, it should be annotated.

(a) Contractor's Name: _____

(b) Address (If financial records are maintained at some other location, show the address of the place where the records are kept):

(c) Telephone Number: _____

(d) Individual (s) to contact regarding this proposal: _____

(e) Cognizant Government:

Agency: _____

Audit Agency: _____

Address: _____

Auditor: _____

(f) (1) Work Distribution for the Last Completed Fiscal Accounting Period:

Sales:

Government cost-reimbursement type prime contracts and subcontracts

..... \$_____

Government fixed-price prime contracts and subcontracts ... \$_____

Commercial Sales \$_____

Total Sales \$_____

(2) Total Sales for first and second fiscal years immediately preceding last completed fiscal year:

Total Sales for First Preceding Fiscal Year \$_____

Total Sales for Second Preceding Fiscal Year \$_____

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(g) Is company a separate rate entity or division? Yes ____ No ____

If a division or subsidiary corporation, name parent company:

(h) Date Company Organized: _____

(i) Manpower:
 Total Employees: _____
 Direct: _____
 Indirect: _____

Standard Work Week (Hours): _____

(j) Commercial Products: _____

(k) Description of Contractor’s system of estimating and accumulating costs under Government contracts. (Check appropriate blocks.)

Estimating System:	Estimated/ Actual Cost	Standard Cost
Job Order	_____	_____
Process	_____	_____
Accumulating System:		
Job Order	_____	_____
Process	_____	_____

Has your cost estimating system been approved by any Government Agency?
 Yes ____ No ____

If yes, give name, date of approval, and location of agency:

Has your cost accumulation system been approved by any Government Agency?
 Yes ____ No ____

If yes, give name, date of approval, and location of agency:

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(l) What is your fiscal year period? (Give month-to-month dates):

(m) Provide indirect cost rates for your last completed fiscal year.

Fiscal Year: _____	Indirect Rate	Basis of Allocation
Fringe Benefits	_____	_____
Overhead	_____	_____
G&A	_____	_____
Other	_____	_____

(n) Have the proposed indirect cost rate (s) been evaluated and accepted by any Government agency? Yes _____ No _____

If yes, give name, date of approval, and location of the Government agency (provide a copy of the latest indirect rate agreement):

Date of last pre-award audit review by a Government agency: _____

If no, data supporting the proposed rates must accompany the cost or price proposal. A breakdown of the items comprising overhead and G&A must be furnished.

(o) Cost estimating is performed by:

Accounting Department _____

Contracting Department _____

Other (describe) _____

(p) Has system of control of Government property been approved by a Government agency? Yes _____ No _____

If yes, give name, date of approval, and location of the Government agency:

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(q) Purchasing System: FAR 44.302 requires the cognizant Government agency to conduct a Contractor Purchasing System Review for each contractor whose sales to the Government, using other than sealed bid procedures, are expected to exceed \$25 million (annual billings) during the next twelve months. The \$25 million sales threshold is comprised of prime contracts, subcontractors under Government prime contracts, and modifications (except when the negotiated price is based on established catalog or market prices or is set by law or regulation).

Has your purchasing system been approved by a Government agency?

Yes ____ No ____

If yes, give name, period of approval and location of the Government agency:

If no, do you estimate that your negotiated sales to the Government during the next twelve months will meet the \$25 million threshold?

Yes ____ No ____

Are your purchasing policies and procedures written?

Yes ____ No ____

(r) Cost Accounting Standards (CAS):

Are you subject to CAS? Yes ____ No ____ Full ____ Modified ____

If yes, do you have any outstanding CAS violations? Yes ____ No ____

If yes, please provide each CAS standard cited and details of citation (s).

If no, please indicate reason for CAS exemption:

Small Business ____ Monetary Threshold ____ Other ____ (please describe) _____

(s) Additionally, offerors shall submit audited financial statements, including a Balance Sheet, Statement of Income (Loss) and Cash Flow for the last two completed fiscal years and the most recent year-to-date actual financial information. If audited financial

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statements are not available, then the offeror shall also provide tax returns from the two most recent fiscal years. Specify resources available to perform the contract without assistance from any outside source. If sufficient resources are not available, indicate in the proposal the amount required and the anticipated source (i.e., bank loans, letter or lines of credit, etc...); in addition, provide a copy of the letter from the bank and names/phone numbers of bank representatives available to confirm the financing arrangement.

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J.3 RESERVED

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J.9 REPORTS

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**ATTACHMENT #5 - DELIVERABLES ACCEPTANCE FORM
TIPSS-4 INSPECTION, ACCEPTANCE & RECEIVING REPORT**

ATTACHMENT #6 - TIPSS-4 T.O. STATUS REPORT

ATTACHMENT #7 - TIPSS-4 FIXED-PRICE T.O. STATUS REPORT

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ATTACHMENT #10 - TIPSS-4 QUARTERLY BUREAU REPORT

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**J.11 ATTACHMENT #11 - HBCUs/MIs (SECTION H.29)
AGREEMENT BETWEEN HISTORICALLY BLACK COLLEGE/UNIVERSITY
(HBCU)/MINORITY INSTITUTION (MI) AND TIPSS-4 PRIME CONTRACTOR**

J.12 ATTACHMENT #12 - IRS HSPD-12 PIV I PROCEDURES MANUAL

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**J.14 ATTACHMENT #14 - NATIONAL DEFENSE INDUSTRIAL ASSOCIATION
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**J.16 ATTACHMENT #15 - 52.219-14 LIMITATIONS ON SUBCONTRACTING
COMPLIANCE REPORT**