SUBCONTRACTING PLAN

FOR
SMALL BUSINESS
SMALL DISADVANTAGED BUSINESS

DATE: _____

CONTRACTOR: _____

ADDRESS: _____

SOLICITATION NO.: _____

TITLE/LOCATION: _____

_____

The following, together with any attachments, is submitted as a Subcontracting Plan to satisfy the requirements of Federal Acquisition Regulations SUBPART 19.7. The following goals are proposed for the total contract including all option periods. This contract ❑ does ❑ does not contain option periods. (Use Attachment (2) for showing option periods.) Percentages may be rounded to nearest tenth of a percent.

1. a. Total Contract Value $_____

   b. Total Subcontracted $_____ _____% of 1.a.

2. The following dollars and percentage goals are applicable to the contract cited above.

   a. LB $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to subcontractors who are large business concerns.

   b. SB $_____ _____% of 1.b. (2a. + 2b.=100% of 1.b.)

Total planned subcontracting dollars under this contract will go to subcontractors who are small business concerns and contracts awarded under the Javits Wagner O'Day Act Contracts (JWOD) to National Industries for the Severely Handicapped (NISH) and to National Industries for the Blind (NIB). This number includes all small businesses, including HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns and HBCU/MI (2c., 2d., 2e., 2f., 2g and 2h. below).

c. HUBZone $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to subcontractors who are qualified HUBZone (historically underutilized business zone) small business concerns. Attach support rationale for goals less than 3.1%. (Included in 2b., above, as a subset.)

d. WOSB $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to subcontractors who are women owned small business concerns. Attach support rationale for goals less than 13.8%. (Included in 2b., above, as a subset.)

e. SDB $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to subcontractors who are SB concerns owned and controlled by socially and economically disadvantaged individuals. Attach support rationale for goals less than 15.3%. (Included in 2b., above, as a subset.)

f. VOSB $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to subcontractors who are SB concerns owned and controlled by veterans. Attach support rationale for goals less than 3%. (Included in 2b., above, as a subset.)

g. SDVOSB $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to subcontractors who are SB concerns owned and controlled by service-disabled veterans. Attach support rationale for goals less than 3%. (Included in 2b. and 2f., above, as a subset.)

h. HBCU/MI $_____ _____% of 1.b.

Total planned subcontracting dollars under this contract will go to Historically Black Colleges and Universities or Minority Institutions as identified in FAR 26. (Included in 2b. and 2e., above, as a subset.)

3. The following principal products and/or services will be subcontracted under this contract:

a. Products/services planned for subcontracting to LB concerns:

_____

_____

b. Products/services planned to be subcontracted to SB concerns:

_____

_____

c. Products/services planned to be subcontracted to HUBZone SB concerns:

_____

_____

d. Products/services planned to be subcontracted to WOSB concerns:

_____

_____

e. Products/services planned for subcontracting to SDB concerns:

_____

_____

f. Products/services planned for subcontracting to VOSB concerns:

_____

_____

g. Products/services planned for subcontracting to SDVOSB concerns:

_____

_____

h. Products/services planned for subcontracting to HBCU/MI organizations:

_____

_____

(ATTACHMENT MAY BE USED IF ADDITIONAL SPACE IS REQUIRED)

4. The following method was used to develop the above subcontracting goals (i.e., statement explaining how the products and services areas to be subcontracted were established, how the areas to be subcontracted to SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns and HBCU/MI were determined, and how SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns and HBCU/MI capabilities were determined).

_____

_____

_____

5. Source lists utilized in making the determinations in 4, above are as follows:

_____

_____

_____

6. Indirect and overhead costs ❑ have ❑ have not been included in the goals specified in 1 and 2 above. If "have" been is checked, explain the method used in determining the proportionate share of indirect and overhead costs to be allocated as subcontracts to SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns, and HBCU/MI and the products and services planned:

_____

_____

_____

7. The following employee will administer the subcontracting program:

NAME: _____

ADDRESS: _____

TELEPHONE NO.:_____ FAX NO.: _____EMAIL:_____

TITLE: _____

This individual's specific duties, as they relate to the firm's subcontracting program, are general overall responsibility for this company's Small Business Program. This person should have knowledge of the federal small business programs and be knowledgeable about federal procurement practices. If the prime decides to change the person in this position, they must notify the contracting officer and the Deputy for Small Business. The administrator is responsible for the development, preparation and execution of individual subcontracting plans, and for monitoring performance relative to contractual subcontracting requirements contained in this plan, including, but not limited to:

a. Developing and maintaining bidders lists of SB, HUBZone, WOSB, SDB, VOSB, and , SDVOSB concerns, and HBCU/MI from all possible sources.
b. Ensuring that procurement packages are structured to permit SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns, and HBCU/MI to participate to the maximum extent possible.
c. Assuring inclusion of SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns, and HBCU/MI in all solicitations for products or services which they are capable of providing.
d. Reviewing solicitations to remove statements, clauses, etc., which may tend to restrict or prohibit SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB, and HBCU/MI participation.
e. Ensuring periodic rotation of potential subcontractors on bidders lists.
f. Ensuring that the bid proposal review board documents its reasons for not selecting low bids submitted by SB, HUBZone, WOSB, SDB, VOSB, and SDVOSB concerns, and HBCU/MI.
g. Ensuring the establishment and maintenance of records of solicitations and subcontract award activity.
h. Attending or arranging for attendance of company counselors at Business Opportunity Workshops, Minority Business Enterprise Seminars, Trade Fairs, etc.
i. Conducting or arranging for the motivational training for purchasing personnel pursuant to the intent of P.L. 95-507.

j. Monitoring attainment of proposed goals.
k. Preparing and submitting required periodic subcontracting reports.
l. Coordinating contractor's activities during the conducting of compliance reviews by Federal agencies.
m. Coordinating the conduct of contractor's activities involving its small and small disadvantaged business subcontracting program.
n. Additions to (or deletions from) the duties specified above are as follows:

_____

_____

8. The following efforts will be taken to assure that SB, HUBZone SB, SDB, NISH/NIB, WOSB, VOSB, SDVOSB concerns, and HBCU/MI will have an equitable opportunity to compete for subcontracts.

a. Outreach efforts will be made by identifying:
   - Contacts with minority and small business trade associations.
   - Contacts with business development organizations.
   - Attendance at small and minority business procurement conference and trade fairs.
b. Sources will be requested from SBA's PRO-Net System available at http://pro-net.sba.gov/pro-net/search.html on the internet.
   List other automated systems to be used.

   _____

   _____

c. The following internal efforts will be made to guide and encourage buyers:
   (i) Workshops, seminars and training programs will be conducted.
   (ii) Activities will be monitored to evaluate compliance with this subcontracting plan.
   (iii) Arrange interviews with SDB/WOSB contractors, NISH/NIB workshops and HBCU/MI.
d. Small and SDB concern source lists, guides and other data identifying SB, HUBZone SB, SDB, WOSB, VOSB, and SDVOSB concerns will be maintained and utilized by buyers in soliciting subcontracts.
e. Additions to (or deletions from) the above listed efforts are as follows:

_____

_____

_____

9. The offeror (contractor) agrees that the clause entitled "Utilization of Small Business Concerns and Small Business Concerns Owned and Controlled by Socially and Economically Disadvantaged Business Concerns" will be included in all subcontracts which offer further subcontracting

opportunities, and all subcontractors, except SB concerns, who receive subcontracts in excess of $500,000 ($1,000,000 for Construction) will be required to adopt and comply with subcontracting plan similar to this one. Such plans will be reviewed by comparing them with the provisions of P.L. 95-507 and assuring that all minimum requirements of an acceptable subcontracting plan have been satisfied. The acceptability of percentage goals shall be determined on a case-by-case basis depending on the supplies/services involved, the availability of potential small and small disadvantaged subcontractors, and prior experience. Once approved and implemented, plans will be monitored through the submission of periodic reports, and/or, as time and availability of funds permit, periodic visits to review subcontracting program progress.

10. The offeror (contractor) agrees to submit such periodic reports and cooperate in any studies or surveys as may be required by the contracting agency or the Small Business Administration in order to determine the extent of compliance by the bidder (contractor) with the subcontracting plan and with clause entitled "Utilization of Small Business Concerns and Small Disadvantaged Business Concerns" contained in the contract. As required by P.L. 95-507, Section 211, the contractor shall submit the original and copy of "Subcontracting Report for Individual Contracts", SF 294, and "Summary Subcontract Report", SF 295, in accordance with the SF294/SF295 Distribution List provided by awarding contract agency. Regardless of the effective date of this contract, the reports shall be submitted for the entire life of the contract on the following dates:

Information as of:	Mail by:	Due:
March 31	April 25	April 30
September 30	October 25	October 30

The Report shall be sent to the address indicated on Attachment (1), SF294/SF295 Distribution List.

11. The offeror (contractor) agrees to maintain at least the following types of records to document compliance with this subcontracting plan:
    a. Source lists, guides and other data identifying SB, HUBZone SB, SDB, WOSB, VOSB, and SDVOSB concerns, and HBCU/MI.
    b. Organizations contacted to locate SB, HUBZone SB, SDB, WOSB, VOSB, and SDVOSB concerns, and HBCU/MI.
    c. On a contract-by-contract basis, records on all subcontract solicitations over $100,000, indicating for each solicitation (1) whether SB concerns were solicited, and if not, why not; (2) whether HUBZone SB concerns were solicited, and if not, why not, (3) whether SDB concerns were solicited, and if not, why not; and (4) whether WOSB concerns were solicited, and if not, why not, (5) whether VOSB concerns were solicited, and if not, why not, (6) whether SDVOSB concerns were solicited, and if not, why not, and (7) reasons for the failure of solicited SB, HUBZone SB, SDB, WOSB, VOSB, and SDVOSB concerns, and HBCU/MI to receive the subcontract award.
    d. Records to support other outreach efforts, e.g., contacts with Minority and Small Business Trade Associations, business development organizations, and attendance at small and small disadvantaged business procurement conferences and trade fairs.

12. Plan Submitted by:

Signed: _____ Date: _____

Printed Name: _____

Title: _____

13. Plan reviewed by:

Signed: _____ Date: _____
Small Business Specialist

14. Plan reviewed by:

Signed: _____ Date: _____
Small Business Administration – Procurement Center Representative

15. Plan approved by:

Signed: _____ Date: _____
Procuring Contracting Officer

The original copy of this plan is included in the file and made a material part of the contract.
Copy to:
Small Business Specialist
SBA PCR

SF294/SF295 DISTRIBUTION

Solicitation N62467-____-____-_____

Agency	SF294	SF295
Associate Director for Small Business Code	None	Copy
Commanding Officer Attn: Code , Small Business Office	Copy	Original
Commanding Officer Attn: _____	( ) Copy ( ) Original ( ) None	( ) Copy ( ) None
Resident Officer in Charge of Construction Attn:	( ) Copy ( ) Original ( ) None	( ) Copy ( ) None
Small Business Administration Commercial Market Representative (NOTE: Call SBA Headquarters, Washington, DC at (202) 205-6475 for correct address if unknown.)	None	Copy

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SF-294/SF-295 Report

Information as of:	Mail by:	Due:
March 31	April 25	April 30
September 30	October 25	October 30

Attachment (1)

Option Period for Solicitation N_____-____-___-_____ Subcontracting Goals

	Base Period	Option Period 1	Option Period 2	Option Period 3	Option Period 4	Total All Periods
1. Total Contract	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
2. Total Subcontracted	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 1)	% _____	% _____	% _____	% _____	% _____	% _____
3. To LB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
4. To SB & NISH/NIB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
5. To HUBZone SB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
6. To WOSB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
7. To SDB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
8. To VOSB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
9. To SDVOSB	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____
10. To HBCU/MI	$ _____	$ _____	$ _____	$ _____	$ _____	$ _____
(% of Line 2)	% _____	% _____	% _____	% _____	% _____	% _____