



**INDIANA ECONOMIC IMPACT - PROPOSALS AND CONTRACTS**

State Form 51778 (R4 / 1-06)  
DEPARTMENT OF ADMINISTRATION  
Approved by State Board of Accounts, 2006

This information is required by the Indiana Department of Administration for all contractors, vendors/suppliers to the State of Indiana (complete all 22 items).

1	<b>Legal Name of firm:</b>	University of Indianapolis (UIndy)
2	<b>Address/City/State/Zip Code:</b>	1400 E. Hanna Avenue; Indianapolis, IN 46227-3630
3	<b>Telephone #/Fax #/Website:</b>	317-788-3301 / n/a / <a href="http://www.uindy.edu">www.uindy.edu</a>
4	<b>Federal Tax Identification Number:</b>	35-0868107
5	<b>State/Country of domicile/incorporation:</b>	Indiana
6	<b>Location of firm's headquarters or principal place of business:</b>	1400 E. Hanna Avenue; Indianapolis, IN 46227-3630
7	<b>Name of parent company or holding company (if applicable):</b>	n/a
8	<b>State/Country of domicile/incorporation of company listed in #7:</b>	n/a
9	<b>Address of company listed in #7:</b>	n/a
10	<b>IN Department of Workforce Development (DWD) account number:</b>	73344
11	<b>IN Department of Revenue (DOR) account number:</b>	1808461001
12	<b>Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:</b>	2228
13	<b>Total number of employees per most recently completed IRS Form W-2 distribution:</b>	2258
14	<b>Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:</b>	47,902,820.59
15	<b>Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:</b>	48,824,390.68
16	<b>Total amount of this proposal, bid, or current contract:</b>	26,091,390.24

**ACCOUNTING OF INDIANA RESIDENT EMPLOYEES**

17	<b>Prime Contractor Company Name:</b>	UIndy
18	<b>Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:</b>	2.45

19	<b>Subcontractor Company Name:</b>	BCforward	ESC's- CIESC	Five Star	Sapphire Marketing	Chamberlin/Dunn
20	<b>Address/Contact Person/Telephone Number/Tax ID Number:</b>	9777 North College Avenue, Indianapolis IN 46280/Todd Tolson/317-493-2017/35-2049936	3500 Depauw Blvd STE 2020, Indianapolis, IN 46268/ Andrew Melin/317-759-554735/1811036/	3310 E. 10th St Suite 4 #358 Jeffersonville, IN 47130/April Harper/812-340-4929/55-0906339	277 E. 12th Street, Indianapolis, IN 46202/Jenn Golding/317-643-2071/0159432359	350 Massachusetts Avenue Suite 300, Indianapolis, IN 46204/Molly Chamberlin/317-435-7490/82-3390147
21	<b>Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:</b>	1.00	13.00	1.00	0.40	0.22

22	<b>Affirmation by authorized official:</b> I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief:	
	Signature:	
	Name of authorized official:	Jason D. Dudich
	Title:	Vice President of Finance & Administration, Treasurer
	Date:	Feb 11, 2022

FTE DETAILS  
Job Titles and Contributing FTE

- Populate the yellow-shaded cells; with all applicable job titles and the total FTE count.  
 - Respondents may insert additional rows to account for all job titles attributing to the total FTE count.  
 Please keep in mind that the only FTE's that should be included in this count are Indiana employees working on this contract ONLY. If there are 10 employees working on this contract but they are splitting their time with numerous other contracts as well, then these employees cannot be counted as 1 FTE. Instead, these employees should be counted as a fraction of an FTE. For example: The project length of the contract is 24 months. There are 10 employees working on the contract over the 24 month contract period. 5 employees are working solely on the project for 24 months. 3 employees are working equal time on 2 projects for 24 months. 2 employees are working solely on the project for 6 months.  
 The FTEs would be calculated as follows:  
 5 employees x 24 months (24 months working solely on this project) x 1 (time spent solely on this project) = 120 months / 24 months (length of contract) = 5 FTEs  
 3 employees x 24 months x .5 (splitting time equally between 2 projects) = 36 months / 24 months = 1.5 FTEs  
 2 employees x 6 months (6 months dedicated solely to this project) x 1 (time spent solely on this project) = 12 months / 24 months = .5 FTEs

**Column Title Definitions:**  
**Number of Employees** = Number of employees working on this State contract.  
**Duration (In Months)** = Amount of time that the employee(s) will spend on the State contract.  
**Time Spent (Percentage)** = Percentage of time the employee(s) will be working on the contract.

Duration of Initial Contract Term (In Months) 30 \*Number based on initial contract term

<b>PRIME CONTRACTOR COMPANY</b>				
EMPLOYEE JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Executive Director	1	30	25.00%	0.25
Director of Rural Education	1	30	25.00%	0.25
Administrative Assistant	1	30	10.00%	0.10
Director of Operations	1	30	10.00%	0.10
Contract Specialist	1	30	100.00%	1.00
Accounting Support	3	30	25.00%	0.75
<b>TOTAL FTE COUNT</b>				<b>2.45</b>

<b>SUB CONTRACTOR COMPANY NAME</b>				
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Program Manager	1	30	100%	1.00
<b>TOTAL FTE COUNT</b>				<b>1.00</b>

<b>SUB CONTRACTOR COMPANY NAME</b>				
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Training Specialist	1	30	100%	1.00
Training Support	12	30	100%	12.00
<b>TOTAL FTE COUNT</b>				<b>13.00</b>

<b>SUB CONTRACTOR COMPANY NAME</b>				
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Project Manager- STEM	1	30	100%	1.00
<b>TOTAL FTE COUNT</b>				<b>1.00</b>

<b>SUB CONTRACTOR COMPANY NAME</b>				
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Marketing Lead	2	30	10%	0.20
Marketing Support	4	30	5%	0.20
<b>TOTAL FTE COUNT</b>				<b>0.40</b>

<b>SUB CONTRACTOR COMPANY NAME</b>				
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE
Research Specialist	1	30	0.15	0.15
Research Specialist	1	30	0.07	0.07
<b>TOTAL FTE COUNT</b>				<b>0.22</b>