



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	Legal Name of firm:	Astbury Water Technology Inc.
2	Address/City/State/Zip Code:	5940 W. Raymond St./Indianapolis/Indiana/46241
3	Telephone #/Fax #/Website:	317-281-7261/317-290-1670/www.astburygroup.com
4	Federal Tax Identification Number:	35-1986047
5	State/Country of domicile/incorporation:	Indiana USA
6	Location of firm's headquarters or principal place of business:	Indianapolis Indiana
7	Name of parent company or holding company (if applicable):	
8	State/Country of domicile/incorporation of company listed in #7:	
9	Address of company listed in #7:	
10	IN Department of Workforce Development (DWD) account number:	408902
11	IN Department of Revenue (DOR) account number:	0006731155 001
12	Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:	86
13	Total number of employees per most recently completed IRS Form W-2 distribution:	103
14	Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:	\$3,020,746
15	Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:	\$33,354,425
16	Total amount of this proposal, bid, or current contract:	\$648,000

ACCOUNTING OF INDIANA RESIDENT EMPLOYEES

17	Prime Contractor Company Name:	Astbury Water Technology Inc.
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18	Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:	2.00
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19	Subcontractor Company Name:	Professional Management Enterprises	Diverse Staffing		
20	Address/Contact Person/Telephone Number/Tax ID Number:	Haskell Portee 317-541-0200	Amber Amores-Villalobos 317-385-5096		
21	Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:	0.13	0.00	0.20	0.00

22	Affirmation by authorized official: I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief:			
	Signature:	<i>Daniel Astbury</i>		
	Name of authorized official:	<i>Daniel Astbury</i>		
	Title:	<i>President</i>		
	Date:	<i>4/27/2022</i>		

