

**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>	Language Training Center, Inc.
2	<b>Address/City/State/Zip Code:</b>	5750 Castle Creek Parkway North Drive, Suite 150, Indianapolis, IN 46250
3	<b>Telephone #/Fax #/Website:</b>	Telephone Number: 888-456-1626; Fax Number: 317-578-1673; Website: <a href="https://itclanguagesolutions.com/">https://itclanguagesolutions.com/</a>
4	<b>Federal Tax Identification Number:</b>	35-2020774
5	<b>State/Country of domicile/incorporation:</b>	Indiana, United States
6	<b>Location of firm's headquarters or principal place of business:</b>	5750 Castle Creek Parkway North Drive, Suite 150, Indianapolis, IN 46250
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>	426131
11	<b>IN Department of Revenue (DOR) account number:</b>	0007106610-001
12	<b>Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:</b>	38
13	<b>Total number of employees per most recently completed IRS Form W-2 distribution:</b>	55
14	<b>Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:</b>	\$1,322,995.97
15	<b>Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:</b>	\$2,114,950.01
16	<b>Total amount of this proposal, bid, or current contract:</b>	\$1,321,279.75

**ACCOUNTING OF INDIANA RESIDENT EMPLOYEES**

17	<b>Prime Contractor Company Name:</b>	Language Training Center, Inc.
18	<b>Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:</b>	1.00

19	<b>Subcontractor Company Name:</b>	Escholwood Corp / Terry's Transcripts	Eloquence Language Services LLC	HIELO Services LLC / Latin Media	Intrinz Inc	Tosca LLC
20	<b>Address/Contact Person/Telephone Number/Tax ID Number:</b>	120 Elm Street, P.O. Box 181, Mulberry, IN 46058 / Terry Wood / 765-426-3679 / 35-1951462	3555 Inverness Blvd., Carmel, IN 46032 / Karen Friedman / 317-446-0951 / 77-0636491	3011 Crabapple Lane, Hobart, IN 46342 / Maria Guillen / 219-973-1952 / 83-0438251	12175 Visionary Way, #430, Fishers, IN 46038 / Patricia Gurnell / 317-288-2267 / 27-4726510	12175 Visionary Way, #430, Fishers, IN 46038 / Isadore Gurnell / 317-938-6996 / 83-2998406
21	<b>Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:</b>	0.25	0.05	0.05	0.05	0.05

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: <u>Mart George</u>
	Name of authorized official: Martin George
	Title: CEO/President
	Date: 7/15/2020

**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)		24			*Number based on initial contract term
PRIME CONTRACTOR COMPANY					
EMPLOYEE JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Project Managers	5	24	100%	5.00	
Example: Project Coordinators	3	24	50%	1.50	
Example: Project Directors	2	6	100%	0.50	
Quality Assurance Manager	1	24	10.00%	0.10	
Interpreting Manager	1	24	10.00%	0.10	
Interpreter Scheduling Coordinator	2	24	25.00%	0.50	
Finance Coordinator	1	24	5.00%	0.05	
Staff ASL Interpreter	2	24	10.00%	0.20	
Interpreting Finance Supervisor	1	24	5.00%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				1.00	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
CART Provider	2	24	10%	0.20	
				0.00	
TOTAL FTE COUNT				0.25	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	
SUB CONTRACTOR COMPANY NAME					
JOB TITLE	Number of Employees	Duration (In Months)	Time Spent (Percentage)	NUMBER OF FTE	
Example: Developer	2	6	100%	0.50	
Account Manager	1	24	5%	0.05	
				0.00	
				0.00	
TOTAL FTE COUNT				0.05	