

Exhibit 1

The University of Texas at Austin Individual Small Business Subcontracting Plan

Solicitation (Contract): _____

Proposal Entitled: _____

OSP Number: _____

UTA Authorization: _____

Arthur A. McDonald

Date

Director, Small and Disadvantaged Business Office

Principal Investigator

Name: _____

Phone: _____

E-mail Address: _____

Sponsor Information

Agency Name: _____

Address: _____

Contracting Officer: _____

Contracting Officer Signature: _____

Date

*(Applicable to the Cited Solicitation/Contract and expressed in terms of subcontracting dollars,
excluding indirect and overhead costs)*

A. TOTAL VALUE OF ALL PLANNED SUBCONTRACTING:

\$ _____

B. SUBTOTAL VALUE OF ALL PLANNED SUBCONTRACTING TO SMALL BUSINESSES:

\$ _____

C. SUBTOTAL VALUE OF ALL PLANNED SUBCONTRACTING TO LARGE BUSINESSES:

\$ _____

*Funds directed toward a SB concern may be counted in all qualifying categories!
(e.g. WOSB and HUBZoneSB)*

	<u>DOLLAR VALUE</u>	<u>PERCENTAGE OF CATEGORY A</u>
Veteran-Owned Small Business (VOSB): <i>Principal products/services involved –</i>	\$ _____	_____ %

Service Disabled Small Business (SDVOSB): <i>Principal products/services involved –</i>	\$ _____	_____ %

Woman-Owned Small Business (WOSB): <i>Principal products/services involved –</i>	\$ _____	_____ %

Historically Underutilized Business Zone (HUBZone): <i>Principal products/services involved –</i>	\$ _____	_____ %

Small Disadvantaged Business (SDB): <i>Principal products/services involved –</i>	\$ _____	_____ %

Historically Black Colleges & Universities/ Small Disadvantaged Business (HBCU/MI): <i>Principal products/services involved –</i>	\$ _____	_____ %

Small Business (SB): <i>Principal products/services involved –</i>	\$ _____	_____ %

