



The University of
Texas System

Office of HUB Programs
512-499-4530
www.utsystem.edu/hub

HUB Subcontracting Plan for

- Miscellaneous Technical Services

Office of Capital Projects (OCP) Managed Projects Only

***Note:** the HUB Program is also referred to as the VetHub program. The terms HUB and VetHUB will be used interchangeably throughout the HSP.



I.	Instructions to Complete the Technical Services HSP	Pages 1-2
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* **Note:** *If awarded a contract, the Prime Contractor Progress Assessment Report (PAR) is a required form with each payment application submitted. This form is a condition of payment.*

For questions or clarifications regarding the HUB Subcontracting Plan, please contact the appropriate HUB Coordinator listed below:

UT Arlington, UT Dallas, and UT Tyler

Stephanie Park
Associate Director of HUB Programs
972-883-5377
spark@utsystem.edu

Stephen F. Austin and UT Rio Grande Valley

Cynthia Booker
Senior HUB Coordinator
512-322-3779
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Kyle Hayes
HUB Coordinator
512-322-3745
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UT System Administration
Historically Underutilized Subcontracting Plans
for Miscellaneous Technical Services 0.25%

It is the policy of The University of Texas System to require a good faith effort to utilize historically underutilized businesses (HUBs) in accordance with the Texas Administrative Code Rules for the HUB Program in Title 34, Part 1, Chapter 20, Subchapter D, Division 1 including the emergency amendments issued on December 2, 2025, as applicable.

Statement of Probability – OCP has determined that subcontracting opportunities are probable in connection with this solicitation.

Responses that do not include a completed HUB Subcontracting Plan shall be rejected due to material failure to comply with Government Code, §2161.252(b).

Determination of Good Faith Effort in developing an HSP for technical services contracts is established if the respondent provides documentation of meeting one of the following options:

Option 1 – Self-Performing HSP-Complete:

- a) Section 1 – Respondent and requisition information. VID # refers to Tax ID number. Requisition is the project number. Include your email address, contact phone number and email address should UT System HUB have any questions.
- b) Section 2A – No, I will not be subcontracting any portion of the contract and will be fulfilling the entire contract with my own resources.
- c) Section 3 – Self Performing Justification – Check no and provide explanation in box **
- d) Section 4 – Affirmation
- e) Letter of HUB Commitment

**Section 3 Sample Statement- edit as needed

_____ will be fulfilling the entire contract with our own resources, including employees, goods, services, transportation and delivery. If sub-contracting opportunities are identified at a future date, we will immediately contact the project manager and HUB Coordinator and commit to performance of a Good Faith Effort through solicitation of HUB firms and submit an amended HUB Subcontracting Plan.

Option 2 – Complete the following if all sub-contracting opportunities are to be performed by ONLY state of Texas certified HUB vendors.

- a) Section 1 – Respondent and requisition information. VID # refers to Tax ID number. Requisition is the project number. Include your email address, contact phone number should UT System HUB have any questions.
- b) Section 2A – Yes, I will be subcontracting portions of the contract.
Section 2B – List all the portions of work to be subcontracted, and indicate the percentage of the contract you expect to award to HUB vendors.
- c) Section 2C – Yes
- d) Section 4 – Affirmation
- e) Good Faith Effort (Attachment A) – Complete this attachment for each subcontracting opportunity listed in Section 2B
- f) Letter of Transmittal

Option 3 – Complete the following if sub-contracting opportunities by both HUB and non-HUB vendors meets or exceeds the HUB technical services goal stated above:

- c) Section 1 – Respondent and requisition information. VID # refers to Tax ID number. Requisition is the project number. Include your email address, contact phone number should UT System HUB have any questions.
- a) Section 2A – Yes, I will be subcontracting portions of the contract.
- b) Section 2B – List all portions of work to be subcontracted and indicate the percentage of the contract you expect to award to HUB vendors and Non-HUB vendors.
- c) Section 2C – No
- d) Section 2D – Yes
- e) Section 4 – Affirmation
- f) Good Faith Effort (Attachment A) – Complete this attachment for each subcontracting opportunity listed in 2B.

-Instructions continued next page-

- Instructions continued -

Option 4 – If you are subcontracting with HUB vendors and Non-HUB vendors (or only Non-HUB vendors), and the total percentage subcontracting with HUB vendors **does not meet or exceed the HUB Goal**, complete the following:

- a) Section 1 - Respondent and Requisition Information. VID number refers to Tax ID number.
- b) Section 2A – Yes, I will be subcontracting portions of the contract.
- c) Section 2B – List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to HUB vendors and Non-HUB vendors
- d) Section 2C –No
- e) Section 2D –No
- f) Section 4 –Affirmation
Good Faith Effort (Attachment B) – Complete and attach your Good Faith Effort documentation including one copy of the invitation to bid (ITB) and an excel spreadsheet listing all subcontractors contacted about the opportunity.
Note: Submit one Attachment B page 1 and 2, for each scope of work

Determination of Good Faith Effort in developing an HSP for technical services contracts includes but is not limited to the following:

1. Divide the work into reasonable lots or portions to the extent consistent with prudent industry practices.
2. **Provide notice to a minimum of two (2) trade organizations or development centers** of subcontracting opportunities to be disseminated to their membership. The notice shall include scope of work; required qualifications; and identify a contact person (including phone number and email address). Notify the trade organizations or development centers of contracting opportunities with reasonable time to disseminate information to members/participants (no less than **seven (7)** working days from receipt of notice). *Weekends and holidays do not count toward the 7-day notice. The day the notification is sent and the day the proposal is due, do not count toward the 7-day notice.*
3. **Notify three (3) or more HUBs of for each discipline that is to be subcontracted in writing.** The notice shall include scope of work; required qualifications; and identify a contact person (including phone number and email address). Notify the HUBs of contracting opportunities with reasonable time to respond (**no less than seven (7)** working days from receipt of notice). *Weekends and holidays do not count toward the 7-day notice. The day the notification is sent and the day the proposal is due, do not count toward the 7-day notice.*
4. Provide written justification of the selection process if the selected subcontractor is not a HUB.
5. **The respondent shall use the Centralized Master Bidders List (CMBL)/ VetHUB Directory when searching for active HUB subcontractors. The CMBL/ VetHUB Directory can be found at: <https://mycpa.cpa.state.tx.us/tpasscmbsearch/tpasscmbsearch.do>.**
6. The respondent must keep and provide if requested official written documentation (i.e. electronic mail, written correspondence, etc.) to demonstrate compliance.
7. **Disabled Veteran-owned prime firms are also required to complete the HUB Plan identifying all subcontractors**

Changes to Plan

Changes to the HSP must be approved in writing by UT System OCP Project Manager and HUB Coordinator **prior** to any work taking place by the new subcontractor. Justification is required to explain the subcontractor substitutions. Once the contract has been awarded the HSP is considered part of the contract. Violations to the HSP will be deemed in breach of the contract by UT System.

Reporting – After Award

Prime firm payment requests shall include: The State of Texas Prime Contractor Progress Assessment Report (PAR) identifying all subcontractor payments. **It is a condition of payment to report all (HUB and Non-HUB) subcontracting expenditures.**

Exhibit H Attachments: <http://www.utsystem.edu/offices/historically-underutilized-business/hub-forms>. Please use the forms posted with this RFQ to complete HSP.

Regional HUB Coordinator
 The University of Texas System
 Office of HUB Programs
 210 West 7th Street
 Austin, Texas 78701

RE: Historically Underutilized Business Plan for (Project Title): _____
 Project/ RFP/ RFQ Number: _____ - _____

Dear

I am pleased to forward this HUB Subcontracting Plan as an integral part of our response in connection with your solicitation document referencing the above project.

I have read and understand The University of Texas System Policy on Utilization of Historically Underutilized Businesses (HUBs) stated on page 1. I also understand the University of Texas System Annual Procurement Goal as stated in the Agency Special Instructions section of the HUB Subcontracting Plan, page 6.

Subcontractors	No. of Subcontractors	Total Subcontract \$ Value	Total Estimated Subcontracting	% VetHub
HUB			%	%
NON-HUB			%	
TOTAL			%	

I understand the above HUB percentages must represent Texas Comptroller HUB certification standards. For each of the listed HUB firms, I have attached a Texas Comptroller HUB Certification document.

During the course of this contract, if so awarded, should we discover the need to subcontract any portion of the Scope of Work, we will notify you immediately in order to take the appropriate steps to amend this HUB subcontracting Plan.

Sincerely,

 (signature)

 (print name)

Project Executive
 cc: Project Manager

Regional HUB Coordinator
The University of Texas System
Office of HUB Programs
210 West 7th Street
Austin, Texas 78701

RE: Historically Underutilized Business Plan for (Project Title): _____
Project/ RFP/ RFQ Number: _____ - _____

Dear

I am pleased to forward this HUB Subcontracting Plan as an integral part of our response in connection with your solicitation document referencing the above project.

I have read and understand The University of Texas System Policy on Utilization of Historically Underutilized Businesses (HUBs) stated on page 1. I also understand the University of Texas System Annual Procurement Goal as stated in the Agency Special Instructions section of the HUB Subcontracting Plan, page 6.

Our company has determined that we have no need to subcontract any portion of the defined Scope of Work in the posted solicitation document; i.e., we will self-perform all aspects of the Scope of Work.

During the course of this contract, if so awarded, should we discover the need to subcontract any portion of the Scope of Work, we will notify you immediately in order to take the appropriate steps to amend this HUB subcontracting Plan.

Sincerely,

(signature)

(print name)

Project Executive
cc: Project Manager

Regional HUB Coordinator
Office of HUB Programs
The University of Texas System
210 W. 7th Street
Austin, TX 78701

RE: Historically Underutilized Business Plan for (Project Title): _____

RFP/RFQ Number: _____

Dear

I have read and understand The University of Texas System Policy on Utilization of Historically Underutilized Businesses (HUBs). In accordance with the requirements outlined in the HUB Subcontracting Plan (HSP), I am pleased to forward this HUB Subcontracting Plan as an integral part of our proposal in connection with your invitation for request for qualifications/proposals, referencing RFP/ RFQ Number _____ .

I understand that the Good Faith Effort will be documented by a two- part HUB Subcontracting Plan (HSP) process. **Part One (1)** of the HSP submission will reflect self-performance with the appropriate sections completed as outlined in the HSP Instruction sheet located on page 2 & 3.

As the scope of work/project is defined (SD) under the terms of this contract, **Part Two (2)** of the process will require a revised HUB Subcontracting Plan (SD), if the Work/ Project value over the *duration* of the contract *meets or exceeds* \$100,000.00. The revised HUB Subcontracting Plan will be submitted to the HUB Coordinator prior to execution of each contract and/or amendment process. A *Progress Assessment Report* (PAR) is required as a condition of payment with each monthly billing in conjunction with this contract amendment.

Sincerely,

(signature)

(print name)

Project Administrator _____



HUB Subcontracting Plan (HSP)

In accordance with Texas Gov't Code §2161.252, the contracting agency has determined that subcontracting opportunities are probable under this contract. Therefore, all respondents, including State of Texas certified Historically Underutilized Businesses (HUBs) must complete and submit this State of Texas HUB Subcontracting Plan (HSP) with their response to the bid requisition (solicitation).

NOTE: When a state agency requires a subcontracting plan, a bid, proposal, offer, or other applicable expression of interest for the contract must contain a plan to be considered responsive.

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas.

- - Agency Special Instructions/Additional Requirements - -

In accordance with 34 TAC §20.285(d) emergency rule as of December 2, 2025, a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs shall qualify for meeting the HUB goal.

In accordance with 34 TAC §20.284(c) emergency rule implemented December 2, 2025, the goal below is applicable for this procurement category for The University of Texas System Administration only, effective December 31, 2025.

Other Services - 0.25%

- Respondents shall submit a completed HUB Subcontracting Plan (HSP) to be considered responsive. Failure to submit a completed HSP shall result in the bid, proposal or other expression of interest to be considered Non-responsive.
- Prime Contractor Progress Assessment Report (PAR) shall be submitted with each request for payment as a condition of payment.
- Please note that phone logs are no longer acceptable documentation of Good Faith Effort. Only fax, email and certified letter are acceptable.

SECTION 1: RESPONDENT AND REQUISITION INFORMATION

a. Respondent (Company) Name: _____ State of Texas VID #: _____
 Point of Contact: _____ Phone #: _____
 E-mail Address: _____ Fax #: _____

b. Is your company a State of Texas certified HUB? - Yes - No

c. Requisition #: _____ Bid Open Date: _____
(mm/dd/yyyy)

Enter your company's name here: _____

Requisition #: _____

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, **including contracted staffing, goods and services will be subcontracted**. Note: In accordance with 34 TAC §20.282, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:

- **Yes**, I will be subcontracting portions of the contract. (If **Yes**, complete Item b of this SECTION and continue to Item c of this SECTION.)
- **No**, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If **No**, continue to SECTION 3 and SECTION 4.)

b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

Item #	Subcontracting Opportunity Description	HUBs	Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs.	Percentage of the contract expected to be subcontracted to non-HUBs.
1		%	%
2		%	%
3		%	%
4		%	%
5		%	%
6		%	%
7		%	%
8		%	%
9		%	%
10		%	%
11		%	%
12		%	%
13		%	%
14		%	%
15		%	%
Aggregate percentages of the contract expected to be subcontracted:		%	%

c. Check the appropriate box (Yes or No) that indicates whether you will be using **only** Texas certified HUBs to perform **all** of the subcontracting opportunities you listed in SECTION 2, Item b.

- **Yes** (If **Yes**, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for **each** of the subcontracting opportunities you listed.)
- **No** (If **No**, continue to Item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."

- Yes** (If **Yes**, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)
- No** (If **No**, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed.)

***Continuous Contract:** Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

Enter your company's name here: _____ Requisition #: _____

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS (CONTINUATION SHEET)

This page can be used as a continuation sheet to the HSP Form's page 2, Section 2, Item b. Continue listing the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

Item #	Subcontracting Opportunity Description	HUBs	Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs	Percentage of the contract expected to be subcontracted to non-HUBs.
16		%	%
17		%	%
18		%	%
19		%	%
20		%	%
21		%	%
22		%	%
23		%	%
24		%	%
25		%	%
26		%	%
27		%	%
28		%	%
29		%	%
30		%	%
31		%	%
32		%	%
33		%	%
34		%	%
35		%	%
36		%	%
37		%	%
38		%	%
39		%	%
40		%	%
41		%	%
42		%	%
43		%	%
Aggregate percentages of the contract expected to be subcontracted:		%	%

Enter your company's name here: _____

Requisition #: _____

SECTION 3: SELF PERFORMING JUSTIFICATION (If you responded "No" to SECTION 2, Item a, you must complete this SECTION and continue to SECTION 4.) If you responded "No" to SECTION 2, Item a, in the space provided below **explain how** your company will perform the entire contract with its own employees, supplies, materials and/or equipment.

[Large empty rectangular box for providing justification]

SECTION 4: AFFIRMATION

As evidenced by my signature below, I affirm that I am an authorized representative of the respondent listed in SECTION 1, and that the information and supporting documentation submitted with the HSP is true and correct. Respondent understands and agrees that, if awarded any portion of the requisition:

- The respondent will provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor for the awarded contract. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.
- The respondent must submit monthly compliance reports (Prime Contractor Progress Assessment Report – PAR) to the contracting agency, verifying its compliance with the HSP, including the use of and expenditures made to its subcontractors (HUBs and Non-HUBs). (The PAR is available at <https://comptroller.texas.gov/purchasing/docs/hub-forms/ProgressAssessmentReportForm.xls>).
- The respondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the hiring of additional or different subcontractors and the termination of a subcontractor the respondent identified in its HSP. If the HSP is modified without the contracting agency's prior approval, respondent may be subject to any and all enforcement remedies available under the contract or otherwise available by law, up to and including debarment from all state contracting.
- The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site where services are being performed and must provide documentation regarding staffing and other resources.

Signature	Printed Name	Title	Date (mm/dd/yyyy)
	email address	Phone Number	

Reminder:

- ▶ If you responded "Yes" to **SECTION 2, Items c or d**, you must complete an "HSP Good Faith Effort - Method A (Attachment A)" for **each** of the subcontracting opportunities you listed in SECTION 2, Item b.
- ▶ If you responded "**No**" **SECTION 2, Items c and d**, you must complete an "HSP Good Faith Effort - Method B (Attachment B)" for **each** of the subcontracting opportunities you listed in SECTION 2, Item b.

HSP Good Faith Effort - Method B (Attachment B)

Enter your company's name here: _____	Requisition #: _____
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IMPORTANT: If you responded “No” to **SECTION 2, Items c and d** of the completed HSP form, you must submit a completed “HSP Good Faith Effort - Method B (Attachment B)” for **each** of the subcontracting opportunities you listed in **SECTION 2, Item b** of the completed HSP form. You may photo-copy this page or download the form at <https://www.comptroller.texas.gov/purchasing/vendor/hub/forms.php>

SECTION B-1: SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

Item Number: _____ Description: _____

SECTION B-2: MENTOR PROTÉGÉ PROGRAM

If respondent is participating as a Mentor in a State of Texas Mentor Protégé Program, submitting its Protégé (Protégé must be a State of Texas certified HUB) as a subcontractor to perform the subcontracting opportunity listed in **SECTION B-1**, constitutes a good faith effort to subcontract with a Texas certified HUB towards that specific portion of work.

Check the appropriate box (Yes or No) that indicates whether you will be subcontracting the portion of work you listed in SECTION B-1 to your Protégé.

- **Yes** (If **Yes**, continue to SECTION B-4.)
- **No / Not Applicable** (If **No** or **Not Applicable**, continue to SECTION B-3 and SECTION B-4.)

SECTION B-3: NOTIFICATION OF SUBCONTRACTING OPPORTUNITY

When completing this section you **MUST** comply with items **a, b, c and d**, thereby demonstrating your Good Faith Effort of having notified Texas certified HUBs and trade organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plans and specifications, bonding and insurance requirements, required qualifications, and identify a contact person. When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUB Subcontracting Opportunity Notice form, which is also available online at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/HUBSubcontractingOpportunityNotificationForm.pdf>.

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs and trade organizations or development centers. Also, be mindful that a working day is considered a normal business day of a state agency, not including weekends, federal or state holidays, or days the agency is declared closed by its executive officer. **Neither the day on which the notice is sent nor the day on which the respondent submits its response count as one of the required seven working days.**

- a.** Provide written notification of the subcontracting opportunity you listed in SECTION B-1, to three (3) or more Texas certified HUBs. Unless the contracting agency specified a different time period, you must allow the HUBs at least seven (7) working days to respond to the notice prior to you submitting your bid response to the contracting agency. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://mycpa.cpa.state.tx.us/passcmbldsearch/index.jsp>. HUB status code “A” signifies that the company is a Texas certified HUB.
- b.** List the **three (3) Texas certified HUBs** you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the company's Texas Vendor Identification (VID) Number, the date you sent notice to that company, and indicate whether it was responsive or non-responsive to your subcontracting opportunity notice.

Company Name	Texas VID <small>(Do not enter Social Security Numbers.)</small>	Date Notice Sent <small>(mm/dd/yyyy)</small>	Did the HUB Respond?
			- Yes - No
			- Yes - No
			- Yes - No

- c.** Provide written notification of the subcontracting opportunity you listed in SECTION B-1 to two (2) or more trade organizations or development centers in Texas to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting opportunity notice to trade organizations or development centers at least seven (7) working days prior to submitting your bid response to the contracting agency. A list of trade organizations and development centers that have expressed an interest in receiving notices of subcontracting opportunities is available on the Statewide HUB Program's webpage at <https://www.comptroller.texas.gov/purchasing/vendor/hub/resources.php>
- d.** List **two (2) trade organizations or development centers** you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the date when you sent notice to it and indicate if it accepted or rejected your notice.

Trade Organizations or Development Centers	Date Notice Sent <small>(mm/dd/yyyy)</small>	Was the Notice Accepted?
		- Yes - No
		- Yes - No

HSP Good Faith Effort - Method B (Attachment B) Cont.

Enter your company's name here: _____ Requisition #: _____

SECTION B-4: SUBCONTRACTOR SELECTION

Enter the item number and description of the subcontracting opportunity you listed in **SECTION 2, Item b**, of the completed HSP form for which you are completing the attachment.

a. Enter the item number and description of the subcontracting opportunity for which you are completing this Attachment B continuation page.

Item Number: _____ Description: _____

b. List the subcontractor(s) you selected to perform the subcontracting opportunity you listed in **SECTION B-1**. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://mycpa.cpa.state.tx.us/passcmbsearch/index.jsp>. HUB status code "A" signifies that the company is a Texas certified HUB.

Company Name	Texas certified HUB	Texas VID or federal EIN <small>Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank.</small>	Approximate Dollar Amount	Expected Percentage of Contract
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%

c. If any of the subcontractors you have selected to perform the subcontracting opportunity you listed in **SECTION B-1** is not a Texas certified HUB, provide written justification for your selection process (attach additional page if necessary):

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to **all** the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity it (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.

**HUB Subcontracting Plan (HSP)
Prime Contractor Progress Assessment Report (PAR)**

Form Completion Instructions:

1	Contract number assigned by UT System Administration (UTS) RFP, RFQ, or ITB number.
2	Date contract was signed by both UTS and prime contractor.
3	Leave blank (completed by UTS).
4	Type "University of System Administration."
5	Awarded company (prime) name.
6	State of Texas VID (14 digits) or Fed ID- (9 digits) of prime contractor.
7	Awarded company (prime) contact person.
8	Awarded company (prime) contact phone number.
9	Calendar month and year of reporting period. Note: Progress Assessment Reports (PARs) must be submitted to UTS for each month that the contract is active, even when no payments are made by prime contractor .
10	Payment requested from the state agency (University of System Administration) by the awarded company (prime) during the reporting period indicated in 9 above.
11	Official company name of all subcontractors (HUB and non-HUB) paid from the beginning of the contract through the reporting period. Note: All subcontractors are assumed to be paid directly by the prime contractor, unless indicated otherwise. To list subcontractors of a subcontractor, type "(1 st Tier)" after the name of the prime contractor's subcontractor. Directly beneath the subcontractor's name, indent and type the name of the subcontractor's subcontractor followed by "(2 nd Tier)."
12	State of Texas VID (14 digits) of company (subcontractor). Do not enter SSN.
13	Texas Certified HUB should be "Yes" or "No" (confirm Texas Certified HUB status at https://mycpa.cpa.state.tx.us/tpasscmblsearch/index.jsp)
14	Dollar amount of awarded to this company (subcontractor) for this contract, as listed on the Original or Modified HUB Subcontracting Plan.
15	Actual amount paid to company (subcontractor) during reporting period indicated in 9 above. Note: Actual payments to subcontractors must be reported, which may be different than the amount invoiced to UTS for the same period. If both 1 st and 2 nd Tier subcontractors are listed, enter the amount paid by the prime contractor to the 1 st Tier and the amount paid by the 1 st Tier to the 2 nd Tier.
16	Actual amount paid to date (through the reporting period indicated in 9 above) to this company (subcontractor) under this contract.
17	Leave blank (completed by UTS).
18	Total amount awarded to all subcontractors (should equal total amount awarded on the Original or Modified HUB Subcontracting Plan).
19	Total amount paid to all subcontractors for the reporting period listed in 9 above.
20	Total amount paid to date to all subcontractors (through the reporting period listed in 9 above) under this contract.
21	Signature of authorized person in prime contractor, who has verified the report is correct.
22	Title of signing authority.
23	Date signed.
24	Printed Name of authorized person in prime contractor, who has verified the report is correct.
25	Phone Number of authorized person in prime contractor, who has verified the report is correct.

NOTE: SELF-PERFORMING COMPANIES COMPLETE ONLY STEPS 1-10 AND 21-25.

