**FY*<<insert FY>>* Disadvantaged Business Enterprise Supportive Services (DBE/SS) Accomplishments Report**

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| **OMB CONTROL NUMBER: 2125-XXXX EXPIRATION DATE: mm/dd/yyyy**  **Paperwork Reduction Act Burden Statement**  A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 21XX-XXXX. Public reporting for this collection of information is estimated to be approximately 4 hours annually for each recipient. There are 53 recipients totaling 212 hours nationally, this includes the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, completing, and reviewing the collection of information.  All responses to this collection of information are required to obtain or retain a benefit [23 CFR 230.204]. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Department of Transportation, Federal Highway Administration, 1200 New Jersey Ave SE, Washington, D.C. 20590.  Upon request by FHWA, State DOTs obligating and expending DBE Supportive Services funding under 23 CFR 230 Subpart B must furnish reports demonstrating compliance. FHWA has developed a short questionnaire to annually collect essential data and provide a narrative summary of in-kind support, notable practices, lessons learned and upcoming program goals. Please answer the following questions for each category and upload the narrative report.  *Please refer to the instructions page for additional information or contact your Division Civil Rights Specialist.* | | | | |
| **Objectives** | | | | |
| 1. **Identify Objective:** *[auto-populate from SOW]* | | | | |
| **Metrics:** *[auto-populate from SOW]* | | **Achievement:**  *{Provide achievement results from the identified objectives and metrics provided in the SOW}* | | |
| **1.** | |  | | |
| **2.** | |  | | |
| **3.** | |  | | |
| 1. **Identify Objective:** | | | | |
| **Metrics:** | | **Achievement:** | | |
| **1.** | |  | | |
| **2.** | |  | | |
| **3.** | |  | | |
| 1. **Identify Objective:** | | | | |
| **Metrics:** | | **Achievement:** | | |
| **1.** | |  | | |
| **2.** | |  | | |
| **3.** | |  | | |
|  | | | | |
| **Increased Participation of DBEs**  23 USC 140(c)  23 CFR 230.203 | | | | |
| 1. How many DBEs received one or more subcontracts on FHWA federally assisted contracts during the reporting period? | | | |  |
| 1. How many DBEs were awarded one or more prime contracts on FHWA federally assisted contracts during the reporting period? | | | |  |
| 1. How many of the firms reported above received any form of DBE supportive services during the reporting period? | | | |  |
| 1. What is the self-identified Ethnicity/Race & Gender of the owner of the DBE firms receiving supportive services/benefits: | | | | |
| *Ethnic Group* | *Women* | | *Men* | |
| African American |  | |  | |
| Hispanic American |  | |  | |
| Native American |  | |  | |
| Subcontinent Asian American |  | |  | |
| Asian Pacific American |  | |  | |
| Non-Minority Women |  | |  | |
| Other |  | |  | |
|  | | | |  |
| **Increased Pool of DBEs**  23 USC 140(c)  23 CFR 230.202(b) | | | | |
| 1. How many DBEs were certified during the reporting period? | | | |  |
| 1. How many of the DBEs certified during the reporting period received any form of DBE supportive services assistance? | | | |  |
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| **Services Provided**  23 CFR 230.204(b) | | | | |
| 1. How many outreach events did the DBE supportive services fund during the reporting period? | | | |  |
| 1. How many technical assistance events did the DBE supportive services fund during the reporting period? | | | |  |
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| **Business Development Program (BDP)**  23 USC 304; 324  49 CFR 26.39(a) | | | | |
| 1. What percentage of DBE supportive service funding was used to support the BDP? | | | |  |
| 1. How many DBE firms participated in the BDP during the reporting period? | | | |  |
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| **Office of Small & Disadvantaged Business Utilization (OSDBU)** | | | | |
| 1. List coordination efforts with the Small Business Transportation Resource Centers (SBTRCs): | | | | |
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| **Financial Management: Cost Effectiveness and Internal Controls**  23 CFR 230.203 | | | | |
| 1. How many projects were funded by DBE supportive services as reported in the Financial Management Information System (FMIS)? | | | |  |
| 1. What percentage of DBE supportive services funds were expended as of the close of the reporting period? | | | |  |
| 1. How many compliance reviews of DBE supportive services were conducted by the State during the reporting period? | | | |  |
| 1. How many financial audits of the DBE supportive services program or contracts were conducted during the reporting period? (This includes but is not limited to Internal Controls Reviews, Billing Reviews, Single Audits, or other similar activities). | | | |  |
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| <<insert submit icon>> | | | | |

Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ By whom: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_