REQUEST FOR PROPOSAL
FOR
ONLINE AUCTION SOLUTION
FOR
DISPOSITION OF SURPLUS
PROPERTY
FOR THE
RETIREMENT SYSTEMS OF ALABAMA
FOR A
3 YEAR CONTRACT PERIOD

RFP 15-017
THIS RFP CONTAINS INFORMATION UNDER THE FOLLOWING HEADINGS:

SECTION I
General Information for the Proposer/Vendor

A. Purpose
B. Scope of Work
C. Minimum Qualifications
D. General Conditions
E. Termination
F. Terms of Proposal
G. Evaluation Criteria
H. Evaluation Questions
I. Security and Privacy Requirements
J. Proposal Opening
K. Key Dates
L. Delivery Schedule
M. Payment Schedule
N. Selection of Firm
O. Economy of Preparation
P. News Releases
Q. Addenda to the RFP
R. Contact Point
S. Agents

SECTION II
Information Required from Proposer/Proposers/Vendors

A. Qualifications of the Firm
B. Costs and Price Analysis

SECTION III
Criteria for Evaluation

A. General
B. Factors

SECTION IV
Additional Documents

A. State of Alabama Disclosure Statement (Required by Article 3B of Title 41, Code of Alabama 1975 - two pages)
B. Sample RSA Contract
C. Immigration Compliance Certificate
D. Proposer/Vendor Profile Form
E. Proposer/Vendor References Form
F. Third Party Vendor Security Checklist
G. IRS Form W-9
SECTION I
GENERAL INFORMATION FOR THE PROPOSER/VENDOR

The Retirement Systems of Alabama (RSA) is an umbrella organization consisting of the Employees’ Retirement System of Alabama (ERS), The Teachers’ Retirement System of Alabama (TRS), and The Judicial Retirement Fund (JRF); and it also administers the Public Education Employees’ Health Insurance Plan (PEEHP), the RSA-1 Deferred Compensation Plan and the Public Employees’ Individual Retirement Account Fund. The various benefit plans were all adopted by the Alabama State Legislature at varying times. TRS was originally created in 1939 and began operation in 1941; followed by ERS which began operation in 1945. JRF began in 1975, followed by PEIRAF in 1981, RSA-1 in 1986 and PEEHIP in 1983. These retirement benefit programs provide for retirement benefits for public employees at the state and local level in the State of Alabama, including education employees. RSA-1 allows public employees to participate in a voluntary tax deferred savings plan, and PEEHIP provides a variety of health insurance benefits to public education employees. With respect to this solution, RSA seeks a commission based arrangement only upon completion of successful sales of items via online auction site.

A. PURPOSE:

REQUEST FOR PROPOSALS:
This Request for Proposals (RFP) solicits proposals on behalf of The Retirement Systems of Alabama (RSA) from experienced and qualified vendors to provide an Online Auction Solution for a contract period three (3) years. The Online Auction Solution will include a method of professional coordination, processing and auctioning of selected surplus assets that have been deemed eligible for sale, as well as administrative services and assistance associated with such auctions.

B. SCOPE OF WORK:

PROPOSER/VENDOR must agree to perform all necessary services as outlined below. Please indicate your agreement to each question by marking “Agree” or “Do Not Agree” for each item and include comments, as needed.

- Must provide a secure avenue through the World Wide Web of auctioning RSA owned surplus property
  
  _____ Agree
  
  _____ Do Not Agree
  
  Comments: _____________________________________________________________
  _____________________________________________________________

- Must perform administrative functions associated with all transactions of an online auction to include, but not limited to, listing, selling, and marketing of RSA surplus property. Any financial settlement services, including electronic collection of payment from winning bidders, will be optional and priced separately in proposal.
  
  _____ Agree
  
  _____ Do Not Agree
C. MINIMUM QUALIFICATIONS:
To be considered a viable PROPOSER/VENDOR, the following minimum requirements must be met. Please indicate your agreement to each question by marking “Agree” or “Do Not Agree” for each item and include comments, as needed.

- PROPOSER/VENDOR must have been in the online auctions business for at least five (5) years
- PROPOSER/VENDOR must not have any bankruptcy filings within last five (5) years
- PROPOSER'S/VENDOR'S senior officers, board members or directors must not have any felony convictions
- PROPOSER/VENDOR is/will be qualified with the Secretary of State to conduct business in the State of Alabama

_____ Agree
_____ Do Not Agree
Comments: _____________________________________________________________
_______________________________________________________________________

- Must provide assistance via telephone, email and on occasion, onsite, as requested

_____ Agree
_____ Do Not Agree
Comments: _____________________________________________________________
_______________________________________________________________________

- Must agree that fees are paid only for successful auction of items

_____ Agree
_____ Do Not Agree
Comments: _____________________________________________________________
_______________________________________________________________________
D. GENERAL CONDITIONS

Pricing:

As indicated previously, payments will be made for commissions for successful sales of RSA surplus property which result from use of the online auction solution.

Conflict of Interest:

The PROPOSER/VENDOR agrees that it will have no interest, direct or indirect, that will conflict in any manner or degree with the performance of contract services. The PROPOSER/VENDOR further agrees that, in the Performance of the contract, the PROPOSER/VENDOR shall not employ any person having any such known interests.

Subcontracting:

PROPOSER/VENDOR shall NOT subcontract any part of this service.

E. TERMINATION

Termination for Convenience: This contract may be terminated for any reason by either party with the submission of a thirty (30) day written notice thereof.

Termination for Default: RSA may terminate immediately all or any part of a contract resulting from this proposal, by giving notice of default of PROPOSER/VENDOR, if the PROPOSER/VENDOR (1) refuses or fails to deliver the goods or services within the time specified, (2) fails to comply with any of the provisions of the Proposal or so fails to make progress as to endanger or hinder performance, (3) becomes insolvent or subject to proceedings under any law relating to bankruptcy, insolvency, or relief of debtors. In the event of termination for default, RSA’s liability will be limited to the payment for goods and/or services delivered and accepted as of the date of termination.

Failure To Execute Contract: Failure of the successful PROPOSER/VENDOR to enter into a contract in the time prescribed by RSA may be cause for cancellation of the award to that PROPOSER/VENDOR. In the event the award is cancelled, the award may then be made to the second lowest responsible PROPOSER/VENDOR, or RSA may reject all of the proposals.

F. TERMS OF PROPOSAL

The initial Contract is anticipated to begin on December 1, 2015 and shall be for three (3) years. Contract may be renewed for two (2) optional one (1) year terms.
To be considered a viable PROPOSER/VENDOR, the following terms must be met. Please indicate your agreement to each question by marking “Agree” or “Do Not Agree” for each item and include comments, as needed.

PROPOSER/VENDOR agrees that any proposal submitted will remain valid for a period of ninety (90) days from the date received by us.

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________

_______________________________________________________________________

The PROPOSER/VENDOR agrees that any exceptions to the terms, conditions, or other requirements in any part of these specifications must be clearly pointed out in the appropriate section of the proposal. Otherwise, it will be considered that all items offered are in strict compliance with the specifications.

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________

_______________________________________________________________________

PROPOSER/VENDOR acknowledges and agrees that RSA will not under any circumstance indemnify or hold harmless PROPOSER/VENDOR, its affiliates, administrators, officers, employees or agents.

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________

_______________________________________________________________________

PROPOSER/VENDOR further acknowledges and agrees that RSA shall not be liable to PROPOSER/VENDOR for any late fees, penalties, collection fees or attorney fees (other than the contingency fee contemplated by this RFP).

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________

_______________________________________________________________________
PROPOSER/VENDOR agrees to abide by all terms and conditions set forth in the attached Sample Agreement found in Section IV-B. PROPOSER/VENDOR further agrees that any exception to those terms must be clearly set forth in the PROPOSER’S/VENDOR’S proposal; otherwise, PROPOSER/VENDOR will be deemed to have agreed to, and be bound by, each clause therein.

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________________

________________________________________________________________________

PROPOSER/VENDOR agrees that PROPOSER/VENDOR shall maintain or obtain (as applicable), with respect to the activities in which PROPOSER/VENDOR engages pursuant to any Agreement that results from this RFP, general liability insurance and cyber security insurance in amounts reasonable and customary for the nature and scope of business engaged in by such party. PROPOSER/VENDOR shall deliver to RSA evidence of such insurance on or before the date the Agreement goes into effect and annually thereafter.

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________________

________________________________________________________________________

PROPOSER/VENDOR agrees that proposals and supporting documents are kept confidential until the evaluation process is complete and a contract has been awarded. PROPOSERS/VENDORS should be aware that any information in a proposal may be subject to disclosure and/or reproduction under Alabama law once a contract has been awarded.

_____ Agree

_____ Do Not Agree

Comments: ______________________________________________________________

________________________________________________________________________

Should PROPOSER/VENDOR intend to request that RSA execute any document or additional terms and conditions for RSA’s contract that PROPOSER/VENDOR generally requires of PROPOSER/VENDOR customers, The PROPOSER/VENDOR agrees to provide a sample of such document or contract terms to RSA. PROPOSER/VENDOR further agrees, however, that by accepting PROPOSER’S/VENDOR’S proposal, RSA is not agreeing to and accepting the terms provided by PROPOSER/VENDOR. RSA reserves the right to negotiate PROPOSER’S/VENDOR’S sample terms and conditions. In addition, PROPOSER/VENDOR acknowledges and agrees that the provision of such sample terms and conditions does not under any circumstance satisfy the requirement that the PROPOSER/VENDOR explicitly state any and all exceptions to RSA’s proposal specifications or Sample Agreement terms.
VENDOR agrees to provide completed Alabama Disclosure Form, Immigration Compliance Certificate, Bidder Reference Form, Bidder Profile Form, Third Party Vendor Security Checklist, and IRS Form W-9 with submission of proposal.

PROSPOSER/VENDOR agrees that the MOU for E-Verify will match the EIN on the IRS Form W-9 or offer an explanation on company letterhead of why the numbers are different.

G. EVALUATION CRITERIA
We reserve the right without qualification to select a PROPOSER/VENDOR based on, in part, but not exclusively, the content of the proposal, experience of the PROPOSER/VENDOR, cost, and any other relevant information, including, without limitation, recommendations concerning the PROPOSER'S/VENDOR'S respective record of past performance with other clients. Each PROPOSER'S/VENDOR'S proposal will be evaluated on their:

1. Ability to provide the features listed in this RFP
2. Demonstrated prior relevant and acceptable experience of PROPOSER/VENDOR or key personnel that will be involved in providing the Online Auction Solution
3. Implementation approach
4. Price
H. EVALUATION QUESTIONS

Please answer the following questions:

1. Does PROPOSER/VENDOR have a written code of ethics, conflict of interest policy, mission statement or other related policy? If so, please provide such. Also, please complete the PROPOSER/VENDOR Profile form attached.

2. List at least 3 customer references who are currently utilizing the proposed Online Auction solution (include a company’s name, individual contact’s name and telephone number) by completing the PROPOSER/VENDOR Reference Form attached.

3. Describe your methodology for implementation of the Online Auction Solution.

4. Describe what payment options are available for potential buyers of RSA surplus items that are sold. If credit or debit card payment is accepted, proof of PCI compliance is required throughout the contract period.

5. Describe how commission payments are made for successful auctions.

6. Describe the training plan. Include details about training for RSA administrators and key personnel.

7. Please provide the last Service Organization Controls 2 Type 2 report issued for your company.

8. Please provide completed State of Alabama Disclosure Statement, Immigration Compliance Certificate (including MOU, if necessary), PROPOSER/VENDOR Profile Form, PROPOSER/VENDOR References Form, and IRS Form W-9 (6 attachments)

I. SECURITY AND PRIVACY REQUIREMENTS

PROPOSER/VENDOR must also fill out the RSA Third Party Security Questionnaire found at Section IV Item F.

For the following items, please answer the questions and/or incorporate your agreement or disagreement, using the format below in your separate response document.

PROPOSER/VENDOR agrees to include a copy of proof of PCI compliance in with proposal.

(a) _____ Agree (b) _____ Disagree (c) _____ Comment

__________________________________________________________________________________________

PROPOSER/VENDOR agrees to attach copy of their Information Security Policy and Procedures in the Response Documents section of the RFP.

(a) _____ Agree (b) _____ Disagree (c) _____ Comment

__________________________________________________________________________________________
J. PROPOSAL OPENING:

All proposals will be submitted with (six (6) copies) in a sealed wrapper with the following plainly marked on the front:

RETIREMENT SYSTEMS OF ALABAMA
ONLINE AUCTION SOLUTION
RFP 15-017
OPENING October 26, 2015
Proposals will be sent to:
Via UPS or FedEx: Via US Mail

Mr. Edward Davis
Director of Office Services
Retirement Systems of Alabama
201 South Union Street
Montgomery, AL 36104

Mr. Edward Davis
Director of Office Services
Retirement Systems of Alabama
P.O. Box 302150
Montgomery, AL 36130-2150

Proposals may be hand delivered to Room 574 of the Retirement Systems Building, 201 South Union Street, Montgomery, Alabama. **Proposals will be accepted until 2:00 p.m. CT on October 26, 2015**, and opened at that time. Proposals will not be accepted after this date and time. The RSA reserves the right to reject any and all responses to this RFP.

Any questions regarding this RFP must be submitted electronically via email by October 9, 2015, at 2:00 p.m. CT to Mr. Edward Davis at Edward.Davis@rsa-al.gov.

K. KEY DATES:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>RFP issued</td>
<td>Friday, September 25, 2015</td>
</tr>
<tr>
<td>Deadline to submit questions</td>
<td>Friday, October 9, 2015</td>
</tr>
<tr>
<td>Responses to questions posted to RSA website</td>
<td>Tuesday, October 13, 2015</td>
</tr>
<tr>
<td>Bid responses due by</td>
<td>Monday, October 26, 2015</td>
</tr>
<tr>
<td>Bid opening date</td>
<td>Monday, October 26, 2015</td>
</tr>
<tr>
<td>Finalist conferences</td>
<td>Thursday - Friday, October 29 - 30, 2015</td>
</tr>
<tr>
<td>Award of bid</td>
<td>Thursday, November 12, 2015</td>
</tr>
</tbody>
</table>
L. DELIVERY SCHEDULE:

RSA desires to utilize the services of awarded PROPOSER/VENDOR beginning within 30 days of obtaining the signed contract with PROPOSER/VENDOR and that PROPOSER/VENDOR shall be prepared to provide all abovementioned services to and on behalf of RSA, in providing an Online Auction Solution and Service for RSA’s surplus property within such timeframe.

M. PAYMENT SCHEDULE:

Payments will be made no more frequently than monthly.

N. SELECTION OF FIRM:

RSA expects to contract with the successful PROPOSER/VENDOR. All responding PROPOSERS/VENDORS will be notified in writing within a reasonable length of time following the selection. Prior to the selection of a firm, two or more PROPOSERS/VENDORS may be requested to make oral presentations via phone to the evaluation committee. The proposal shall become the property of the RSA.

O. ECONOMY OF PREPARATION:

Proposals should be prepared simply and economically and provide a concise description of the PROPOSER’S/VENDOR’S response to the requirements of this RFP. Emphasis should be on clarity. RSA will not be responsible for any costs incurred by any PROPOSER/VENDOR in the preparation of a proposal.

P. NEWS RELEASES:

News releases pertaining to this RFP or the service to which it relates will be made only with prior written approval of the CEO or his representative.

Q. ADDENDA TO THE RFP:

Any modifications made to the RFP prior to the proposal due date will be provided in writing to all solicited PROPOSERS/VENDORS.

R. CONTACT POINT:

Any questions regarding this RFP must be submitted electronically via email by October 9, 2015, at 2:00 p.m. CT to Mr. Edward Davis at Edward.Davis@rsa-al.gov.

S. AGENTS:

No agents fees will be payable by RSA or successful PROPOSER/VENDOR. RSA will respond only to parties interested in proposing and performing the services.
SECTION II
INFORMATION REQUIRED FROM PROPOSERS/VENDORS

Proposals must be submitted in the format outlined below:

A. QUALIFICATIONS OF THE FIRM:

1. BUSINESS ORGANIZATION

State the full name and address of your organization, and if applicable, the branch office or other subordinate element that will perform or assist in performing the work hereunder. Indicate whether you operate as an individual, partnership, limited liability company, corporation or other type of organization and provide the state in which you were formed or incorporated. State whether you are currently in good standing in the state in which you were formed or incorporated and provide a Certificate of Good Standing from that state. Also state whether you are licensed to operate a business in the State of Alabama and whether you are currently in good standing in the State of Alabama.

2. PRIOR EXPERIENCE:

As part of your proposal, include a brief statement (maximum five pages) concerning the relevant experience and previous success in Online Auction Solutions of the key person(s) who will be implementing or delivering the services for the proposed solution for RSA. Do not include general corporate background brochures.

3. MANPOWER:

Identify lead individuals by name and title.

4. IMPLEMENTATION PLAN

Provide a detailed implementation plan in providing an Online Auction Solution for RSA.

5. AUTHORIZED OFFICIALS:

Include the names and telephone numbers of personnel of the organization authorized to execute the proposed contracts with the RSA.

6. ADDITIONAL INFORMATION AND COMMENTS:

Include any other information believed to be pertinent but not specifically requested elsewhere in this RFP.

B. COST AND PRICE ANALYSIS:

The information requested in this Section is required to support the reasonableness of your proposal price. Use the following format. RSA requires contingency pricing on actual sales of RSA’s Surplus Property. No other fees will be accepted.

NOTE: RSA will not be liable for any expense/cost for use of any billing item not identified in the PROPOSER’S/VENDOR’S response.

RSA desires to enter into a three-year contract for the specified services.
SECTION III
CRITERIA FOR EVALUATION

A. GENERAL:

Proposals will be evaluated by an evaluation committee. Selection will be based on all factors listed below and others implicit within the RFP and will represent the best performance and reasonable costs for the RSA. Oral presentations and interviews (in person or webex) may be required as part of the evaluation criteria.

B. FACTORS:

The following factors will be the minimum criteria in making the selection (order does not indicate priority):

1. PRICE:
   This criterion shall be judged by its reasonableness in relation to the merits of the proposal.

2. QUALIFICATION OF THE FIRM AND VIABILITY OF PROPOSED SOLUTION:
   This includes the ability of the PROPOSER/VENDOR to meet the terms of the RFP.

3. ACCOUNT PERSONNEL:
   The competence and level of professional personnel who will perform the services will be considered.
SECTION IV ADDITIONAL DOCUMENTS

The following documents are referenced in this RFP and must be completed and submitted with the proposal:

A. State of Alabama Disclosure Statement (Required by Article 3B of Title 41, Code of Alabama 1975) – two pages

B. Sample RSA State Contract

C. Immigration Compliance Certificate

D. Proposer/Vendor Profile Form

E. Proposer/Vendor References Form

F. Third Party Vendor Security Checklist

G. IRS Form W-9
State of Alabama
Disclosure Statement
(Required by Act 2001-955)

ENTITY COMPLETING FORM

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONSIBLE FOR GRANT AWARD

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

This form is provided with:

<table>
<thead>
<tr>
<th>Contract</th>
<th>Proposal</th>
<th>Request for Proposal</th>
<th>Invitation to Bid</th>
<th>Grant Proposal</th>
</tr>
</thead>
</table>

Have you or any of your partners, divisions, or any related business units previously performed work or provided goods to any State Agency/Department in the current or last fiscal year?

Yes

No

If yes, identify below the State Agency/Department that received the goods or services, the type(s) of goods or services previously provided, and the amount received for the provision of such goods or services.

<table>
<thead>
<tr>
<th>STATE AGENCY/DEPARTMENT</th>
<th>TYPE OF GOODS/SERVICES</th>
<th>AMOUNT RECEIVED</th>
</tr>
</thead>
</table>

Have you or any of your partners, divisions, or any related business units previously applied and received any grants from any State Agency/Department in the current or last fiscal year?

Yes

No

If yes, identify the State Agency/Department that awarded the grant, the date such grant was awarded, and the amount of the grant.

<table>
<thead>
<tr>
<th>STATE AGENCY/DEPARTMENT</th>
<th>DATE GRANT AWARDED</th>
<th>AMOUNT OF GRANT</th>
</tr>
</thead>
</table>

1. List below the name(s) and address(es) of all public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

<table>
<thead>
<tr>
<th>NAME OF PUBLIC OFFICIAL/EMPLOYEE</th>
<th>ADDRESS</th>
<th>STATE DEPARTMENT/AGENCY</th>
</tr>
</thead>
</table>

RSA Online Auction Solution [15] RFP 15-017
2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

<table>
<thead>
<tr>
<th>NAME OF FAMILY MEMBER</th>
<th>ADDRESS</th>
<th>NAME OF PUBLIC OFFICIAL/PUBLIC EMPLOYEE</th>
<th>STATE DEPARTMENT/AGENCY WHERE EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

|                        |         |                                        |                                      |
|                        |         |                                        |                                      |
|                        |         |                                        |                                      |
|                        |         |                                        |                                      |

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

|                        |         |                                        |                                      |
|                        |         |                                        |                                      |
|                        |         |                                        |                                      |
|                        |         |                                        |                                      |

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal:

<table>
<thead>
<tr>
<th>NAME OF PAID CONSULTANT/ LOBBYIST</th>
<th>ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed $10,000.00, is applied for knowingly providing incorrect or misleading information.

Signature
Date

Notary’s Signature
Date
Date Notary

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to The State of Alabama in excess of $5,000.
2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

<table>
<thead>
<tr>
<th>NAME OF FAMILY MEMBER</th>
<th>ADDRESS</th>
<th>NAME OF PUBLIC OFFICIAL/ PUBLIC EMPLOYEE</th>
<th>STATE DEPARTMENT/ AGENCY WHERE EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal:

<table>
<thead>
<tr>
<th>NAME OF PAID CONSULTANT/ LOBBYIST</th>
<th>ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed $10,000.00, is applied for knowingly providing incorrect or misleading information.

Signature                          Date

Notary’s Signature                Date                           Date Notary Expires

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to The State of Alabama in excess of $5,000.
STATE OF ALABAMA
MONTGOMERY COUNTY

AGREEMENT

This Agreement, which results from RFP 15-017, entitled Request for Proposal for Online Auction Solution for Disposition of Surplus Property is made and entered into effective _________________ between The Retirement Systems of Alabama and ________________________, hereinafter referred to as “Contractor.”

SERVICES

Contractor shall provide Online Auction Solution to RSA in accordance with the guidelines, terms and conditions set forth in RSA’s RFP 15-017 and Contractor’s Proposal dated _____________, all of which documents are attached hereto as Exhibit A and incorporated herein by reference.

CONSIDERATION

As consideration for the services rendered pursuant to the Agreement, RSA agrees to compensate the Contractor an amount equal to the rates set forth in Contractor’s Proposal.

TERM

This Agreement shall be for the period beginning _________________ and ending _________________.

OTHER

Contractor acknowledges and understands that this Agreement is not effective until it has received all required state government approvals, and Contractor shall not begin performing work under this agreement until notified to do so by RSA. Contractor is entitled to no compensation for work performed prior to the effective date of this Agreement.
Contractor acknowledges that Contractor is an independent contractor, and neither Contractor nor Contractor’s employees are to be considered employees of RSA or entitled to benefits under the State of Alabama Merit System.

In the event of proration of the funds from which this Agreement is to be paid, the Agreement will be subject to termination by RSA.

Contractor acknowledges that the terms and commitments contained herein shall not be constituted as a debt of the State of Alabama in violation of Article 11, Section 213 of the Constitution of Alabama, 1901, as amended by Amendment Number 26. It is further agreed that if any provisions of this Agreement shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this Agreement, be enacted, then that conflicting provision in the Agreement shall be deemed null and void and the remaining provisions shall continue to be valid and enforceable. Contractor may not assign this Agreement or any interest herein or any money due hereunder without the expressed written consent of RSA. Contractor’s sole remedy for the settlement of any and all disputes arising under the terms of this Agreement shall be limited to the filing of a claim with the Board of Adjustment of the State of Alabama.

To the fullest extent permitted by law, Contractor shall indemnify, defend, and hold harmless the Retirement Systems of Alabama, the State of Alabama, and their affiliates, and their respective administrators, officers, directors, agents, and employees (the “Indemnites”), from and against any and all claims, damages, losses, and expenses, including but not limited to reasonable attorney’s fees, arising out of or resulting from Contractor’s performance of Services under this Agreement and/or any other of Contractor’s acts and/or omissions under this Agreement. Without limiting the foregoing in any manner, Contractor shall indemnify, defend and hold harmless the Indemnites from and against any and all claims, damages, losses and expenses, including but not limited to reasonable attorney’s fees, (a) incurred as a result of Contractor’s (or Contractor’s agent’s) violation of any law, rule or regulation; (b) arising out of, or related to, Contractor’s (or Contractor’s agent’s) breach of warranty or representation; or (c) arising out of, or related to, Contractor’s (or Contractor’s agent’s) negligent or willful misconduct. For all claims against the Indemnites by any employee, agent, or any other person directly or indirectly employed by Contractor, the indemnification obligation under this paragraph shall not be limited in any way by any limitation on the amount or type of damages, compensation or benefits payable by or for Contractor or its agents, under worker’s compensation laws, disability benefits laws or other employee benefits laws.

Contractor acknowledges and agrees that, notwithstanding anything to the contrary contained herein or in any other agreement between the parties hereto, RSA shall not indemnify or hold harmless Contractor, its affiliates, administrators, officers, employees or agents. Contractor further acknowledges and agrees that RSA shall not be liable to Contractor for any late fees, penalties, collection fees or attorney fees unless specifically agreed to in a writing signed by RSA.
Contractor agrees that Contractor shall maintain or obtain (as applicable), with respect to the activities in which Contractor engages pursuant to any Agreement that results from this RFP, general liability insurance and cyber security insurance in amounts reasonable and customary for the nature and scope of business engaged in by such party. Contractor shall deliver to RSA evidence of such insurance on or before the date the Agreement goes into effect and annually thereafter.

Contractor acknowledges that, in the course of performing its responsibilities under this Agreement, Contractor may be exposed to or acquire information that is proprietary or confidential to RSA or its members. Contractor agrees to hold such information in confidence and not to copy, reproduce, sell, assign, license, market, transfer or otherwise disclose such information to third parties or to use such information for any purpose whatsoever, without the express written permission of RSA, other than for the performance of obligations hereunder or as required by applicable state or federal law. For purposes of this Agreement, all records, financial information, specifications and data disclosed to Contractor during the term of this Agreement, whether submitted orally, in writing, or by any other media, shall be deemed to be confidential in nature unless otherwise specifically stated in writing by RSA.

Contractor acknowledges that all data relating to RSA or RSA’s beneficiaries is owned by RSA and constitutes valuable property of RSA. RSA shall retain ownership of, and all other rights and interests with respect to, its data (including, without limitation, the content thereof, and any and all copies, modifications, alterations, and enhancements thereto, and any derivative works resulting therefrom), and nothing herein shall be construed as granting Contractor any ownership, license or any other rights of any nature with respect thereto. Contractor may not use RSA’s data (including de-identified data) for any purpose other than providing the Services contemplated hereunder. Upon termination of the Agreement, Contractor agrees to return or destroy all copies of RSA data in its possession or control except to the extent such data must be retained pursuant to applicable law.

By signing this contract, the contracting parties affirm, for the duration of the agreement, that they will not violate federal immigration law or knowingly employ, hire for employment, or continue to employ an unauthorized alien within the state of Alabama. Furthermore, a contracting party found to be in violation of this provision shall be deemed in breach of the agreement and shall be responsible for all damages resulting therefrom.

Contractor acknowledges that RSA may be subject to Alabama open records laws or similar state and/or federal laws relating to disclosure of public records and may be required, upon request, to disclose certain records and information covered by and not exempted from such laws. Contractor acknowledges and agrees that RSA may comply with those laws without violating any provision of Contractor’s proposal or this final Agreement. Contractor agrees to intervene in and defend any lawsuit brought against RSA, the Retirement Systems of Alabama, or any of their respective employees, agent or directors, for their refusal to provide Contractor’s alleged confidential and/or proprietary information to a requesting party. RSA shall provide Contractor written notice of any such lawsuit within ten (10) days of receipt of service by RSA. Contractor shall intervene within thirty (30) days of notice or will be deemed to have waived any and
all claim that the information is confidential and/or proprietary and any and all claims against RSA for disclosure of Contractor's alleged confidential and/or proprietary information.

APPLICABLE LAW

This Agreement shall be governed by and construed in accordance with Alabama Law, without giving any effect to the conflict of laws provision thereof.

TERMINATION

Termination for Convenience: This contract may be terminated for any reason by either party with the submission of a thirty (30) day written notice thereof.

Termination for Default: RSA may terminate immediately all or any part of a contract resulting from this proposal, by giving notice of default of PROPOSER/VENDOR, if the PROPOSER/VENDOR (1) refuses or fails to deliver the goods or services within the time specified, (2) fails to comply with any of the provisions of the Proposal or so fails to make progress as to endanger or hinder performance, (3) becomes insolvent or subject to proceedings under any law relating to bankruptcy, insolvency, or relief of debtors. In the event of termination for default, RSA’s liability will be limited to the payment for goods and/or services delivered and accepted as of the date of termination.

In the event of such termination or expiration of the agreement, PROPOSER/VENDOR shall return all accounts to RSA, even those that are in repayment or have documented payment arrangements.

Failure To Execute Contract: Failure of the successful PROPOSER/VENDOR to enter into a contract in the time prescribed by RSA may be cause for cancellation of the award to that PROPOSER/VENDOR. In the event the award is cancelled, the award may then be made to the second lowest responsible PROPOSER/VENDOR, or RSA may reject all of the proposals.

[SIGNATURE PAGE TO FOLLOW]
Contractor Federal Tax ID Number

Retirement Systems of Alabama
By: ____________________________
Its: ____________________________

By: David G. Bronner
Its: Chief Executive Officer

Legally reviewed and approved by:

Legal Counsel for RSA

AND

Approved by:

Governor Robert Bentley
State of Alabama
State of __________
County of ______________

CERTIFICATE OF COMPLIANCE WITH THE BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT
(Act 2011-535, as amended by Act 2012-491)

DATE: __________________________

RE: Contract/Grant/Incentive (describe by number or subject): ________________________________
by and between ________________________________ (Contractor/Grantee) and
______________________________ (State Agency, Department of Public Entity)

The undersigned hereby certifies to the State of Alabama as follows:

1. The undersigned holds the position of __________________ with the Contractor/Grantee named above, and is authorized to
provide representations set out in this Certificate as the official and binding act of that entity, and has knowledge of the provisions of THE
BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (ACT 2011-535 of the Alabama Legislature, as
amended by Act 2012-491) which is described herein as “the Act”.
2. Using the following definitions from Section 3 of the Act, select and initial either (a) or (b), below, to describe the Contractor/Grantee’s
business structure.

   BUSINESS ENTITY: Any person or group of persons employing one or more persons performing or engaging in any activity,
   enterprise, profession, or occupation for gain, benefit, advantage, or livelihood, whether for profit or not for profit. “Business entity”
   shall include, but not be limited to the following:
   a. Self-employed individuals, business entities filing articles of incorporation, partnerships, limited partnerships, limited liability
      companies, foreign corporations, foreign limited partnerships, foreign limited liability companies authorized to transact business
      in this state, business trusts, and any business entity that registers with the Secretary of State.
   b. Any business entity that possesses a business license, permit, certificate, approval, registration, charter, or similar form of
      authorization issued by the state, any business entity that is exempt by law from obtaining such a business license and any
      business entity that is operating unlawfully without a business license.

   EMPLOYER: Any person, firm, corporation, partnership, joint stock association, agent, manager, representative, foreman, or other
   person having control or custody of any employment, place of employment, or of any employee, including any person or entity
   employing any person for hire within the State of Alabama, including a public employer. This term shall not include the occupant of a
   household contracting with another person to perform casual domestic labor within the household.

   ___(a) The Contractor/Grantee is a business entity or employer as those terms are defined in Section 3 of the Act. The Contractor/Grantee must
       attach a copy of its complete E-Verify Memorandum of Understanding issued and electronically signed by the U.S. Department of Homeland
       Security when the business entity or employer enrolls in the E-Verify program to this Certificate of Compliance.

   ___(b) The Contractor/Grantee is not a business entity or employer as those terms are defined in Section 3 of the Act.

3. As of the date of this Certificate, Contractor/Grantee does not knowingly employ an unauthorized alien within the State of Alabama and
hereafter it will not knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama;
4. Contractor/Grantee is enrolled in E-verify unless it is not eligible to enroll because of the rules of that program or other factor beyond its
   control.

Certified this ______ day of ____________ 20 ______.

Name of Contractor/Grantee/Recipient
By:
Its:

The above Certification was signed in my presence by the person whose name appears above, on

This ______ day of ______________________ 20 ______.

WITNESS ____________________________

Printed Name of Witness
<table>
<thead>
<tr>
<th><strong>PROPOSER/VENDOR</strong></th>
<th><strong>PROFILE FORM</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Proposer/Vendor’s Legal Name:</strong></td>
<td><strong>Address:</strong></td>
</tr>
<tr>
<td><strong>Phone Number:</strong></td>
<td><strong>Fax Number:</strong></td>
</tr>
<tr>
<td><strong>Home Office Location:</strong></td>
<td><strong>Date Established:</strong></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Firm Leadership:</strong></td>
<td><strong>Number of Employees:</strong></td>
</tr>
<tr>
<td>Is your firm licensed to operate in the State of Alabama?</td>
<td></td>
</tr>
<tr>
<td>Additional Background Information:</td>
<td></td>
</tr>
</tbody>
</table>
Three professional references who have received services from the Proposer/Vendor in the past three years:

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Contact Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Phone Number:</th>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Name:</th>
<th>Beginning Date of Project:</th>
<th>Ending Date of Project:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Description of project size, complexity and role in this project.

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Contact Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Phone Number:</th>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Name:</th>
<th>Beginning Date of Project:</th>
<th>Ending Date of Project:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Description of project size, complexity and role in this project.

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Contact Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Phone Number:</th>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Name:</th>
<th>Beginning Date of Project:</th>
<th>Ending Date of Project:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Third Party Vendor – Security Questionnaire

<table>
<thead>
<tr>
<th>Factors:</th>
<th>YES/NO/NA</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I. Security Policy</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>A. Policy</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Is there a corporate information security policy in place? If yes, provide as an attachment.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Does the policy state what is and is not permissible as it pertains to sensitive company and customer information?</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Does the policy identify what is classified as sensitive company and customer information?</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Does the policy identify management and employee responsibilities including contractors?</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Does the policy identify use of employee owned devices such as laptops, smartphones, and any other form of device capable of storing data?</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Does the policy address change management requirements?</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Is there a policy on the portable media? (e.g., thumb drives, CDRW, etc.)</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Are personnel and contract personnel required to have national background check performed as part of your security policy? Please provide a copy of Proposer's personnel policy if this is separate addressing hiring and termination procedures.</td>
<td></td>
</tr>
<tr>
<td><strong>B. Procedures</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Are procedures in place to implement the information security policy?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Are the procedures and standards evaluated to determine their level of impact to the business process?</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Does the project management methodology uphold the security practices? If yes, explain how.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Are there policy and procedures in place to vet and audit subcontractors prior to contract acceptance where applicable?</td>
<td></td>
</tr>
<tr>
<td><strong>C. Document Handling</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Is there a reasonable and usable information classification policy?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Does the information classification policy address all enterprise information?</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Is an information classification methodology in place to assist employees in identifying levels of information within the business unit?</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Is there an information handling matrix that explains how specific information resources are to be handled?</td>
<td></td>
</tr>
<tr>
<td>A. Organizational Suitability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>The Information Security Program has an executive level committee assigned for reporting and guidance purposes?</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Are employees able to perform their duties efficiently and effectively while following security procedures?</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Does the information security program have its' own line item in the budget?</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Does the security group have the authority to submit needed security policy changes throughout the enterprise?</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Is an annual report on the level of information security compliance issued to management?</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Is there more than one person responsible for the implementation of the Information Security Program?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Personnel Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
</tr>
<tr>
<td>4.</td>
</tr>
<tr>
<td>5.</td>
</tr>
<tr>
<td>6.</td>
</tr>
<tr>
<td>7.</td>
</tr>
<tr>
<td>8.</td>
</tr>
<tr>
<td>9.</td>
</tr>
<tr>
<td>10.</td>
</tr>
<tr>
<td>11.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Training and Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
</tr>
<tr>
<td>4.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td><strong>D. Oversight and Auditing</strong></td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
<tr>
<td>11</td>
</tr>
<tr>
<td>12</td>
</tr>
<tr>
<td>13</td>
</tr>
<tr>
<td>14</td>
</tr>
<tr>
<td>15</td>
</tr>
<tr>
<td>16</td>
</tr>
<tr>
<td>17</td>
</tr>
<tr>
<td>18</td>
</tr>
</tbody>
</table>

**E. Application Development and Management**

<table>
<thead>
<tr>
<th></th>
<th>Has an application development methodology been implemented?</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Are appropriate/key application users involved with developing and improving application methodology and implementation process?</td>
</tr>
<tr>
<td>3</td>
<td>Is pre-production testing performed in an isolated environment?</td>
</tr>
<tr>
<td>4</td>
<td>Has a promotion to production procedures been implemented?</td>
</tr>
<tr>
<td>5</td>
<td>Is there a legacy application management program?</td>
</tr>
<tr>
<td>6</td>
<td>Are secure coding standards implemented and are they followed?</td>
</tr>
</tbody>
</table>
Are applications testing for security vulnerabilities prior to being released to production?

Is there a dedicated security team for testing applications for vulnerabilities?

Are there procedures in place for protecting source code developed by the Proposer (physically and electronically)?

Is system access and security based on the concept of least possible privilege and need-to-know?

Does Proposer perform source code reviews for each release?

Are backdoors prevented from being placed into application source code?

### III Physical Security

#### A. Physical and Facilities

1. Is access to the building(s) controlled?
2. Is access to computing facilities controlled more so than to the building?
3. Is there an additional level of control for after-hours access?
   - Is there an audit log to identify the individual and the time of access that is monitored by a group other than Information Technology?
4. Are systems and other hardware adequately protected from theft?
5. Are procedures in place for proper disposal of confidential information?
6. Are proper fire suppression systems located in the facility?
7. Are facilities more than 5 miles from a government facility or airport?
8. Are the servers and facilities that house software documentation and programming logic located in a secure facility?
   - Is all confidential and restricted information marked as such and stored in a secure area (room, cabinet) with access restricted to authorized personnel only?
9. Does Proposer allow employees to work remote or in a virtual environment?
10. Please provide documentation around controls for safeguarding computer systems and confidential data.

#### B. After-Hours Review

1. Are areas containing sensitive information properly secured?
2. Are workstations secured after-hours?
3. Are keys and access cards properly secured?
4. Is confidential information properly secured?
5. Are contract cleaning crews activities monitored?

#### C. Incident Handling

1. Has an Incident Response Team (IRT) been established?
2. Have employees been trained as to when the IRT should be notified?
3. Has the IRT been trained in evidence gathering and handling?
4. Are incident reports issued to appropriate management?
5. After an incident, are policies and procedures reviewed to determine if modification need to be implemented?
Does the Proposer have a process in place to notify IT security of breaches and/or problems so that proper notification and correction can be done?

**D. Contingency Planning**

1. Has a Business Impact Analysis been conducted on all systems, applications, and platforms?

2. Is there a documented data center Disaster Recovery Plan (DRP) in place?

3. Are backup media password protected or encrypted?

4. Has the data center DRP been tested within the past 12 months?

5. Are system, application, and data backups sent to a secure off-site facility on a regular basis?

6. Are Service Level Agreements that identify processing requirements in place with all users and service providers?

7. Have departments, business units, groups, and other such entities implemented business continuity plans that supplement the data center DRP?

8. Have Emergency Response Procedures (ERP) been implemented?

9. Have ERPs been tested for effectiveness?

**IV. Business Impact Analysis, Disaster Recovery Plan**

**A. General Review**

Backup planning includes identification of all critical data, programs, documentation, and support items required performing essential task during recovery?

The BIA is reviewed and updated regularly with special attention to new technology, business changes, and migration of applications to alternative platforms?

Critical period timeframes have been identified for all applications and systems?

Senior management has reviewed and approved the prioritized list of critical applications?

**B. Disaster Recovery Plan (DRP)**

1. A corporate Disaster recovery plan coordinator has been named and a mission statement identifying scope and responsibilities has been published?

2. A "worst-case" scenario DRP to recover normal operations within the prescribed timeframes has been implemented and tested?

3. Listing of current emergency telephone numbers for police, fire department, medical aid, and company officials are strategically located throughout the facility and at off-site locations?

4. The backup site is remote from hazards that endanger the main data center?

5. Contracts for outsourced activities have been amended to include service providers' responsibilities for DRP?
Lead times for communication lines and equipment, specialized devices, power hookups, construction, firewalls, computer configurations, and LAN implementation have been factored into the DRP?

At least one copy of the DRP is stored at the backup site and is updated regularly?

Automatic restart and recovery procedures are in place to restore data files in the event of a processing failure?

Contingency arrangements are in place for hardware, software, communications, software, staff and supplies.

Customer software solutions that are being developed and/or in production are backed up as part of the Proposer's backup and recovery procedures?

C. Testing
1. Backup and recovery procedures are tested at least annually?
2. Training sessions are conducted for all relevant personnel on backup, recovery, and contingency operating procedures?
3. Appropriate user representative have a particular role in creating and reviewing control reliability and backup provisions for relevant applications?
4. Appropriate user representatives participate in the DRP tests?

Other Issues
1. Provisions are in place to maintain the security of processing functions in the event of an emergency?
2. Insurance coverage for loss of hardware and business impact is in place?

V. Technical Safeguards
A. Passwords
1. Are host systems and servers as well as application servers secured with unique passwords?
2. Are default accounts de-activated?
3. Are temporary user accounts restricted and disabled within 4 hours?
4. Are the password management systems forcing users to change passwords every 90 days or less?
5. Are users of all company-provided network resources required to change the initial default password?
6. Are the passwords complex? Contain upper case, lower case, special character or number, and at least 8 characters long.
7. Do network and system administrators have adequate experience to implement security standards?
8. Are reports and logs pertaining to network users reviewed and reconciled on a regular basis?
9. Are permissions being set securely?
10. Are administrators assigned a unique ID for access to critical systems?
11. Are administrators using appropriate tools to perform their jobs?

RSA Online Auction Solution [31] RFP 15-017
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Does the application support multi-factor authentication?</td>
</tr>
<tr>
<td>13</td>
<td>Are online systems always secured using SSL encryption?</td>
</tr>
</tbody>
</table>

### B. Infrastructure

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the network infrastructure audited on an annual basis?</td>
</tr>
<tr>
<td>2</td>
<td>Are network vulnerability assessments conducted on an annual basis?</td>
</tr>
<tr>
<td>3</td>
<td>Are changes/improvements made in a timely fashion following network vulnerability assessments?</td>
</tr>
<tr>
<td>4</td>
<td>If you house or develop solutions around credit card transactions are you CISP compliant?</td>
</tr>
</tbody>
</table>

### C. Firewalls

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Are protocols allowed to initiate connections from &quot;outside&quot; the firewall?</td>
</tr>
<tr>
<td>2</td>
<td>Has a risk analysis been conducted to determine if the protocols allowed maintain an acceptable level of risk?</td>
</tr>
<tr>
<td>3</td>
<td>Has the firewall been tested to determine if outside penetration is possible?</td>
</tr>
<tr>
<td>4</td>
<td>Are other products in place to augment the firewall level security?</td>
</tr>
<tr>
<td>5</td>
<td>Are the firewalls maintained and monitored 24x7?</td>
</tr>
<tr>
<td>6</td>
<td>Have services offered across the firewall been documented?</td>
</tr>
<tr>
<td>7</td>
<td>Has a Demilitarized Zone (DMZ) or Perimeter Network been implemented?</td>
</tr>
<tr>
<td>8</td>
<td>Has the firewall administrator been formally trained?</td>
</tr>
<tr>
<td>9</td>
<td>Is there more than one person administering the firewall?</td>
</tr>
<tr>
<td>10</td>
<td>Is the firewall for the ASP separate from the corporate firewall?</td>
</tr>
</tbody>
</table>

### D. Data Communications

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is there a remote access procedure in place?</td>
</tr>
<tr>
<td>2</td>
<td>Is there a current network diagram?</td>
</tr>
<tr>
<td>3</td>
<td>Are Access Control List (ACLs) maintained on a regular basis?</td>
</tr>
<tr>
<td>4</td>
<td>Is the network environment partitioned?</td>
</tr>
<tr>
<td>5</td>
<td>Are the corporate routers separated from the ASP routers?</td>
</tr>
<tr>
<td>6</td>
<td>Are the corporate switches separated from the ASP switches?</td>
</tr>
<tr>
<td>7</td>
<td>Does the communication equipment log administrative access to the systems?</td>
</tr>
<tr>
<td>8</td>
<td>Is SNMP data collected from the data communication devices?</td>
</tr>
<tr>
<td>9</td>
<td>Is syslog data collected from the data communication devices?</td>
</tr>
<tr>
<td>10</td>
<td>Are there standard templates for configuring routers?</td>
</tr>
<tr>
<td>11</td>
<td>Are there standard templates for configuring switches?</td>
</tr>
</tbody>
</table>

### E. Databases

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Are default database passwords changed?</td>
</tr>
<tr>
<td>2</td>
<td>Are database administrators trained or certified?</td>
</tr>
<tr>
<td>3</td>
<td>Are database backups performed daily?</td>
</tr>
</tbody>
</table>

### F. Computing Platforms

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Are critical servers protected with appropriate access controls?</td>
</tr>
<tr>
<td>2</td>
<td>Are development staff administrators on their computers used for writing source code?</td>
</tr>
<tr>
<td>3</td>
<td>Is there a company image used for corporate PCs and laptops?</td>
</tr>
</tbody>
</table>
Does the company have an asset management system to track software installed?

Is there an anti-virus application installed on all PC's, laptops, and servers?

Does the anti-virus application automatically update computing assets 3 times or more per day?

Is there a URL filtering solution in place?

Do computing assets have a corporate anti-malware application installed?

Are Internet facing servers protected with host based intrusion prevention?

Are employees restricted to what can be installed on their computer systems? How is this managed for remote employees if applicable?

Do any of the Proposer's computer systems including storage reside on a cloud computing environment? Is it owned and operated by the Proposer? If no, please explain.

G. Intrusion Prevention

Is host based intrusion prevention software installed on all Internet facing servers?

Are network based intrusion prevention systems in-line and defending?

Is host based intrusion prevention software installed on all laptops?

Is there a dedicated security staff monitoring 24x7 alerts from the host based intrusion prevention?

Is there a dedicated security staff monitoring 24x7 alerts from the network based intrusion prevention?

VI. Telecommunications Security

A. Policy

Is there a published policy on the use of organizational telecommunications resources?

Have all employees have been made aware of the telecommunications policy?

Employees authorized for Internet access are made aware of the organization's proprietary information and what they can discuss in open forums?

Employees using cellular or wireless phones are briefed on the lack of privacy of conversations when using unsecured versions of technology?

The organization has a published policy on prosecution of employees and outsiders if found guilty of serious premeditated criminal acts against the organization?

Are corporate devices such as iPhones or Android based phones centrally managed by the Proposer to control rogue software installations and protect corporate data?

B. Standards
A threshold is established to monitor and suspend repeated unsuccessful dial-in or remote access attempts?

Access to databases reachable via dial-in or VPN have access control in place to prevent unauthorized access?

Financial applications available via dial-in or VPN have audit trails established to track access and transaction usage?

Are audit trails reviewed and corrective action taken on a regular basis?

When possible are acl security programs used to control dial-in or remote access to a specific application?

Company proprietary data, stored on portable computers are secured from unauthorized access?

Are corporate emails allowed to be sent from unique domains not one used by Proposer such as Gmail or Microsoft Email?

Users of all company-provided communication systems are required to change the default or initial password?

Security, application, and network personnel actively work to ensure control inconvenience is as minimal as possible?

Personnel independent of the operations staff and security administration review tamper-resistant logs and audit trails?

Special procedures and audited user IDs have been established for application, system, network troubleshooting activities?

Messages and transactions coming in via phone lines are serially numbered, time stamped, and logged for audit investigation and backup purposes?

Employees are made aware of their responsibility to keep remote access codes secure from unauthorized access and usage?

Removal of portable computers from the corporate locations must be done through normal property removal procedures?

Employees are briefed on their responsibility to protect the property of the company when working away from the corporate environment?

Is the company publicly traded?

Is the company bonded?

Are all employees in the continental US? If not please list.

Are there any planned acquisitions in the next 12 months?

Are there current plans to sell the company in the next 12 months?
Form W-9

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

<table>
<thead>
<tr>
<th>Name (as shown on your income tax return)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business name/disregarded entity name, if different from above</td>
</tr>
</tbody>
</table>

Check appropriate box for federal tax classification:
- Individual/sole proprietor
- C Corporation
- S Corporation
- Partnership
- Trust/estate
- Exempt payee
- Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)
- Other (see instructions)

Address (number, street, and apt. or suite no.)

City, state, and Zip code

Requester's name and address (optional)

List account number(s) here (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the “Name” line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

**Part II Certification**

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and

3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

**Sign Here**

<table>
<thead>
<tr>
<th>Signature of U.S. person *</th>
<th>Date *</th>
</tr>
</thead>
</table>

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners’ share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester’s form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners’ share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.
The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

Updating Your Information
You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties
Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions
Name
If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose TIN you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Partnership, C Corporation, or S Corporation. Enter the entity’s name on the “Name” line and any business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Disregarded entity. Enter the owner’s name on the “Name” line. The name of the entity entered on the “Name” line should never be a disregarded entity. The name on the “Name” line must be the name shown on the income tax return on which the income will be reported.

For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner’s name is required to be provided on the “Name” line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on the “Business name/disregarded entity name” line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the “Name” line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the “Name” line is an LLC, check the “Limited liability company” box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter “P” for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter “C” for C corporation or “S” for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the “Name” line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the “Name” line.
Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/ disgorgehd entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/ disgorgehd entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).
2. The United States or any of its agencies or instrumentalities.
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

<table>
<thead>
<tr>
<th>IF the payment is for . . .</th>
<th>THEN the payment is exempt for . . .</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and dividend payments</td>
<td>All exempt payees except for 9</td>
</tr>
<tr>
<td>Broker transactions</td>
<td>Exempt payees 1 through 5 and 7 through 13. Also, C corporations.</td>
</tr>
<tr>
<td>Barter exchange transactions and patronage dividends</td>
<td>Exempt payees 1 through 5</td>
</tr>
<tr>
<td>Payments over $600 required to be reported and direct sales over $5,000</td>
<td>Generally, exempt payees 1 through 7</td>
</tr>
</tbody>
</table>

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see Limited Liability Company (LLC) on page 2), enter the owner’s SSN (or EIN, if the owner has one). Do not enter the disregarded entity’s EIN. If the LLC is classified as a corporation or partnership, enter the entity’s EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see Exempt Payee on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

See Form 1099-MISC, Miscellaneous Income, and its instructions.

However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.
4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. “Other payments” include payments made in the course of the requester’s trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

### What Name and Number To Give the Requester

<table>
<thead>
<tr>
<th>For this type of account:</th>
<th>Give name and SSN of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Individual</td>
<td>The individual</td>
</tr>
<tr>
<td>2. Two or more individuals (joint account)</td>
<td>The actual owner of the account or, if combined funds, the first individual on the account</td>
</tr>
<tr>
<td>3. Custodian account of a minor (Uniform Gift to Minors Act)</td>
<td>The minor</td>
</tr>
<tr>
<td>4. a. The usual revocable savings trust (grantor is also trustee)</td>
<td>The grantor-trustee</td>
</tr>
<tr>
<td>b. So-called trust account that is not a legal or valid trust under law</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>For this type of account:</th>
<th>Give name and EIN of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Disregarded entity not owned by an individual</td>
<td>The owner</td>
</tr>
<tr>
<td>8. A valid trust, estate, or pension trust</td>
<td>Legal entity</td>
</tr>
<tr>
<td>9. Corporation or LLC electing corporate status on Form 8832 or Form 2553</td>
<td>The corporation</td>
</tr>
<tr>
<td>10. Association, club, religious, charitable, educational, or other tax-exempt organization</td>
<td>The organization</td>
</tr>
<tr>
<td>11. Partnership or multi-member LLC</td>
<td>The partnership</td>
</tr>
<tr>
<td>12. A broker or registered nominee</td>
<td></td>
</tr>
<tr>
<td>13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or</td>
<td></td>
</tr>
</tbody>
</table>

### Note

If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

### Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:
- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

### Protect yourself from suspicious emails or phishing schemes

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.
1 List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person’s number must be furnished.

2 Circle the minor’s name and furnish the minor’s SSN.

3 You must show your individual name and you may also enter your business or “DBA” name on the “Business name/disregarded entity” name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

4 List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 1.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.