Proposing Entity:

RFP# NNG1475030R

EXHIBIT 1

PRIME OFFEROR
CORE REQUIREMENTS
SUMMARY OF ESTIMATED COST PLUS FIXED FEE

	Base		Option 1		Option 2		
Elements of Cost	Government Fiscal Year (GFY) 2016 (2/1/16-9/30/16)^	GFY 2017 (10/1/16 - 9/30/17)	GFY 2018 (10/1/18-9/30/18)	GFY 2019 (10/1/18-9/30/19)	GFY 2020 (10/1/19 - 9/30/20)	GFY 2021 (10/1/20 - 1/31/21)^^	GRAND TOTAL
TOTAL PRIME PLUS SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS							
TOTAL ESTIMATED COST							
FIXED FEE							
TOTAL COST PLUS FIXED FEE							

^GFY 2016 Partial (February 1, 2016, through September 30, 2016)
^^GFY 2021 Partial (October 1, 2020, through January 31, 2021)

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 1-A

PRIME OFFEROR

REPRESENTATIVE TASK ORDERS

SUMMARY OF ESTIMATED COST PLUS FIXED FEE

REPRESENTATIVE TASK ORDER NUMBER	TOTAL PRIME PLUS SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS	ESTIMATED COST	FIXED FEE	TOTAL ESTIMATED COST PLUS FIXED FEE
1				
2				
TOTAL				

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 2

PRIME OFFEROR
CORE REQUIREMENTS
ELEMENTS OF COST BY WORK BREAKDOWN STRUCTURE (WBS)
WBS Level ____

Elements of Cost	Base		Option 1		Option 2		GRAND TOTAL
	Government Fiscal Year (GFY) 2016 (2/1/16-9/30/16) ^	GFY 2017 (10/1/16 - 9/30/17)	GFY 2018 (10/1/18-9/30/18)	GFY 2019 (10/1/18-9/30/19)	GFY 2020 (10/1/19 - 9/30/20)	GFY 2021 (10/1/20 - 1/31/21)^^	
Direct Labor (DL) Hours:							
Prime Onsite DL Hours *(Derived from Exhibit 2-A)*							
Prime Offsite DL Hours *(Derived from Exhibit 2-A)*							
Total Prime Direct Labor Hours							
Significant Subcontractor Onsite DL Hours*:							
(List total hours separately by company)							
Subtotal Significant Subcontractor Onsite Direct Labor Hours							
Significant Subcontractor Offsite DL Hours*:							
(List total hours separately by company)							
Subtotal Significant Subcontractor Offsite Direct Labor Hours							
Total Significant Subcontractor Direct Labor Hours							
TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS							
Direct Labor Costs							
Prime Onsite DL Costs *(Derived from Exhibit 2-A)*							
Prime Offsite DL Costs *(Derived from Exhibit 2-A)*							
TOTAL PRIME DIRECT LABOR COSTS							
Overhead:							
Onsite							
Offsite							
TOTAL OVERHEAD							
Other Direct Costs (ODCs)							
Significant Subcontracts (list separately by company)**							
Other Subcontracts							
Non-Proposed Costs							
- Waste Disposal Costs	$86,667	$130,000	$130,000	$130,000	$130,000	$43,333	$650,000
- GSFC Regulatory Fees	$9,333	$14,000	$14,000	$14,000	$14,000	$4,667	$70,000
Material							
Travel							
Other (Specify)							
TOTAL ODCs							
SUBTOTAL COST							
G&A							
TOTAL ESTIMATED COST							
FIXED FEE PERCENTAGE							
FIXED FEE							
TOTAL COST PLUS FIXED FEE							

60
$4,000,000
$4,800,000
$3,200,000

60
$3,400,000
$4,800,000
$3,800,000
$12,000,000
$200,000
$4,800,000

***Significant Subcontractor (>10% of proposed Core estimated value (Base and Option periods)) - Insert Direct Labor Hours Only**
****List each significant subcontractor separately by company - Insert Total Costs and Fees**
^GFY 2016 Partial (February 1, 2016, through September 30, 2016)
^^GFY 2021 Partial (October 1, 2020, through January 31, 2021)
Offerors may adjust elements of cost to be consistent with your current accounting system.

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 2-A

CORE REQUIREMENTS

DIRECT LABOR HOURS, DIRECT LABOR RATES AND DIRECT LABOR COSTS DETAIL

Government Fiscal Year _____ and WBS Level _____

Elements of Cost	Labor Type (E or NE)	Month***	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
DIRECT LABOR (DL) HOURS														
Onsite DL Hours: *(List by Individual DL Category)*														
Subtotal Onsite DL Hours														
Offsite DL Hours: *(List by Individual DL Category)*														
Subtotal Offsite DL Hours														
TOTAL DIRECT LABOR HOURS														
DIRECT LABOR HOURLY RATES *(List by Individual DL Category)*														
DIRECT LABOR COSTS														
Onsite DL Costs: *(List by Individual DL Category)*														
Subtotal Onsite DLCosts														
Offsite DL Costs: *(List by Individual DL Category)*														
Subtotal Offsite DL Costs														
TOTAL DIRECT LABOR COSTS														

***Adjust the number of month columns accordingly in the first and last Government Fiscal Years of the contract.**

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 2-B

SIGNIFICANT SUBCONTRACTOR

CORE REQUIREMENTS

ELEMENTS OF COST BY WORK BREAKDOWN STRUCTURE (WBS)

WBS Level _____

	Base		Option 1		Option 2		
Elements of Cost	**Government Fiscal Year (GFY) 2016 (2/1/16-9/30/16) ^**	**GFY 2017 (10/1/16 - 9/30/17)**	**GFY 2018 (10/1/18-9/30/18)**	**GFY 2019 (10/1/18-9/30/19)**	**GFY 2020 (10/1/19 - 9/30/20)**	**GFY 2021 (10/1/20 - 1/31/21)^^**	**GRAND TOTAL**
Direct Labor (DL) Hours:							
Onsite DL Hours *(Derived from **Exhibit 2-A**)*							
Offsite DL Hours *(Derived from **Exhibit 2-A**)*							
TOTAL DIRECT LABOR HOURS							
Direct Labor Costs:							
Onsite DL Costs *(Derived from **Exhibit 2-A**)*							
Offsite DL Costs *(Derived from **Exhibit 2-A**)*							
TOTAL DIRECT LABOR COSTS							
Overhead:							
Onsite							
Offsite							
TOTAL OVERHEAD							
Other Direct Costs (ODCs):							
Other Subcontracts							
Material							
Travel							
Other (Specify)							
TOTAL ODCs							
SUBTOTAL COST							
G&A							
TOTAL ESTIMATED COST							
FIXED FEE/PROFIT PERCENTAGE							
FIXED FEE/PROFIT							
TOTAL COST PLUS FIXED FEE/PROFIT							

^GFY 2016 Partial (February 1, 2016, through September 30, 2016)
^^GFY 2021 Partial (October 1, 2020, through January 31, 2021)
Offerors may adjust elements of cost to be consistent with your current accounting system.

This exhibit contains Source Selection Information. See FAR 3.104.

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 3

PRIME OFFEROR
CORE REQUIREMENTS
SUMMARY OF ESTIMATED COST AND FIXED FEE
SLIP MONTHS

Elements of Cost	Slip Month 1 (February 2021)	Slip Month 2 (March 2021)	Slip Month 3 (April 2021)	Slip Month 4 (May 2021)	Slip Month 5 (June 2021)	Slip Month 6 (July 2021)	TOTAL
Direct Labor (DL) Hours							
Prime Onsite DL Hours							
Prime Offsite DL Hours							
Total Prime Direct Labor Hours							
Significant Subcontractor Onsite DL Hours*:							
(List separately by company)							
Subtotal Significant Subcontractor Onsite Direct Labor Hours							
Significant Subcontractor Offsite DL Hours*:							
(List separately by company)							
Subtotal Significant Subcontractor Offsite Direct Labor Hours							
Total Significant Subcontractor Direct Labor Hours							
TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS							
Direct Labor Costs							
Prime Onsite DL Costs							
Prime Offsite DL Costs							
TOTAL PRIME DIRECT LABOR COSTS							
Overhead							
Onsite							
Offsite							
TOTAL OVERHEAD							
Other Direct Costs (ODCs)							
Significant Subcontracts (list separately by company)**							
Other Subcontracts							
Non-Proposed Costs							
- Waste Disposal Costs	$10,833	$10,833	$10,833	$10,833	$10,833	$10,833	$64,998
- GSFC Regulatory Fees	$1,167	$1,167	$1,167	$1,167	$1,167	$1,167	$7,002
Material							
Travel							
Other (Specify)							
TOTAL ODCs							
SUBTOTAL COST							
G&A							
TOTAL ESTIMATED COST							
FIXED FEE PERCENTAGE							
FIXED FEE							
TOTAL COST PLUS FIXED FEE							

***Significant Subcontractor (>10% of proposed Core value (Base and Option periods)) - Insert Direct Labor Hours Only**
****List each significant subcontractor separately by company - Insert Total Costs and Fees**
Offerors may adjust elements of cost to be consistent with your current accounting system.

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 3-A

SIGNIFICANT SUBCONTRACTOR

CORE REQUIREMENTS

SUMMARY OF ESTIMATED COST AND FEE

SLIP MONTHS

Elements of Cost	Slip Month 1 (February 2021)	Slip Month 2 (March 2021)	Slip Month 3 (April 2021)	Slip Month 4 (May 2021)	Slip Month 5 (June 2021)	Slip Month 6 (July 2021)	TOTAL
Direct Labor (DL) Hours:							
Onsite DL Hours							
Offsite DL Hours							
TOTAL DIRECT LABOR HOURS							
Direct Labor Costs:							
Onsite DL Costs							
Offsite DL Costs							
TOTAL DIRECT LABOR COSTS							
Overhead:							
Onsite							
Offsite							
TOTAL OVERHEAD							
Other Direct Costs (ODCs):							
Other Subcontracts							
Material							
Travel							
Other (Specify)							
TOTAL ODCs							
SUBTOTAL COST							
G&A							
TOTAL ESTIMATED COST							
FIXED FEE/PROFIT PERCENTAGE							
FIXED FEE/PROFIT							
TOTAL COST PLUS FIXED FEE/PROFIT							

Offerors may adjust elements of cost to be consistent with your current accounting system.

This exhibits contains Source Selection Information. See FAR 3.104.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 4

SUMMARY OF INDIRECT RATES

	Overhead Onsite Rate	Overhead Offsite Rate	G&A Expense Rate	Other (Identify)** Rate
Government Fiscal Year 2016 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2016 Composite				
Government Fiscal Year 2017 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2017 Composite				
Government Fiscal Year 2018 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2018 Composite				
Government Fiscal Year 2019 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2019 Composite				
Government Fiscal Year 2020 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2020 Composite				
Government Fiscal Year 2021 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2021 Composite				
BASE OF APPLICATION - INDIRECT RATE APPLIED AGAINST (Specific Base)*				

*Explain Basis of Allocation of Contractor FY Rates to Obtain Government FY Rates
**If Multiple "Other" Indirect Rates - Add additional columns and specify each individually
***Explanation of Base of Application

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 5

SUMMARY OF RECURRING OTHER DIRECT COSTS (ODCs) / COST ESTIMATING RELATIONSHIPS (CERs)

	Specify ODC* Percentage/Rate/Amount**	Specify ODC* Percentage/Rate/Amount**	Specify ODC* Percentage/Rate/Amount**	Specify ODC* Percentage/Rate/Amount**
Government Fiscal Year 2016 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2016 Composite				
Government Fiscal Year 2017 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2017 Composite				
Government Fiscal Year 2018 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2018 Composite				
Government Fiscal Year 2019 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2019 Composite				
Government Fiscal Year 2020 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2020 Composite				
Government Fiscal Year 2021 *Portion of Contractor FY From:_____to_____ *Portion of Contractor FY From:_____to_____				
Government Fiscal Year 2021 Composite				
BASE OF APPLICATION - INDIRECT RATE APPLIED AGAINST (Specific Base)*				

*Explain Basis of Allocation of Contractor FY Rates to Obtain Government FY Rates
**If Multiple "Other" Indirect Rates - Add additional columns and specify each individually
***Explanation of Base of Application

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 6-A

OVERHEAD (Composition of Burden Pool)

Overhead or Service Center Pool = _____

(Specify Type of Overhead Burden, e.g. Labor, Onsite, Offsite, Engineering, Procurement, Service Center(s), etc. - See Page 2)

OFFEROR'S FISCAL YEAR BEGINS _____ AND ENDS _____.

Cost Elements within the Overhead Burden Pool	Contractor Fiscal Year Prior Yr 3	Contractor Fiscal Year Prior Yr 2	Contractor Fiscal Year Prior Yr 1	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year
Total Overhead Pool Expenses											
Base of Distribution (identify) Dollars:											
Existing Base											
Forecasted Base*											
Contractor FY Rate (%)											
Conversion of Contractor FY Overhead Rate to Government Fiscal Year (GFY)				Phase-In + Base Period GFY 2016	Base Period GFY 2016	Base Period GFY 2017	Option 1 GFY 2018	Option 1 GFY 2019	Option 2 GFY 2020	Option 2 GFY 2021	6 Slip Months GFY 2021
Proposed Overhead Bid Rate by GFY											

If more than one Overhead Pool is proposed, submit a separate Exhibit 6-A for each Pool.
*Provide details of the forecasted base.

Type of Overheads - Examples include:
Material Overhead
Manufacturing Overhead
Engineering Overhead
Field Service Overhead
Site Overhead

Typical Costs Found in an Overhead Expense Pool

Material Overhead
Acquisition (Purchasing)
Inbound transportation
Indirect labor
Employee related expenses (shift & overtime premiums, employee taxes, fringe benefits)
Receiving and inspection
Material handling and storage
Vendor quality assurance
Scrap sales credits
Inventory adjustments

Operations Overhead (e.g., Manufacturing, Engineering, Field Service, and Site Operations)
Indirect labor and supervision
Perishable tooling (primarily in manufacturing overhead)
Employee related expenses (shift & overtime premiums, employee taxes, fringe benefits)
Indirect material & supplies (small tools, grinding wheels, lubricating oils)
Fixed charges (e.g., depreciation, insurance, rent, property taxes)
Downtime of direct employees (training, vacation pay, regular pay) when not working on a specific contract/job

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 6-B

GENERAL AND ADMINISTRATIVE (G&A) (Composition of Burden Pool)

OFFEROR'S FISCAL YEAR BEGINS _____ AND ENDS _____.

Cost Elements Within the G&A Expense Pool	Contractor Fiscal Year Prior Yr 3	Contractor Fiscal Year Prior Yr 2	Contractor Fiscal Year Prior Yr 1	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year	Contractor Fiscal Year
Labor:											
Labor Related Cost:											
B&P											
IR&D											
Corporate Allocations:											
Other (Specify):											
Total G&A Pool Expenses											
Base of Distribution (identify) Dollars:											
Existing Base											
Forecasted Base*											
Contractor FY Rate (%)											
Conversion of Contractor FY Overhead Rate to Government Fiscal Year (GFY)				Phase-In + Base Period GFY 2016	Base Period GFY 2016	Base Period GFY 2017	Option 1 GFY 2018	Option 1 GFY 2019	Option 2 GFY 2020	Option 2 GFY 2021	6 Slip Months GFY 2021
Proposed G&A Bid Rate by GFY											

If more than one G&A Pool is proposed, submit a separate Exhibit 6-B for each Pool.
*Provide details of the forecasted base.

General and Administrative (G&A) Expenses. These are management, financial, and other expenses related to the general management and administration of the business unit as a whole. To be considered a G&A Expense of a business unit, the expenditure must be incurred by, or allocated to, the general business unit. Examples of G&A Expense include:

Salary and other costs of the executive staff of the corporate or home office.
Salary and other costs of such staff services as legal, accounting, public relations, and financial offices
Selling and marketing expenses

Typical Costs Found in a G&A Expense Pool

General & executive office
Staff services (legal, accounting, public relations, financial)
Selling and marketing
Corporate or home office
Independent research and development (IR&D)
Bid and proposal (B&P)
Other miscellaneous activities related to overall business operation

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 7

CORE REQUIREMENTS
OTHER SUBCONTRACTS

GOVERNMENT FISCAL YEAR	WBS(s)	SUBCONTRACTOR	DESCRIPTION OF EFFORT	TYPE OF CONTRACT	PRIME PROPOSED SUB HOURS	PRIME PROPOSED SUB PRICE
TOTAL						

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 8

CORE REQUIREMENTS

MATERIAL ITEMS

GOVERNMENT FISCAL YEAR	WBS	NOMENCLATURE	PART NUMBER	QUANTITY REQUIRED	UNIT PRICE	TOTAL PRICE
TOTAL						

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 9

CORE REQUIREMENTS

TRAVEL

GOVERNMENT FISCAL YEAR	WBS	ORGIN/DESTINATION	PURPOSE	# OF TRIPS	# OF PEOPLE	# OF DAYS	AIRFARE RATE	AIRFARE AMOUNT	PER DIEM RATE	PER DIEM AMOUNT	CAR RENTAL RATE	CAR RENTAL AMOUNT	TOTAL
TOTAL													

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 10

CORE REQUIREMENTS

OTHER DIRECT COSTS

GOVERNMENT FISCAL YEAR	WBS	DESCRIPTION	QUANTITY REQUIRED	UNIT PRICE	TOTAL PRICE
TOTAL					

Proposing Entity: **RFP# NNG1475030R**
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor** **Page 1 of 2**

EXHIBIT 11
PHASE-IN COSTS

Elements of Cost	Proposed Costs
DIRECT LABOR HOURS *(Derived from Page 2 of 2)*	
DIRECT LABOR COST *(Derived from Page 2 of 2)*	
OVERHEAD	
OTHER DIRECT COSTS:	
Relocation	
Training	
Subcontracts	
Travel	
Other (detail)	
TOTAL ODCS	
SUBTOTAL COSTS	
G&A	
TOTAL COSTS	
PROFIT	
TOTAL FIRM FIXED PRICE	

Proposing Entity: **RFP#**
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor** **Page 2 of 2**

EXHIBIT 11-A
DIRECT LABOR PHASE-IN COSTS

Contract Direct Labor Categories	Hours	Proposed Rates	Proposed Costs
TOTAL PHASE-IN DIRECT LABOR COSTS			

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 12

CORE REQUIREMENTS

SOURCE OF PERSONNEL CHART

Total Number of Staff	Labor Category	Labor Category Code*	Personnel Available Within Company	Personnel to be Obtained from Incumbent	Outside Hired Staff
TOTAL					

*Code each Labor Cateogry: S=SALARIED; H=HOURLY; U=UNION; E=EXEMPT; NE=NON-EXEMPT DOL/WD DETERMINATION; I=INCUMBENT; SU=SUBCONTRACTOR

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 13

PRODUCTIVE WORK YEAR CALCULATION

	Government Fiscal Year (GFY) 2016^	GFY 2017	GFY 2018	GFY 2019	GFY 2020	GFY 2021^^
Total Possible Hours in Year						
Less:						
Vacation in Hours						
Holidays in Hours						
Sick Leave in Hours						
Miscellaneous in Hours (specifically identify)						
PRODUCTIVE WORK YEAR in Hours (Hours Actually Worked)						

^GFY 2016 Partial (February 1, 2016, through September 30, 2016)
^^GFY 2021 Partial (October 1, 2020, through January 31, 2021)

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

EXHIBIT 14-A

FRINGE BENEFITS (FB)

(Total Compensation Plan)

Exempt Employees

Company Or Division Name:
Employer Location(s):
Effective:

Benefit Item	Total Cost of FB per Hour	Percentage AND Cost Per Hour of Employee Contribution		Percentage AND Cost Per Hour of Company Contribution		Remarks
		%	$	%	$	
Insurance Plans Health Life Dental Disability Other (List)						
Sick Leave						
Employee Savings						
Severance Pay						
Vacation						
Holidays						
Other (List)						
Total Cost of FB						

NOTE: This is a SAMPLE format only and reflects examples of fringe benefit items your company package may include. All costs should be shown in cents-per-hour (9 Holidays = $.185). It is recognized that such costs will be averages for the different employee categories involved (EXEMPT, UNION, etc.). Each benefit item should be briefly highlighted. EXAMPLE: Vacation – "2 weeks after one year, 3 after seven years, and 4 after fifteen years." Only company costs should be shown, if a specific benefit item is contributory by the employee, explain separately.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

EXHIBIT 14-B

FRINGE BENEFITS (FB)

(Total Compensation Plan)

Non-Exempt Employees

Company Or Division Name:
Employer Location(s):
Effective:

Benefit Item	Total Cost of FB per Hour	Percentage AND Cost Per Hour of Employee Contribution		Percentage AND Cost Per Hour of Company Contribution		Remarks
		%	$	%	$	
Insurance Plans Health Life Dental Disability Other (List)						
Sick Leave						
Employee Savings						
Severance Pay						
Vacation						
Holidays						
Other (List)						
Total Cost of FB						

NOTE: This is a SAMPLE format only and reflects examples of fringe benefit items your company package may include. All costs should be shown in cents-per-hour (9 Holidays = $.185). It is recognized that such costs will be averages for the different employee categories involved (EXEMPT, UNION, etc.). Each benefit item should be briefly highlighted. EXAMPLE: Vacation – "2 weeks after one year, 3 after seven years, and 4 after fifteen years." Only company costs should be shown, if a specific benefit item is contributory by the employee, explain separately.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 15-A

Cognizant Defense Contract Audit Agency (DCAA) Office Information

DCAA Online Info http://www.dcaa.mil

Submitting Entity:		DCAA Field Audit Office (FAO):	
Company Name:		DCAA FAO:	
POC:		POC:	
Phone Number:		Phone Number:	
FAX Number:		FAX Number:	
E-Mail Address:		E-Mail Address:	
Street:		Street:	
P.O.Box:		P.O.Box:	
City:		City:	
State:		State:	
Zip Code:		Zip Code:	

Note: The submitting entity audit point of contact (POC) and address provided above must be at a location where auditable records supporting the proposed amounts physically reside.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 15-B

Cognizant Defense Contract Management Agency (DCMA) Office Information

DCMA Online Info http://www.dcma.mil

Submitting Entity:		DCMA Cognizant Office:	
Company Name:		DCMA Office	
POC:		POC:	
Phone Number:		Phone Number:	
FAX Number:		FAX Number:	
E-Mail Address:		E-Mail Address:	
Street:		Street:	
P.O.Box:		P.O.Box:	
City:		City:	
State:		State:	
Zip Code:		Zip Code:	

Disclosures:	Date	Audit Report #	Status
Contractor Estimating System Review (CESR)			
Contractor Purchasing System Review (CPSR)			
Contractor Billing System Review			
Contractor Accounting System Review			
Contractor Disclosure Statement Accuracy			
Contractor Executive Compensation Review			
Contractor Property Management System			
Forward Pricing Rate Agreements			
Earned Value Management System (EVMS)			
Level of CAS applicability			
Determination of Cost Accounting Standards (CAS) applicability			

Note: The submitting entity audit point of contact (POC) and address provided above must be at a location where auditable records supporting the proposed amounts physically reside.

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 16

PRIME OFFEROR
REPRESENTATIVE TASK ORDER (RTO) No. _____
ELEMENTS OF COST SUMMARY
Government Fiscal Year _____ and WBS Level _____

Elements of Cost	Month***	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
Direct Labor (DL) Hours:													
Prime Onsite DL Hours *(Derived from **Exhibit 16-A**)*													
Prime Offsite DL Hours *(Derived from **Exhibit 16-A**)*													
Total Prime Direct Labor Hours													
Significant Subcontractor Onsite DL Hours*:													
(List total hours separately by company)													
Subtotal Significant Subcontractor Onsite Direct Labor Hours													
Significant Subcontractor Offsite DL Hours*:													
(List total hours separately by company)													
Subtotal Significant Subcontractor Offsite Direct Labor Hours													
Total Significant Subcontractor Direct Labor Hours													
TOTAL PRIME AND SIGNIFICANT SUBCONTRACTOR DIRECT LABOR HOURS													
Direct Labor Costs:													
Prime Onsite DL Costs *(Derived from **Exhibit 16-A**)*													
Prime Offsite DL Costs *(Derived from **Exhibit 16-A**)*													
TOTAL PRIME DIRECT LABOR COSTS													
Overhead:													
Onsite													
Offsite													
TOTAL OVERHEAD													
Other Direct Costs (ODCs):													
Significant Subcontracts (list separately by company)**													
Other Subcontracts													
Material													
Travel													
Other (Specify)													
TOTAL ODCs													
SUBTOTAL COST													
G&A													
TOTAL ESTIMATED COST													
FIXED FEE PERCENTAGE													
FIXED FEE													
TOTAL COST PLUS FIXED FEE													

***Significant Subcontractor (>10% of proposed Core estimated value (Base and Option periods)) - Insert Direct Labor Hours Only**
****List each significant subcontractor separately by company - Insert Total Costs and Fees**
*****Adjust the number of month columns to match RTO period of performance**
Offerors may adjust elements of cost to be consistent with your current accounting system.

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 16-A

REPRESENTATIVE TASK ORDER (RTO) No. _____

DIRECT LABOR HOURS, DIRECT LABOR RATES AND DIRECT LABOR COSTS DETAIL

Government Fiscal Year _____ and WBS Level _____

Elements of Cost	Labor Type (E or NE)	Month*	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
DIRECT LABOR (DL) HOURS														
Onsite DL Hours: *(List by Individual DL Category)*														
Subtotal Onsite DL Hours														
Offsite DL Hours: *(List by Individual DL Category)*														
Subtotal Offsite DL Hours														
TOTAL DIRECT LABOR HOURS														
DIRECT LABOR HOURLY RATES *(List by Individual DL Category)*														
DIRECT LABOR COSTS														
Onsite DL Costs: *(List by Individual DL Category)*														
Subtotal Onsite DLCosts														
Offsite DL Costs: *(List by Individual DL Category)*														
Subtotal Offsite DL Costs														
TOTAL DIRECT LABOR COSTS														

***Adjust the number of month columns to match RTO period of performance**

Proposing Entity:

RFP# NNG1475030R

EXHIBIT 16-B

SIGNIFICANT SUBCONTRACTOR

REPRESENTATIVE TASK ORDER (RTO) No. _____

ELEMENTS OF COST BY WORK BREAKDOWN STRUCTURE (WBS)

Government Fiscal Year _____ and WBS Level _____

Elements of Cost	Month***	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	TOTAL
Direct Labor (DL) Hours:													
Onsite DL Hours *(Derived from Exhibit 16-A)*													
Offsite DL Hours *(Derived from Exhibit 16-A)*													
TOTAL DIRECT LABOR HOURS													
Direct Labor Costs:													
Onsite DL Costs *(Derived from Exhibit 16-A)*													
Offsite DL Costs *(Derived from Exhibit 16-A)*													
TOTAL DIRECT LABOR COSTS													
Overhead:													
Onsite													
Offsite													
TOTAL OVERHEAD													
Other Direct Costs (ODCs):													
Other Subcontracts													
Material													
Travel													
Other (Specify)													
TOTAL ODCs													
SUBTOTAL COST													
G&A													
TOTAL ESTIMATED COST													
FIXED FEE/PROFIT PERCENTAGE													
FIXED FEE/PROFIT													
TOTAL COST PLUS FIXED FEE/PROFIT													

***Adjust the number of month columns to match RTO period of performance**
Offerors may adjust elements of cost to be consistent with your current accounting system.

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 16-C

REPRESENTATIVE TASK ORDER (RTO) No. _____

OTHER SUBCONTRACTS

GOVERNMENT FISCAL YEAR	WBS	SUBCONTRACTOR	DESCRIPTION OF EFFORT	TYPE OF CONTRACT	PRIME PROPOSED SUB HOURS	PRIME PROPOSED SUB PRICE
TOTAL						

Proposing Entity:
[ ] Prime Offeror OR [ ] Significant Subcontractor

RFP# NNG1475030R

EXHIBIT 16-D

REPRESENTATIVE TASK ORDER (RTO) No. _____

MATERIAL ITEMS

GOVERNMENT FISCAL YEAR	WBS	NOMENCLATURE	PART NUMBER	QUANTITY REQUIRED	UNIT PRICE	TOTAL PRICE
TOTAL						

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 16-E

REPRESENTATIVE TASK ORDER (RTO) No. _____
TRAVEL

GOVERNMENT FISCAL YEAR	WBS	ORGIN/DESTINATION	PURPOSE	# OF TRIPS	# OF PEOPLE	# OF DAYS	AIRFARE RATE	AIRFARE AMOUNT	PER DIEM RATE	PER DIEM AMOUNT	CAR RENTAL RATE	CAR RENTAL AMOUNT	TOTAL
TOTAL													

Proposing Entity:
[ ] **Prime Offeror** OR [ ] **Significant Subcontractor**

RFP# NNG1475030R

EXHIBIT 16-F

REPRESENTATIVE TASK ORDER (RTO) No. _____

OTHER DIRECT COSTS

GOVERNMENT FISCAL YEAR	WBS	DESCRIPTION	QUANTITY REQUIRED	UNIT PRICE	TOTAL PRICE
TOTAL					