FISCAL YEAR 2024

SMALL BUSINESS CONTRACTING (30 ILCS 500/45-90)

**ANNUAL REPORT**

**Agency Name:** Choose an item.

(Please note: for Fiscal Year 2024 your Agency totals will not include any spend utilizing CMS master contracts, DOIT master contracts, or master contracts originated through any State Agency other than the one you are reporting on. Please only utilize data for solicitations that originated in the agency that you are reporting on.)

# Agency Utilization of Small Businesses

Total Agency Awards ($) =

Agency Awards with Small Businesses Pursued as a Set-Aside ($) =

Agency Awards with Small Businesses NOT pursued as a Set-Aside ($) =

Agency Awards with Small Businesses as a Percent of Total Agency Awards (%) =

# Self-Evaluation of Agency Effort and Accomplishments in Contracting with Illinois Small Businesses

2.1. If the agency’s total awards with small businesses as a percent of total agency awards is **not** 10% or greater, then check any of the situations that apply.

[ ]  The supplies or services we purchased were mostly provided by large business sole source vendors.

[ ]  The supplies or services we purchased were brand name and there were no small businesses that provided the products.

[ ]  The supplies or services we would have purchased from small businesses were instead purchased from State Use vendors.

[ ]  The supply base for the supplies or services we purchased included larger diversified vendors that counted towards the Business Enterprise for Minorities, Women, and Persons with Disabilities Act.

[ ]  Small business vendors were solicited, and no offers were received.

[ ]  The prices offered by qualified small businesses were substantially greater than the prices offered by large businesses.

[ ]  The small business supply base did not meet the regional or geographic requirements for the supplies and services we purchased.

2.2 Please provide additional information regarding the agency’s efforts to meet the 10% contracting goal. You may want to comment on the strategy and timelines expressed in the Compliance Plan.

2.3 Name of Report Submitter:

 Title of Report Submitter:

 Date: Click or tap to enter a date.