



**State of Illinois**  
Central Management Services

# COMMUNITY COLLEGES SUPPLIER DIVERSITY

## FISCAL YEAR 2020 ANNUAL REPORT

<b>District #</b>	<b>District Name</b>
501	Kaskaskia College
502	College of DuPage
503	Black Hawk College
504	Triton College
505	Parkland College
506	Sauk Valley Community College
507	Danville Area Community College
508	City Colleges of Chicago
509	Elgin Community College
510	South Suburban College
511	Rock Valley College
512	Harper College
513	Illinois Valley Community College
514	Illinois Central College
515	Prairie State College
516	Waubensee Community College
517	Lake Land College
518	Carl Sandburg College
519	Highland Community College
520	Kankakee Community College
521	Rend Lake College
522	Southwestern Illinois College
523	Kishwaukee Community College
524	Moraine Valley Community College
525	Joliet Junior College
526	Lincoln Land Community College
527	Morton College
528	McHenry County College
529	Illinois EasternCommunity Colleges
530	John A. Logan College
531	Shawnee Community College
532	College of Lake County
533	Southeastern Illinois College
534	Spoon River College
535	Oakton Community College
536	Lewis & Clark Community College
537	Richland Community College
539	John Wood Community College
540	Heartland Community College

# Community College Business Enterprise Program FY 2019 Annual Report

For Items 1-6 Enter Data in This Column

- 1) Submitted on:** Friday, October 30, 2020
  
- 2) Fiscal Year Reporting:** 2020
  
- 3) Name and District Number of Community College District:** Kaskaskia College, District #501
  
- 4) Name of College Appointed Contact for Vendors:** Craig Roper
  
- 5) College Contact Person and Phone Number for Purposes of This Report:** Craig Roper Phone: 618-545-3137
  
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability** MBE, FBE, DBE, SBE, VOB (to include ethnicity)
  
- 7) College Policy concerning Certified Vendors (Separate Narrative Required)** *Narrative not requested for FY2020*
  
- 8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)** *Narrative not requested for FY2020*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	3,871,666	0	0
<i>Investment Management Services</i>	53080	0	0	0
<i>Information Technology Services</i>	53080	545,520	0	0
<i>Accounting Services</i>	53010	49,425	0	0
<i>Architectural &amp; Engineering Services</i>	53030	107,689	19,254	18
<i>Legal Services</i>	53050	149,795	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	8	0	0
<i>Investment Management Services</i>	53080	0	0	0
<i>Information Technology Services</i>	53080	21	0	0

Accounting Services	53010	1	0	0
Architectural & Engineering Services	53030	23	9	39
Legal Services	53050	1	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
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Nothing to report

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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Nothing to report

# Community College Business Enterprise Progr

For Items 1-6 Enter Data in This Column

- 1) Submitted on: 10.12.2020
  
- 2) Fiscal Year Reporting: 2020
  
- 3) Name and District Number of Community College District: College of Dupage 502
  
- 4) Name of College Appointed Contact for Vendors: Theresa Dobersztyn, Procurement Services Manager  
630-942-4353
  
- 5) College Contact Person and Phone Number for Purposes of This Report: Ellen Roberts, Interim Vice President, Administrative Affairs 630-942-2218
  
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability Illinois Department of Central Management Services (CMS) Business Enterprise Program (BEP)
  
- 7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and*
  
- 8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and*

**9) Total FY 2020 Expenditure Analysis current fiscal year)**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)
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<i>Insurance Services (Managers &amp; Premiums)*</i>	<i>53080, 56050, 56070</i>
<i>Investment Management Services</i>	<i>53080</i>
<i>Information Technology Services</i>	<i>53080</i>
<i>Accounting Services</i>	<i>53010</i>
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>

Legal Services

53050

**10) Total Number of Contracts Analyzed**

Vendor Categories	
-------------------	--

Insurance Services (Managers & Premiums)\*

53080, 56050, 56070

Investment Management Services

53080

Information Technology Services

53080

Accounting Services

53010

Architectural & Engineering Services

53030

Legal Services

53050

\* College of Dupage is a member of the Illinois Community College Risk Management Consortium, which

**Submission Instructions:**

**Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;**

**Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or indiv**

**Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

**11) FY 2020 Expenditure Analysis**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)
-------------------	---------------------------------------------------------------------------------------------------------

- Building Remodel
- Computer Supplies
- Consultants Services
- Custodial Services
- Equipment Instruction
- Instructional Services
- Instructional Supplies
- Maintenance Services
- Office Equipment
- Other Contractual Services
- Other Material and Supplies

Printing

**12) FY20 Number of Contracts Analyzed**

Vendor Categories	
-------------------	--

- Building Remodel
- Computer Supplies
- Consultants Services
- Custodial Services
- Equipment Instruction
- Instructional Services
- Instructional Supplies
- Maintenance Services
- Office Equipment
- Other Contractual Services
- Other Material and Supplies
- Printing



# am FY 2020 Annual Report

*d send as an attachment to this annual report.*

*d send as an attachment to this annual report.*

For Item 9 Enter Data in These 3 Columns		
Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)

\$1,032,811	\$0	0.00%
\$265,256	\$0	0.00%
\$3,637,735	\$5,750	0.16%
\$115,484	\$0	0.00%
\$570,051	\$13,793	2.42%

\$320,517                      \$0                      0.00%

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
1	0	0.00%
1	0	0.00%
114	1	0.88%
3	0	0.00%
17	1	5.88%
6	0	0.00%

h manages our insurance coverage.

*idually) where XXX is your district number;*

For Item 9 Enter Data in These 3 Columns

Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
\$8,581,234	\$64,266	0.75%
\$161,689	\$0	0.00%
\$570,121	\$15,637	2.74%
\$417,756	\$0	0.00%
\$1,801,726	\$0	0.00%
\$345,701	\$0	0.00%
\$3,765,699	\$85,355	2.27%
\$2,764,592	\$46,700	1.69%
\$1,027,751	\$4,500	0.44%
\$2,352,679	\$51,909	2.21%
\$3,134,890	\$30,031	0.96%

\$539,934

\$0

0.00%

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
79	4	5.06%
86	0	0.00%
35	2	5.71%
1	0	0.00%
84	0	0.00%
20	0	0.00%
1709	15	0.88%
316	8	2.53%
79	1	1.27%
380	6	1.58%
344	1	0.29%
58	0	0.00%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

- 1) Submitted on:** 9/17/2020
- 2) Fiscal Year Reporting:** 2020
- 3) Name and District Number of Community College District:** Black Hawk College District 503
- 4) Name of College Appointed Contact for Vendors:** Mike Meleg, Director of Purchasing and Auxiliary Services
- 5) College Contact Person and Phone Number for Purposes of This Report:** Mike Meleg 1-309-796-5002
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability** DCMS (Department of Central Management Services) Business Enterprise Program, CMBDC (Chicago Minority Business Development Council), IDOT (Illinois Department of Transportation), WBDC (Women's Business Development Center) plus those recognized by CMS and BEP (City of Chicago, CTA, Metra, PACE, Cook County, CMSDC, MSMSDC, etc.). The College will recognize all firms that are certified with CMS as BEP vendor, per State statute and also recognition of other States' certifications.
- 7) College Policy concerning Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*
- 8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	\$595,665.21	\$0.00	0%
<i>Investment Management Services</i>	53080	\$0.00	\$0.00	0%
<i>Information Technology Services</i>	53080	\$3,246,128.02	\$0.00	0%
<i>Accounting Services</i>	53010	\$90,100.00	\$29,000.00	32%
<i>Architectural &amp; Engineering Services</i>	53030	\$255,788.90	\$0.00	0%
<i>Legal Services</i>	53050	\$125,693.85	\$0.00	0%

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	2	0	0%
<i>Investment Management Services</i>	53080	0	0	0%
<i>Information Technology Services</i>	53080	709	0	0%
<i>Accounting Services</i>	53010	7	1	50%
<i>Architectural &amp; Engineering Services</i>	53030	5	0	0%
<i>Legal Services</i>	53050	3	0	0%

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY20 BEP Report where XXX is your district number;

Please complete the required narratives in a WORD format and name it XXXFY20 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Midyear FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Laboratory/Safety Services</i>	<i>53040, 53090</i>	\$1,550.00	\$1,550.00	100%
<i>Fingerprinting Services/Consultants</i>	<i>53020, 53060, 53090</i>	\$33.00	\$33.00	100%
<i>All other BEP</i>		\$4,645,344.27	\$0.00	0%

**12) Midyear Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Laboratory/Safety Services</i>	<i>53040, 53090</i>	1	1	100%
<i>Fingerprinting Services/Consultants</i>	<i>53020, 53060, 53090</i>	1	1	100%
<i>All other BEP</i>		136	0	0%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 10/14/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Triton College Community College District No. 504

4) Name of College Appointed Contact for Vendors: John McGarry johnmcgarry@triton.edu

5) College Contact Person and Phone Number for Purposes of This Report: Jim Reynolds 708-779-4542

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: IL Department of Central Management Services BEP Vendors

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Attached*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Attached*

**9) Total FY 2020 Expenditure Analysis)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)

<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	407,980	0	0
<i>Investment Management Services</i>	<i>53080</i>	0	0	0
<i>Information Technology Services</i>	<i>53080</i>	1,964,869	15,975	0.81%
<i>Accounting Services</i>	<i>53010</i>	105,600	0	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	116,112	0	0
<i>Legal Services</i>	<i>53050</i>	383,815	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	3	0	0
<i>Investment Management Services</i>	<i>53080</i>	0	0	0
<i>Information Technology Services</i>	<i>53080</i>	45	2	4.44%
<i>Accounting Services</i>	<i>53010</i>	1	0	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	2	0	0
<i>Legal Services</i>	<i>53050</i>	10	0	0



**Submission Instructions:**

**Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;**

**Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;**

**Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

**11) Year End FY 2020 Expenditure Analysis**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Instructional Service Contract	53080	217,852.15	1,009.50	0.46%
Maintenance Services	53040	2,150,337.91	294,867.87	13.71%
Repair Materials & Supplies	54040	781,184.65	35,382.12	4.53%

# Community College Business Enterprise Program FY 2020 Mid Year Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 9/24/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Parkland College, District 505

4) Name of College Appointed Contact for Vendors: Lauren Craig, Purchasing Agent

5) College Contact Person and Phone Number for Purposes of This Report: Lauren Craig, 217-351-2232

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability MBE, PBE,VOSB, WBE,WMBE - The Business Enterprise Programe with the State of Illinois and Federal Certifications

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

9) Total FY 2020 Expenditure Analysis current fiscal year		For Item 9 Enter Data in These 3 Columns			
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)	
Insurance Services (Managers & Premiums)	53080, 56050, 56070	660,172	0	0	
Investment Management Services	53080	0	0	0	
Information Technology Services	53080	407,567	0	0.000%	
Accounting Services	53010	69,700	42,995	62.000%	
Architectural & Engineering Services	53030	229,470	0	0	
Legal Services	53050	151,017	0	0	

10) Total Number of Contracts Analyzed		For Item 10 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	2	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	5	0	0.000%
Accounting Services	53010	2	1	50.000%
Architectural & Engineering Services	53030	3	0	0
Legal Services	53050	1	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY20 BEP Report where XXX is your district number;

Please complete the required narratives in a WORD format and name it XXXFY20 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

11) FY 2020 Expenditure Analysis		For Item 9 Enter Data in These 3 Columns			
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)	
Maintenance Supplies	54010	344094.62	42753.86	12.00%	
Office Supplies	54010	114130.25	38179.11	33.00%	

12) Number of Contracts Analyzed		For Item 10 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Maintenance Supplies	54010	10	1	10.00%
Office Supplies	54010	2	1	50.00%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 12/15/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Sauk Valley Community College District No. 506

4) Name of College Appointed Contact for Vendors: Kent Sorenson

5) College Contact Person and Phone Number for Purposes of This Report: Kent Sorenson, 815.835.6253

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: MBE, FBE, PBE

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	2,487	0	0%
<i>Investment Management Services</i>	53080	0	0	0%
<i>Information Technology Services</i>	53080	184,540	0	0%
<i>Accounting Services</i>	53010	43,600	0	0%
<i>Architectural &amp; Engineering Services</i>	53030	115,472	0	0%
<i>Legal Services</i>	53050	2,160	0	0%

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	3	0%
<i>Investment Management Services</i>	53080	0	0%
<i>Information Technology Services</i>	53080	11	0%
<i>Accounting Services</i>	53010	2	0%
<i>Architectural &amp; Engineering Services</i>	53030	11	0%
<i>Legal Services</i>	53050	2	0%

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Maintenance Services	53040	97,475.00	3,898.17	4%
Supplies	54010, 54020, 54030, 54040, 54050, 54060, 54070, 5409C	358,381.00	4,942.00	1%
Capital Renovations and Remodeling	58040, 58020	1,377,139.00	1,079,448.00	78%
Equipment	58050, 58060, 58070	475816	7,423.00	2%

**12) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Maintenance Services	53040	39	4	10%
Supplies	54010, 54020, 54030, 54040, 54050, 54060, 54070, 5409C	602	4	1%
Remodeling	58040	14	2	5%
Equipment	58050, 58060, 58070	18	1	5%

# Community College Business Enterprise Progr

For Items 1-6 Enter Data in This Column

**1) Submitted on:**

**2) Fiscal Year Reporting:** FY2020

**3) Name and District Number of Community College District:** Danville Area Community College, District #507

**4) Name of College Appointed Contact for Vendors:** Carl Lewis, Assistant VP Finance

**5) College Contact Person and Phone Number for Purposes of This Report:** Carl Lewis, 217-443-8881

**6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability**

**7) College Policy concerning Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and attach.*

**8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and attach.*

**9) Total FY 2020 Expenditure Analysis (prior fiscal year)**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)

*Insurance Services (Managers & Premiums)* 53080, 56050, 56070

*Investment Management Services* 53080

*Information Technology Services* 53080

*Accounting Services* 53010

*Architectural & Engineering Services* 53030

Legal Services

53050

**10) Total Number of Contracts Analyzed**

Vendor Categories	

Insurance Services (Managers & Premiums)

53080, 56050, 56070

Investment Management Services

53080

Information Technology Services

53080

Accounting Services

53010

Architectural & Engineering Services

53030

Legal Services

53050

**Submission Instructions:**

**Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9**  
**Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or indiv**  
**Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

**11) Total FY 2020 Expenditure Analysis (prior fiscal year)**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)

FO  
MO

**12) Total Number of Contracts Analyzed**

Vendor Categories	
-------------------	--

All Vendors

# am FY 2020 Annual Report

*d send as an attachment to this annual report.*

*d send as an attachment to this annual report.*

For Item 9 Enter Data in These 3 Columns		
Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)

203,206

0 0

0 0

43,000

158,662



17,877

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
-----------------------------------------------------------------	-------------------------------------------------------------------------	--------------------------------------------------

7

0

0

0

0

1

2

2

*idually) where XXX is your district number;*

For Item 9 Enter Data in These 3 Columns

Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
---------------------------------------------------------	---------------------------------------------------------------------------------	--------------------------------------------

\$168,370.02

\$ 70,343.00

1.60%

\$23,131.24

\$ -

0.30%

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
1075	1	0.10%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on:

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: City Colleges of Chicago  
Community College District No. 508

4) Name of College Appointed Contact for Vendors: Debra King  
Associate Director of Procurement  
(312) 553-2590  
dking84@ccc.edu

5) College Contact Person and Phone Number for Purposes of This Report: Debra King  
Associate Director of Procurement  
(312) 553-2590  
dking84@ccc.edu

- 1) The City of Chicago;
- 2) Cook County;
- 3) The State of IL—CMS ;
- 4) National Minority Supplier Development Council and its regional affiliates including the Chicago Minority Supplier Development Council and
- 5) Women Business Enterprise National Council and its regional partner organizations including the Women’s Business Development Center in Chicago and

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability  
Certifications will also be considered from conferring government agencies in other states and major metropolitan cities on a case by case basis.

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	399,549	0	
Investment Management Services	53080	55,316	0	
Information Technology Services	53080	7,270,849	2,781,483	38%
Accounting Services	53010	633,391	0	
Architectural & Engineering Services	53030	838,298	387,656	46%
Legal Services	53050			

**10) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	3	0	0
Investment Management Services	53080	1	0	0
Information Technology Services	53080	20	8	40%
Accounting Services	53010	2	0	0
Architectural & Engineering Services	53030	4	3	75%
Legal Services	53050	12	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 5

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)

**12) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 1/4/2021

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Community College District No. 509, Elgin Community College

4) Name of College Appointed Contact for Vendors: Melissa Tait

5) College Contact Person and Phone Number for Purposes of This Report: Melissa Tait; 847-214-7365

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: Illinois Deptment of Central Management Services BEP Vendors

7) College Policy concerning Certified Vendors (Separate Narrative Required) Attached

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) Attached

**9) Total FY 2019 Expenditure Analysis current fiscal year** For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	9,728,173	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	0	0	
Accounting Services	53010	85,861	0	0
Architectural & Engineering Services	53030	442,482	2,000	0%
Legal Services	53050	339,591	0	0

**10) Total Number of Contracts Analyzed** For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	6	0
Investment Management Services	53080		
Information Technology Services	53080	0	0
Accounting Services	53010	1	0
Architectural & Engineering Services	53030	5	1
Legal Services	53050	9	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;

Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number; Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or jared.ebel@illinois.gov

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Annual FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Printing	542000	187,503	28,706	15%

**12) Annual Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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# Community College Business

1) Submitted on:

2) Fiscal Year Reporting:

3) Name and District Number of Community College District:

4) Name of College Appointed Contact for Vendors:

5) College Contact Person and Phone Number for Purposes of This Report:

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability

7) College Policy concerning Certified Vendors (Separate Narrative Required)

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)

9) Total FY 2019 Expenditure Analysis (prior fiscal year)

--

Vendor Categories

*Insurance Services (Managers & Premiums)*

*Investment Management Services*

*Information Technology Services*

*Accounting Services*

*Architectural & Engineering Services*

*Legal Services*

**10) Total Number of Contracts Analyzed**

--

Vendor Categories

*Insurance Services (Managers & Premiums)*

*Investment Management Services*

*Information Technology Services*

*Accounting Services*

*Architectural & Engineering Services*

*Legal Services*

***Submission Instructions:***

***Please complete the spreadsheet and name it XXXFY18 BEP Report where XX***

***Please complete the required narratives in a WORD format and name it XXXF***

***Attach the completed annual report (with narratives) to an email and send to***

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

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Vendor Categories

Maintenance Services

Other Contractual Services

Publications/Dues

**12) Total Number of Contracts Analyzed**



Vendor Categories

# is Enterprise Program FY 2019 Annual Report

For Items 1-6 Enter Data in This Column

10/16/2020

2020

South Suburban College/District 510

Laurie Czulno - Purchasing

Martin Lareau - 708-210-5721

New vendor form produced by the College request that vendors self identify if they are a certified minority, female or disabled.

*Narrative Attached*

*Narrative Attached*

For Item 9 Enter Data in These 3 Columns			
FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>53080, 56050, 56070</i>	0	0	0
<i>53080</i>	0	0	0
<i>53080</i>	0	0	0
<i>53010</i>	0	0	0
<i>53030</i>	0	0	0
<i>53050</i>	0	0	0

For Item 10 Enter Data in These 3 Columns

	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
53080, 56050, 56070	0	0	0
53080	0	0	0
53080	0	0	0
53010	0	0	0
53030	0	0	0
53050	0	0	0

**X is your district number; 9**

**Y90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;**

**› jared.ebel@illinois.gov**

For Item 9 Enter Data in These 3 Columns

FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
53040	481,593	15,096	3.10%
53090	1,116,153	10,050	0.90%
54060	86,989	3,212.00	3.70%

For Item 10 Enter Data in These 3 Columns

	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on:

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community

College District: Rock Valley College, District 511

4) Name of College Appointed Contact for Vendors: Kathleen Jones, Purchasing Manager  
815-921-4477

5) College Contact Person and Phone Number for Purposes of This Report: Kathleen Jones, Purchasing Manager  
815-921-4477

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability Illinois CMS/BEP Listing  
NWBOC; WBENC; NMSDC; USBLN  
Dept of Veterans Affairs

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	\$ 571,797.00	\$ -	0
<i>Investment Management Services</i>	53080	\$ -	\$ -	0
<i>Information Technology Services</i>	53080	\$ 16,629.00	\$ -	0
<i>Accounting Services</i>	53010	\$ 120,801.00	\$ -	0
<i>Architectural &amp; Engineering Services</i>	53030	\$ 68,032.00	\$ -	0
<i>Legal Services</i>	53050	\$ 670,521.00	\$ -	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	5	0	0
<i>Investment Management Services</i>	53080	2	0	0
<i>Information Technology Services</i>	53080	4	0	0
<i>Accounting Services</i>	53010	1	0	0
<i>Architectural &amp; Engineering Services</i>	53030	3	0	0
<i>Legal Services</i>	53050	4	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Maintenance Svcs Building	53420	\$ 726,490.00	\$ 726,490.00	100.00%
Promotional Materials	54930	\$ 61,873.00	\$ 49,845.00	80.56%
Instructional Supplies General	54121	\$ 359,141.00	\$ 17,571.00	4.89%
Other Supplies	54190	\$ 80,843.00	\$ 3,114.00	3.85%

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Maintenance Svcs Building	1	1	100.00%
Promotional Materials	27	1	3.70%
Instructional Supplies General	65	1	1.54%
Other Supplies	24	1	4.17%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

- 1) Submitted on: 20-Dec-20
- 2) Fiscal Year Reporting: 2020
- 3) Name and District Number of Community College District: William Rainey Harper College #512
- 4) Name of College Appointed Contact for Vendors: Jewell Jackson
- 5) College Contact Person and Phone Number for Purposes of This Report: Robert Grapenthien - Phone #847-925-6245
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: Department of Central Management Services - BEP Cep Certification

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

9) Total FY 2020 Expenditure Analysis (prior fiscal year)

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	\$ 610,893.32	0	0.0%
Investment Management Services	53080	-	0	0.0%
Information Technology Services	53080	4,010,619.30	0	0.0%
Accounting Services	53010	102,700.00	0	0.0%
Architectural & Engineering Services	53030	683,267.54	6,500	1.0%
Legal Services	53050	202,482.57	0	0.0%

10) Total Number of Contracts Analyzed

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	5	0	0.0%
Investment Management Services	53080	0	0	0.0%
Information Technology Services	53080	17	0	0.0%
Accounting Services	53010	1	0	0.0%
Architectural & Engineering Services	53030	25	1	4.0%
Legal Services	53050	2	0	0.0%

**Submission Instructions:**  
Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number; Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

**1) Submitted on:** 10/1/2020

**2) Fiscal Year Reporting:** 2020 ( End of Year)

**3) Name and District Number of Community College District:** Illinois Valley Community College #513

**4) Name of College Appointed Contact for Vendors:** Michelle Carboni Direct of Purchasing

**5) College Contact Person and Phone Number for Purposes of This Report:** Michelle Carboni 815.224.0417

**6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability** Illinois Department of Central Management (CMD) Business Enterprise Program (BEP)

**7) College Policy concerning Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis current fiscal year)**

	For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year
			Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	<i>415,829</i>	
<i>Investment Management Services</i>	<i>53080</i>	<i>0</i>	
<i>Information Technology Services</i>	<i>53080</i>	<i>290,320</i>	
<i>Accounting Services</i>	<i>53010</i>	<i>36,150</i>	



Architectural & Engineering Services	53030	97,319
Legal Services	53050	62,391

**10) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	8	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	7	0	0
Accounting Services	53010	1	0	0
Architectural & Engineering Services	53030	1	0	0
Legal Services	53050	4	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY20 BEP Report where XXX is your district number;

Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to [Kris.Pickford@illinois.gov](mailto:Kris.Pickford@illinois.gov)

**11) End of Year FY 2020 Expenditure Analysis (prior fiscal year)**

		For Item 11 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Other contractual		30237		
Vehicle Rental		18997		
Bookstore Supplies		1307		
Instructional Supplies		7483		

**12) End of Year Number of Contracts Analyzed**

For Item 12 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Other contractual		7		MBE, FBE
Vehicle Rental		1		FBE
Bookstore Supplies		1		MBE/FBE
Instructional Supplies		4		FBE, MBE

## **Supplier Diversity**

The College recognizes the importance of increasing the participation of businesses owned by minorities, females and persons with disabilities in public contracts. It is the policy of the College to promote the economic development of disadvantaged business enterprises by setting aspirational goals to awarded contracts to business owned by minorities, females, and persons with disabilities for certain services as provided by the Business Enterprise for Minorities, Females and Persons with Disabilities Act (“Act”), 30 ILCS 575/0.01 et seq. and the Business Enterprise Council (“Council”) for Minorities, Females, and Persons with Disabilities which serves to implement, monitor and enforce the goals of the Act.

In support of this policy, the College makes a commitment to promote and encourage usage of minority, female and persons with disability owned business to the greatest extent feasible within the bounds of financial and fiduciary prudence and to take necessary steps to remove any barriers to the full participation of such firms in the procurement and contraction opportunities afforded. The College will support administrative and staff members to attend and participate in trainings, workshops, conferences and seminars dealing with procurement through qualified minority, female and persons with disability owned businesses in compliance with the Act.

The College is committed to meeting the requirements of the Act, establishing the aspirational goals as cited by the Act to contract and pursue good faith efforts to meet such goals. The College President shall appoint the Director of Purchasing as a liaison to the Council with all duties as set forth in the Act. The College has the responsibility to develop policies, plans and procedures to achieve the goals to the best ability in compliance with the Act.

Legal Reference

30ILCS 375

Public Act 99-0462

Policy

Illinois Valley Community College

Oglesby, Illinois

Adopted: This was approved at the January 12, 2017 Board Meeting.

**Specific outreach efforts to increase the use of certified vendors for Illinois Valley Community College:**

Illinois Valley Community College will make an effort to identify and encourage business relationships with BEP Certified vendors through:

- A. **Identification:** Illinois Valley Community College vendors will be required to complete a vendor form which provides additional company information, including BEP classification.
- B. **Targeted Outreach for Solicitations:** As part of the new bid/quote/RFP notification process, Illinois Valley Community College will search the BEP website to locate certified vendors to notify based on commodity code classification.
- C. Attend Supplier Diversity events sponsored by other Community Colleges or appropriate entities as budget allows.

# Community College Business Enterprise Progr

For Items 1-6 Enter Data in This Column

- 1) Submitted on: 9/29/2020
  
- 2) Fiscal Year Reporting: 2020
  
- 3) Name and District Number of Community College District: Illinois Central College District 514
  
- 4) Name of College Appointed Contact for Vendors: Molly Walker, Purchasing Coordinator
  
- 5) College Contact Person and Phone Number for Purposes of This Report: Ed Babcock, Controller, 309-694-5337
  
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability Illinois Central College only recognizes vendors that are certified by the State of Illinois Central Management Services. Certification Types that are recognized include Female Business Enterprise (FBE), Female and Minority Business Enterprise (FMB), Minority Business Enterprise (MBE), and Persons with Disability Business Enterprise (PBE).
  
- 7) College Policy concerning Certified Vendors (Separate Narrative Required) *Please see attached.*
  
- 8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Please see attached.*
  
- 9) Total FY 2019 Expenditure Analysis (prior fiscal year)

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)
-------------------	---------------------------------------------------------------------------------------------------------

<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>
<i>Investment Management Services</i>	<i>53080</i>
<i>Information Technology Services</i>	<i>53080</i>

<i>Accounting Services</i>	53010
<i>Architectural &amp; Engineering Services</i>	53030
<i>Legal Services</i>	53050

**10) Total Number of Contracts Analyzed**

Vendor Categories	
-------------------	--

<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070
<i>Investment Management Services</i>	53080
<i>Information Technology Services</i>	53080
<i>Accounting Services</i>	53010
<i>Architectural &amp; Engineering Services</i>	53030
<i>Legal Services</i>	53050

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# am FY 2020 Annual Report

For Item 9 Enter Data in These 3 Columns		
Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)

<b>1,698,499</b>	<b>0</b>	0%
<b>0</b>	<b>0</b>	0%
<b>265,905</b>	<b>66,050</b>	25%



<b>108,582</b>	<b>0</b>	<b>0%</b>
<b>227,830</b>	<b>19,750</b>	<b>9%</b>
<b>153,682</b>	<b>0</b>	<b>0%</b>

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
-----------------------------------------------------------------	-------------------------------------------------------------------------	--------------------------------------------------

<b>19</b>	<b>0</b>	<b>0%</b>
<b>0</b>	<b>0</b>	<b>0%</b>
<b>13</b>	<b>2</b>	<b>15%</b>
<b>2</b>	<b>0</b>	<b>0%</b>
<b>13</b>	<b>1</b>	<b>8%</b>
<b>7</b>	<b>0</b>	<b>0%</b>




# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 24-Sep-20

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Waubensee Community College District 516

4) Name of College Appointed Contact for Vendors: Theresa Larson

5) College Contact Person and Phone Number for Purposes of This Report: Theresa Larson, 630-466-2910

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability

MBE – Minority Owned/Controlled Business Enterprise  
WBE – Women Owned/Controlled Business Enterprise  
WMBE – Women Owned/Controlled Business Enterprise  
PBE – Person with Disability Owned/Controlled Business Enterprise  
SDVOSB – Service Disabled Veteran Owned Small Business  
SWS – Sheltered Workshop

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

9) Total FY 2019 Expenditure Analysis (prior fiscal year)

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	594,048	0	0
<i>Investment Management Services</i>	<i>53080</i>	99,257	0	0
<i>Information Technology Services</i>	<i>53080</i>	1,886,961	57,147	3%
<i>Accounting Services</i>	<i>53010</i>	89,580	0	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	789,768	0	0
<i>Legal Services</i>	<i>53050</i>	103,525	0	0

**10) Total Number of Contracts Analyzed**

Vendor Categories		For Item 10 Enter Data in These 3 Columns		
		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	23	0	0
<i>Investment Management Services</i>	<i>53080</i>	2	0	0
<i>Information Technology Services</i>	<i>53080</i>	92	1	1%
<i>Accounting Services</i>	<i>53010</i>	2	0	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	8	0	0
<i>Legal Services</i>	<i>53050</i>	2	0	0

**Submission Instructions:**

**Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9**

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Maintenance Services	530401, 402, 406, 407	864345.68	39598.59	5%
Other Contractual Services	530901	1485254.28	51108.79	3%
Supplies	540101, 102	788319.33	4355.37	1%
Printing	540201	252672.86	64	0%
Postage	540403	184507.97	0	0%
Advertising	540701	544631.09	14268	3%
Purchases for Resale	540801, 802, 804, 805, 806, 807	2680458.65	0	0%
Other Materials and Supplies	540901	277697.59	0	0%
Minor Technology Equipment	540902	1442538.6	0	0%
Staff Development	550902	99470.7	0	0%
Site Improvements	580200	104660.7	0	0%

**12) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Maintenance Services	530401, 402, 406, 407	294	18	6%
Other Contractual Services	530901	326	20	6%
Supplies	540101, 102	1144	14	1%
Printing	540201	64	5	8%
Postage	540403	59	0	0%
Advertising	540701	242	8	3%
Purchases for Resale	540801, 802, 804, 805, 806, 807	155	0	0%
Other Materials and Supplies	540901	41	1	2%
Minor Technology Equipment	540902	158	0	0%
Staff Development	550902	10	0	0%
Site Improvements	580200	6	0	0%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

- 1) Submitted on: 9/25/2020
- 2) Fiscal Year Reporting: 2020
- 3) Name and District Number of Community College District: Lake Land College  
Madge Shoot, Comptroller  
Connie Compton, Admin. Asst. to VP for Business Services
- 4) Name of College Appointed Contact for Vendors: Madge Shoot - 217-234-5375  
Connie Compton - 217-234-5223
- 5) College Contact Person and Phone Number for Purposes of This Report: Madge Shoot - 217-234-5375  
Connie Compton - 217-234-5223
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability  
Any qualified bidders who are certified through CMS or one of the other entities listed on the CMS website
- 7) College Policy concerning Certified Vendors (Separate Narrative Required)  
*Narrative in Word format required. Please complete and send as an attachment to this annual report.*
- 8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)  
*Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	786,353	0	0
<i>Investment Management Services</i>	<i>53080</i>	0	0	0
<i>Information Technology Services</i>	<i>53080</i>	0	0	0
<i>Accounting Services</i>	<i>53010</i>	36,800	0	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	0	0	0
<i>Legal Services</i>	<i>53050</i>	218,393	0	0

**10) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	3	0	3
<i>Investment Management Services</i>	<i>53080</i>	0	0	0
<i>Information Technology Services</i>	<i>53080</i>	0	0	0
<i>Accounting Services</i>	<i>53010</i>	1	0	1
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	1	0	1
<i>Legal Services</i>	<i>53050</i>	1	0	1

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to cassy.good@illinois.gov

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)

All other categories		93,367,314	120,541.08	0.13%
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**12) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)

All other categories		0		0
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# Community College Business Enterprise Progr

For Items 1-6 Enter Data in This Column

**1) Submitted on:**

**2) Fiscal Year Reporting:**

2020

**3) Name and District Number of Community College District:**

Carl Sandburg College Dist 518

**4) Name of College Appointed Contact for Vendors:**

Cory Gall, CFO

**5) College Contact Person and Phone Number for Purposes of This Report:**

Nora Austin (309) 341-5220

**6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability**

State of IL Central Management Services (CMS)/BEP Cer

**7) College Policy concerning Certified Vendors (Separate Narrative Required)**

*Narrative in Word format required. Please complete and*

**8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)**

*Narrative in Word format required. Please complete and*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)

*Insurance Services (Managers & Premiums)*

*53080, 56050, 56070*

*Investment Management Services*

*53080*

*Information Technology Services*

*53080*

*Accounting Services*

*53010*

*Architectural & Engineering Services*

*53030*

Legal Services

53050

**10) Total Number of Contracts Analyzed**

Vendor Categories	

Insurance Services (Managers & Premiums)

53080, 56050, 56070

Investment Management Services

53080

Information Technology Services

53080

Accounting Services

53010

Architectural & Engineering Services

53030

Legal Services

53050

**Submission Instructions:**

**Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9  
Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or indiv  
Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)

Consultants

53020

Maintenance Services

53040

Office Services

53060

Other Contractual Services

53090

Rental Facility/Equipment	56010, 56020
Debt Principal Retirement, Interest, Install Payts for Lease/Purchase Agrmnts	56030, 56040, 56060
Other Fixed Charges	56090

**12) Total Number of Contracts Analyzed**

Vendor Categories	
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Consultants	53020
Maintenance Services	53040
Office Services	53060
Other Contractual Services	53090
Rental Facility/Equipment	56010, 56020
Debt Principal Retirement, Interest, Install Payts for Lease/Purchase Agrmnts	56030, 56040, 56060
Other Fixed Charges	56090

# am FY 2020 Annual Report

(07/1/19 - 06/30/20) Year report

rtification and CPO - Illinois Procurement Gateway

*d send as an attachment to this annual report.*

*d send as an attachment to this annual report.*

For Item 9 Enter Data in These 3 Columns		
Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)

169,145	0	0%
0	0	0%
0	0	0%
56,575	0	0%
158,779	0	0%



76,171	0	0%
47,423	0	0%
0	0	0%

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
-----------------------------------------------------------------	-------------------------------------------------------------------------	--------------------------------------------------

23	0	0%
124	7	6%
4	0	0%
697	0	0%
98	0	0%
24	0	0%
0	0	0%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on:

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Highland, 519

4) Name of College Appointed Contact for Vendors: Jill Janssen

5) College Contact Person and Phone Number for Purposes of This Report: Jill Janssen, 815-599-3412

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability  
 DCMS (Department of Central Management Services) Business Enterprise Program, CMBDC (Chicago Minority Business Development Council), IDOT (IL Department of Transportation), WBDC (Women's Business Development Center), other if enough information provided

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

9) Total FY 2020 Expenditure Analysis current fiscal year)

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
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<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	183,036	118,399	65%
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<i>Investment Management Services</i>	53080	500	0	0
<i>Information Technology Services</i>	53080	1,203,119	24,720	2%
<i>Accounting Services</i>	53010	48,000	0	0
<i>Architectural &amp; Engineering Services</i>	53030	114,423	0	0
<i>Legal Services</i>	53050	25,823	0	0

**10) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	2	1	50%
<i>Investment Management Services</i>	53080	1	0	0
<i>Information Technology Services</i>	53080	50	2	4%
<i>Accounting Services</i>	53010	1	0	0
<i>Architectural &amp; Engineering Services</i>	53030	1	0	0
<i>Legal Services</i>	53050	1	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;

Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

**11) Midyear FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns



Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
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**12) Midyear Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 10/29/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Kankakee Community College 520

4) Name of College Appointed Contact for Vendors: Michelle Weishaar

5) College Contact Person and Phone Number for Purposes of This Report: Michelle Weishaar 815-802-8123

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability City of Chicago ,Cook County, PACE, METRA, Illinois Department of Transportation (IDOT), Chicago Chicago Transportation Authority (CTA), Chicago Minority Business Development Council (CMBDC), Women’s Business Development Center (WBDC), Department of Central Management Service (DCMS)

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis current fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)

<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	2,678,303	0	0.00%
<i>Investment Management Services</i>	53080	0	0	0.00%
<i>Information Technology Services</i>	53080	2,335,762	0	0.00%
<i>Accounting Services</i>	53010	50,000	0	0.00%
<i>Architectural &amp; Engineering Services</i>	53030	484,831	0	0.00%
<i>Legal Services</i>	53050	22,018	0	0.00%

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	209	0	0.00%
<i>Investment Management Services</i>	53080	0	0	0.00%
<i>Information Technology Services</i>	53080	709	0	0.00%
<i>Accounting Services</i>	53010	2	0	0.00%
<i>Architectural &amp; Engineering Services</i>	53030	39	0	0.00%
<i>Legal Services</i>	53050	39	0	0.00%

**Submission Instructions:**

*Please complete the spreadsheet and name it XXXFY20 BEP Report where XXX is your district number;*

*Please complete the required narratives in a WORD format and name it XXXFY20 BEP Narrative 7 & 8 (or individually) where XXX is your district number;*

*Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)*

**Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Fullyear FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Bldg Improvements		3,638,787.60	\$ -	0.00%
Books		39,303.87	\$ 9,521.70	24.23%
Building Maint		123,116.06	\$ 5,119.88	4.16%
Client Tuition		399,605.09	\$ 8,200.00	2.05%
Contractual Serv		216,749.24	\$ 2,616.90	1.21%
Equipment Maint		79,998.99	\$ -	0.00%
Field Trip		14,722.70	\$ 3,178.75	21.59%
Grounds Maint		39,874.03	\$ 586.31	1.47%
Hardware Maint		-	\$ -	#DIV/0!
Inspection Fee		147.00	\$ -	0.00%
Instr Supplies		250,221.19	\$ 4,506.62	1.80%
Maint Supplies		7,920.80	\$ 454.18	5.73%
Service Equipment		174,956.56	\$ 10,045.00	5.74%
Supplies		74,643.06	\$ -	0.00%
Transportation Exp		-	\$ -	#DIV/0!
Travel Expense		81,622.76	\$ 925.00	1.13%

**12) Fullyear Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Bldg Improvements	29	0	0.00%
Books	88	22	25.00%
Building Maint	350	29	8.29%
Client Tuition	1	2	200.00%

Contractual Serv	124	8	6.45%
Equipment Maint	51	0	0.00%
Field Trip	37	6	16.22%
Grounds Maint	162	1	0.62%
Hardware Maint	0	0	#DIV/0!
Inspection Fee	2	0	0.00%
Instr Supplies	1262	42	3.33%
Maint Supplies	55	3	5.45%
Service Equipment	36	5	13.89%
Supplies	148	0	0.00%
Transportation Exp	0	0	#DIV/0!
Travel Expense	281	1	0.36%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on:

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: REND LAKE COLLEGE - DISTRICT NO 521

4) Name of College Appointed Contact for Vendors: SUE SCATTONE

5) College Contact Person and Phone Number for Purposes of This Report: ANGIE KISTNER

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability MBE, WBE, WMBE, PBE

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis current fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	3,814	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	133,912	0	0
Accounting Services	53010	200	0	0
Architectural & Engineering Services	53030	7,638	0	0
Legal Services	53050	2,750	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	0	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	3	0	0
Accounting Services	53010	1	0	0
Architectural & Engineering Services	53030	2	0	0
Legal Services	53050	1	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;

Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

# Community College Business Enterprise Program FY 2018 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 12/17/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Southwestern Illinois College District 522

4) Name of College Appointed Contact for Vendors: Michael Thomas, Director of Purchasing

5) College Contact Person and Phone Number for Purposes of This Report: Michael Thomas, 618-222-5384

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: Illinois Department of Central Management Services (CMS) Business Enterprise Program (BEP)

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2018 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	1,147,902	0	
Investment Management Services	53080	0	0	
Information Technology Services	53080	322,077	0	
Accounting Services	53010	64,766	0	
Architectural & Engineering Services	53030	74,099	0	
Legal Services	53050	202,463	0	

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	0	0
Investment Management Services	53080	0	0
Information Technology Services	53080	30	0
Accounting Services	53010	1	0
Architectural & Engineering Services	53030	0	0
Legal Services	53050	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number;  
 Please complete the required narratives in a WORD format and name it XXXFY18 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Total FY 2018 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
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Contractual Services--Lab Fees	540099	1,105,152	2,312	0.002
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**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 9/28/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Kishwaukee College, District 523

4) Name of College Appointed Contact for Vendors: Jasmin McIntosh

5) College Contact Person and Phone Number for Purposes of This Report: Jasmin McIntosh

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: CMS BEP and reciprocal certifications as determined by CMS BEP

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	\$ 325,673.72	0	0%
<i>Investment Management Services</i>	53080	\$ 619,621.00	0	0%
<i>Information Technology Services</i>	53080	\$ 958,354.02	0	0%
<i>Accounting Services</i>	53010	\$ 74,947.50	0	0%
<i>Architectural &amp; Engineering Services</i>	53030	\$ 182,516.09	0	0%
<i>Legal Services</i>	53050	\$ 149,688.30	0	0%

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	7	0%
<i>Investment Management Services</i>	53080	4	0%
<i>Information Technology Services</i>	53080	7	0%
<i>Accounting Services</i>	53010	2	0%
<i>Architectural &amp; Engineering Services</i>	53030	1	0%
<i>Legal Services</i>	53050	2	0%

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9  
 Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)



<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	2	0	0						
<i>Investment Management Services</i>	53080	0	0	0						
<i>Information Technology Services</i>	53080	177	0	0						
<i>Accounting Services</i>	53010	2	0	0						
<i>Architectural &amp; Engineering Services</i>	53030	18	0	0						
<i>Legal Services</i>	53050	6	0	0						
<b>Submission Instructions:</b>										
<i>Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9</i>										
<i>Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 &amp; 8 (or individually) where XXX is your district number;</i>										
<i>Attach the completed annual report (with narratives) to an email and send to <a href="mailto:jared.ebel@illinois.gov">jared.ebel@illinois.gov</a></i>										

# Community College Business Enterprise Program FY 2019 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 15-Oct-20

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Joliet Junior College District #525

4) Name of College Appointed Contact for Vendors: Janice Reedus, Director of Business & Auxiliary Services

5) College Contact Person and Phone Number for Purposes of This Report: Janice Reedus, 815-280-6640

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: Illinois Department of Central Management Services (CMS) Business Enterprise Program (BEP) & City of Chicago

7) College Policy concerning Certified Vendors (Separate Narrative Required): *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required): *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis current fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	1,490,299	0	0
<i>Investment Management Services</i>	<i>53080</i>	0	0	0

<i>Information Technology Services</i>	53080	404,461	23,760	6
<i>Accounting Services</i>	53010	74,475	0	0
<i>Architectural &amp; Engineering Services</i>	53030	147,055	0	0
<i>Legal Services</i>	53050	150,122	0	0

**10) Total Number of Contracts Analyzed**

Vendor Categories		For Item 10 Enter Data in These 3 Columns		
		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	15	0	0
<i>Investment Management Services</i>	53080	0	0	0
<i>Information Technology Services</i>	53080	30	2	7
<i>Accounting Services</i>	53010	2	0	0
<i>Architectural &amp; Engineering Services</i>	53030	12	0	0
<i>Legal Services</i>	53050	5	0	0

**Submission Instructions:**

*Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;*

*Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;*

*Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)*

**Report all other BEP Expenditures across all other Vendor Categories below.**

<b>11) Total FY 2019 Expenditure Analysis (prior fiscal year)</b>		For Item 9 E
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year
Procurable Spend - All Categories		47,421,125

<b>12) Total Number of Contracts Analyzed</b>		For Item 10
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year
Procurable Spend - All Categories		2,218

Enter Data in These 3 Columns

Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
540,436	1.139652

Enter Data in These 3 Columns

Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
60	2.705140

# Community College Business Enterprise Program FY 2020 Annual F

For Items 1-6 Enter Data in This Column

- 1) Submitted on: Wednesday, October 7, 2020
- 2) Fiscal Year Reporting: 2020
- 3) Name and District Number of Community College District: Lincoln Land Community College 526
- 4) Name of College Appointed Contact for Vendors: Jeremy Bliss
- 5) College Contact Person and Phone Number for Purposes of This Report: Jeremy Bliss 217-786-4646

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability

7) College Policy concerning Certified Vendors (Separate Narrative Required) Attached

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) Attached

9) Total FY 2020 Expenditure Analysis (prior fiscal year) For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	362,357	0
<i>Investment Management Services</i>	<i>53080</i>	0	0
<i>Information Technology Services</i>	<i>53080</i>	1,061,193	0
<i>Accounting Services</i>	<i>53010</i>	86,700	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	638,787	15,375
<i>Legal Services</i>	<i>53050</i>	105,303	0

10) Total Number of Contracts Analyzed For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	3
		0



Investment Management Services	53080	0	0
Information Technology Services	53080	33	0
Accounting Services	53010	1	0
Architectural & Engineering Services	53030	8	1
Legal Services	53050	4	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your di:

Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Colur

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year
SUPPLIES	54010	826,225.68	1,490.25
PRINTING	54020	107,217.23	16,402.86
RENTAL - EQUIPMENT	56020	188,022.13	38,187.00
SITE IMPROVEMENTS	58020	1,142,214.17	44,880.27
CONSULTANTS	53020	1,656,849.00	468.75
MAINTANENCE CONTRACTS	53040	1,236,433.00	7,975.00
OTHER MATERIALS & SUPPLIES	54090	944,823.09	6,919.00

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Colur

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year
SUPPLIES	54010	221	2
PRINTING	54020	12	1
RENTAL - EQUIPMENT	56020	8	1
SITE IMPROVEMENTS	58020	13	3
CONSULTANTS	53020	214	1
MAINTANENCE CONTRACTS	53040	63	1
OTHER MATERIALS & SUPPLIES	54090	85	1

# Report

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(aspirational goal  
is 20%)

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(aspirational goal  
is 20%)

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(aspirational goal  
is 20%)

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count %  
(aspirational goal  
is 20%)

0.90%

8.33%

12.50%

23.08%

0.47%

1.59%

1.18%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 9/30/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Morton College Dist 527

4) Name of College Appointed Contact for Vendors: Mireya Perez

5) College Contact Person and Phone Number for Purposes of This Report: 708-656-8000 ext 2289

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: Illinois Department of Central Management Services, Illinois Department of Transportation, Department of Procurement Services

7) College Policy concerning Certified Vendors (Separate Narrative Required): Attached

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required): Attached

9) Total FY 2020 Expenditure Analysis For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	229,795	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	625,377	0	0.00%
Accounting Services	53010	81,600	0	0
Architectural & Engineering Services	53030	36,333	0	0
Legal Services	53050	114,856	0	0

10) Total Number of Contracts Analyzed For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	1	0
Investment Management Services	53080	0	0
Information Technology Services	53080	1	0.00%
Accounting Services	53010	1	0
Architectural & Engineering Services	53030	1	0
Legal Services	53050	1	0

**Submission Instructions:**  
 Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;  
 Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Year End FY 2020 Expenditure Analysis**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Instructional Service Contract	53080	233,372.00	-	0.00%
Maintenance Services	53040	756,103.00	-	0.00%
Repair Materials & Supplies	54010	1,312,406.00	12,011.00	0.92%

**12) Midyear Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Instructional Service Contract	53080	8	0	0.00%
Maintenance Services	53040	14	0	0.00%
Repair Materials & Supplies	54010	121	1	0.83%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

**1) Submitted on:** 30-Jun-20

**2) Fiscal Year Reporting:** 2020

**3) Name and District Number of Community College District:** McHenry County College District 528

**4) Name of College Appointed Contact for Vendors:** Jennifer Jones

**5) College Contact Person and Phone Number for Purposes of This Report:** Jennifer Jones 815-455-8770

**6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability** The College will recognize all firms that are certified with CMS as BEP vendor, per State Statute and also recognition of other States' certifications.

**7) College Policy concerning Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis current fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	326,443	0	0
<i>Investment Management Services</i>	53080	0	0	0

<i>Information Technology Services</i>	53080	90,705	0	0
<i>Accounting Services</i>	53010	82,506	0	0
<i>Architectural &amp; Engineering Services</i>	53030	604,746	0	0
<i>Legal Services</i>	53050	126,288	0	0

**10) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)

<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	1	0	0
<i>Investment Management Services</i>	53080	1	0	0
<i>Information Technology Services</i>	53080	3	0	0
<i>Accounting Services</i>	53010	1	0	0
<i>Architectural &amp; Engineering Services</i>	53030	3	0	0
<i>Legal Services</i>	53050	2	0	0

**Submission Instructions:**

*Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;*

*Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;*

*Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)*

**Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 30-Jun-20

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: McHenry County College District 528

4) Name of College Appointed Contact for Vendors: Jennifer Jones

5) College Contact Person and Phone Number for Purposes of This Report: Jennifer Jones 815-455-8770

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability  
 The College will recognize all firms that are certified with CMS as BEP vendor, per State Statute and also recognition of other States' certifications.

7) College Policy concerning Certified Vendors (Separate Narrative Required)  
*Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)  
*Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis current fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	326,443	0	0
<i>Investment Management Services</i>	<i>53080</i>	0	0	0



<i>Information Technology Services</i>	53080	90,705	0	0
<i>Accounting Services</i>	53010	82,506	0	0
<i>Architectural &amp; Engineering Services</i>	53030	604,746	0	0
<i>Legal Services</i>	53050	126,288	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
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<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	1	0	0
<i>Investment Management Services</i>	53080	1	0	0
<i>Information Technology Services</i>	53080	3	0	0
<i>Accounting Services</i>	53010	1	0	0
<i>Architectural &amp; Engineering Services</i>	53030	3	0	0
<i>Legal Services</i>	53050	2	0	0

**Submission Instructions:**

*Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;*

*Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;*

*Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)*

**Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

# Community College Business Enterprise Program FY 2019 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 10/13/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Illinois Eastern Community College District #529

4) Name of College Appointed Contact for Vendors: Ryan Hawkins

5) College Contact Person and Phone Number for Purposes of This Report: Ryan Hawkins

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: Any business register and/or certified by the IL Department of Central Management Services as a qualified business owned by a minority, female, or person with disabilities

7) College Policy concerning Certified Vendors (Separate Narrative Required): *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required): *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	439,162	0	0
<i>Investment Management Services</i>	<i>53080</i>	0	0	0
<i>Information Technology Services</i>	<i>53080</i>	0	0	0
<i>Accounting Services</i>	<i>53010</i>	75,675	0	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	85,450	0	0
<i>Legal Services</i>	<i>53050</i>	428,937	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	5	0
<i>Investment Management Services</i>	<i>53080</i>	0	0
<i>Information Technology Services</i>	<i>53080</i>	0	0
<i>Accounting Services</i>	<i>53010</i>	1	0
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>	2	0
<i>Legal Services</i>	<i>53050</i>	5	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

11) Total FY 2019 Expenditure Analysis (prior fiscal year)

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Office Supplies	54010.01	117,606.00	2,601.00	2.21%

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Office Supplies	44	1	2.27%

# Community College Business Enterprise Program FY 20 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 10/2/2020

2) Fiscal Year Reporting: 20

3) Name and District Number of Community College District: Community College District 530, John A. Logan College

4) Name of College Appointed Contact for Vendors: Sue Zamora, Director of Purchasing & Auxiliary Services

5) College Contact Person and Phone Number for Purposes of This Report: Sue Zamora, Director of Purchasing & Auxiliary Services, 618-985-2828, ext. 8260

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: CMS - Illinois Department of Central Management Services

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	492,234.65	0.00	0.00%
<i>Investment Management Services</i>	53080	2,000.00	0.00	0.00%
<i>Information Technology Services</i>	53080	1,342,968.53	0.00	0.00%
<i>Accounting Services</i>	53010	52,995.00	0.00	0.00%
<i>Architectural &amp; Engineering Services</i>	53030	288,654.00	0.00	0.00%
<i>Legal Services</i>	53050	29,990.44	0.00	0.00%

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	5	0.00	0.00%
<i>Investment Management Services</i>	53080	1	0.00	0.00%
<i>Information Technology Services</i>	53080	23	0.00	0.00%
<i>Accounting Services</i>	53010	1	0.00	0.00%
<i>Architectural &amp; Engineering Services</i>	53030	3	0.00	0.00%
<i>Legal Services</i>	53050	1	0.00	0.00%

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Total FY 20 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Cleaning Services		25,389.50	25,389.50	100%
Emergency Systems		87,600.00	87,600.00	100%

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Cleaning Services	1	1	100%
Emergency Systems	1	1	100%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on:

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Shawnee Community College, District 531

4) Name of College Appointed Contact for Vendors: Rachel Harrell

5) College Contact Person and Phone Number for Purposes of This Report: Rachel Harrell, (618) 634-3299

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability MBE, PBE, WBE, WMBE

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	233,248	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	592,642	0	0
Accounting Services	53010	35,450	0	0
Architectural & Engineering Services	53030	141,455	0	0
Legal Services	53050	28,024	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070			
Investment Management Services	53080			
Information Technology Services	53080			
Accounting Services	53010			
Architectural & Engineering Services	53030			
Legal Services	53050			

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9  
 Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Janitorial Services		280816.34	242850	86%

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)

## Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column				
<b>1) Submitted on:</b>				
<b>2) Fiscal Year Reporting:</b>	2020			
<b>3) Name and District Number of Community College District:</b>	College of Lake County, District 532			
<b>4) Name of College Appointed Contact for Vendors:</b>	Sue Kilby			
<b>5) College Contact Person and Phone Number for Purposes of This Report:</b>	Sue Kilby, (847) 543-2785			
<b>6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability</b>	IL Department of Central Management Services BEP Vendors			
<b>7) College Policy concerning Certified Vendors (Separate Narrative Required)</b>	<i>Narrative in Word format required. Please complete and send as an attachment to this annual report.</i>			
<b>8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)</b>	<i>Narrative in Word format required. Please complete and send as an attachment to this annual report.</i>			
9) Total FY 2019 Expenditure Analysis (prior fiscal year)		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	4,002,247.64	0	0.00%
<i>Investment Management Services</i>	53080	0.00	0	0.00%
<i>Information Technology Services</i>	53080	3,193,733.68	0	0.00%
<i>Accounting Services</i>	53010	146,805.00	0	0.00%
<i>Architectural &amp; Engineering Services</i>	53030	171,582.40	44,657	26.03%
<i>Legal Services</i>	53050	1,074,130.52	0	0.00%
10) Total Number of Contracts Analyzed		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	7	0	0.00%
<i>Investment Management Services</i>	53080	0	0	0.00%
<i>Information Technology Services</i>	53080	88	0	0.00%
<i>Accounting Services</i>	53010	2	0	0.00%
<i>Architectural &amp; Engineering Services</i>	53030	4	1	25.00%
<i>Legal Services</i>	53050	1	0	0.00%
<b>Submission Instructions:</b>				
<i>Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9</i>				
<i>Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 &amp; 8 (or individually) where XXX is your district number;</i>				
<i>Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov</i>				
<b>Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or jared.ebel@illinois.gov</b>				



**Report all other BEP Expenditures across all other Vendor Categories below.**

**11) Total FY 2020 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Consulting Services	53020	2,484,852.95	573,004.66	23.06%
Contractual Services	53000	2,604,514.32	309,970.95	11.90%
Building Remodeling	58040	1,582,922.19	332,409.18	21.00%
Office Supplies	54010	3,774,993.92	722,074.08	19.13%

**12) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Consulting Services	53020	132	37	28.03%
Contractual Services	53000	244	22	9.02%
Building Remodeling	58040	21	3	14.29%
Office Supplies	54010	126	4	3.17%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on: 9/28/2020

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Southeastern Illinois College #533

4) Name of College Appointed Contact for Vendors: Pamela Kingston

5) College Contact Person and Phone Number for Purposes of This Report: Erica Griffin 618-252-5400 ext 2526

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability  
 Illinois Central Management Services Directory, CMS  
 BEP certification, SBA WOSB certification, USBLN  
 DSDP certification, City of Chicago M/WBE certification, National Minority Supplier Development Council MBE certification, SBA SDB certification

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	297,323	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	0	0	0
Accounting Services	53010	44,210	0	0
Architectural & Engineering Services	53030	135,051	1,126	1%
Legal Services	53050	42,049	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories	Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	4	0	0
Investment Management Services	0	0	0
Information Technology Services	0	0	0
Accounting Services	1	0	0
Architectural & Engineering Services	2	1	50%
Legal Services	1	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9

Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;

Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)

**11) Total FY 2019 Expenditure Analysis (prior fiscal year)**

		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Southeastern Illinois College #533				
Maintenance Services	53040	323,803	1,234	0%
Other Contractual Services	53090	1,195,393	1,519	0%
Postage	54040	14,674	378	2%

**12) Total Number of Contracts Analyzed**

		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Maintenance Services	53040	50	1	2%
Other Contractual Services	53090	117	1	1%
Postage	54040	10	1	10%

# Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column

1) Submitted on:

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: Spoon River College, Dist 534

4) Name of College Appointed Contact for Vendors: Sarah Gray, Director of Business & Auxiliary Services 309-649-6265

5) College Contact Person and Phone Number for Purposes of This Report: Sarah Gray, Director of Business & Auxiliary Services 309-649-6265

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability MBE, PBE, SDVOSB, SWS, VOSB, WBE, WMBE

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2020 Expenditure Analysis current fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	106,754	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	0	0	0
Accounting Services	53010	46,250	0	0
Architectural & Engineering Services	53030	500	0	0
Legal Services	53050	8,389	0	0

**10) Total Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	3	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	0	0	0
Accounting Services	53010	1	0	0
Architectural & Engineering Services	53030	0	0	0
Legal Services	53050	1	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;  
 Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

**11) Midyear FY 2019 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Building Remodeling	58040	\$ 3,493,631.48	\$ 590,498.57	17%

**12) Midyear Number of Contracts Analyzed**

For Item 10 Enter Data in These 3 Columns

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Building Remodeling	58040	23.00	2	9%

## Community College Business Enterprise Program FY 2020 Annual Report

For Items 1-6 Enter Data in This Column				
1) Submitted on:	September 28, 2020			
2) Fiscal Year Reporting:	2020			
3) Name and District Number of Community College District:	Oakton Community College - District 535			
4) Name of College Appointed Contact for Vendors:	Kathi Rosenberg, Procurement Manager			
5) College Contact Person and Phone Number for Purposes of This Report:	Kathi Rosenberg, Procurement Manager 847-635-2607 krosenberg@oakton.edu			
6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability	State of IL - Central Management Services			
7) College Policy concerning Certified Vendors (Separate Narrative Required)	<i>Narrative in Word format required. Please complete and send as an attachment to this annual report.</i>			
8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)	<i>Narrative in Word format required. Please complete and send as an attachment to this annual report.</i>			
For Item 9 Enter Data in These 3 Columns				
9) Total FY 2020 Expenditure Analysis current fiscal year)				
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in current Fiscal Year	Amount of Total Paid to Certified Vendors in current Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	1,165,744	0	0
Investment Management Services	53080	2,000	0	0
Information Technology Services	53080	1,694,760	188,862	11
Accounting Services	53010	79,900	0	0
Architectural & Engineering Services	53030	840,933	465,571	55
Legal Services	53050	438,616	0	0
For Item 10 Enter Data in These 3 Columns				
10) Total Number of Contracts Analyzed				
Vendor Categories	Total Number of contracts in current Fiscal Year	Total Number of Certified Vendors in current Fiscal Year	Actual Vendor count % (aspirational goal is 20%)	
Insurance Services (Managers & Premiums)	53080, 56050, 56070	7	0	0
Investment Management Services	53080	1	0	0
Information Technology Services	53080	53	4	8
Accounting Services	53010	1	0	0
Architectural & Engineering Services	53030	9	1	11
Legal Services	53050	1	0	0
<b>Submission Instructions:</b>				
<i>Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number;</i>				
<i>Please complete the required narratives in a WORD format and name it XXXFY19 BEP Narrative 7 &amp; 8 (or individually) where XXX is your district number.</i>				
<i>Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov</i>				
For Item 9 Enter Data in These 3 Columns				
11) FY 2020 Expenditure Analysis (prior fiscal year)				
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Printing and mailing	540201	\$ 194,744.00	\$ 173,423.00	89%
Advertising Agency Services	540481	\$ 228,967.00	\$ 175,000.00	76%
Transportation Services for Student Athletes	560201	\$ 37,856.00	\$ 37,856.00	100%
For Item 10 Enter Data in These 3 Columns				
12) Number of Contracts Analyzed				

Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Printing and Mailing		29	5	17.00%
Advertising Agency Services		3	1	67%
Transportation Services for Student Athletes		1	1	100%

# Community College Business Enterprise Program FY 2018 Annual Report

For Items 1-6 Enter Data in This Column

**1) Submitted on:** 12/29/2020

**2) Fiscal Year Reporting:** 2020

**3) Name and District Number of Community College District:** Lewis and Clark Community College-District #536

**4) Name of College Appointed Contact for Vendors:** Mary Schulte/Wendy Phipps

**5) College Contact Person and Phone Number for Purposes of This Report:** Mary Schulte 618-468-3300

**6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability** CMS' Business Enterprise Program (BEP) Certification of WBE, MBE, and PBE

**7) College Policy concerning Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required)** *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

**9) Total FY 2018 Expenditure Analysis (prior fiscal year)**

For Item 9 Enter Data in These 3 Columns

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>	850,551	0	0
<i>Investment Management Services</i>	<i>53080</i>	8,677	0	0



<i>Information Technology Services</i>	53080	862,949	0	0
<i>Accounting Services</i>	53010	60,475	0	0
<i>Architectural &amp; Engineering Services</i>	53030	182,628	0	0
<i>Legal Services</i>	53050	225,445	0	0

**10) Total Number of Contracts Analyzed**

Vendor Categories		For Item 10 Enter Data in These 3 Columns		
		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
<i>Insurance Services (Managers &amp; Premiums)</i>	53080, 56050, 56070	26	0	0
<i>Investment Management Services</i>	53080	1	0	0
<i>Information Technology Services</i>	53080	35	0	0
<i>Accounting Services</i>	53010	2	0	0
<i>Architectural &amp; Engineering Services</i>	53030	5	0	0
<i>Legal Services</i>	53050	3	0	0

**Submission Instructions:**

*Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number;*

*Please complete the required narratives in a WORD format and name it XXXFY18 BEP Narrative 7 & 8 (or individually) where XXX is your district number;*

*Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)*

**Any questions contact: Jared Ebel, ICCB Ph 217-524-0504 or [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

# Community College Business Enterprise Progr

For Items 1-6 Enter Data in This Column

1) Submitted on: 12/16/2019

2) Fiscal Year Reporting: 2020

3) Name and District Number of Community College District: John Wood Community College 539

4) Name of College Appointed Contact for Vendors: Darla Snyder

5) College Contact Person and Phone Number for Purposes of This Report: Josh Welker 217-641-4200

6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: BEP Certification

7) College Policy concerning Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and*

8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required) *Narrative in Word format required. Please complete and*

9) Total FY 2020 Expenditure Analysis (prior fiscal year)

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)
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*Insurance Services (Managers & Premiums) 53080, 56050, 56070*

*Investment Management Services 53080*

*Information Technology Services 53080*

*Accounting Services 53010*

*Architectural & Engineering Services 53030*

**10) Total Number of Contracts Analyzed**

Vendor Categories	
-------------------	--

<i>Insurance Services (Managers &amp; Premiums)</i>	<i>53080, 56050, 56070</i>
<i>Investment Management Services</i>	<i>53080</i>
<i>Information Technology Services</i>	<i>53080</i>
<i>Accounting Services</i>	<i>53010</i>
<i>Architectural &amp; Engineering Services</i>	<i>53030</i>
<i>Legal Services</i>	<i>53050</i>

**Submission Instructions:**

**Please complete the spreadsheet and name it XXXFY18 BEP Report where XXX is your district number; 9  
Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or indiv  
Attach the completed annual report (with narratives) to an email and send to [jared.ebel@illinois.gov](mailto:jared.ebel@illinois.gov)**

**11) Total FY 2020 Expenditure Analysis (prior fiscal year)**

Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)
-------------------	---------------------------------------------------------------------------------------------------------

Contractual Services	53XXX
Supplies	54XXX
Utilities	57XXX
Equipment	58XXX

**12) Total Number of Contracts Analyzed**

Vendor Categories	
-------------------	--

Contractual Services 53XXX

Supplies 54XXX

Utilities 57XXX

Equipment 58XXX

# am FY 2020 Annual Report

*d send as an attachment to this annual report.*

*d send as an attachment to this annual report.*

For Item 9 Enter Data in These 3 Columns		
Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)

134,347	0	0.00%
0	0	#DIV/0!
1,018,985	397	0.04%
36,750	0	0.00%
123,236	0	0.00%

25,361                                  0                                  0.00%

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
3	0	0.00%
0	0	#DIV/0!
55	1	1.82%
1	0	0.00%
2	0	0.00%
1	0	0.00%

*idually) where XXX is your district number;*

For Item 9 Enter Data in These 3 Columns

Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
2075547.75	8690.48	0.42%
1579231.26	95254.83	6.03%
580569.94	21794.46	3.75%
1560098.56	170114.55	10.90%

For Item 10 Enter Data in These 3 Columns

Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
-----------------------------------------------------------------	-------------------------------------------------------------------------	--------------------------------------------------

323 10 3.10%

354 24 6.78%

19 1 5.26%

39 6 15.38%

# Community College Business Enterprise Program FY 2019 Annual Report

For Items 1-6 Enter Data in This Column

- 1) Submitted on: 25-Sep-20
- 2) Fiscal Year Reporting: 2020 07/01/2019-06/30/20
- 3) Name and District Number of Community College District: Heartland Community College District #540
- 4) Name of College Appointed Contact for Vendors: Jd Davis - jd.davis@heartland.edu
- 5) College Contact Person and Phone Number for Purposes of This Report: Jd Davis - (309)268-8126
- 6) Identify the Certifications Recognized For Determining Whether a Business is Owned and Controlled by a Minority, Female or Person With a Disability: IL Dept of Central Management Services BEP Vendors
- 7) College Policy concerning Certified Vendors (Separate Narrative Required): *Narrative in Word format required. Please complete and send as an attachment to this annual report.*
- 8) Specific Outreach Efforts to Increase the Use of Certified Vendors (Separate Narrative Required): *Narrative in Word format required. Please complete and send as an attachment to this annual report.*

9) Total FY 2020 Expenditure Analysis (prior fiscal year)		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	390,298	0	0
Investment Management Services	53080	0	0	0
Information Technology Services	53080	378,143	0	0
Accounting Services	53010	68,405	0	0
Architectural & Engineering Services	53030	253,900	0	0
Legal Services	53050	64,120	0	0

10) Total Number of Contracts Analyzed		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Insurance Services (Managers & Premiums)	53080, 56050, 56070	5	0	0
Investment Management Services	53080	1	0	0
Information Technology Services	53080	11	0	0
Accounting Services	53010	2	0	0
Architectural & Engineering Services	53030	1	0	0
Legal Services	53050	4	0	0

**Submission Instructions:**

Please complete the spreadsheet and name it XXXFY19 BEP Report where XXX is your district number; 9  
 Please complete the required narratives in a WORD format and name it XXXFY90 BEP Narrative 7 & 8 (or individually) where XXX is your district number;  
 Attach the completed annual report (with narratives) to an email and send to jared.ebel@illinois.gov

11) Total FY 2019 Expenditure Analysis (prior fiscal year)		For Item 9 Enter Data in These 3 Columns		
Vendor Categories	FMM accounting code guidance (include costs by vendor category even if charged to another account code)	Total Amount Paid in most current Completed Fiscal Year	Amount of Total Paid to Certified Vendors in most current Completed Fiscal Year	Actual Dollar % (aspirational goal is 20%)
Instructional Service Contract	53080	178,724	5,998	3.36%
Maintenance Services	53040	573,278	23960.72	4.18%
Repair Materials & Supplies	54040	55,905	3145	5.60%

12) Total Number of Contracts Analyzed		For Item 10 Enter Data in These 3 Columns		
Vendor Categories		Total Number of contracts in most current Completed Fiscal Year	Total Number of Certified Vendors in most current Completed Fiscal Year	Actual Vendor count % (aspirational goal is 20%)
Instructional Service Contract	53080	26	4	15.40%
Maintenance Services	53040	51	1	2%
Repair Materials & Supplies	54040	7		0.00%