NYS Vendor ID: 000000000

	TITY INFORMATION						
Legal Business Name East House				EIN 16-0926404			
Address of the Principal Place of Business/Executive Office				New York State Vendor Identification Number			
259 Monroe A	Ave STE 200				1000015047		
Rochester, New York 14607				Telephone		8-4899	
Email bmaynard@easthouse.org				Web	www.easthouse.org		
Authorized Contact for this Questionnaire							
Name: Beck	y Maynard				Telephone Fax 585-238-4899		
Title VP of	Service Excell	ence			Email bmaynard@e	astho	use.org
	3A, Trade Name, Other Id nactive): (if applicable)	lentity, or EIN used in	the last fi	ive (5)	years, the state or county when	re filed, a	nd the
Туре	Name		EIN		State or County where filed	State or County where filed	
							1.1
I. BUSINESS C	HARACTERISTICS						
1.0 Business Ent	ity Type – Please check a	ppropriate box and pr	ovide add	itional	information:		
a) 🔳 Corpo	oration (including PC)	Date of Incorporation	n 11/14/	1966			
b) Limited Liability Co. Date Organized (LLC or PLLC)							
c) 🗌 Limit	ed Liability Partnership	Date of Registration					
d) ☐ Limit	ed Partnership	Date Established					
e) 🗌 Gene	ral Partnership	Date Established County (if formed in NYS)					
f) Sole Proprietor How many			low many years in business?				
g) 🗌 Other	ſ	Date Established					
If Other, explain:							
1.1 Was the Business Entity formed in New York State?							
If "No," indicate jurisdiction where Business Entity was formed:							
United States State							
Other Country  1.2 Is the Business Entity currently registered to do business in New York State with the Department of Yes No							
1.2 Is the Business Entity currently registered to do business in New York State with the Department of State? Note: Select 'not required' if the Business Entity is a General Partnership.							
If "No," explain why the Business Entity is not required to be registered in New York State.							
1.3 Is the Busine Finance?	ess Entity registered as a S	ales Tax vendor with	the New	York S	State Department of Tax and	■ Yes	s 🗌 No
	ide detail, such as 'not rec	quired,' 'application in	n process,	or otl	her reasons for not being regist	ered.	

#### **NEW YORK STATE**

I. BUSINESS CHARACTERISTICS					
1.4 Is the Business Entity a Joint Venture? Note: If the submitting Business Entity is a Joint Venture, also submit a separate questionnaire for the Business Entity compromising the Joint Venture.					
1.5 Does the Business Entity have an active Char	ities Re	gistration Number?		Yes	□No
Enter Number: 01-25-18					
If exempt, explain:					
If an application is pending, enter date of appl	lication	Att	ach a copy of the application		
1.6 Does the Business Entity have a DUNS Numl	ber?			■ Yes	□No
Enter DUNS Number 07-970-5778				10	
1.7 Is the Business Entity's principal place of bus If "No," does the Business Entity maintain an	office !	in New York State?		Yes Yes	□ No
Provide the address and telephone number for one	New Y	ork Office. 259 Monro	pe Ave., Suite 200, Rochest	er, New Yo	ork 14607
1.8 Is the Business Entity's principal place of bus	iness/ex	cecutive office:			
Owned					
Rented Landlord Name (if 'rented')	Bucki	ingham Properties			
Other Provide explanation (if 'other')				<del></del>	
Is space shared with another Business Entity?				Yes	■ No
Name of other Business Entity				1	
Address					
City State		Zip Code	Country		
1.9 Is the Business Entity a Minority Community	Based	Organization (MCBO)?		Yes	■ No
1.10 Identify current Key Employees of the Busin	ess Ent	ity (include middle init	ial). Attach additional pages if	necessary.	
Name Lindsay Gozzi-Theobald		Title President and C			
Name Catherine Amico Orlandini Title Chief Advancement Officer					
Name John Barnes Title Chief Financial Officer					
Name Jamie Comenale		Title Chief Program	Officer		
1.11 Identify current Trustees/Board Members of	the Bus	siness Entity. Attach add	ditional pages if necessary		
1.11 Identify current Trustees/Board Members of the Business Entity. Attach additional pages if necessary.  Name George Nasra MD, MBA  Title Chair - University of Rochester Medical Center			ter		
Name Kwasi Boaitey LCSW		Title Vice Chair - Upper Level Fitness			
Name Deron E. Johnson MBA		Title Board Secretary			-
Name David VanBlarcom	Title Treasurer - Veterans Outreach Center				
And Housdre - Veterans Outreach Center					
II. AFFILIATES AND JOINT VENTURE RELATIONSHIPS					
2.0 Does the Business Entity have any Affiliates? Attach additional pages if necessary (If no, proceed to Section III)					
Affiliate Name Affiliate EIN (If available) Affiliate's Primary Business Activity					
Explain relationship with the Affiliate and indicate percent ownership, if applicable (enter N/A, if not applicable):  Only					
Are there any Business Entity Officials or Principal Owners that the Business Entity has in common with this  Yes  No  No					
Individual's Name Position/Title with Affiliate					

#### **NEW YORK STATE**

### VENDOR RESPONSIBILITY QUESTIONNAIRE NOT-FOR-PROFIT BUSINESS ENTITY

III. CONTRACT HISTORY					
3.0 Has the Business Entity held any contracts with New York State government entities in the last three (3) years? If "Yes," attach a list including the Contract Number, Agency Name, Contract Amount, Contract Start Date, Contract End Date, and the Contract Description.	Yes	□ No			
	•				
IV. INTEGRITY – CONTRACT BIDDING  Within the most fine (5) weeks has the Presinces Entity on any Affiliate					
Within the past five (5) years, has the Business Entity or any Affiliate	Yes	■ No			
4.0 Been suspended or debarred from any government contracting process or been disqualified on any government procurement?					
4.1 Been subject to a denial or revocation of a government prequalification?	Yes	■ No			
4.2 Been denied a contract or had a bid rejected based upon a finding of non-responsibility by a government entity?	Yes	■ No			
4.3 Agreed to a voluntary exclusion from bidding/contracting with a government entity?	Yes	■ No			
4.4 Initiated a request to withdraw a bid submitted to a government entity or made any claim of an error on a bid submitted to a government entity?	Yes	■ No			
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.					
V. INTEGRITY – CONTRACT AWARD					
Within the past five (5) years, has the Business Entity or any Affiliate					
5.0 Been suspended, cancelled or terminated for cause on any government contract?	Yes	■ No			
5.1 Been subject to an administrative proceeding or civil action seeking specific performance or restitution in connection with any government contract?	Yes	■ No			
5.2 Entered into a formal monitoring agreement as a condition of a contract award from a government entity?					
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.					
VI. CERTIFICATIONS/LICENSES					
6.0 Within the past five (5) years, has the Business Entity or any Affiliate had a revocation, suspension or disbarment of any business or professional permit and/or license?	Yes	■ No			
If "Yes," provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.					
VII. LEGAL PROCEEDINGS					
Within the past five (5) years, has the Business Entity or any Affiliate					
7.0 Been the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation?	Yes	■ No			
7.1 Been the subject of an indictment, grant of immunity, judgment or conviction (including entering into a plea bargain) for conduct constituting a crime?	Yes	■ No			
7.2 Received any OSHA citation and Notification of Penalty containing a violation classified as serious or willful?	Yes	■ No			
7.3 Had any New York State I abor I aw violation deemed willful?	Yes	■ No			

NYS Vendor ID: 000000000

VII. LEGAL PROCEEDINGS				
Within the past five (5) years, has the Business Entity or any Affiliate				
7.4 Entered into a consent order with the New York State Department of Environmental Conservation, or a federal, state or local government enforcement determination involving a violation of federal, state or local environmental laws?	Yes No			
<ul> <li>7.5 Other than the previously disclosed:</li> <li>(i) Been subject to the imposition of a fine or penalty in excess of \$1,000, imposed by any government entity as a result of the issuance of citation, summons or notice of violation, or pursuant to any administrative, regulatory, or judicial determination; or</li> <li>(ii) Been charged or convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any government entity?</li> </ul>	☐ Yes ■ No			
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relassibmitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	ationship to the n(s) taken and the			
VIII. LEADERSHIP INTEGRITY				
Note: If the Business Entity is a Joint Venture, answer 'N/A- Not Applicable' to questions 8.0 through 8.4.				
Within the past five (5) years, has any individual previously identified, any other Key Employees not previously identified or any individual having the authority to sign execute or approve bids, proposals, contracts or supporting documentation with New York State been subject to				
8.0 A sanction imposed relative to any business or professional permit and/or license?	Yes No			
8.1 An investigation, whether open or closed, by any government entity for a civil or criminal violation for any business related conduct?	Yes No			
8.2 An indictment, grant of immunity, judgment, or conviction of any business related conduct constituting a crime including, but not limited to, fraud, extortion, bribery, racketeering, price fixing, bid collusion or any crime related to truthfulness?	Yes No			
<ul> <li>8.3 Misdemeanor or felony charge, indictment or conviction for: <ol> <li>(i) any business-related activity including but not limited to fraud, coercion, extortion, bribe or bribe-receiving, giving or accepting unlawful gratuities, immigration or tax fraud, racketeering, mail fraud, wire fraud, price fixing or collusive bidding; or</li> <li>(ii) any crime, whether or not business related, the underlying conduct of which related to truthfulness, including but not limited to the filing of false documents or false sworn statements, perjury or larceny?</li> </ol> </li></ul>	Yes No			
8.4 A debarment from any government contracting process?	Yes No			
For each "Yes" answer, provide an explanation of the issue(s), the individual involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.				

IX. FINANCIAL AND ORGANIZATIONAL CAPACITY				
9.0 Within the past five (5) years, has the Business Entity or any Affiliates received any formal unsatisfactory performance assessment(s) from any government entity on any contract?				
If "Yes," provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.				
9.1 Within the past five (5) years, has the Business Entity or any Affiliates had any liquidated damages assessed over \$25,000?	Yes No			
If "Yes," provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the contracting party involved, the amount assessed and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.				
9.2 Within the past five (5) years, has the Business Entity or any Affiliates had any liens, claims or judgments over \$15,000 filed against the Business Entity which remain undischarged or were unsatisfied for more than 120 days?	Yes No			
If "Yes," provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, relevant dates, the lien holder or claimant's name(s), the amount of the lien(s), claim(s), or judgments(s) and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.				
9.3 Within the last seven (7) years, has the Business Entity or any Affiliate initiated or been the subject of any bankruptcy proceedings, whether or not closed, regardless of the date of filing, or is any bankruptcy proceeding pending?	Yes No			
If "Yes," provide the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the Bankruptcy Chapter Number, the Court name, the Docket Number. Indicate the current status of the proceedings as "Initiated," "Pending" or "Closed." Provide answer below or attach additional sheets with numbered responses.				
9.4 During the past three (3) years, has the Business Entity and any Affiliates failed to file or pay any tax returns required by federal, state or local tax laws?	Yes No			
If "Yes," provide the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the taxing jurisdiction (federal, state or other), the type of tax, the liability year(s), the Tax Liability amount the Business Entity failed to file/pay, and the current status of the Tax Liability. Provide answer below or attach additional sheets with numbered responses.				
9.5 During the past three (3) years, has the Business Entity and any Affiliates failed to file or pay any New York State unemployment insurance returns?	Yes No			
If "Yes," provide the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the year(s) the Business Entity failed to file/pay the insurance, explain the situation, and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.				
9.6 During the past three (3) years, has the Business Entity or any Affiliates had any government audits? If "Yes," did any audit reveal material weaknesses in the Business Entity's system of internal controls If "Yes," did any audit reveal non-compliance with contractual agreements or any material disallowance (if not previously disclosed in 9.6)?	Yes No Yes No Yes No			
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity or Affiliate involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.				

NYS Vendor ID: 000000000

X. FREEDOM OF INFORMATION LAW (FOIL)		
10.0 Indicate whether any information supplied herein is believed to be exempt from disclosure under the Freedom of Information Law (FOIL). Note: A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL.		
Indicate the question number(s) and explain the basis for your claim.		
XI. AUTHORIZED CONTACT FOR THIS QUESTIONNAIRE		-
Becky Maynard	Telephone 585-238-4808 ext.	Fax 585-238-4899
VP of Service Excellence	Email bmaynard@easthouse.org	

### NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE NOT-FOR-PROFIT BUSINESS ENTITY

#### Certification

The undersigned: (1) recognizes that this questionnaire is submitted for the express purpose of assisting New York State government entities (including the Office of the State Comptroller (OSC)) in making responsibility determinations regarding award or approval of a contract or subcontract and that such government entities will rely on information disclosed in the questionnaire in making responsibility determinations; (2) acknowledges that the New York State government entities and OSC may, in their discretion, by means which they may choose, verify the truth and accuracy of all statements made herein; and (3) acknowledges that intentional submission of false or misleading information may result in criminal penalties under State and/or federal law, as well as a finding of non-responsibility, contract suspension or contract termination.

It being acknowledged and agreed that all responses included in this questionnaire are to the knowledge, information and belief of the Business Entity, the undersigned certifies under penalties of perjury that they:

#### The undersigned certifies that he/she:

- are knowledgeable about the submitting Business Entity's business and operations;
- have legal authority to bind the Business Entity;
- have read and understand all of the questions contained in the questionnaire, including all definitions;
- have not altered the content of the questionnaire in any manner;
- have reviewed and/or supplied full and complete responses to each question;
- have provided true, accurate and complete responses, including all attachments, if applicable;
- understand that New York State government entities will rely on the information disclosed in the questionnaire when entering
  into a contract with the Business Entity; and
- are under an obligation to update the information provided herein to include any material changes to the Business Entity's
  responses at the time of bid/proposal submission through the contract award notification, and may be required to update the
  information at the request of the New York State government entities or OSC prior to the award and/or approval of a
  contract, or during the term of the contract.

Signature of Official	ander S.	
Printed Name of Signatory	Lindsay Gozzi	
Title	President & CEO	
Name of Business	East House Corporation	
Address	259 Monroe Square, svite 200	
City, State, Zip	Rochester, M 14607	

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