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Printed By:Laurel ParzychDate Printed:Mar 4, 2024

Vendor Responsibility NFP Form

 Status:
 Certified

 Note:
 The content of any attached documents will not print with this page. To view or print an attached document, you must open it separately by clicking the corresponding hyperlink in the 'Uploaded Files' section of a question.

Basic Vendor Data

Entity Information	
Legal Business Entity Name:	BAKER HALL INC dba OLV Human Services
TIN (EIN or SSN):	161017453
Vendor ID:	1000003442
Principal Place of Business:	790 Ridge Road Lackawanna, NY 14218 United States
Telephone:	(716)828-9751
Fax:	(716)828-9450
Website:	olvhumanservices.org
Email:	lparzych@olvhs.org
Business Entity Information	
Business Type:	Not-For-Profit
Business Activity:	Non-Construction

Additional Business Entity Identities

Туре:	DBA	Explanation:	This was a DBA attached to Baker Hall which
Name:	Baker Victory Services		ended 10/31/2019.
Vendor ID:	1000003442		
Status:	Active		
Туре:	Previously Enrolled As	Explanation:	
Name:	Baker Hall Inc.		
Vendor ID:	1000003442		
Status:	Active		
Туре:	Previously Enrolled As	Explanation:	
Name:	BAKER HALL INC		
Vendor ID:	1000003442		
Status:	Active		
Туре:	DBA	Explanation:	This is a DBA attached to Baker Hall effective
Name:	OLV Human Services		11/1/2019.
Vendor ID:	1000003442		
Status:	Active		
Туре:	Previously Enrolled As	Explanation:	
Name:	BAKER HALL INC		
Vendor ID:	1000003442		
Status:	Active		

Authorized Contacts

Name: Title: Telephone:	Kristin Knopeck Controller (716)828-7570	Address:	790 Ridge Road Lackawanna, NY 14218 United States	
Email:	kknopeck@olvhs.org			
Name:	Jaime Janiga	Address:	790 Ridge Road	
Title:	Senior Accountant		Lackawanna, NY 14218 United States	
Telephone:	(716)828-9476		United States	
Email:	jjaniga@olvhs.org			
Name:	Emily Miller	Address:	790 Ridge Road	
Title:	CFO		Lackawanna, NY 14218 United States	
Telephone:	(716)828-9123		United States	
Email:	emmiller@olvhs.org			

- 1.0 Business Entity type Please check appropriate box and provide additional information:
 - Corporation (including PC)
 - C Limited Liability Co. (LLC or PLLC)
 - Climited Liability Partnership
 - Limited Partnership
 - O General Partnership
 - O Sole Proprietor
 - Unincorporated Association

Other - Specify

Date of Incorporation	
08/05/1851	

1.1 Was the Business Entity formed in New York State?

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.

Yes
No
Not Required

1.3 Is the Business Entity registered as a Sales Tax vendor with the New York State Department of Taxation and Finance?

- Yes
- No

1.4 Is the responding Business Entity a Joint Venture?

Note: If the submitting Business Entity is a Joint Venture, also submit a separate questionnaire for each Business Entity comprising the Joint Venture.

No No

1.5 Does the Business Entity have an active Charities Registration Number?

Yes
No

1	Enter Number	
	04-08-34	

1.6 Does the Business Entity have a DUNS Number?

• Yes

◯ No

Enter DUNS N	umber
172934556	

1.7 Is the Business Entity's Principal Place of Business/Executive Office in New York State?

Lackawanna tate NY ip Code 14218	Provide the a	address for one New York Office
ity Lackawanna tate NY ip Code 14218	Address Lin	e
Lackawanna tate NY ip Code 14218	790 Ridge	Rd.
Lackawanna tate NY ip Code 14218		
tate NY üp Code 14218	City	
iip Code 14218	Lackawanr	na
iip Code 14218		
ip Code 14218	State	
14218	NY	
14218		
	Zip Code	
elephone	14218	
elephone		
	Felephone	

1.8 Is the Business Entity's Principal Place of Business/Executive Office:

- Owned
- Rented
- Other

1.9 Is the Business Entity a Minority Community Based Organization (MCBO)?

O Yes

● No

1.10 Identify current Key Employees of the Business Entity (include middle initial).

Note: If more than four (4) Key Employees need to be listed, select 'Attach Document' as the response.

Select method for providing this information:

Enter Below	
Attach Document	
Name	
Cindy A. Lee	
Title	
СЕО	
Add another?	
Ves Yes	
No	
Name	
Laurel B. Parzych	
Title	
COO	
Add another?	
• Yes	
No	
Name	
Emily Miller	
Title	
CFO	
Add another?	
O Yes	
No	

1.11 Identify current Trustees/Board Members of the Business Entity.

Note: If more than four (4) Trustees/Board Members need to be listed, please select 'Attach Document' as the response.

Select method for providing this information:

- Enter Below
- Attach Document

For each person, include name and title.

Uploaded	Files	
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2024 Board Member List Updated 11.15.23_OLVHS.docx 15K

Last Modified: Mar 4, 2024 Modified By: Laurel Parzych 2.0 Does the Bu

> Yes ◯ _{No}

he Business Entity have any Affiliates?
/es
lo
Select method for providing this information: Note: If more than four (4) Affiliates need to be listed, select 'Attach Document' as the response.
Enter Below
Attach Document(s)
Affiliate Name
Baker Victory Healthcare Center
Is Affiliate EIN available?
Ves
◯ _{No}
Affiliate EIN
16-1557074
Affiliate's Primary Business Activity
Dental and Medical Services
Explain relationship
Wholly controlled subsidiary company.
% Ownership (enter 0 if not applicable)
0
Are there any Business Entity Officials or Principal Owners that the Business Entity has in common with this Affiliate? Ves No Provide each individual's name and position or title with this Affiliate
Cindy Lee - CEO
Laurel Parzych - COO
Emily Miller - CFO
Add another?
Ves Yes
No
Affiliate Name
Sweet Olivia's Inc DBA Mazurek's Bakery
Is Affiliate EIN available?
Ves
No
Affiliate EIN
84-5036433
Affiliate's Primary Business Activity
Bakery
Explain relationship
Wholly controlled subsidiary company.
% Ownership (enter 0 if not applicable)
100% controlled
Are there any Business Entity Officials or Principal Owners that the Business Entity has in common with this Affiliate?
Yes No

Provide each individual's name and position or title with this Affiliate

Kevin O'Leary - Board Member

James Partsch - Board Member

Add another? Ves

Last Modified: Mar 4, 2024 Modified By: Laurel Parzych

III. Contract History

Based on the Business Entity's New York State Vendor Identification Number (Vendor ID) provided, active contracts with any New York State contracting entities approved as of April 2012 by the Office of the State Comptroller and approved contracts submitted after April 2012 are displayed by selecting 'Contract Data' in the menu to the left.

3.0 Has the Business Entity held any other contracts with any New York State government entity in the last three (3) years which are not displayed? Yes

No

4.0 Been suspended or debarred from any government contracting process or been disqualified on any government procurement?

O Yes No

4.1 Been subject to a denial or revocation of a government prequalification?

> O Yes No No

4.2 Been denied a contract award or had a bid rejected based on a finding of non-responsibility by a government entity?

O Yes No No

4.3 Agreed to a voluntary exclusion from bidding/contracting with a government entity?

- O Yes
- No 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? O Yes

 - No

Last Modified: Oct 7, 2015 Modified By: jeffrey almeter

5.0 Been suspended, cancelled or terminated for cause on any government contract?

Yes

No No

5.1 Been subject to an administrative proceeding or civil action seeking specific performance or restitution in connection with any government contract?

Ves No

5.2 Entered into a formal monitoring agreement as a condition of a contract award from a government entity?

Ves No

6.0 Had a revocation, suspension or disbarment of any business or professional permit and/or license?

○ Yes ● No

7.0 Been the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation?

O 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?

[∞] No

7.2 Received any OSHA citation, which resulted in a final determination classified as serious or willful?

Yes

No No

7.3 Had a New York State Labor Law violation deemed willful?

O Yes

- No
- 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

- 7.5 Other than the previously disclosed:
 - (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 a citation, summons or notice of violation, or pursuant to any administrative, regulatory or judicial determination; or
 (ii) Been charged or convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by government entity?
 - O Yes

No

Last Modified: Nov 15, 2022 Modified By: Laurel Parzych

VIII. Leadership Integrity

Note: If the Business Entity is a Joint Venture, answer N/A to the questions in this section.

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 any of the following:

- 8.0 A sanction imposed relative to any business or professional permit and/or license?
 - O Yes
 - No No
 - O_{N/A}
- An investigation, whether open or closed, by any government entity for a civil or criminal violation for any business related conduct? 8.1
 - O Yes
 - No No
 - O_{N/A}
- 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? 8.2
 - O Yes
 - No No
 - O_{N/A}

8.3 A misdemeanor or felony charge, indictment or conviction for:

A impactituation on record entry entry 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 (ii) any crime, whether or not business-related, the underlying conduct of which is related to truthfulness, including but not limited to the filing of false documents or false sworn statements, perjury or larceny?

- O Yes
- No No
- O N/A

- 8.4 A debarment from any government contracting process?
 - O Yes
 - No No
 - O N/A

Last Modified: Apr 1, 2022 Modified By: Laurel Parzych Note: If more than four (4) affiliates need to be listed, select 'Attach $\mathsf{Document}(s)$ ' as the response.

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?

Ves

- 🔍 No
- 9.1 Within the past five (5) years, has the Business Entity or any Affiliates had any liquidated damages assessed over \$25,000?

Ves No

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?

Ves

- 9.3 In the last seven (7) years has the Business Entity or any Affiliates 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?
 - O Yes
 - No No
- 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? Ves
 - No No
- 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?
 - O Yes
 - No No
- 9.6 During the past three (3) years, has the Business Entity or any Affiliates had any government audits?
 - O Yes
 - No No

Last Modified: Oct 7, 2020 Modified By: Laurel Parzych 10.0 Indicate whether any information provided 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.)

○ Yes ● No

11.0	Name
	Laurel B. Parzych
11.1	Title
	СОО
11.2	Email
	lparzych@olvhs.org
11.3	Telephone
	716-828-9751
11.4	Fax

Last Modified: Feb 1, 2024 Modified By: Laurel Parzych

716-828-9503

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.

 Legal Business Name:
 BAKER HALL INC dba OLV Human Services

 Certifier's Name:
 Laurel Parzych

 Certifier's Title:
 COO

 Certification Date:
 Mar 4, 2024

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