Instructions for Completing the Nebraska Department of Transportation **DBE Annual Affidavit of No Change**

Completion and submission of the Nebraska Department of Transportation's (NDOT) Disadvantaged Business Enterprise (DBE) Annual Affidavit of No Change (Annual Affidavit) is required each year within 30 days prior to a DBE firm's certification anniversary date. By signing the Annual Affidavit the firm's owner declares, under penalty of perjury, that there have been no unreported changes in the firm's circumstances affecting its business size, disadvantaged status, ownership or control.

If there have been changes in your firm's circumstances that may affect its DBE eligibility, you are required to notify the NDOT Highway Civil Rights Office (HCRO) in writing within 30 days of the change. Failure to do so may result in the removal of the firm's DBE eligibility. Events that may affect your firm's DBE eligibility include: change in ownership or ownership structure; a change in your personal net worth; the firm's acquisition of or acquisition by another firm; or an action of decertification, certification suspension, or certification denial taken by another state in which your firm has been or has attempted to be DBE certified. If there have been unreported changes in your firm's circumstances, submit notice of them with the completed Annual Affidavit.

The Annual Affidavit affirms that your firm continues to meet the Small Business Administration's (SBA) business size standards for small businesses and does not exceed the U.S. Department of <u>Transportation's (USDOT) DBE</u> <u>business size cap of \$23.98 million</u>. Firms having average annual gross receipts in excess of the \$23.98 million over the previous three (3) fiscal years do not qualify as a DBE regardless of the SBA's business size standards.

The following are instructions for completing the Affidavit:

- First field: Name of the DBE-qualifying majority owner (owns 51% or more)
- Second field: Name of DBE firm
- Third field: Name of DBE firm
- Fourth field: Name of DBE firm
- List SBA's business size standard for firm's primary NAICS code (e.g. 238120 = \$15 million)

In addition to the signed and notarized Affidavit, include the most recent federal business tax return, including all schedules and attachments, for the DBE firm and any of its affiliates and subsidiaries. If you are a sole proprietor or your firm is a LLC and you report the firm's income on Schedule C of your personal federal tax return, submit your most recent federal personal tax return, including all schedules and attachments.

If you fail to provide a completed Affidavit along with the required tax return and any other applicable documentation in a timely manner, you may be deemed to have failed to cooperate under § 26.109(c) of the federal DBE program regulations, and NDOT will be required to take steps to remove your firm's eligibility.

If you have any questions regarding the Affidavit, please contact the NDOT HCRO at:

NDOT HCRO - Annual Affidavit 1500 Hwy 2 PO Box 94759

Lincoln, NE 68509-4759

Phone: 402-479-4531 / Fax: 402-479-3728 / E-mail: troy.larsen@nebraska.gov

NDOT DBE ANNUAL AFFIDAVIT OF NO CHANGE

I, as the DBE-qualifying owner of record of the certified DBE fi				
	, do hereby swear and	affirm there	have been no unrep	orted
changes in circumstance or information w	hich affect or may affect the	firm's ability	to meet the business	s size,
ownership, control, disadvantaged status,	or other eligibility requiremen	ts for continu	ed DBE certification	as set
forth under 49 CFR Part 26 and 13 CFR Part 26 and 1	art 121 of the federal regulation	ons governin	g the DBE program.	
I swear and affirm that I am socially disadv	antaged because I have beer	n subjected to	racial or ethnic prej	udice
or cultural bias, or have suffered the effects	s of discrimination because o	f my identity a	as a member of one	or
more of the groups identified in 49 CFR Pa	art 26, without regard to my in	dividual quali	ties. <u>I further swear a</u>	and
$\underline{\text{affirm}}$ that my personal net worth does not	exceed \$1.32 million and tha	t my adjusted	d gross income as	
averaged over the previous three (3) tax ye	ears does not exceed \$350 th	ousand, and	that I am economica	lly
disadvantaged because my ability to comp	ete in the free enterprise syst	tem has been	impaired due to	
diminished capital and credit opportunities	as compared to others in the	same or simi	lar industry who are	not
socially and economically disadvantaged.				
I swear and affirm that the firm continues to	o meet the Small Business A	dministration'	s (SBA) size criteria t	for
small businesses in my industry, as measu			` '	
previous three (3) fiscal years. I further swe	•	-	•	
receipts do not exceed \$23.98 million. In e		-	•	<u>iness</u>
tax return(s) as required.		-		
DBE Owner				
Name / Title	Signature		Date	
Phone:	Email:			
Notary Public				_
County of State	State of			
Subscribed and sworn before me on this	s day of			
, 20				
			{Seal}	
Notary Public:				
Commission expires on:				

Submit the completed form, along with any other required or applicable documents to: <u>NDOT HCRO – Annual Affidavit</u>, 1500 Highway 2, P.O. Box 94759, Lincoln, NE 68509-4759. Phone: 402-479-4531. Fax: 402-479-3728. Email: troy.larsen@nebraska.gov.