DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity	Control of		Limited Liability	Garage War	1.2/T.Jrd.	☐ Non-Profit		Control of the Contro	
_ Sole Proprietorship	□Partnership		mpany	□ Corporation	☐ Trust	Organization		Other	
Business Desigr	nation Group (P	ease selec	t all that apply)				- 1		
⊒ мв е	☐ WBE		☐ SBE	☐ PBE		□ VET]DVET	☐ ESB
Ainority Business Interprise	Women-O Business I		Small Business Enterprise	Physically Ch Business Ent		Veteran Owned Business	10.00	isabled Veteran wned Business	Emerging Small Business
Number of C	lark County		a Residents E		3				
Corporate/Business Entity Name:		ı: B	lack & Veatch	Corporation					
Include d.b.a., it	f applicable)	@ 1 / P.							
treet Address:	elan mark	8	400 Ward Str	eet	V)	Vebsite: WWV	v.bv.com	Lu	
ity, State and Zip Code:		ŀ	Kansas City, MO 64114			POC Name: Dan Wonders Email: wondersd@bv.com			
Telephone No:		9	913-458-2200		F	ax No: 913	-458-939	92	
Nevada Local St			8965 S. Easte	rn Ave, Suite 3	25 W	Vebsite:	www.bv	v.com	
City, State and			Las Vegas, N\	/ 89123	/L	ocal Fax No:	702-43	4-3378	
ocal Telephone No:			702-894-4504		L	Local POC Name: Dan Wonders wondersd@bv.com			
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Disclosure of Ownership/Principals

Black & Veatch Corporation is a wholly owned subsidiary of Black & Veatch Holding Company (BVHC). The Black & Veatch Retirement Program, or Employee Stock Ownership Program (ESOP), holds 100% of the common shares of BVHC. The ESOP shares are held in trust and registered to the program's trustee, GreatBanc Trust Company. Individual beneficial holder data within the ESOP trust is confidential and not available to the Company without prior written consent from the individual; however, shareholdings are broadly dispersed among the 6,000 employee participants. Aside from the ESOP, no one individual currently holds over 5% of the common shares of BVHC. The Business Address and phone number is: 8400 Ward Parkway, Kansas City, MO 64114, (913) 458-2000.

Lisa Jackson

DISCLOSURE OF RELATIONSHIP

List any disclosures below: (Mark N/A, if not applicable.)

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE	RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL	COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT
N/A	N/A	N/A	N/A

^{*} County employee means Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District.

"To the second degree of consanguinity" applies to the candidate's first and second degree of blood relatives as follows:

- Spouse Registered Domestic Partners Children Parents In-laws (first degree)
- Brothers/Sisters Half-Brothers/Half-Sisters Grandchildren Grandparents In-laws (second degree)

For County Use Only:
If any Disclosure of Relationship is noted above, please complete the following:
Yes No Is the County employee(s) noted above involved in the contracting/selection process for this particular agenda item?
Yes No Is the County employee(s) noted above involved in any way with the business in performance of the contract?
Notes/Comments:
Signature
Print Name Authorized Department Representative

[&]quot;Consanguinity" is a relationship by blood. "Affinity" is a relationship by marriage.