## DISCLOSURE OF OWNERSHIP/PRINCIPALS

Business Entity Type (Please select one)													
Sole Proprietorship	Partners	hip		imited Liability	7	Corporation	Tru	st	Non-Profit Organization		Other		
Business Design	ation Grou	p (Please	sele	ct all that apply	)								
MBE	□wв	E		SBE		PBE			□ VET		OVET	ESB	
Minority Business Enterprise  Women-Owned Business Enterprise		SS	Small Busines Enterprise			Physically Challenged Business Enterprise			Veteran Owned Business	Disabled Veteran Owned Business  Emerging Small Business			
Number of Clark County Nevada Residents Employed: 149													
Corporate/Business Entity Name:			Protiviti Inc										
(Include d.b.a., if applicable)													
Street Address:	Street Address:		2884 Sand Hill Rd					Website: www.protiviti.com					
City, State and Zi	in Code:		Menio Park, CA, 94025-7072				POC Name: Mark Gosnell						
Oity, State and 21	p code.						Email: mark.gosnell@protiviti.com						
Telephone No:			(650) 234-6000					Fax	Fax No:				
Nevada Local Str	eet Addres	s:						Wel	Website:				
(If different from	above)												
City, State and Z	ip Code:							Local Fax No:					
								Loc	Local POC Name:				
Local Telephone	NO:							Email:					
All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.  Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s).  Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations,													
close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.													
Full Name				Title					% Owned (Not required for Publicly Traded Corporations/Non-profit organizations)				
Joseph Tarantino				President and Chief Execu							oracionaritori profic	organizations,	
Cory Gunderson				EVP, Global Solutions									
Brian Christensen				Ε\	EVP, Managed Solutions and Enterprise Coll								
Patrick Murphy				VF	- &	Lead Counsel	Protivit		<del></del>				
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes No  1. Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?													
Yes (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.)													
<ol> <li>Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?</li> </ol>													
Yes No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.)													
l certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.													
Mark Gosnell Signature		itatly signed by te: 2022.01.12			2	Mark Gosnell Print Name							
Managing Director				X		1/12/22 Date							
						2410		_					

## **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			
Water Reclamation District.  "Consanguinity" is a relations  "To the second degree of of follows:  • Spouse – Registered  • Brothers/Sisters – H	Clark County, Department of ship by blood. "Affinity" is a release consanguinity" applies to the d Domestic Partners – Children alf-Brothers/Half-Sisters – Gra	ationship by marriage. candidate's first and second n – Parents – In-laws (first deg	degree of blood relatives as
For County Use Only:			
	noted above, please complete the folio		
	ployee(s) noted above involved in the		-
	ployee(s) noted above involved in any	way with the business in performance	e of the contract?
Notes/Comments:			
Signature	<del></del> ;		
Print Name Authorized Department Representa	tive		