

DEPARTMENT OF DEFENSE		CONTRACT PRICING PROPOSAL (RESEARCH AND DEVELOPMENT)	
This form is for use when (i) submission of cost or pricing data (see ASPR 3-807.3) is required and (ii) substitution for the DD Form 633 is authorized by the contracting officer.		NAME OF OFFEROR Massachusetts Institute of Technology HOME OFFICE ADDRESS 77 Massachusetts Avenue Cambridge, Mass. 02139	
SUPPLIES AND/OR SERVICES TO BE FURNISHED Engineering of a Computer System for which Security can be Certified by Auditing.		DIVISION(S) AND LOCATION(S) WHERE WORK IS TO BE PERFORMED Laboratory for Computer Science \$ 253,027	
GOVT SOLICITATION NO.		TOTAL AMOUNT OF PROPOSAL	
DETAIL DESCRIPTION OF COST ELEMENTS			
1. DIRECT MATERIAL (Itemize on Exhibit A)			
EST COST (\$)	EST COST/	TOTAL	REFER- ENCE 2/
26,335		118,993	page 3
2. MATERIAL OVERHEAD <sup>3/</sup> (Rate % X \$ base = )			
TOTAL DIRECT MATERIAL			
3. DIRECT LABOR (Specify)			
ESTIMATED HOURS	RATE/ HOUR	EST COST (\$)	
actual	25,888		
actual	29,290		
Graduate Students	52,690		
Secretarial, Clerical	7,925		
Other	3,200		
4. LABOR OVERHEAD (Specify Department or Cost Center) <sup>3/</sup>			
XXX RATE	X BASE =	EST COST (\$)	
24.5%	63,103	15,459	page 3
5. SPECIAL TESTING (Including field work at Government installations)			
TOTAL LABOR OVERHEAD			
68.0%	108,107	73,512	
6. SPECIAL TESTING (Itemize on Exhibit A)			
7. TRAVEL (If direct charge) (Give details on attached Schedule)			
a. TRANSPORTATION		EST COST (\$)	
b. PER DIEM OR SUBSISTENCE			
8. CONSULTANTS (Identify - purpose - rate)			
TOTAL TRAVEL			
		4,200	
9. OTHER DIRECT COSTS (Itemize on Exhibit A)			
TOTAL DIRECT COSTS AND OVERHEAD			
14,528			page 2
10. GENERAL AND ADMINISTRATIVE EXPENSE (Rate % of cost element Nos. <sup>3/</sup> )			
TOTAL DIRECT COST AND FEE OR PROFIT			
253,027			
11. FEE OR PROFIT			
12. ROYALTIES <sup>4/</sup>			
13. TOTAL ESTIMATED COST			
253,027			
14. FEE OR PROFIT			
15. TOTAL ESTIMATED COST AND FEE OR PROFIT			
253,027			
and reflects our best estimates as of this date, in accordance with the Instructions to Offerors and the Footnotes which follow			
TYPED NAME AND TITLE Joseph F. Connolly Assistant Director, Office of Sponsored Programs.			
SIGNATURE			
NAME OF FIRM Massachusetts Institute of Technology			
DATE OF SUBMISSION			

Form Approved  
Budget Bureau No. 22-R100

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