



CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
BRAD LANDER

JOHN K. KATSORHIS
AGENCY CHIEF CONTRACTING OFFICER

BUREAU OF ADMINISTRATION

ADDENDUM NO. 5

RFQ Title: PURCHASE OF CITRIX VIRTUAL APPS AND DESKTOP PREMIUM ON-PREM
SUBSCRIPTION BUSINESS CONTINUITY ASSURANCE LICENSES

PIN: 01524BIST68310

Date: March 14, 2024

Contact: Yudan Zhao

Email: opportunity@comptroller.nyc.gov

Except as otherwise stated below and by any subsequent Addenda to the above referenced Request for Quote (RFQ), which was released on February 20, 2024, the solicitation remains unchanged:

The changes are underlined and in bold.

- Title of RFQ has been changed to:

Purchase of **Citrix for Private Cloud**

- Section I. Timetable. C. Due Date and Time for RFQ Responses, has been changed to:

Friday, March 22, 2024 by 2:00 P.M. (EST)

- Section II. RFQ Summary, A. RFQ Background and Purpose, first paragraph has been changed to:

Pursuant to section 3-08 (c)(1)(iv) of the New York City (“City”) Procurement Policy Board (“PPB”) Rules, the New York City Office of the Comptroller (the “Comptroller’s Office” or “Comptroller”), Bureau of Information Systems and Technology (“BIST”), is seeking responses from responsible Citrix Systems, Inc (“Citrix”) authorized resellers for the purchase of **Citrix for Private Cloud** as set forth in the attached RFQ Worksheet (Attachment A).

- Attachment A

Attachment A has been replaced and attached to this addendum.

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Attachment A
RFQ Worksheet

Instructions: Vendors responding to this RFQ ***must*** submit a fully completed and signed Attachment A (PARTS A and B) as a PDF attachment to the email containing the vendor’s complete RFQ Response. Only RFQ Responses that include an attached PDF copy of a signed and fully completed Attachment A will be considered.

Note: VENDORS ARE ADVISED THAT THE CITRIX CONTACT FOR DETAILED PRICING INFORMATION FOR THIS OPPORTUNITY IS: BJ Dieterich
bj.dieterich@cloud.com

PART A. VENDOR INFORMATION					
Submitting Vendor Name:				EIN:	
Vendor Address:					
Telephone No.:			E-mail:		
Name of Duly Authorized Representative:					
Title of Duly Authorized Representative:					
_____ <i>Signature of Duly Authorized Representative</i>			_____ <i>Signature Date</i>		
PART B. PRICE QUOTE					
Line Item #	Description	Part Number	Qty.	Unit Price	Extended Price (Qty. x Unit Price)
1	Citrix for Private Cloud Term: 3/15/2024 - 12/31/2024	SKU 6002996	500	\$	\$
TOTAL PRICE QUOTE					\$