



Oklahoma Center for the Advancement of Science and Technology

## **Small Business Innovation Research (SBIR) Phase II Matching Funds Program**

### **Fiscal Year 2009 Solicitation**

**Submission Dates: July 1, 2008 through June 30, 2009**  
**Closing Date: June 30, 2009**

*For additional information contact:*

**Oklahoma Center for the Advancement of  
Science and Technology  
OCAST Programs  
755 Research Parkway, Suite 110  
Oklahoma City, OK 73104**

**Phone: 405-319-8418  
Toll Free: 866-265-2215  
Fax: 405-319-8426  
E-mail: [sroberts@ocast.state.ok.us](mailto:sroberts@ocast.state.ok.us)  
Web Site: [www.ocast.state.ok.us](http://www.ocast.state.ok.us)**

**OCAST Small Business Innovation Research (SBIR)  
Matching Funds Program  
Fiscal Year 2009 Solicitation**

**A. PROGRAM DESCRIPTION**

The OCAST SBIR Matching Funds Program is designed to award matching funds to Oklahoma firms who (1) have been awarded a federal SBIR Phase I award and (2) have submitted a qualified Phase II proposal to a participating federal government agency.

SBIR is administered by 11 federal agencies for the purpose of providing research and development funding to small companies. Companies compete for funding by submitting proposals in response to solicitations issued by participating federal agencies. The federal program provides for funding competitions in two phases: Phase I - to conduct feasibility research; Phase II - to expand and develop Phase I results. The federal program also includes a Phase III which provides commercialization support for the product or process developed in Phase II. For more information about the federal SBIR program go to: [www.sbirworld.com](http://www.sbirworld.com)

Through the SBIR Matching Funds Program, OCAST will match an eligible Oklahoma firm's federal Phase I SBIR award at the rate of \$.50 on the dollar, with a maximum award of \$25,000, if that firm submits a qualified Phase II proposal to any participating federal agency, or a federal "Fast Track" proposal through the Department of Defense (DoD) or the National Science Foundation ("NSF"). "Fast Track" programs which may be initiated by other federal agencies may not fit OCAST's program provisions, and thus would not be eligible for funding under the "Fast Track" provisions of this solicitation, (see section K for specific information about "Fast Track").

**B. PROGRAM PURPOSE**

The Oklahoma Center for the Advancement of Science and Technology (OCAST) has a statutory mandate to develop a program to provide State-matching support for federal SBIR program grants awarded to Oklahoma firms. The purpose of the OCAST SBIR Matching Funds Program is to provide an incentive for Phase I award-winning firms to pursue the more substantial Phase II awards, toward the ultimate end of Phase III, commercialization.

The goals of the program are: (1) to increase the amount of federal research dollars received by Oklahoma firms; (2) to help sustain Oklahoma companies through the funding gap period between the final federal Phase I payment and the first federal Phase II payment and (3) to encourage the establishment and growth of high-quality, small advanced technology firms in the State of Oklahoma.

**C. DEFINITIONS**

1. **Applicant** – a small business that submits an application for an award under this Program Solicitation.
2. **Award** – financial assistance provided pursuant to a contract that matches a Recipient's federal SBIR Phase I award at a rate of \$.50 on the dollar with a maximum award of \$25,000.
3. **Federal SBIR "Fast Track" Program** - Federal program designed to provide interim federal funding between the completion of the federal SBIR Phase I grant and the beginning of the federal SBIR Phase II grant. The federal SBIR

"Fast Track" program only applies to those federal agencies that have elected to participate in the federal "Fast Track" initiative.

4. **Recipient** – an Applicant who has been approved to receive an award under this Program Solicitation.
5. **"Small business"** – a business concern that is at least 51 percent owned and controlled by one or more individuals who are citizens of, or permanent resident aliens, in the United States and that does not have more than 500 employees, including its affiliates.

#### D. APPLICANT ELIGIBILITY

In order to be eligible to be considered for an award under this program, the applicant must meet the following qualifications:

1. Applicant must meet all federal SBIR eligibility requirements.
2. Applicant must be a for-profit Oklahoma-based small business.
3. Applicant must have (a) won a Phase I SBIR award from a participating federal agency, (b) submitted a final Phase I report; (c) demonstrated that the federal agency has an interest in this Phase II proposal, e.g. an invitation to submit a Phase II proposal from the federal agency; (d) submitted such proposal to the federal agency.
4. Applications must be received by OCAST **no later than 45 days from the date the Phase II application was submitted to the federal agency.** Any application received by OCAST after 45 days will be returned without consideration.

5. Applicant may not receive concurrent funding support from other sources, which duplicate the purpose of the funds to be provided by OCAST.
6. Applicant must certify that at least fifty-one percent (51%) of the proceeds of the federal Phase II award will be spent in Oklahoma.
7. Applicant may not apply for an OCAST SBIR Matching Funds Program award if the Applicant has received an award during the current fiscal year (July 1, 2008 through June 30, 2009).

**Please Note:** Any applicant that, in OCAST's judgment, has failed to correct a material breach of a contract awarded under any of OCAST programs will not be eligible to submit an application.

#### E. FUNDING TERMS

1. Beginning in FY 2008, providing funds are available, applicants must apply for state funding within 45 days from the date they submitted their federal application. The company must submit documentation of the date the Phase II application was submitted and received by the federal agency.
2. Applications will be considered, and funds awarded, on a first-come, first-served basis within this application period (July 1, 2008 - June 30, 2009) or until the funds available for this program have been exhausted.
3. So long as funds remain available, for each approved application, funds will be awarded in an amount equal to 50% of the federal SBIR Phase I award, not to exceed \$25,000.

## F. APPLICATION REQUIREMENTS

**Applications must include ALL of the documents specified below in order to be considered complete. Incomplete applications *may be returned to the applicant without further review.* Each Applicant must submit the following documents in the order listed below. :**

1. A completed OCAST SBIR Matching Funds Program application form (Appendix A attached).
2. A copy of a document proving the legal existence of the applicant's organization, such as articles of incorporation, partnership agreements, or a notarized affidavit of sole proprietorship, indicating name and location of business.
3. Evidence that the SBIR Phase I final report was received and accepted by the federal agency for which the research was conducted and that terms of the SBIR Phase I contract between the company and the participating federal agency were met satisfactorily by the company. Such evidence must include:
  - a. a copy of the SBIR Phase I contract;
  - b. a copy of the SBIR Phase I final report (portions which are non-proprietary/ nonclassified);
  - c. verification of the final payment to the applicant under the federal SBIR Phase I contract. In the event that final payment is pending, a copy of the final invoice submitted to the federal agency shall be accepted as documentation of the firm's successful compliance with the federal SBIR Phase I Contract.

4. A copy of the federal SBIR Phase II proposal that has been submitted to the participating federal agency (portions which are non-proprietary/nonclassified).
5. Proof that the federal SBIR Phase II proposal has been submitted to and received by the participating federal agency. Documentation must include the date the federal agency received the application.
6. A notarized statement, signed by an authorized official of the applicant firm, attesting that:
  - a. the applicant is eligible to submit an SBIR Phase II proposal;
  - b. the applicant has not received and will not solicit funds from any other source which duplicates the purpose of the funds to be provided by OCAST and;
  - c. in the event the firm is awarded a federal Phase II grant or contract, as a minimum, fifty-one percent (51%) of the proceeds of that federal Phase II award shall be spent in Oklahoma.

**NOTE:** If proprietary or classified material is excluded from the SBIR Phase II Matching Funds Program application, the applicant must submit a notarized statement, signed by an authorized official of the applicant firm, attesting to the fact that the excluded material is proprietary or classified and that economic harm or violation of federal rules pertaining to classified materials will result if such materials are submitted.

## G. APPLICATION PREPARATION AND SUBMISSION

Applicants **must** use the required forms and comply with all requirements of this solicitation. The required documents listed in the previous section **must** be assembled in the following order and **include a clearly marked cover page identifying each section.**

Section 1. Application Forms

Section 2. Proof of Firm's Existence

Section 3. Evidence that the SBIR Phase I Final Report was received and accepted by the Federal Agency

Section 4. Copy of Federal Phase II Proposal

Section 5. Proof that the Federal SBIR Phase II Proposal has been Submitted to the Federal Agency

Section 6. Notarized Statements

The documents comprising the application must be stapled together in the upper left-hand corner and delivered to OCAST by mail, carrier service or in person at the following address:

Sherry Roberts, Client Services Manager  
OCAST Programs  
755 Research Parkway, Suite 110  
Oklahoma City, OK 73104

All materials pertaining to the application must be received by OCAST no later than **5:00 PM, June 30, 2009**. No applications or supplemental materials submitted in response to this solicitation shall be accepted after **5:00 PM, June 30, 2009**, or when awards funds have

been exhausted, except for supplemental material requested by OCAST.

## I. APPLICATION REVIEW AND APPROVAL

1. OCAST staff will review applications to ascertain compliance with the requirements of this solicitation on a first-come first-served basis during the state's fiscal year (July 1 through June 30).
2. To qualify for funding, applications must be complete and in full compliance with all requirements in this solicitation. **NOTE: OCAST staff may return incomplete or non-compliant applications without further review.** At their discretion, OCAST staff may request supplemental materials from the Applicant. If OCAST staff requests supplemental materials, **such materials must be received within 15 days of the date of the request or the application may be returned to the Applicant without further review.**
3. Applications will be approved on the basis of satisfactory compliance with all requirements as stated in this solicitation.
4. A decision by OCAST to disapprove an application may be appealed to the Oklahoma Science & Technology Research and Development (OSTRaD) Board of Directors. All appeals must be submitted to the OSTRaD Board within thirty (30) days of receipt of the notice of disapproval.

## H. AWARD CONTRACT

1. The mechanism for funding approved applications is a professional services contract between OCAST and the Recipient. The contract shall include

commitments on the part of the Recipient to comply with all requirements described in this SBIR Matching Funds Program solicitation.

2. Terms of the contract shall also include the following requirements:
  - a. Status reports must be filed with OCAST every six (6) months between the start date of the OCAST contract and the submission of the final report. The Recipient shall prepare the Status Report as outlined in Appendix B of this solicitation.
  - b. A final report shall be filed with OCAST within 30 days of notification of federal Phase II contract award or denial. The Recipient shall prepare the Final Report as outlined in Appendix C of this solicitation when submitting the final report.
3. The Recipient shall provide OCAST with requested information for OCAST's annual SBIR Matching Funds Program survey for a period of up to five (5) years following receipt of the OCAST award.
4. If notification regarding award of a Phase II contract is received from the federal agency within six months of the start date of the OCAST contract, the status report will be waived, and only a final report will be required.
5. Failure to file a final report as required may cause the Recipient to be barred from receiving further OCAST SBIR-related funding.
6. The Recipient, or designated fiscal agent, shall maintain records and accounts that properly document and account for the source and application of all OCAST

funds for a minimum of five (5) years. All such records and accounts shall be made available on demand by OCAST for inspection and use in carrying out its responsibilities for administration of the funds.

7. The Recipient or designated fiscal agent shall comply with the audit policy of OCAST and shall provide OCAST timely copies of reports on any audits that include funds received from OCAST.
8. In the event that an audit results in the determination that the Recipient has expended contract funds on unallowable costs, the Contractor shall reimburse OCAST in full for all such costs.
9. Recipients will receive **two** sets of contract documents, which must be signed, dated, and **both copies** returned to OCAST. A fully executed contract will be returned to the applicant. Upon receipt and approval of the signed contract documents, payment will be processed and a warrant mailed to the applicant.

#### I. "FAST TRACK" PROVISION

1. "**Fast Track**" Applicant Eligibility - In order to be eligible to be considered for an award under the "Fast Track" provisions of the OCAST SBIR Matching Funds Program, the applicant participating in any federal SBIR "Fast Track" program must comply with all provisions set forth in this solicitation and in addition must:
  - a. have applied for a federal Phase II SBIR award through the "Fast Track" program, and;
  - b. provide evidence of participation in the "Fast Track" program.

NOTE: Companies that are participating in the federal "Fast Track" program with a federal agency which requires its federal Phase I, "Fast Track", and federal Phase II applications to be submitted at the same time, will not be eligible under the "Fast Track" provisions of the OCAST SBIR Matching Funds Program until that company has obtained a fully-executed federal SBIR Phase I contract with a confirmed budget.

2. **"Fast Track" Funding Terms** - Funding for approved OCAST "Fast Track" Matching awards will be disbursed to an awardee only when OCAST has received all documentation required under Section H, and the firm's Phase I final report. The Phase I final report must be submitted to OCAST within 12 months of the OCAST contract start date.
3. **"Fast Track" Application Requirements** Applicant must submit evidence that the SBIR "Fast Track" application and SBIR Phase II application were submitted in accordance with the requirements outlined by the federal agency solicitation. Such evidence must include:
  - a. a copy of the SBIR Phase I contract;
  - b. a copy of the federal SBIR "Fast Track" application or a copy of the federal SBIR Phase I and Phase II application cover sheet(s) which indicates application to the federal "Fast Track" program;
  - c. verification of the amount paid to the applicant under the federal Phase I contract, including a copy of the invoice(s) and/or pending invoice(s) submitted to the federal agency and;
  - d. a copy of the SBIR Phase I final report (portions which are non-proprietary and

nonclassified) when the federal Phase I project is completed.

4. **"Fast Track" Application Review, Approval, and Award** Upon approval by the OSTRaD Board of Directors, a letter will be mailed to the awardee indicating the approved award amount and stipulating that funds will be disbursed only upon receipt of all documentation required under this solicitation; specifically, the federal Phase I final report and documentation of payment. The awardee may then forward a copy of this letter to the applicable federal agency to satisfy the requirements of the federal SBIR "Fast Track" application.

#### **J. GENERAL TERMS AND CONDITIONS**

1. No oral statement of any person shall modify or otherwise affect the terms and conditions of this Solicitation.
2. OCAST may reject any application that does not comply with the requirements of this Solicitation.
3. OCAST may withdraw this Solicitation at any time.
4. This Program is funded by State appropriations and awards are contingent upon the availability of State funds.

#### **K. RELEASE OF INFORMATION**

OCAST is subject to the Oklahoma Open Meetings Act and the Open Records Act. However, *"marketing plans, financial statements, trade secrets, research concepts, methods or products, or any other proprietary information shall be confidential, except to the extent that the person or entity which provided such information or which is*

*the subject of such information consents to the disclosure.” 74 O.S. § 5060.7.*

OCAST may use the contents from applications for the required OCAST Annual Report or other publications without obtaining permission from the applicant unless the contents are confidential under State or Federal law and are identified as confidential by the Applicant.

#### **L. INQUIRIES**

Inquiries about the OCAST SBIR Matching Funds Program should be addressed to:

Sherry Roberts  
Client Services Manger  
OCAST Programs  
755 Research Parkway, Suite 110  
Oklahoma City, OK 73104

**Current solicitations for OCAST funding programs and information about small business support is available on-line at:**  
[www.ocast.state.ok.us](http://www.ocast.state.ok.us)

**Current federal solicitations and information about the federal program may be found at:** [www.sbir.com](http://www.sbir.com)

#### **M. WORKSHOPS**

OCAST will conduct workshops on application preparation during State Fiscal Year 2006. For additional information about the workshops or the OCAST SBIR program in general, please contact:

Sherry Roberts  
405/319-8418  
Toll free: 866/265-2215  
[sroberts@ocast.state.ok.us](mailto:sroberts@ocast.state.ok.us)

#### **P. Commercialization Support**

Commercialization support is available through:

i2E, Inc  
840 Research Parkway, Suite 250  
Oklahoma City, Oklahoma 73104  
405/235-2305  
or

415 South Boston, Suite 800  
Tulsa, Oklahoma  
918/582-5592

On the web at: [www.i2E.org](http://www.i2E.org)  
Toll Free: 800/337-6822

# Appendix A Application Form

For OCAST Use Only

|               |            |               |   |
|---------------|------------|---------------|---|
| Application # | Contract # | Date Received | Date approved/denied by<br>OSTRaD Board of<br>Directors |
|---------------|------------|---------------|---|

## Oklahoma Center for the Advancement of Science and Technology (OCAST)

### OCAST Small Business Innovation Research (SBIR) FY 2009 Matching Funds Program

|   |                 |                          |              |  |
|---|-----------------|--------------------------|--------------|--|
| 1. Firm name  |                 | 2. Federal tax ID number |              |  |
| 3. Firm address<br><i>(Street Address)</i>  |                 |                          |              |  |
| <i>(City)</i>   | <i>(County)</i> | <i>(State)</i>           | <i>(Zip)</i> |  |
| 4. Firm <b>mailing</b> address (if different from question 3)<br><i>(Street Address)</i>                |                 |                          |              |  |
| <i>(City)</i>   |                 | <i>(State)</i>           | <i>(Zip)</i> |  |
| 5. Previous names, if any, used by your firm (other than name listed in question 1 of this application) |                 |                          |              |  |

|   |   |
|---|---|
| 6. Firm telephone number (            ) | 10. Oklahoma State House of Representatives district number |
| 7. Firm fax number (            )       | 11. Oklahoma State Senate district number                   |
| 8. Firm e-mail address                  | 12. Federal Congressional district number                   |
| 9. Firm Website                         | 13. Federal Agency to which proposal was submitted          |

|   |  |
|---|--|
| 14. Principal Investigator (P.I.) <i>[Please type.]</i> | 18. Authorized Organizational Official <i>[Please type.]</i> |
| 15. Title   | 19. Title  |
| 16. Signature and Date                                  | 20. Signature and Date                                       |
| 17. E-mail address                                      | 21. E-mail address   |

22. Project Title and two sentence description in lay terms:

23. Check the appropriate box that best describes your **firm's main business activity**

|                          |                               |                                   |
|--------------------------|-------------------------------|-----------------------------------|
| AUT - Factory Automation | ENR - Energy                  | PHO- Photonics                    |
| BIO - Biotechnology      | ENV - Environmental           | SOF - Computer Software           |
| CHE - Chemicals          | MAN - Manufacturing Equipment | SUB - Subassemblies/Components    |
| COM - Computer Hardware  | MAT - Advanced Materials      | TAM - Test & Measurement          |
| DEF - Defense            | MED - Medical                 | TEL - Telecommunications/Internet |
| EDU - Education          | PHA - Pharmaceuticals         | TRN - Transportation              |

23a. *If your SBIR Phase II **project** does not fall within the above general category for your firm, please specify the appropriate category for your firm's project, using the above list.*

24. Please describe briefly the main products/processes/services your firm produces

25. SIC - Standard Industrial Code(s) applicable to your firm's main business operations

26. NAIC - North American Industrial Code(s) applicable to your firm's main business operations

| 27. Types of employees       | Current number of employees per category | Current employee number in Oklahoma<br>(if different from column to left) |
|------------------------------|--|---|
| a) Professional / Scientific |  |   |
| b) Management                |  |   |
| c) Technical / Technician    |  |   |
| d) Skilled labor             |  |   |
| e) Unskilled labor           |  |   |
| f) Other (please describe)   |  |   |

28. How will your firm use the OCAST SBIR Matching funds, if awarded? Please indicate your best estimate of the percentage expenditures on the table below.

| Estimated Percentage Expenditures | OCAST SBIR Matching Funds |
|-----------------------------------|---------------------------|
| a) Wages and salaries             | %                         |
| b) Facility rental                | %                         |
| c) Supplies                       | %                         |
| d) Research-related equipment     | %                         |
| e) Computer software              | %                         |
| f) Consultant fees                | %                         |
| g) Other (please specify)         | %                         |

**Commercialization.** Based on completion of Phase II of your SBIR project and movement into the "Commercialization Phase" (Phase III), your firm may anticipate a variety of outcomes, depending upon the nature of the market for the product or process that is the subject of your Phase II proposal. Please answer the following questions related to **Phase III**, indicating your best estimate of the commercial potential of your product/process.

| 29. Does your firm's project involve patentable products/processes or copyrightable intellectual property? |                                 | Yes   | No                                       |
|--|---------------------------------|---|--|
| [If "No," please go to question 30. If "Yes," please answer Parts a) and b) below.]                        |                                 |   |  |
| a) What is the estimated <b>number</b> of patents issued, or expected to be issued?                        |                                 | b) What is the estimated <b>total value</b> of the patents? |  |
| 1  | 4                               | 0 - \$100,000   | \$2,000,000 - \$5,000,000                |
| 2  | _____ (Over 4, please specify.) | \$100,000 - \$500,000                                       | _____ (Over \$5,000,000, please specify) |
| 3  |                                 | \$500,000 - \$2,000,000                                     |  |

|   |   |   |               |                           |   |                            |                         |   |
|---|---|---|---------------|---------------------------|---|----------------------------|-------------------------|---|
| <p>30. Does your firm plan to manufacture/produce your product/service in Oklahoma?<br/>         [If "No," please go to question 31. If "Yes," please answer Parts a) through d) below.]</p>  | Yes                                       | No  |               |                           |   |                            |                         |   |
| <p>a) What do you estimate will be the value (retail) of the product/services sold in the <b>first full year</b> of production?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">0 - \$100,000</td> <td style="width: 50%;">\$2,000,000 - \$5,000,000</td> </tr> <tr> <td>\$100,000 - \$500,000</td> <td>\$5,000,000 - \$10,000,000</td> </tr> <tr> <td>\$500,000 - \$2,000,000</td> <td>_____ (Over \$10,000,000, please specify)</td> </tr> </table>   |   |   | 0 - \$100,000 | \$2,000,000 - \$5,000,000 | \$100,000 - \$500,000                     | \$5,000,000 - \$10,000,000 | \$500,000 - \$2,000,000 | _____ (Over \$10,000,000, please specify) |
| 0 - \$100,000   | \$2,000,000 - \$5,000,000                 |   |               |                           |   |                            |                         |   |
| \$100,000 - \$500,000   | \$5,000,000 - \$10,000,000                |   |               |                           |   |                            |                         |   |
| \$500,000 - \$2,000,000   | _____ (Over \$10,000,000, please specify) |   |               |                           |   |                            |                         |   |
| <p>b). What will be the nature of the market for the product or process that is the subject of your Phase II application?<br/>         (Please check the appropriate box.)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Government</td> <td style="width: 33%; text-align: center;">Commercial Market</td> <td style="width: 34%; text-align: center;">Both Government and the Commercial Market</td> </tr> </table>   |   |   | Government    | Commercial Market         | Both Government and the Commercial Market |                            |                         |   |
| Government  | Commercial Market                         | Both Government and the Commercial Market |               |                           |   |                            |                         |   |
| <p>c) Is there a similar product/process on the market today? <span style="float: right;">Yes      No</span></p> <p><i>If "No," please skip to Part d) below. If "Yes," please answer i) through iv) below.</i></p> <p>i) What is the current unit price? (Designate wholesale or retail)      \$ _____</p> <p>ii) How many are currently sold annually (Designate nationally or worldwide)      _____</p> <p>iii) What is the pricing trend / history? (Rising or falling)      \$ _____</p> <p>iv) What is your firm's current market share, if any?      _____ %</p> |   |   |               |                           |   |                            |                         |   |
| <p>d)</p> <p>i) What is your estimate of the unit price at which the product/process will be offered?<br/>         (Designate wholesale or retail)      \$ _____</p> <p>ii) How many do you estimate you will sell annually during the first year of sales?<br/>         (Designate nationally or worldwide)      _____</p> <p>iii) During the third year of sales?      _____</p>  |   |   |               |                           |   |                            |                         |   |

|   |   |    |               |                           |                       |                            |                         |   |
|---|---|----|---------------|---------------------------|-----------------------|----------------------------|-------------------------|---|
| <p>31. Does your firm anticipate making <b>licenses</b> available to producers/manufacturers of your product/process?<br/>         [If "No," please go to question 32. If "Yes," please answer Part a) below.]</p>  | Yes                                       | No |               |                           |                       |                            |                         |   |
| <p>a) What do you estimate will be the <b>total value</b> of the licenses(s)?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">0 - \$100,000</td> <td style="width: 50%;">\$2,000,000 - \$5,000,000</td> </tr> <tr> <td>\$100,000 - \$500,000</td> <td>\$5,000,000 - \$10,000,000</td> </tr> <tr> <td>\$500,000 - \$2,000,000</td> <td>_____ (Over \$10,000,000, please specify)</td> </tr> </table> |   |    | 0 - \$100,000 | \$2,000,000 - \$5,000,000 | \$100,000 - \$500,000 | \$5,000,000 - \$10,000,000 | \$500,000 - \$2,000,000 | _____ (Over \$10,000,000, please specify) |
| 0 - \$100,000   | \$2,000,000 - \$5,000,000                 |    |               |                           |                       |                            |                         |   |
| \$100,000 - \$500,000   | \$5,000,000 - \$10,000,000                |    |               |                           |                       |                            |                         |   |
| \$500,000 - \$2,000,000   | _____ (Over \$10,000,000, please specify) |    |               |                           |                       |                            |                         |   |

**Follow-on Funding**

32. Does your firm have a commitment for follow-on funding at the end of Phase II, other than that listed in Q. 29-31 above?

Yes      No

Is your firm in the process of negotiating for such funding?

Yes      No

If the answer to both questions is "No," please skip to question 33.

If the answer to either question is "Yes," please describe the **nature** and **approximate dollar value** of the follow-on funding and its **current status**.

33. **Savings for Your Firm.** Your firm may anticipate receiving future financial benefits during the course of this SBIR project. Please fill out the following table, giving your **best estimate** of the savings your firm expects, if any, as a result of the project.

|                           | During Phase II |
|---------------------------|-----------------|
| a) In labor costs         | \$              |
| b) In materials           | \$              |
| c) In energy costs        | \$              |
| d) In waste savings       | \$              |
| e) Other (please specify) | \$              |

34. What effect will **OCAST** SBIR Matching funds and **federal** SBIR Phase II funds, if awarded, have on your firm's employment planning? Please indicate estimated numbers on the table below.

**Estimated Job Impact - Number of full-time equivalent jobs**

|   | During Phase II                             |   |
|---|---|---|
|   | <b>With OCAST</b><br>SBIR Matching funds    | <b>With federal</b><br>SBIR Phase II funds    |
| If funding is received, what is the <b>number of jobs</b> expected to be <b>created</b> in the following categories, if any?    |   |   |
| a) Professional / Scientific  |   |   |
| b) Management   |   |   |
| c) Technical / Technician   |   |   |
| d) Skilled Labor  |   |   |
| e) Unskilled Labor  |   |   |
| f) Other (please describe)  |   |   |
| If funding is NOT received, what, if any, is the <b>number of employees</b> that your company may be forced to <b>lay off</b> ? | <b>Without OCAST</b><br>SBIR Matching funds | <b>Without federal</b><br>SBIR Phase II funds |
| a) Professional / Scientific  |   |   |
| b) Management   |   |   |
| c) Technical / Technician   |   |   |
| d) Skilled Labor  |   |   |
| e) Unskilled Labor  |   |   |
| f) Other (please describe)  |   |   |

**SUCCESS RATES:** The following questions (35 & 36) assist OCAST in determining the overall success rates of Oklahoma firms applying for federal SBIR/STTR awards.

35. Has your firm received any **federal SBIR or STTR** awards in the **two years**? Yes      No  
*If "No", please skip to question 36. If "Yes", please supply the following information for each award in the appropriate section. Indicate with an asterisk (\*) those proposals for which the firm received an OCAST Award. Attach additional sheets, as needed.*

**SBIR/STTR Phase I Applications - Federal Award Received**

| Year<br>Federal<br>Award<br>Received | * | Project Title | Check one. |      | Federal<br>Agency | Award<br>Amount |
|--------------------------------------|---|---------------|------------|------|-------------------|-----------------|
|                                      |   |               | SBIR       | STTR |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |
|                                      |   |               |            |      |                   |                 |

**SBIR/STTR Phase II Applications - Federal Award Received**

| Year | * | Project Title | Check one. |      | Federal<br>Agency | Award<br>Amount |
|------|---|---------------|------------|------|-------------------|-----------------|
|      |   |               | SBIR       | STTR |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |
|      |   |               |            |      |                   |                 |

36. Did your firm apply for any **federal SBIR/STTR** awards in the **past two years** that did **NOT** receive federal funding?

Yes No

If "No", please skip to question 37. If "Yes", please supply the following information **for each proposal** in the appropriate section. Indicate with an asterisk (\*) those proposals for which the firm received an OCAST Award. Attach additional sheets, as needed.

**SBIR/STTR Phase I Applications - No Federal Award Received**

| Year | * | Project Title | Check one. |      | Federal Agency |
|------|---|---------------|------------|------|----------------|
|      |   |               | SBIR       | STTR |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |
|      |   |               |            |      |                |

**SBIR/STTR Phase II Applications - No Federal Award Received**

| Year Proposal Submitted | * | Project Title | Check one. |      | Federal Agency |
|-------------------------|---|---------------|------------|------|----------------|
|                         |   |               | SBIR       | STTR |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |
|                         |   |               |            |      |                |

**SBIR Fast Track Program** (Fill out this section only if applicable.) **If your firm submitted an SBIR “Fast Track” proposal,** please answer the questions (37 & 38). If not, please skip to Question 39.

|   |
|---|
| 37. Date your firm’s federal SBIR “ <b>Fast Track</b> ” proposal was submitted (month / year)   |
| <p>38. <b>Follow-on funding.</b> Does your firm have a commitment for “Fast Track” funding? <span style="float: right;">Yes    No</span></p> <p>If “no”, please skip to Question 39. If “yes”, please describe the nature and approximate dollar-value of the Fast Track follow-on funding. Attach additional sheets if needed.</p> |

**RESOURCES**

|  |
|--|
| 39. a) Are you familiar with the Oklahoma Technology Commercialization Center? <span style="float: right;">Yes    No</span>        |
| b) Have you ever been a client of the Oklahoma Technology Commercialization Center? <span style="float: right;">Yes    No</span>   |
| 40. a) Are you familiar with the Oklahoma Alliance for Manufacturing Excellence? <span style="float: right;">Yes    No</span>      |
| b) Have you ever been a client of the Oklahoma Alliance for Manufacturing Excellence? <span style="float: right;">Yes    No</span> |

## **Appendix B**

### **OCAST SBIR MATCHING FUNDS PROGRAM**

#### **STATUS REPORT REQUIREMENTS**

Please summarize the status of your firm at this time in terms of:

- 1) research progress;
- 2) the adequacy of OCAST SBIR Matching funds in meeting the company's needs; and
- 3) is the company still prepared to accept a federal Phase II contract if awarded.

If the company is unable to continue operations, even with the OCAST SBIR Matching Funds Program award, explain why.

This report is due every six months after receipt of OCAST Matching Funds Program award until the firm receives the federal Phase II award or notification the federal award will not be granted.

This status report must be typewritten, signed and dated by the authorized organizational official.

## **Appendix C**

### **OCAST SBIR MATCHING FUNDS PROGRAM FINAL REPORT REQUIREMENTS**

The following shall serve as the final report and must be filed with OCAST within 30 days of notification of a federal Phase II contract award or denial. Please provide a thorough and complete response to each of the questions below.

- 1) If your firm was awarded a federal Phase II contract, please state the contract amount.
- 2) If a Phase II contract was awarded but the company was unable or unwilling to accept the contract, please explain.
- 3) Please state whether the company plans to continue the proposed research on its own resources if a federal Phase II contract was not awarded. If this is the case will/did the OCAST SBIR Matching Funds Program award contribute to the firm's ability to continue the research?
- 4) Please discuss any material effects the OCAST SBIR Matching Funds Program award had on your firm.
- 5) Please provide any general comments you may have about this program.

These final reports must be typewritten, signed and dated by the authorized organizational official.



REGISTERED \_\_\_\_\_ NON-REGISTERED \_\_\_\_\_

**STATE OF OKLAHOMA  
VENDOR/PAYEE FORM**



Change of Address, Additional Address (Page 1 only)   
Gov. Entity (Page 1 only)

The State of Oklahoma requires the following information for all new vendors (payees) before any payments can be made. This information is used to establish you in the State's vendor file. Complete all that applies.

**AGENCY SECTION**

Agency Name \_\_\_\_\_ # \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

|                                  |   |
|----------------------------------|---|
| <b>1099 Reportable Status</b>    | <b>Attention Paying Agency:</b> Please check the <i>Add</i> box on the left if payments to this vendor/Payee are represented by Account Codes listed on page 3 of this form. If the vendor is incorrectly showing as 1099 Reportable, check the <i>Remove</i> box. The PeopleSoft system requires specific details regarding the type of transaction. Please check the box that applies to this vendor: |
| Add: <input type="checkbox"/>    | <input type="checkbox"/> 1 - Rents <input type="checkbox"/> 2 - Royalties <input type="checkbox"/> 3 - Prizes & Awards <input type="checkbox"/> 6 - Medical & Health Care<br><input type="checkbox"/> 7 - Non-Employee Compensation <input type="checkbox"/> 14 - Gross Proceeds to an Attorney   |
| Remove: <input type="checkbox"/> |   |

If vendor has a PeopleSoft Vendor #, add it here. \_\_\_\_\_

**VENDOR/PAYEE SECTION (Complete and fax to State Agency)**

|   |                |                |
|---|----------------|----------------|
| Company Name (or Individual, or Government Entity)  | Phone #        | Fax #          |
| Name on IRS Record (if different from above)  | Phone #        | Fax #          |
| VENDOR/PAYEE TIN/SSN # _____  |                |                |
| <b>Business Address:</b>  |                |                |
| (PO Box or Street, City, State, <b>9-Digit Zip Required</b> )   | E-Mail Address |                |
| <b>Optional Addresses – check as appropriate:</b>   |                |                |
| If different, <input type="checkbox"/> Pricing <input type="checkbox"/> Ordering <input type="checkbox"/> Invoicing <input type="checkbox"/> Remitting <input type="checkbox"/> Returning | Phone #        | Fax #          |
| (PO Box or Street, City, State, <b>9-Digit Zip Required</b> )   | E-Mail Address |                |
| Contact Name & Title: _____   |                |                |
| If different, <input type="checkbox"/> Pricing <input type="checkbox"/> Ordering <input type="checkbox"/> Invoicing <input type="checkbox"/> Remitting <input type="checkbox"/> Returning | Phone #        | Fax #          |
| (PO Box or Street, City, State, <b>9-Digit Zip Required</b> )   | E-Mail Address |                |
| Contact Name & Title: _____   |                |                |
| <b>Customer Service Information, if different:</b>  | Phone #        | Fax #          |
|   |                | E-Mail Address |

Vendors/Payees DO NOT fax to numbers below. The form must be returned to the state agency requesting this information.

State Agency, fax vendor completed and signed form to: For Registered Vendors -- DCS, Attention Rhydonia Sloan, at 405-521-4475.  
Non-Registered Vendors -- OSF, Attention Vendor Maintenance 405-521-3383 or 405-522-0392

|                  |              |     |
|------------------|--------------|-----|
| OSF/DCS USE ONLY | Date Posted: | By: |
|------------------|--------------|-----|



## IRS Instructions Regarding 1099 MISC Reporting

IRS Instructions regarding 1099 MISC reporting are posted on the IRS website at: <http://www.irs.gov/instructions/i1099misc/index.html>. Reportable payments include (a) royalties or broker payments in lieu of dividends or tax-exempt interest; (b) rents, services (including parts and materials), prizes and awards, other income payments, medical and health care payments, crop insurance proceeds, cash payments for fish (or other aquatic life) you purchase from anyone engaged in the trade or business of catching fish; (c) any fishing boat proceeds; or (d) gross proceeds paid to an attorney (see below).

Generally, if reportable payments do not fall under Box 1, 2, 3, 6 or 14, use Box 7. Specifically, all payments to physicians and medical corporations must be reported in Box 6. Attorney's fees, including payments to a law firm or other provider of legal services, are reportable in Box 7, except for gross proceeds. Gross proceeds paid to attorneys, under IRC section 6045(f), are reportable in Box 14. These include the total amount paid to an attorney for settlement agreements. These rules apply whether or not the legal services are provided to the payer and whether or not the attorney is exclusive payee (e.g., the attorney's and claimant's names are on one check). However, these rules do not apply to wages paid to attorneys that are reportable on Form W-2.

### OSF Account Codes for 1099 Reporting - By Category

|  |   |   |
|--|---|---|
| <p><b><input type="checkbox"/> 1 - RENTS</b></p> <p>532110 Rent of Office Space<br/>                     532120 Rent of Land<br/>                     532130 Rent of Other Building Space<br/>                     532140 Rent of Equipment and Machinery<br/>                     532150 Rent of Telecommunications Equip<br/>                     532160 Rent of Electronic Data Processing Equipment<br/>                     532170 Rent of Electronic Data Processing Software<br/>                     532190 Other Rents</p>  | <p><b><input type="checkbox"/> 2 - ROYALTIES</b></p> <p>553170 Royalties</p>  | <p><b><input type="checkbox"/> 3 - PRIZES AND AWARDS</b></p> <p>552140 Incentive Awards – Monetary &amp; Material<br/>                     552160 Incentive Payments – Oklahoma Horse Breeders &amp; Owners<br/>                     552170 Incentive Payments – Oklahoma Film Enhancement Rebate</p>   |
| <p><b><input type="checkbox"/> 6 - MEDICAL &amp; HEALTH CARE PAYMENTS</b></p> <p>515700 Offices of Physicians (except Mental Health Specialists)<br/>                     515710 Offices of Physicians, Mental Health Specialists<br/>                     515720 Offices of Dentists<br/>                     515730 Offices of Chiropractors<br/>                     515740 Offices of Optometrists<br/>                     515750 Offices of Mental Health Practitioners (except Physicians)<br/>                     515760 Offices of Physical, Occupational &amp; Speech Therapists, &amp; Audiologists<br/>                     515770 Offices of Podiatrists<br/>                     515780 Offices of all other Miscellaneous Health Practitioners<br/>                     515790 Family Planning Centers<br/>                     515800 Outpatient Mental Health &amp; Substance Abuse Centers<br/>                     515810 Other Outpatient Care Centers<br/>                     515820 Medical and Diagnostic Laboratories<br/>                     515830 Home Health Care Services<br/>                     515840 Ambulance Services<br/>                     515850 All other Ambulatory Health Care Services<br/>                     515860 General Medical &amp; Surgical Hospitals</p>  | <p>515870 Psychiatric &amp; Substance Abuse Hospitals<br/>                     515880 Specialty Hospitals (except Psychiatric &amp; Substance Abuse)<br/>                     515890 Nursing Care Facilities<br/>                     515900 Residential Mental Retardation Facilities<br/>                     515910 Residential Mental Health &amp; Substance Abuse Facilities<br/>                     515920 Community Care Facilities for the Elderly<br/>                     515930 Other Residential Care Facilities<br/>                     537210 Laboratory Services &amp; Supplies<br/>                     551230 Medical Services to Indigent (from agencies other than DHS)<br/>                     551240 Hospital Services to Indigents (from agencies other than DHS)<br/>                     551250 Other Health Services to Indigents (from agencies other than DHS)<br/>                     515280 Surveying &amp; Mapping (except geophysical) Services<br/>                     515290 Testing Laboratories<br/>                     515300 Interior Design Services<br/>                     515310 Industrial Design Services<br/>                     515320 Graphic Design Services<br/>                     515330 Other Specialized Design Services<br/>                     515350 Custom Computer Programming Services</p>  | <p>515510 Photographic Services<br/>                     515520 Translation &amp; Interpretation Services<br/>                     515530 Veterinary Services<br/>                     515540 All other Professional, Scientific and Technical Services<br/>                     515550 Management of Companies &amp; Enterprises<br/>                     515560 Office Administrative Services<br/>                     515570 Employment Placement Services<br/>                     515580 Business Support Services<br/>                     515590 Document Preparation Services<br/>                     515600 Telephone Call Centers<br/>                     515610 Business Service Centers<br/>                     515620 Collection Agencies<br/>                     515630 Credit Bureaus<br/>                     515640 Other Business Support Services<br/>                     515650 Investigation &amp; Security Services<br/>                     515660 Educational Services<br/>                     515940 Individual &amp; Family Services<br/>                     515950 Community Food &amp; Housing &amp; Emergency &amp; Other Relief Services<br/>                     515960 Vocational Rehabilitation Services<br/>                     515970 Child Day Care Services<br/>                     515980 Arts, Entertainment and Recreation<br/>                     515990 Other Services (except Public Administration)<br/>                     515490 Advertising &amp; Related Services<br/>                     515500 Marketing Research &amp; Public Opinion Polling</p> |
| <p><b><input type="checkbox"/> 7 - NON-EMPLOYEE COMPENSATION</b></p> <p>515010 Office of Lawyers<br/>                     515020 Offices of Notaries<br/>                     515030 Other Legal Services<br/>                     515060 Accounting, Tax Preparation, Bookkeeping &amp; Payroll Services<br/>                     515210 Payments for Contract Mentor Services<br/>                     515220 Architectural Services<br/>                     515230 Landscape Architectural Services<br/>                     515240 Engineering Services<br/>                     515250 Drafting Services<br/>                     515260 Building Inspection Services<br/>                     515270 Geophysical Surveying &amp; Mapping Services<br/>                     515360 Computer Systems Design Services<br/>                     515370 Computer Facilities Management Services<br/>                     515380 Other Computer Related Services<br/>                     515400 Administrative Management &amp; General Management Consult Services<br/>                     515410 Human Resources &amp; Executive Search Consulting Services<br/>                     515420 Marketing Consulting Services<br/>                     515430 Process, Physical Distribution, &amp; Logistics Consulting Services<br/>                     515440 Other Management Consulting Services<br/>                     515450 Environmental Consulting Services<br/>                     515460 Other Scientific &amp; Technical Consulting Services<br/>                     515470 Research &amp; Development in the Physical, Engineering, &amp; Life Sciences<br/>                     515480 Research &amp; Development in the Social Sciences &amp; Humanities</p> | <p>515510 Photographic Services<br/>                     515520 Translation &amp; Interpretation Services<br/>                     515530 Veterinary Services<br/>                     515540 All other Professional, Scientific and Technical Services<br/>                     515550 Management of Companies &amp; Enterprises<br/>                     515560 Office Administrative Services<br/>                     515570 Employment Placement Services<br/>                     515580 Business Support Services<br/>                     515590 Document Preparation Services<br/>                     515600 Telephone Call Centers<br/>                     515610 Business Service Centers<br/>                     515620 Collection Agencies<br/>                     515630 Credit Bureaus<br/>                     515640 Other Business Support Services<br/>                     515650 Investigation &amp; Security Services<br/>                     515660 Educational Services<br/>                     515940 Individual &amp; Family Services<br/>                     515950 Community Food &amp; Housing &amp; Emergency &amp; Other Relief Services<br/>                     515960 Vocational Rehabilitation Services<br/>                     515970 Child Day Care Services<br/>                     515980 Arts, Entertainment and Recreation<br/>                     515990 Other Services (except Public Administration)<br/>                     515490 Advertising &amp; Related Services<br/>                     515500 Marketing Research &amp; Public Opinion Polling</p> | <p>515510 Photographic Services<br/>                     515520 Translation &amp; Interpretation Services<br/>                     515530 Veterinary Services<br/>                     515540 All other Professional, Scientific and Technical Services<br/>                     515550 Management of Companies &amp; Enterprises<br/>                     515560 Office Administrative Services<br/>                     515570 Employment Placement Services<br/>                     515580 Business Support Services<br/>                     515590 Document Preparation Services<br/>                     515600 Telephone Call Centers<br/>                     515610 Business Service Centers<br/>                     515620 Collection Agencies<br/>                     515630 Credit Bureaus<br/>                     515640 Other Business Support Services<br/>                     515650 Investigation &amp; Security Services<br/>                     515660 Educational Services<br/>                     515940 Individual &amp; Family Services<br/>                     515950 Community Food &amp; Housing &amp; Emergency &amp; Other Relief Services<br/>                     515960 Vocational Rehabilitation Services<br/>                     515970 Child Day Care Services<br/>                     515980 Arts, Entertainment and Recreation<br/>                     515990 Other Services (except Public Administration)<br/>                     515490 Advertising &amp; Related Services<br/>                     515500 Marketing Research &amp; Public Opinion Polling</p> |
| <p><b><input type="checkbox"/> 14 - GROSS PROCEEDS TO AN ATTORNEY</b></p> <p>553180 Settlements – Paid To/Thru Attorney</p>  |   |   |