

a. Personnel

PLEASE READ!!!

List costs solely for employees of the entity completing this form (award recipient or sub-recipient). All other personnel costs (of subrecipients or other contractual efforts of the entity preparing this) must be included under f., Contractual. This includes all consultants and FFRDCs.

Identify positions to be supported. Key personnel should be identified by title. All other personnel should be identified either by title or a group category. State the amounts of time (e.g., hours or % of time) to be expended, the composite base pay rate, total direct personnel compensation and identify the rate basis (e.g., actual salary, labor distribution report, technical estimate, state civil service rates, etc.).

Add rows as needed. Formulas/calculations will need to be entered by the preparer of this form. Please enter formulas as shown in the example.

Task # and Title	Position Title	Budget Period 1			Budget Period 2			Budget Period 3			Budget period 4			Budget period 5			Project Total Hours	Project Total Dollars	Rate Basis	
		Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 1	Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 2	Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 1	Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 1	Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 3				
1.	Generation 2A Receiver Design	10000		\$423,000	600		\$24,000								800	\$31,000	11400	\$478,000	Actual Salary	
EXAMPLE	Sr. Engineer	2000	\$85.00	\$170,000	200	\$50.00	\$10,000								200	\$50.00	\$10,000	2400	\$190,000	Actual Salary
ONLY!!!	Electrical engineers	6200	\$35.00	\$217,000	400	\$35.00	\$14,000								600	\$35.00	\$21,000	7200	\$252,000	Actual Salary
	Technician	1800	\$20.00	\$36,000	0	\$0.00	\$0								0	\$0.00	\$0	1800	\$36,000	Actual Salary

Exemption 4

Additional Explanations/Comments (as necessary)

b. Fringe Benefits

	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Total
Rate applied:	Exemption 4					
Total fringe requested:						

A federally approved fringe benefit rate agreement, or a proposed rate supported and agreed upon by DOE for estimating purposes is required if reimbursement for fringe benefits is requested. Please check (X) one of the options below and provide the requested information. Calculate the fringe rate and enter the total amount in Section B, line 6.b. ("Fringe Benefits") of form SF-424A.

A fringe benefit rate has been negotiated with, or approved by, a federal government agency. A copy of the latest rate agreement is included with this application, and will be provided electronically to the Contracting Officer for this project.
**In the area designated below, identify the full calculations used to derive the total fringe costs. See further information below.*

There is not a current, federally approved rate agreement negotiated and available.
*When this option is checked, the entity preparing this form shall submit a rate proposal in the format provided at the following website, or a format that provides the same level of information and which will support the rates being proposed for use in performance of the proposed project. Go to <https://www.eere-pmc.energy.gov/forms.aspx> and select PMC 400.2 Sample Rate Proposal. *
 In the area designated below, identify the full calculations used to derive the total fringe costs. See further information below.*

Additional explanation/comments (as necessary)

***IMPORTANT:** In the space provided below (or as an attachment) provide a complete explanation and the full calculations used to derive the total fringe costs. If the total fringe costs are a cumulative amount of more than one calculation or rate application, the explanation and calculations should identify all rates used, along with the base they were applied to (and how the base was derived), and a total for each (along with grand total). The rates and how they are applied should not be averaged to get one fringe cost percentage. NOTE: The fringe benefit rate should be applied to both the Federal Share and Recipient Cost Share.

c. Travel

PLEASE READ!!!

Provide travel detail as requested below, identifying total Foreign and Domestic Travel as separate items. Purpose of travel are items such as professional conference, DOE sponsored meeting, project management meeting, etc. The Basis for Estimating Costs are items such as past trips, current quotations, Federal Travel Regulations, etc.

All listed travel must be necessary for performance of the Statement of Project Objectives.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Purpose of travel	No. of Travelers	Depart From (not required for domestic travel)	Destination (not required for domestic travel)	No. of Days	Cost per Traveler	Cost per Trip	Basis for Estimating Costs
Budget Period 1							
Domestic Travel							
EXAMPLE ONLY!!! Visit to PV cell mfr to set up vendor agreement	2			2	\$650	\$1,300	Internet prices
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
Domestic Travel subtotal						\$0	
International Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
International Travel subtotal						\$0	
Budget Period 1 Total						\$0	
Budget Period 2							
Domestic Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
Domestic Travel subtotal						\$0	
International Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
International Travel subtotal						\$0	
Budget Period 2 Total						\$0	
Budget Period 3							
Domestic Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
Domestic Travel subtotal						\$0	
International Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
International Travel subtotal						\$0	
Budget Period 3 Total						\$0	
Budget Period 4							
Domestic Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
Domestic Travel subtotal						\$0	
International Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
International Travel subtotal						\$0	
Budget Period 4 Total						\$0	
Budget Period 5							
Domestic Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
Domestic Travel subtotal						\$0	
International Travel							
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
						\$0	
International Travel subtotal						\$0	
Budget Period 5 Total						\$0	
PROJECT TOTAL						\$0	

Additional Explanations/Comments (as necessary)

d. Equipment

PLEASE READ!!!

Equipment is generally defined as an item with an acquisition cost greater than \$5,000 and a useful life expectancy of more than one year. Further definitions can be found at 10 CFR 600 found on the PMC Recipient Resources Forms page at <https://www.eere-pmc.energy.gov/Forms.aspx#regs>.

List all proposed equipment below, providing a basis of cost such as vendor quotes, catalog prices, prior invoices, etc., and briefly justifying its need as it applies to the Statement of Project Objectives. If it is existing equipment, and the value of its contribution to the project budget is being shown as cost share, provide logical support for the estimated value shown. If it is new equipment which will retain a useful life upon completion of the project, provide logical support for the estimated value shown.

For equipment over \$50,000 in price, also include a copy of the associated vendor quote or catalog price list.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Equipment Item	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Budget Period 1					
EXAMPLE ONLY!!! Thermal shock chamber	2	\$20,000	\$40,000	Vendor Quote	Reliability testing of PV modules- Task 4.3
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 1 Total			\$0		
Budget Period 2					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 2 Total			\$0		
Budget Period 3					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 3 Total			\$0		
Budget Period 4					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 4 Total			\$0		
Budget Period 5					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 5 Total			\$0		
PROJECT TOTAL			\$0		

Additional Explanations/Comments (as necessary)

e. Supplies

PLEASE READ!!!

Supplies are generally defined as an item with an acquisition cost of \$5,000 or less and a useful life expectancy of less than one year. Supplies are generally consumed during the project performance. Further definitions can be found at 10 CFR 600 found on the PMC Recipient Resources Forms page at <https://www.eere-pmc.energy.gov/Forms.aspx#regs>.

List all proposed supplies below, providing a bases of cost such as vendor quotes, catalog prices, prior invoices, etc., and briefly justifying the need for the Supplies as they apply to the Statement of Project Objectives. Note that Supply items must be direct costs to the project at this budget category, and not duplicative of supply costs included in the indirect pool that is the basis of the indirect rate applied for this project.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

General Category of Supplies	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Budget Period 1					
EXAMPLE ONLY!!! Wireless DAS components	10	\$360.00	\$3,600	Catalog price	For Alpha prototype - Task 2.4
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 1 Total			\$0		
Budget Period 2					
Exemption 4			Exemption 4		
Budget Period 2 Total					
Budget Period 3					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 3 Total			\$0		
Budget Period 4					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 3 Total			\$0		
Budget Period 5					
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
			\$0		
Budget Period 3 Total			\$0		
PROJECT TOTAL					Exemption 4

Additional Explanations/Comments (as necessary)

f. Contractual

PLEASE READ!!!

The entity completing this form must provide all costs related to sub-recipients, vendors, contractors, consultants and FFRDC partners in the applicable boxes below.

Sub-recipients (partners, sub-awardees):

For each sub-recipient with total project costs of \$100,000 or more, a separate SF-424A budget and PMC123.1 budget justification form must be submitted. These sub-recipient forms may be completed by either the sub-recipients themselves or by the preparer of this form. The budget totals on the sub-recipient's forms must match the sub-recipient entries below.

The preparer of this form need only provide further support of the completed sub-recipient budget forms as they deem necessary. The support to justify the budgets of sub-recipients with estimated costs less than \$100,000 may be in any format, and at a minimum should provide what Statement of Project Objectives task(s) are being performed, the purpose/need for the effort, and a basis of the estimated costs that is considered sufficient for DOE evaluation.

Vendors (includes contractors and consultants):

List all vendors, contractors and consultants supplying commercial supplies or services used to support the project. The support to justify vendor costs (in any amount) should provide the purpose for the products or services and a basis of the estimated costs that is considered sufficient for DOE evaluation.

Federal Research and Development Centers (FFRDCs):

For FFRDC partners, award recipient will provide a Field Work Proposal (if not already provided with the original application), along with the FFRDC labor mix and hours, by category and FFRDC major purchases greater than \$25,000, including Quantity, Unit Cost, Basis of Cost, and Justification. The award recipient may allow the FFRDC to provide this information directly to DOE.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Sub-Recipient Name/Organization	Purpose/Tasks in SOPO	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Budget Period 4 Costs	Budget Period 5 Costs	Project Total
EXAMPLE ONLY!!! XYZ Corp.	Partner to develop optimal fresnel lens for Gen 2 product - Task 2.4	\$48,000	\$32,000			\$16,000	\$96,000
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
Sub-total		\$0	\$0	\$0	\$0	\$0	\$0

Vendor Name/Organization	Product or Service, Purpose/Need and Basis of Cost (Provide additional support at bottom of page as needed)	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Budget Period 4 Costs	Budget Period 5 Costs	Project Total
EXAMPLE ONLY!!! ABC Corp.	Vendor for developing custom robotics to perform lens inspection, alignment, and placement (Task 4). Required for expanding CPV module mfg. capacity. Cost is from competitive quotes.	\$32,900	\$86,500				\$119,400
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
		\$0	\$0	\$0	\$0	\$0	\$0

FFRDC Name/Organization	Purpose	Budget Period 1 Costs	Budget Period 3 Costs	Budget Period 3 Costs	Budget Period 4 Costs	Budget Period 5 Costs	Project Total
							\$0
							\$0
							\$0
		\$0	\$0	\$0	\$0	\$0	\$0
Total Contractual		\$0	\$0	\$0	\$0	\$0	\$0

Additional Explanations/Comments (as necessary)

g. Construction

PLEASE READ!!!

Construction, for the purpose of budgeting, is defined as all types of work done on a particular building, including erecting, altering, or remodeling. Construction conducted by the award recipient is entered on this page. Any construction work that is performed by a vendor or subrecipient to the award recipient should be entered under f. Contractual.

List all proposed construction below, providing a basis of cost such as engineering estimates, prior construction, etc., and briefly justify its need as it applies to the Statement of Project Objectives.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Overall description of construction activities:

Example Only!!! - Build wind turbine platform

General Description	Cost	Basis of Cost	Justification of need
Budget Period 1			
Three days of excavation for platform site EXAMPLE ONLY!!!	\$28,000	Engineering estimate	Site must be prepared for construction of platform.
Budget Period 1 Total	\$0		
Budget Period 2			
Budget Period 2 Total	\$0		
Budget Period 3			
Budget Period 3 Total	\$0		
Budget Period 4			
Budget Period 4 Total	\$0		
Budget Period 5			
Budget Period 5 Total	\$0		
PROJECT TOTAL	\$0		

Additional Explanations/Comments (as necessary)

h. Other Direct Costs

PLEASE READ!!!

Other direct costs are direct cost items required for the project which do not fit clearly into other categories, and are not included in the indirect pool for which the indirect rate is being applied to this project. Examples are meeting costs, postage, couriers or express mail, telephone/fax costs, printing costs, etc.

Basis of cost are items such as vendor quotes, prior purchases of similar or like items, published price list, etc.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

General description	Cost	Basis of Cost	Justification of need
Budget Period 1			
EXAMPLE ONLY!!! Grad student tuition	\$16,000	Established UCD costs	Support of graduate students working on project
Budget Period 1 Total	\$0		
Budget Period 2			
Exemption 4		Exemption 4	
Budget Period 2 Total			
Budget Period 3			
Analytical Services			
Exemption 4		Exemption 4	
Budget Period 3 Total			
Budget Period 4			
Analytical services			
Exemption 4		Exemption 4	
Budget Period 4 Total			
Budget Period 5			
Analytical Services			
Exemption 4		Exemption 4	
Budget Period 5 Total			
PROJECT TOTAL			

Additional Explanations/Comments (as necessary)

This worksheet contains proprietary information that The Dow Chemical Company requests not be released to persons outside the Government, except for purposes of review and evaluation.

i. Indirect Costs

	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Total
Rate applied:	Exemption 4					
Total indirect costs requested:	Exemption 4					

A federally approved indirect rate agreement, or rate proposed supported and agreed upon by DOE for estimating purposes is required if reimbursement of fringe benefits is requested. Please check (X) one of the options below and provide the requested information if it has not already been provided as requested, or has changed. Calculate the indirect rate dollars and enter the total in the Section B., line 6.j. (Indirect Charges) of form SF 424A.

There is a federally approved indirect rate agreement. A copy is provided with this application and will be provided electronically to the Contracting Officer for this project.
**In the area designated below, identify the full calculations used to derive the total indirect costs. See further information below.*

There is no current, federally-approved indirect rate agreement.
*When this option is checked, the entity preparing this form shall submit an indirect cost rate proposal in the format provided at the following website, or in a format that provides the same level of information and which supports the rate(s) being proposed for use in estimating the project. Go to <https://www.eere-pmc.energy.gov/forms.aspx> and select PMC 400.2 Sample Rate Proposal. *In the area designated below, identify the full calculations used to derive the total indirect costs. See further information below.*

Additional Explanations/Comments (as necessary)

***IMPORTANT:** In the space provided below (or as an attachment) provide a complete explanation and the full calculations used to derive the total indirect costs. If the total indirect costs are a cumulative amount of more than one calculation or rate application, the explanation and calculations should identify all rates used, along with the base they were applied to (and how the base was derived), and a total for each (along with grand total). The rates and how they are applied should not be averaged to get one indirect cost percentage. NOTE: The indirect rate should be applied to both the Federal Share and Recipient Cost Share.

This worksheet contains proprietary information that The Dow Chemical Company requests not be released to persons outside the Government, except for purposes of review and evaluation.

There are three indirect cost billing rates which will be applicable on this project:
 R&D Laboratories Exemption 4
 Non-R&D Groups
 Administration Service Expense
 There rates are based on CY 2008 provisional rates.

Cognizant/oversight Agency: Defense Contract Audit Agency
 Person responsible for negotiating indirect rates: Ms. Kristy Mundell, (989)638-9831

Cost Share

PLEASE READ!!!

A detailed presentation of the cash or cash value of all cost share proposed for the project must be provided in the table below. Identify the source & amount of each item of cost share proposed by the award recipient and each sub-recipient or vendor. Letters of commitment must be submitted for all third party cost share (other than award recipient).

Note that "cost-share" is not limited to cash investment. Other items that may be assigned value in a budget as incurred as part of the project budget and necessary to performance of the project, may be considered as cost share, such as: contribution of services or property; donated, purchased or existing equipment; buildings or land; donated, purchased or existing supplies; and/or unrecovered personnel, fringe benefits and indirect costs, etc. For each cost share contribution identified as other than cash, identify the item and describe how the value of the cost share contribution was calculated.

Funds from other Federal sources MAY NOT be counted as cost share. This prohibition includes FFRDC sub-recipients. Non-Federal sources include private, state or local Government, or any source not originally derived from Federal funds. Documentation of cost sharing commitments must be provided, if not already provided with the original application and they have not changed since its submission.

Fee or profit will not be paid to the award recipients or subrecipients of financial assistance awards. Additionally, foregone fee or profit by the applicant shall not be considered cost sharing under any resulting award. Reimbursement of actual costs will only include those costs that are allowable and allocable to the project as determined in accordance with the applicable cost principles prescribed in 10 CFR 600.127, 10 CFR 600.222 or 10 CFR 600.317. Also see 10 CFR 600.318 relative to profit or fee.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Organization/Source	Type (cash or other)	Cost Share Item	Budget Period 1 Cost Share	Budget Period 2 Cost Share	Budget Period 3 Cost Share	Budget Period 4 Cost Share	Budget Period 5 Cost Share	Total Project Cost Share	
ABC Company EXAMPLE ONLY!!!	Cash	Project partner ABC Company will provide 40 PV modules for product development at 50% off the of the retail price of \$680	\$13,600					\$13,600	
The Dow Chemical Company	Exemption 4								
The Dow Chemical Company									
								\$0	
								\$0	
								\$0	
								\$0	
								\$0	
								\$0	
								\$0	
								\$0	
Totals			Exemption 4						\$0

Total Project Cost: \$Exemption 4

Cost Share Percent of Award: Exempt=0%

Additional Explanations/Comments (as necessary)

Applicant Name: The Dow Chemical Company

Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. DE-FOA-0000096	81.087			\$4,625,118	Exemption 4	
2.						
3.						
4.						
5. Totals		\$0	\$0	\$4,625,118		
Section B - Budget Categories						
6. Object Class Categories	Grant Program, Function or Activity				Total (5)	
	(1)	(2)	(3)	(4)		
a. Personnel	Exemption 4					
b. Fringe Benefits						
c. Travel						
d. Equipment						
e. Supplies						
f. Contractual						
g. Construction						
h. Other						
i. Total Direct Charges (sum of 6a-6h)						
j. Indirect Charges						
k. Totals (sum of 6i-6j)						
7. Program Income						\$0

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Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. DE-FOA-0000096	\$1,996,280	Exemption 4		
9.				
10.				
11.				
12. Total (sum of lines 8 - 11)	\$1,996,280			

Section D - Forecasted Cash Needs					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$1,416,520	\$1,156,280	\$1,156,280	\$1,156,280	\$1,156,280
14. Non-Federal	Exemption 4				
15. Total (sum of lines 13 and 14)					

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project				
(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16. DE-FOA-0000096	\$2,204,485	\$428,295	\$292,522	\$299,651
17.				
18.				
19.				
20. Total (sum of lines 16-19)	\$2,204,485	\$428,295	\$292,522	\$299,651

Section F - Other Budget Information	
21. Direct Charges	22. Indirect Charges
23. Remarks	

Applicant Name: The Dow Chemical Company

Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. DE-FOA-0000096	81.087			\$1,416,520	Exemption 4	
2.						
3.						
4.						
5. Totals		\$0	\$0	\$1,416,520		

Section B - Budget Categories					
6. Object Class Categories	Grant Program, Function or Activity				Total (5)
	(1) Budget Period 1	(2)	(3)	(4)	
a. Personnel	Exemption 4				
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. Totals (sum of 6i-6j)					
7. Program Income					\$0

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Section C - Non-Federal Resources

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. DE-FOA-0000096	\$354,130			\$354,130
9.				\$0
10.				\$0
11.				\$0
12. Total (sum of lines 8 - 11)	\$354,130	\$0	\$0	\$354,130

Section D - Forecasted Cash Needs

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$0				
14. Non-Federal	\$0				
15. Total (sum of lines 13 and 14)	\$0	\$0	\$0	\$0	\$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project

(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17.				
18.				
19.				
20. Total (sum of lines 16-19)	\$0	\$0	\$0	\$0

Section F - Other Budget Information

21. Direct Charges	22. Indirect Charges
23. Remarks	

Applicant Name: The Dow Chemical Company

Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1. DE-FOA-0000096	81.087			\$2,204,485	Exemption 4	
2.						
3.						
4.						
5. Totals		\$0	\$0	\$2,204,485		

Section B - Budget Categories

6. Object Class Categories	Grant Program, Function or Activity				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	Exemption 4				
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. Totals (sum of 6i-6j)					
7. Program Income					\$0

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Section C - Non-Federal Resources

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. DE-FOA-0000096	\$740,678			\$740,678
9.				\$0
10.				\$0
11.				\$0
12. Total (sum of lines 8 - 11)	\$740,678	\$0	\$0	\$740,678

Section D - Forecasted Cash Needs

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$0				
14. Non-Federal	\$0				
15. Total (sum of lines 13 and 14)	\$0	\$0	\$0	\$0	\$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project

(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17.				
18.				
19.				
20. Total (sum of lines 16-19)	\$0	\$0	\$0	\$0

Section F - Other Budget Information

21. Direct Charges	22. Indirect Charges
--------------------	----------------------

23. Remarks

Applicant Name: The Dow Chemical Company

Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. DE-FOA-0000096	81.087			\$428,295	Exemption 4	
2.						
3.						
4.						
5. Totals		\$0	\$0	\$428,295		
Section B - Budget Categories						
6. Object Class Categories	Grant Program, Function or Activity				Total (5)	
	(1)	(2)	(3)	(4)		
a. Personnel	Exemption 4					
b. Fringe Benefits						
c. Travel						
d. Equipment						
e. Supplies						
f. Contractual						
g. Construction						
h. Other						
i. Total Direct Charges (sum of 6a-6h)						
j. Indirect Charges						
k. Totals (sum of 6i-6j)						
7. Program Income					\$0	

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Page 1 of 2

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Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. DE-FOA-0000096	\$317,074			\$317,074
9.				\$0
10.				\$0
11.				\$0
12. Total (sum of lines 8 - 11)	\$317,074	\$0	\$0	\$317,074

Section D - Forecasted Cash Needs					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$0				
14. Non-Federal	\$0				
15. Total (sum of lines 13 and 14)	\$0	\$0	\$0	\$0	\$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project				
(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17.				
18.				
19.				
20. Total (sum of lines 16-19)	\$0	\$0	\$0	\$0

Section F - Other Budget Information	
21. Direct Charges	22. Indirect Charges

23. Remarks

Applicant Name: The Dow Chemical Company

Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. DE-FOA-0000096	81.087			\$292,522	Exemption 4	
2.						
3.						
4.						
5. Totals		\$0	\$0	\$292,522		
Section B - Budget Categories						
6. Object Class Categories	Grant Program, Function or Activity				Total (5)	
	(1)	(2)	(3)	(4)		
a. Personnel	Exemption 4					
b. Fringe Benefits						
c. Travel						
d. Equipment						
e. Supplies						
f. Contractual						
g. Construction						
h. Other						
i. Total Direct Charges (sum of 6a-6h)						
j. Indirect Charges						
k. Totals (sum of 6i-6j)						
7. Program Income						\$0

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Page 1 of 2

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Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. DE-FOA-0000096	\$283,131			\$283,131
9.				\$0
10.				\$0
11.				\$0
12. Total (sum of lines 8 - 11)	\$283,131	\$0	\$0	\$283,131

Section D - Forecasted Cash Needs					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$0				
14. Non-Federal	\$0				
15. Total (sum of lines 13 and 14)	\$0	\$0	\$0	\$0	\$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project				
(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17.				
18.				
19.				
20. Total (sum of lines 16-19)	\$0	\$0	\$0	\$0

Section F - Other Budget Information	
21. Direct Charges	22. Indirect Charges

23. Remarks

Applicant Name: The Dow Chemical Company

Award Number: _____

Budget Information - Non Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. DE-FOA-0000096	81.087			\$299,651	Exemption 4	
2.						
3.						
4.						
5. Totals		\$0	\$0	\$299,651		

Section B - Budget Categories

6. Object Class Categories	Grant Program, Function or Activity				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	Exemption 4				
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. Totals (sum of 6i-6j)					
7. Program Income					\$0

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Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. DE-FOA-0000096	\$284,912			\$284,912
9.				\$0
10.				\$0
11.				\$0
12. Total (sum of lines 8 - 11)	\$284,912	\$0	\$0	\$284,912

Section D - Forecasted Cash Needs					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$0				
14. Non-Federal	\$0				
15. Total (sum of lines 13 and 14)	\$0	\$0	\$0	\$0	\$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project				
(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17.				
18.				
19.				
20. Total (sum of lines 16-19)	\$0	\$0	\$0	\$0

Section F - Other Budget Information	
21. Direct Charges	22. Indirect Charges

23. Remarks

U.S. DEPARTMENT OF ENERGY
PROJECT MANAGEMENT CENTER



PRE-AWARD INFORMATION SHEET

Awardee Name:	Algenol Biofuels Inc.
Award Number:	
Awardee Business Officer:	Katie McFadden
Awardee Project Director:	Craig R. Smith, M.D.

Employer/Taxpayer Identification Number (EIN/TIN):	REDACTED EXEMPTION 6
Data Universal Numbering System (DUNS):	800399904

For assistance in obtaining a DUNS Number, call Dunn & Bradstreet at 1-800-333-0505.
The Applicant should be prepared to provide the following information to Dunn & Bradstreet:
(1) Company name
(2) Company address
(3) Company telephone number
(4) Line of business
(5) Chief executive officer/key manager
(6) Date the company was started
(7) Number of people employed by the company
(8) Company affiliation

A. TYPE OF BUSINESS - the Awardee is a:

- For-Profit Organization (Other than Small Business)
 - Corporation
 - Partnership
 - Sole Proprietorship
- Government
 - Local Government
 - State Government
 - Indian Tribal Government
- Individual
- Institution of Higher Education
- Other NonProfit Organization
- Small Business
- Other (specify):

If NonProfit, select one below:

- A university or other institution of higher education or an organization of the type described in Section 501(c)(3) of the Internal Revenue Code of 1954 (26 USC 501(c)) and exempt from taxation under Section 501(a) of the Internal Revenue Code (26 USC 501(a)); or
- An organization of the type described in Section 501(c)(4) of the Internal Revenue Code of 1954 (26 USC 501(c)) and exempt from taxation under Section 501(a) of the Internal Revenue Code (26 USC 501(a)); or
- An organization of the type described in Section 501(c)(6) of the Internal Revenue Code of 1954 (26 USC 501(c)) and exempt from taxation under Section 501(a) of the Internal Revenue Code (26 USC 501(a)); or
- A nonprofit scientific or educational organization qualified under a State nonprofit organization statute. (Please identify the statute.); or
- Other (specify type):

Is the Applicant a member of the Federal Demonstration Partnership (FDP)? Yes No
A listing of FDP members is available at http://www.thefdp.org/FDP_Members.html.

B. INTELLECTUAL PROPERTY

1. WAIVER OF DOE PATENT RIGHTS

This section applies only to large businesses and nonprofits other than 501(c)(3) organizations. All others should leave this subsection blank and proceed to the "Rights in Application Data" subsection that follows. Large businesses and nonprofits other than 501(c)(3) organizations have the right to request, in advance or within 30 days after execution of an award, in accordance with applicable statutes and DOE Patent Waiver Regulation (10 CFR 784), a waiver of all or any part of the rights of the United States in Subject Inventions. Accordingly, please check all that apply:

- I intend to request an advance waiver in accordance with 10 CFR 784.
- I intend to request an advance waiver on behalf of one or more subrecipients/subcontractors.
- I have at least one subrecipient/subcontractor that will request a waiver on its own behalf.
- I do not intend to request an advance waiver.

2. RIGHTS IN APPLICATION DATA

For an award based on an application/proposal, the Government will obtain unlimited rights in the technical data contained in the application/proposal, unless the Awardee marks those portions of the technical information which it asserts as "proprietary data" or specifies those portions of such technical data which are not directly related to or will not be utilized in the work to be funded under this award.

Accordingly, please indicate:

- No restrictions on Government rights in technical data contained in the application/proposal; or
- The application/proposal contains the following identified technical data that is proprietary, or is not directly related to, or will not be utilized in the work to be funded under this award.

Please list specific page numbers, table numbers, etc., and the dated version of the application/proposal to which you refer:

The data contained on pages 6-10 of the Project Narrative; pages 3-6 and 12-13 of Environmental Questionnaire; pages 1-10, 16-18 and 20 of the Business and Commercialization Plan; and pages 2-4 of the IP Statement and all information contained in the files named Lifecycle Energy and Greenhouse Gas Emissions, SF424A, Budget, Subaward Budget Files, Process Flow Diagram, Project Management Plan and Project Executive Plan have been submitted in confidence and contain trade secrets or proprietary information, and such data shall be used or disclosed only for evaluation purposes, provided that if this applicant receives an award as a result of or in

connection with the submission of this application, DOE shall have the right to use or disclose the data herein to the extent provided in the award.

All existing data on our process, procedures and know-how embody trade secrets, commercial and financial data that are confidential and privileged.

Paragraphs in this application's respective files that are preceded by an asterisk (*) contain proprietary information that Algenol Biofuels requests not be released to persons outside the Government, except for the purposes of review and evaluation.

3. IDENTIFICATION OF LIMITED RIGHTS DATA AND RESTRICTED COMPUTER SOFTWARE

Below, please identify any Limited Rights Data or Restricted Computer Software you plan to use to carry out your work under the award. Limited Rights Data means data (other than computer software) developed at private expense that embody trade secrets or are commercial or financial, and confidential or privileged. Restricted Computer Software means computer software developed at private expense and that is a trade secret, is commercial or financial, and confidential or privileged, or is published, copyrighted computer software, to include modifications of the computer software.

Please note that these data do not include data that you will produce under this award. Data that is first produced under this award is treated separately under the data rights clause of this award. This section covers only those data that you bring into this award that were privately funded.

If you plan to use Limited Rights Data or Restricted Computer Software under the award, please describe it in a few sentences or bullets, with sufficient detail that the DOE Project Officer can determine whether DOE will need to have any of it delivered, for example, to validate your results or the data produced under the award. You are not required to list issued patents or published patent applications. You do need to list unpublished patent applications (by title and brief description) and trade secret processes (by non-proprietary title with brief, non-proprietary description). If you have questions regarding the completion of this section, please contact the Contract Specialist handling your award.

Based on the above, please review the requirements in the technical scope of work for this award and indicate, to the best of your knowledge:

- No Limited Rights Data will be utilized in the performance of this award.
- Limited Rights Data as follows will be utilized in the performance of this award.

Use this block to provide additional information or provide an attachment:

All existing data on our process, procedures and know-how embody trade secrets, commercial and financial data that are confidential and privileged.

Based on the above, please review the requirements in the technical scope of work for this award and indicate, to the best of your knowledge:

- Awardee Restricted Computer Software will NOT be utilized in the performance of this award.
- Awardee Restricted Computer Software as follows will be utilized in the performance of this award.

Use this block to provide additional information or provide an attachment:

Attached please find the Process Flow Diagram that was included the application. The Supervisory Control and Data Acquisition system is described on pages 28-35. As well, the Vapor Compression Steam Stripper control system is described on pages 14-23. These systems are privileged and confidential restricted computer software.

C. PROJECT PERFORMANCE SITE and CONGRESSIONAL DISTRICT

List the address and congressional district for the primary site where the work will be performed:

Street Address:	2301 N Brazosport Blvd. APB 2436
City:	Freeport
State:	TX
Zip:	77541
Congressional District:	TX-14th

If a portion of the work will be performed at any other site(s), identify those site(s) below, and indicate what portion of the effort will be performed at this/these site(s):

Street Address:	16121 Lee Road
City:	Ft. Myers
State:	FL
Zip:	33912
Congressional District:	FL-14th

Briefly describe portion of effort for this Site:	Algenol is in the process of consolidating already established research and development activities at this location. Research and development activities detailed in our application will be located at this facility.
---	--

Street Address:	2805 B Road
City:	Loxahatchee
State:	Florida
Zip:	33470
Congressional District:	FL-16th

Briefly describe portion of effort for this Site:	The process development unit detailed in the application will be located at this site.
---	--

Street Address:	1700 Union AVE, Suite A
City:	Baltimore
State:	Maryland
Zip:	21211
Congressional District:	MD-3rd

Briefly describe portion of effort for this Site:	On-going research and development activities detailed in the application will continue to be conducted at this site.
---	--

D. INVOICING AND PAYMENTS

1. Has the Awardee received any prior DOE awards administered by the Golden Field Office (GO)?

Yes

If yes, please list the most recent award number: _____

No

2. Is the Awardee currently enrolled with the U.S. Department of Treasury / ASAP system (Automated Standard Application for Payment System) under the DOE / Golden Field Office (GO) Agency Locator Code (ALC) and Region Code (#8900-0001-04)?

Yes

Enter Awardee Seven-digit ASAP ID Number: _____

No

3. Please provide the following contact information for ASAP and/or Payments:

IMPORTANT: If not currently enrolled in the ASAP system under GO's ALC and Region Code, the person identified below will be contacted by the U.S. Department of Treasury with further instruction on completing the ASAP enrollment process.

ASAP / Payments Contact Person: Katie McFadden

Phone No.: (239) 498-2000 Extension: _____ E-mail: Katie.mcfadden@algenolbiofuels.com

4. Indicate preferred payment method below: (NOTE: this section is reserved for universities, hospitals, other non-profit organizations and state and local governments that are authorized Advance Payment Procedures, unless a specific need is supported. All other entities desiring advance payment should discuss with the DOE Award Administrator.)

Payment by Advance is preferred. (SF 272 reporting will be required.)

Payment by Reimbursement is preferred. (SF 272 reporting will not be required.)

5. Indicate the name, phone number, and email address of the Designated Responsible Employee for complying with national policies prohibiting discrimination (see 10 CFR 1040.5 and the Certifications and Assurances found at <http://management.energy.gov/documents/CERTSASSUR.doc>).

Craig R. Smith, M.D.
Name

(239) 498-2000
Telephone Number

Chief Operating Officer
Title

Craig.smith@algenolbiofuels.com
Email Address

REPRESENTATION/CERTIFICATION

I represent by my signature below that all the information provided by this form is accurate.

Name: Craig R. Smith, M.D.

Title: Chief Operating Officer

Signature of Authorized
Company Official: *Craig R. Smith, M.D.*

Date: 1/4/10

Applicant Name Algenol Biofuels Inc.

Announcement Number DE-FOA-000009

Representation of Limited Rights Data and Restricted Computer Software

- (a) Any data delivered under an award resulting from this announcement is subject to the Rights in Data – General or the Rights in Data – Programs Covered Under Special Data Statutes clause (See Intellectual Property Provisions at http://www.gc.energy.gov/financial_assistance_awards.htm). Under these clauses, the Recipient may withhold from delivery data that qualify as limited rights data or restricted computer software. As an aid in determining the Government’s need to include Alternate I and/or Alternate II in these clauses, which allow for delivery of limited rights data and/or restricted computer software, the applicant must complete paragraph (b) below to either state that none of the data involved in the proposed work effort qualify as limited rights data or restricted computer software, or identify, to the extent feasible, which of the data qualifies as limited rights data or restricted computer software. Any identification of limited rights data or restricted computer software in this application is not determinative of the status of such data should an award be made.
- (b) The applicant has reviewed the proposed work effort and the requirements for the delivery of data or software and states:
- None of the data proposed for fulfilling such requirements qualifies as limited rights data or restricted computer software.
- Data proposed for fulfilling such requirements qualify as limited rights data or restricted computer software and are identified as follows:

The data contained on pages 6-10 of the Project Narrative; pages 3-6 and 12-13 of Environmental Questionnaire; pages 1-10, 16-18 and 20 of the Business and Commercialization Plan; and pages 2-4 of the IP Statement and all information contained the files named Lifecycle Energy and Greenhouse Gas Emissions, SF424A, Budget, Subaward Budget Files, Process Flow Diagram, Project Management Plant and Project Executive Plan have been submitted in confidence and contain trade secrets or proprietary information, and such data shall be used or disclosed only for evaluation purposes, provided that if this applicant receives an award as a result of or in connection with the submission of this application, DOE shall have the right to use or disclose the data herein to the extent provided in the award.

All existing data on our process, procedures and know-how embody trade secrets, commercial and financial data that are confidential and privileged.

Paragraphs in the application’s respective files that are preceded by an asterisk (*) contain proprietary information that Algenol Biofuels requests not be released to persons outside the Government, except for the purposes of review and evaluation.

Note: "limited rights data" and "restricted computer software" are defined in provision "Rights in Data – General."

Direct Fringe Indirect Jnallowabl Allowable Indirects

Income
Total Income

^E Exemption 4

Exemption 4

Salaries (Indirect + Direct)
Fringe Benefits

Fringe Rate

Indirects Pool
Base (Total Direct Costs)

Indirect Rate

Exemption 4

U.S. DEPARTMENT OF ENERGY
PROJECT MANAGEMENT CENTER



FINANCIAL INFORMATION

PROVIDE ALL INFORMATION REQUESTED ON THIS FORM

Applicant: **Algenol Biofuels Inc.**
Project Title: **Pilot-Scale Integrated Biorefinery Operations for Producing Ethanol from Hybrid Algae**
Announcement/Award No: **DE-FOA-0000096 /**

- 1. Have you had prior Federal awards? Yes No
- 2. Have you had an outside audit or an A-133 audit? Yes No
If yes, please provide a copy of the A-133 or outside audit (electronic preferred).

INFORMATION FOR DETERMINING COGNIZANT AGENCY/OFFICE

- 3. Applicant's fiscal year end date is December 31st
- 4a. Identify Cognizant **Federal Agency** (agency providing the preponderance of Federal funding), and provide Agency name, a point of contact, phone number, and e-mail.

Agency: Department of Energy
Point of Contact: Christy Sterner
Phone: 303-275-4720
E-mail:Christy.sterner@go.doe.gov

- 4b. To assist our office in validating Cognizant **Federal Agency** (4a), please provide following information for the 5 highest dollar award value for current Federal contracts, grants or awards (do not include sub-awards). (State Agencies and Universities can skip 4b)

Contract/Award #	Awarding Agency	Awarding Office	Start Date	End Date	Total Value

- 5a. If applicant has current DOE awards, identify Cognizant **DOE Office** (office providing the preponderance of DOE funding), and provide DOE office name, a point of contact, phone number, and e-mail.

DOE Office:
Point of Contact (Contracting Officer):
Phone:
E-mail:

5b. To assist our office in validating Cognizant **DOE Office** (5a), please provide following information for the 5 highest dollar value awards for current DOE contracts, grants or awards (do not include sub-awards). (State agencies and Universities can skip 5b)

DOE Contract/Award #	DOE Awarding Office	Start Date	End Date	Total Value

FINANCIAL MANAGEMENT SYSTEM

To qualify for Financial Assistance, compliance with 10 CFR 600.121 - Higher Education, Hospitals, and Other Non-Profit Organizations, 10 CFR 600.220(b) - State and Local Governments or 10 CFR 600.311 - For-Profit Organizations is required. Please check applicable boxes below.

- The Financial Management System is in compliance with 10 CFR 600.121, 10 CFR 600.220(b), or 10 CFR 600.311.
- I do not know if my Financial Management System is in compliance with 10 CFR 600.121, 10 CFR 600.220(b), or 10 CFR 600.311. If this block is checked, complete the survey below.

Accounting System Survey

	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Is your Accounting System in accordance with Generally Accepted Accounting Principles applicable to the circumstances?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Accounting System provides for:			
a. Segregation of direct costs from indirect costs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Identification and accumulation of direct costs by project.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. A logical and consistent method for the allocation of indirect costs to intermediate and final cost objectives. (Project is final cost objective)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Accumulation of costs under general ledger control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. A timekeeping system that identifies employees' labor by intermediate and final cost objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. A labor distribution system that charges direct and indirect labor to appropriate cost objectives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Interim (at least monthly) determination of costs charged to a project through routine posting of books of account.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Excluding costs charged to Government projects which are not allowable in terms of FAR 31, Contract Cost Principles and Procedures, or other provisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Identification of costs by project line item and by units (as if each unit or line item were a separate project) if required by the proposed award.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the Accounting System designed, and are the records maintained in such a manner that adequate, reliable data are developed for use in developing cost proposals?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the Accounting System currently in full operation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Instructions and Summary

Award Number: DE-FOA-0000096
 Award Recipient: Algenol Biofuels Inc.

Date of Submission: Jan-10
 Form submitted by: Algenol Biofuels Inc.
 (May be award recipient or sub-recipient)

**Please read the instructions on each page before starting.
 If you have any questions, please ask your DOE contact. It will save you time!**

On this form, provide detailed support for the estimated project costs identified on the SF-424A form (Budget).

- The dollar amounts on this page must match the amounts on the associated SF-424A.
- The award recipient and each sub-recipient with estimated costs of \$100,000 or more must complete this form and a SF-424A form.
- The total budget presented on this form and on the SF424A must include both Federal (DOE), and Non-Federal (cost share) portions, thereby reflecting TOTAL PROJECT COSTS proposed.
- For costs in each Object Class Category on the SF-424A, complete the corresponding worksheet on this form (tab at the bottom of the page).
- All costs incurred by the preparer's sub-recipients, vendors, contractors, consultants and Federal Research and Development Centers (FFRDCs), should be entered only in section f. Contractual. All other sections are for the costs of the preparer only.

SUMMARY OF BUDGET CATEGORY COSTS PROPOSED

(Note: The values in this summary table are from entries made in each budget category sheet.)

CATEGORY	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Total Costs	Project Costs %	Comments (Add comments as needed)
a. Personnel	Exemption 4					
b. Fringe Benefits						
c. Travel						
d. Equipment						
e. Supplies						
f. Contractual						
Sub-recipient						
FFRDC						
Vendor						
Total Contractual						
g. Construction						
h. Other Direct Costs						
i. Indirect Charges						
Total Project Costs						

Additional Explanations/Comments (as necessary)

a. Personnel

Task #	Title	Position Title	Budget Period 1			Budget Period 2			Budget Period 3			Project Total Hours	Project Total Dollars
			Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 1	Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 2	Time (Hours)	Pay Rate (\$/Hr)	Total Budget Period 3		
1.	Generation 2A Receiver Design		10000		\$423,000	600		\$24,000	800		\$31,000	11400	
EXAMPLE	Sr. Engineer		2000	\$85.00	\$170,000	200	\$50.00	\$10,000	200	\$50.00	\$10,000	2400	
ONLY!!!	Electrical engineers		6200	\$35.00	\$217,000	400	\$35.00	\$14,000	600	\$35.00	\$21,000	7200	
	Technician		1800	\$20.00	\$36,000	0	\$0.00	\$0	0	\$0.00	\$0	1800	

Exemption 4

Exemption 4

Exemption 4

Total Personnel Costs	Exemption 4
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Additional Explanations/Comments (as necessary)

For existing employees, salary rates were based on actual. For new hires, their salary was based on industry standards for their respective position, experience and education. In all cases, we will be Davis-Bacon compliant. /s/ Craig R. Smith, M.D.

b. Fringe Benefits

	Budget Period 1	Budget Period 2	Budget Period 3	Total
Rate applied:	Exemption 4			
Total fringe requested:				

A federally approved fringe benefit rate agreement, or a proposed rate supported and agreed upon by DOE for estimating purposes is required if reimbursement for fringe benefits is requested. Please check (X) one of the options below and provide the requested information, if it has not already been provided to the Contracting Officer, OR if it has changed since it was. Calculate the fringe rate and enter the total amount in Section B, line 6.b. ("Fringe Benefits") of form SF-424A.

A fringe benefit rate has been negotiated with, or approved by, a federal government agency. A copy of the latest rate agreement is included with this application, and will be provided electronically to the Contracting Officer for this project.
(When this option is selected, a presentation of the budget that demonstrates the application of the approved rate, to arrive at the proposed fringes benefits dollars should also be provided.)

There is not a current, federally approved rate agreement negotiated and available.
(When this option is checked, the entity preparing this form shall submit a rate proposal in the format provided at the following website, or a format that provides the same level of information and which will support the rates being proposed for use in performance of the proposed project. Go to <https://www.eere-pmc.energy.gov/forms.aspx> and select PMC 400.2 Sample Rate Proposal.)

Additional explanation/comments (as necessary)

The Fringe Benefits rate is based on current actual and adjusted in the future periods for projected hiring salary levels. Currently a larger portion of our employees are senior level and as we expand they will represent a smaller portion of our staff. Since the majority of our fringe benefits is for healthcare insurance, the effect of this demographic change is that fringe benefits will be a higher percent of compensation. Please see the Indirect tab at the end of this file for the Fringe calculation.

c. Travel

PLEASE READ!!!

Provide travel detail as requested below, identifying total Foreign and Domestic Travel as separate items. Purpose of travel are items such as professional conference, DOE sponsored meeting, project management meeting, etc. The Basis for Estimating Costs are items such as past trips, current quotations, Federal Travel Regulations, etc.

All listed travel must be necessary for performance of the Statement of Project Objectives.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Purpose of travel	No. of Travelers	Depart From (not required for domestic travel)	Destination (not required for domestic travel)	No. of Days	Cost per Traveler	Cost per Trip	Basis for Estimating Costs
Budget Period 1							
Domestic Travel							
EXAMPLE ONLY!!! Visit to PV cell mfr. to set up vendor agreement	2			2	\$650	\$1,300	Internet prices
Exemption 4	Exemption 4						
Domestic Travel subtotal							
International Travel							
International Travel subtotal							
Budget Period 1 Total							
Budget Period 2							
Domestic Travel							
Exemption 4	Exemption 4						

Purpose of travel	No. of Travelers	Depart From (not required for domestic travel)	Destination (not required for domestic travel)	No. of Days	Cost per Traveler	Cost per Trip	Basis for Estimating Costs
Exemption 4	Exemption 4						
Domestic Travel subtotal							
International Travel							
International Travel subtotal							
Budget Period 2 Total							
Budget Period 3							
Domestic Travel							
Exemption 4	Exemption 4						
Domestic Travel subtotal							
International Travel							
International Travel subtotal							
Budget Period 3 Total							
PROJECT TOTAL							

Additional Explanations/Comments (as necessary)

In the interest of having a more reader-friendly schedule, column B above represents the number of trips, not the number of travelers on each trip (e.g. Exemption 4). The general assumption (based on past experience) is that each trip would be Exemption 4. We anticipated lower hotel rates due to the volume and ability to book in advance.

d. Equipment

PLEASE READ!!!

Equipment is generally defined as an item with an acquisition cost greater than \$5,000 and a useful life expectancy of more than one year. Further definitions can be found at 10 CFR 600 found on the PMC Recipient Resources Forms page at <https://www.eere-pmc.energy.gov/Forms.aspx#regs> .

List all proposed equipment below, providing a basis of cost such as vendor quotes, catalog prices, prior invoices, etc., and briefly justifying its need as it applies to the Statement of Project Objectives. If it is existing equipment, and the value of its contribution to the project budget is being shown as cost share, provide logical support for the estimated value shown. If it is new equipment which will retain a useful life upon completion of the project, provide logical support for the estimated value shown.

For equipment over \$50,000 in price, also include a copy of the associated vendor quote or catalog price list.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Equipment Item	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Budget Period 1					
EXAMPLE ONLY!!! Thermal shock chamber	2	\$20,000	\$40,000	Vendor Quote	Reliability testing of PV modules- Task 4.3
	0		\$0		
	0		\$0		
	0		\$0		
	0		\$0		
	0		\$0		
	0		\$0		
	0		\$0		
Budget Period 1 Total			\$0		
Budget Period 2					
	Exemption 4				
Lab equipment - see attached detail sheet					
Office equipment and set-up - see attached detail					
Budget Period 2 Total					
Budget Period 3					
	0		\$0		

Equipment Item	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
	Exemption 4				
Budget Period 3 Total					
PROJECT TOTAL					

Additional Explanations/Comments (as necessary)

At the end of this file there are 2 tabs, one for Lab equipment the other for Office equipment which details the above amounts by item. Basis for quotes include vendor quotes, known actual and catalogs.

e. Supplies

PLEASE READ!!!

Supplies are generally defined as an item with an acquisition cost of \$5,000 or less and a useful life expectancy of less than one year. Supplies are generally consumed during the project performance. Further definitions can be found at 10 CFR 600 found on the PMC Recipient Resources Forms page at <https://www.eere-pmc.energy.gov/Forms.aspx#regs>.

List all proposed supplies below, providing a bases of cost such as vendor quotes, catalog prices, prior invoices, etc., and briefly justifying the need for the Supplies as they apply to the Statement of Project Objectives. Note that Supply items must be direct costs to the project at this budget category, and not duplicative of supply costs included in the indirect pool that is the basis of the indirect rate applied for this project.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

General Category of Supplies	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Budget Period 1					
EXAMPLE ONLY!!! Wireless DAS components	10	\$360.00	\$3,600	Catalog price	For Alpha prototype - Task 2.4
	0		\$0		
	0		\$0		
	0		\$0		
Budget Period 1 Total			\$0		
Budget Period 2					
	0		\$0		
	0		\$0		
	0		\$0		
	0		\$0		
Budget Period 2 Total			\$0		
Budget Period 3					
	0		\$0		

General Category of Supplies	Qty	Unit Cost	Total Cost	Basis of Cost	Justification of need
Analytical supplies	Exemption 4				
Chemicals, solvents, polymers					
Disposable lab supplies (e.g. gloves)					
Safety supplies					
Minor engineering equipment					
Budget Period 3 Total					
PROJECT TOTAL					

Additional Explanations/Comments (as necessary)

The above was based on our historic usage and cost rates. These supplies are required in the normal course of running a biorefinery and for lab analysis and monitoring.

f. Contractual

Sub-Recipient Name/Organization	Purpose/Tasks in SOPO	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Project Total
EXAMPLE ONLY!!! XYZ Corp.	Partner to develop optimal fresnel lens for Gen 2 product - Task 2.4	\$48,000	\$32,000	\$16,000	\$96,000
Georgia Tech	Exemption 4				
MTR - Membrane Technology and Research, Inc.					
The Dow Chemical Company					

Vendor Name/Organization	Product or Service, Purpose/Need and Basis of Cost (Provide additional support at bottom of page as needed)	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Project Total
EXAMPLE ONLY!!! ABC Corp.	Vendor for developing custom robotics to perform lens inspection,	\$32,900	\$86,500		\$119,400
Exemption 4					

Sub-Recipient Name/Organization	Purpose/Tasks in SOPO	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Project Total
Exemption 4					

Sub-Recipient Name/Organization	Purpose/Tasks in SOPO	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Project Total
Exemption 4					

FFRDC Name/Organization	Purpose	Budget Period 1 Costs	Budget Period 2 Costs	Budget Period 3 Costs	Project Total
NREL- National Renewable Energy Laboratory	Exemption 4				

Total Contractual	Exemption 4				
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g. Construction

PLEASE READ!!!

Construction, for the purpose of budgeting, is defined as all types of work done on a particular building, including erecting, altering, or remodeling. Construction conducted by the award recipient is entered on this page. Any construction work that is performed by a vendor or subrecipient to the award recipient should be entered under f. Contractual.

List all proposed construction below, providing a basis of cost such as engineering estimates, prior construction, etc., and briefly justify its need as it applies to the Statement of Project Objectives.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Overall description of construction activities:

Example Only!!! - Build wind turbine platform

General Description	Cost	Basis of Cost	Justification of need
Budget Period 1			
Three days of excavation for platform site EXAMPLE ONLY!!!	\$28,000	Engineering estimate	Site must be prepared for construction of platform.
Budget Period 1 Total	\$0		
Budget Period 2			
Budget Period 2 Total	\$0		

General Description	Cost	Basis of Cost	Justification of need
Budget Period 3			
Budget Period 3 Total	\$0		
PROJECT TOTAL	\$0		

Additional Explanations/Comments (as necessary)

Construction will be sub-contracted, one of our sub-recipient partners, The Dow Chemical Company, will provide ground clearing/ land prep work while the actual construction contractor is TBD. These amounts have been included on the Contractual tab. At the end of the this file there is a tab, Construct Recon, which summarizes the the capitalized costs.

h. Other Direct Costs

PLEASE READ!!!

Other direct costs are direct cost items required for the project which do not fit clearly into other categories, and are not included in the indirect pool for which the indirect rate is being applied to this project. Examples are meeting costs, postage, couriers or express mail, telephone/fax costs, printing costs, etc.

Basis of cost are items such as vendor quotes, prior purchases of similar or like items, published price list, etc.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

General description	Cost	Basis of Cost	Justification of need
Budget Period 1			
EXAMPLE ONLY!!! Grad student tuition	\$16,000	Established UCD costs	Support of graduate students working on project
Budget Period 1 Total			
Budget Period 2			
Exemption 4		Exemption 4	
Budget Period 2 Total			
Budget Period 3			
	\$0		

General description	Cost	Basis of Cost	Justification of need
Exemption 4			

i. Indirect Costs

	Budget Period 1	Budget Period 2	Budget Period 3	Total
Rate applied:	Exemption 4			
Total indirect costs requested:				

A federally approved indirect rate agreement, or rate proposed supported and agreed upon by DOE for estimating purposes is required if reimbursement of fringe benefits is requested. Please check (X) one of the options below and provide the requested information if it has not already been provided as requested, or has changed. Calculate the indirect rate dollars and enter the total in the Section B., line 6.j. (Indirect Charges) of form SF 424A.

There is a federally approved indirect rate agreement. A copy is provided with this application and will be provided electronically to the Contracting Officer for this project.
(When this option is selected, a presentation of the budget that demonstrates the application of the approved rate, to arrive at the proposed indirect charges proposed should also be provided.)

There is no current, federally-approved indirect rate agreement.
(When this option is checked, the entity preparing this form shall submit an indirect cost rate proposal in the format provided at the following website, or in a format that provides the same level of information and which supports the rate(s) being proposed for use in estimating the project. Go to <https://www.eere-pmc.energy.gov/forms.aspx> and select PMC 400.2 Sample Rate Proposal.)

Additional Explanations/Comments (as necessary)

Please see the Indirect Proposal tab at the end of this file for indirects calculation. The allowable rate per the calculation is ^{Exemption} 0% and we request this rate during Phase II since we anticipate during the construction period this would require maximum overhead effort. Please note the overhead rate was not applied to Fringe, Travel nor construction costs.

Cost Share

PLEASE READ!!!

A detailed presentation of the cash or cash value of all cost share proposed for the project must be provided in the table below. Identify the source & amount of each item of cost share proposed by the award recipient and each sub-recipient or vendor. Letters of commitment must be submitted for all third party cost share (other than award recipient).

Note that "cost-share" is not limited to cash investment. Other items that may be assigned value in a budget as incurred as part of the project budget and necessary to performance of the project, may be considered as cost share, such as: contribution of services or property; donated, purchased or existing equipment; buildings or land; donated, purchased or existing supplies; and/or unrecovered personnel, fringe benefits and indirect costs, etc. For each cost share contribution identified as other than cash, identify the item and describe how the value of the cost share contribution was calculated.

Funds from other Federal sources MAY NOT be counted as cost share. This prohibition includes FFRDC sub-recipients. Non-Federal sources include private, state or local Government, or any source not originally derived from Federal funds. Documentation of cost sharing commitments must be provided, if not already provided with the original application and they have not changed since its submission.

Fee or profit will not be paid to the award recipients or subrecipients of financial assistance awards. Additionally, foregone fee or profit by the applicant shall not be considered cost sharing under any resulting award. Reimbursement of actual costs will only include those costs that are allowable and allocable to the project as determined in accordance with the applicable cost principles prescribed in 10 CFR 600.127, 10 CFR 600.222 or 10 CFR 600.317. Also see 10 CFR 600.318 relative to profit or fee.

Add rows as needed. If rows are added, formulas/calculations may need to be adjusted by the preparer.

Organization/Source	Type (cash or other)	Cost Share Item	Budget Period 1 Cost Share	Budget Period 2 Cost Share	Budget Period 3 Cost Share	Total Project Cost Share
ABC Company EXAMPLE ONLY!!!	Cash	Project partner ABC Company will provide 40 PV modules for product development at 50% off the of the retail price of \$680	\$13,600			\$13,600
Algenol Biofuels Inc	Exemption 4					
The Dow Chemical Company						
The Dow Chemical Company						
Membrane Technology and Research, Inc.						

Organization/Source	Type (cash or other)	Cost Share Item	Budget Period 1 Cost Share	Budget Period 2 Cost Share	Budget Period 3 Cost Share	Total Project Cost Share
		Exemption 4				
Totals			Exemption 4			

Total Project Cost: \$Exemption 4

Cost Share Percent of Award: Exemption 4 %

Additional Explanations/Comments (as necessary)

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