

Federal Agency Form Instructions

Form Identifiers	Information
Agency Owner	Grants.gov
Form Name	SBIR/STTR Information
Form Version Number	1.2
OMB Number	4040-0001
OMB Expiration Date	10/31/2019

Form Field Instructions

Field Name	Required or Optional	Information
Agency to which you are applying (select only one)	Required	This field is required. If "Other" is selected, enter agency name.
SBC Control ID	Required	Enter the SBC Control ID. This field is required.
Program Type (select only one)	Required	This field is required.
Application Type (select only one)	Required	See agency-specific instructions to determine application type participation. This field is required.
Phase I Letter of Intent Number	Optional	If "Phase I" is selected, enter Phase I Letter of Intent Number.
Agency Topic/Subtopic	Optional	Enter Agency Topic/Subtopic.
Questions 1-7 must be completed by all SBIR and STTR Applicants	Required	Section label.
1a. Do you certify that at the time of award your organization will meet the eligibility criteria for a small business as defined in the funding opportunity announcement?	Required	This field is required.
1b. Anticipated Number of personnel to be employed at your organization at the time of award.	Required	Enter the number of personnel anticipated to be employed by the small business at the time of award. This field is required.

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1c. Is your small business majority owned by venture capital operating companies, hedge funds, or private equity firms?	Required	This field is required.
1d. Is your small business a Faculty or Student-Owned entity?	Required	This field is required.
2. Does this application include subcontracts with Federal laboratories or any other Federal Government agencies?	Required	This field is required.
If yes, insert the names of the Federal laboratories/agencies:	Optional	If you have answered "yes" to the question above, then please indicate the names of the applicable Federal laboratories or agencies, in the space provided.
3. Are you located in a HUBZone? To find out if your business is in a HUBZone, use the mapping utility provided by the Small Business Administration at its web site: http://www.sba.gov	Required	This field is required.
4. Will all research and development on the project be performed in its entirety in the United States?	Required	This field is required.
If no, provide an explanation in an attached file. * Explanation:	Optional	If you have answered "no" to question 4 above, please prepare an explanation of the research and development that is being performed outside the United States, in a separate file. Then use the Add Attachment button to attach the file and complete this entry. When you click Add Attachment, browse to where you saved the file, select the appropriate file and then click Open to complete the action.

Field Name	Required or Optional	Information
5. Has the applicant and/or Program Director/Principal Investigator submitted proposals for essentially equivalent work under other Federal program solicitations or received other Federal awards for essentially equivalent work?	Required	This field is required.
If yes, insert the names of the other Federal agencies:	Optional	If you have answered "yes" to question 5 above, then please indicate the names of the applicable Federal agencies, in the space provided.
6. Disclosure Permission Statement: If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and email address of the official signing for the applicant organization to state-level economic development organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)?	Required	This field is required.
7. Commercialization Plan: The following applications require a Commercialization Plan: Phase I (DOE only), Phase II (all agencies), Phase I/II Fast-Track (all agencies). Include a Commercialization Plan in accordance with the agency announcement and/or agency-specific instructions. * Attach File:	Optional	The following applications require a Commercialization Plan: Phase I (DOE only), Phase II (all agencies), Phase I/II Fast-Track (all agencies). Include a Commercialization Plan in accordance with the agency announcement and/or agency-specific instructions. To attach a Commercialization Plan file, click the Add Attachment button, browse to where you saved the file, select the file, and then click Open.

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8. Have you received SBIR Phase II awards from the Federal Government? If yes, provide a company commercialization history in accordance with agency-specific instructions using this attachment.	Optional	This field is required for Program Type SBIR or Both. If you have answered "Yes" to question 8 above, please prepare a commercialization history in accordance with agency specific instructions, in a separate file. Then use the Add Attachment button to attach the file and complete this entry. When you click Add Attachment, browse to where you saved the file, select the appropriate file and then click Open to complete the action.
9. Will the Project Director/Principal Investigator have his/her primary employment with the small business at the time of award?	Optional	This field is required for Program Type SBIR or Both.
10. PDPI Formal Appointment and Devote 10 Percent	Optional	This field is required for Program Type STTR or Both.
11. Joint Research and Development Proposed	Optional	This field is required for Program Type STTR or Both.
12. DUNS Number	Optional	Enter the DUNS Number of the non-profit research partner for STTR. This field is required for Program Type STTR or Both.