OMB Number: 4040-0014

0.00

0.00

Expiration Date: 02/28/2025 (Follow form Instructions) 1. Federal Agency and Organizational Element to Which Report is Submitted 2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) US Dept of Commerce 40-09-C13032 3. Recipient Organization (Name and complete address including Zip code) Recipient Organization Name: Oklahoma State University Street1: 401 Whitehurst Street2: City: Stillwater County: Province: State: OK: Oklahoma Country: ZIP / Postal Code: 74078-1031 USA: UNITED STATES 4a. UEI 4b, EIN 5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) VMMJBLMMWSJ4 73-1383996 4-553313 9. Reporting Period End Date 8. Project/Grant Period 6. Report Type 7. Basis of Accounting Quarterly Cash From: 09/30/2022 Semi-Annual Accrual 07/31/2024 08/01/2022 Annual Final 10. Transactions Cumulative (Use lines a-c for single or multiple grant reporting) Federal Cash (To report multiple grants, also use FFR attachment): a. Cash Receipts 0.00 b. Cash Disbursements 20,168.99 c. Cash on Hand (line a minus b) -20,168.99 (Use lines d-o for single grant reporting) Federal Expenditures and Unobligated Balance: d. Total Federal funds authorized 754,970.22 e. Federal share of expenditures 20,168.99 f. Federal share of unliquidated obligations 0.00 g. Total Federal share (sum of lines e and f) 20,168.99 734,801.23 h. Unobligated balance of Federal Funds (line d minus g) Recipient Share: 0.00 i. Total recipient share required j. Recipient share of expenditures 0.00 k. Remaining recipient share to be provided (line i minus j) 0.00 Program Income: 0.00 I. Total Federal program income earned m. Program Income expended in accordance with the deduction alternative 0.00

n. Program Income expended in accordance with the addition alternative

o. Unexpended program income (line I minus line m and line n)

11. Indirect Expense							
а. Туре	b. Rate	c. Period From	Period To	d. Ba	se	e. Amount Charged	f. Federal Share
Predetermined	0.56	08/01/2022	06/30/2024		12,928.84	7,240.15	7,240.15
			g. Totals:		12,928.84	7,240.15	7,240.15
12. Remarks: Attach any explanation	ons deemed		,	by Federal sp Delete Attach		ncy in compliance with go	overning legislation:
13. Certification: By signing this expenditures, disbursements and am aware that any false, fictitious administrative penalties for fraudand 3801-3812).	d cash rece s, or fraudu l, false stat	ipts are for the pulent information ements, false cla	ourposes and ob , or the omission	jectives set f n of any mate	orth in the te rial fact, may	rms and conditions of subject me to crimina	the Federal award. I I, civil or
a. Name and Title of Authorized C	ertifying Off	icial					
Prefix: Fir	st Name: $\overline{\mathbb{K}}$	aci			Middle Nan	ne:	
Last Name: Gaches					Suffix:		
Title: Accountant II							
b. Signature of Authorized Certifying	g Official			c. Telep	hone (Area co	de, number and extension	on)
Cali Galing				405-74	4-6557		
d. Email Address				e. Date	Report Submit	ted 14. Agency use	e only:
kaci.gaches@okstate.edu				04/28	/2023	Marie Co.	

## **REVIEWED**

By Zelandonaii Thompson at 8:41 am, May 01, 2023

ALC/Region: 13060001/02 Short Name:

1159233

Short Name: NTIA
Recipient Name: OKLAHOMA STATE UNIVERSITY INST

Award No: 40-09-C13032

Recipient ID:

Settlement Date From: 7/21/2022 Through: 9/30/2022

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474426	\$754,970.22		\$754,970.22
Totals:				\$754,970.22		

Report Generated on 10/28/22 at 11:22:34 AM GMT-04:00

Page 1 of 1

(Follow form Instructions)

OMB Number: 4040-0014 Expiration Date: 02/28/2025

Federal Agency and Or	rganizational Element to Wh	nich Report is Submitted			ntifying Number Assigned by Federal Ints, use FFR Attachment)
US Dept of Commerce			40-09-C13		
L			40-09-013	0032	
	(Name and complete addre				
Recipient Organization Na	ame: Oklahoma State U	University			
Street1: 401 Whitehu	irst				
Street2:					
City: Stillwater		County:			
State: OK: Oklahom	na			Province:	
Country: USA: UNITED	STATES		ZIP	/ Postal Code: 74	078-1031
4a. UEI	4b. EIN	5. F	Recipient Accoun	t Number or Identi	ifying Number
VMMJBLMMWSJ4	73-1383996			rants, use FFR At	
		4-5	553313		
6. Report Type	7. Basis of Accounting	8. Project/Grant Period		9. Reporting Pe	riod End Date
Quarterly	⊠ Cash	From: To:		12/31/2	2022
Semi-Annual	Accrual	08/01/2022 0	7/31/2024	-	
Annual Final					
10. Transactions	or multiple grant reporting)				Cumulative
	or multiple grant reporting)	EED attachment):			
a. Cash Receipts	t multiple grants, also use	errk attachmenty.			40 616 30
b. Cash Disbursements					49,616.39
c. Cash on Hand (line a	minus h)				61,463.19
(Use lines d-o for single					-11,846.80
, ,	<del></del>				
d. Total Federal funds au	and Unobligated Balance:				754,970.22
e. Federal share of expe					
					61,463.19
f. Federal share of unliqu					0.00
g. Total Federal share (s					61, 463.19
	of Federal Funds (line d min	us g)		=	693,507.03
Recipient Share:	aguirod				0.00
i. Total recipient share re	·				
j. Recipient share of expo		: IV			0.00
	hare to be provided (line i m	iiius J)	===		0.00
Program Income:	i				
I. Total Federal program				_	0.00
	ended in accordance with th				0.00
	ended in accordance with the				0.00
o. Unexpended program	income (line I minus line m	and line n)			0.00

11. Indirect Expense							
a. Type	b. Rate	c. Period From	Period To	d. Base	-	. Amount Charged	f. Federal Share
Predetermined	0.56	08/01/2022	06/30/2024	39,	399.49	22,063.71	22,063.71
			g. Totals:	39,	399.48	22,063.71	22,063.71
12. Remarks: Attach any explana	tions deemed		· · · · · · · · · · · · · · · · · · ·	y Federal spons		1	verning legislation:
13. Certification: By signing the expenditures, disbursements a am aware that any false, fictitic administrative penalties for fra and 3801-3812).  a. Name and Title of Authorized	nd cash rece bus, or fraudu ud, false stat	ipts are for the p llent information ements, false cla	ourposes and objo , or the omission	ectives set forth of any material	n in the terms a fact, may sub	and conditions of the ject me to criminal,	he Federal award. I , civil or
Prefix:	First Name: K	aci			Middle Name:		
Last Name: Gaches					Suffix:		
Title: Accountant II							
b. Signature of Authorized Certify	ing Official			c. Telephon	e (Area code, n	umber and extensio	n)
[cai Gachy				405-744-6	5557		
d. Email Address				e. Date Rep	ort Submitted	14. Agency use	only:
kaci.gaches@okstate.edu				04/28/20	23		

# **REVIEWED**

By Zelandonaii Thompson at 8:45 am, May 01, 2023

ALC/Region: 13060001/02 Short Name: NTIA

Recipient ID: 1159233 Recipient Name: OKLAHOMA STATE UNIVERSITY INST

Award No: 40-09-C13032

Settlement Date From: 7/21/2022 Through: 12/31/2022

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474426	\$754,970.22		\$754,970.22
10/26/2022	PAYMENT	VINV	1840143		-\$20,168.99	\$734,801.23
11/04/2022	PAYMENT	VINV	1841473		-\$11,278.55	\$723,522.68
12/15/2022	PAYMENT	VINV	1852165		-\$18,168.85	\$705,353.83
Totals:				\$754,970.22	-\$49,616.39	

Report Generated on 1/27/23 at 2:32:52 PM GMT-05:00

Page 1 of 1

OMB Number: 4040-0014 Expiration Date: 02/28/2025 (Follow form Instructions) 1. Federal Agency and Organizational Element to Which Report is Submitted 2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) US Dept of Commerce 40-09-C13032 3. Recipient Organization (Name and complete address including Zip code) Recipient Organization Name: Oklahoma State University Street1: 401 Whitehurst Street2: City: County: Stillwater State: Province: OK: Oklahoma Country: ZIP / Postal Code: 74078-1031 USA: UNITED STATES 4a. UEI 4b. EIN 5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) 73-1383996 VMMJBLMMWSJ4 4-553313 9. Reporting Period End Date 8. Project/Grant Period 6. Report Type 7. Basis of Accounting **Quarterly** Cash From: To: 03/31/2023 Semi-Annual Accrual 08/01/2022 07/31/2024 Annual Final 10. Transactions Cumulative (Use lines a-c for single or multiple grant reporting) Federal Cash (To report multiple grants, also use FFR attachment): a. Cash Receipts 61,463.19 b. Cash Disbursements 244,153.31 c. Cash on Hand (line a minus b) -182,690.12 (Use lines d-o for single grant reporting) Federal Expenditures and Unobligated Balance: 754,970.22 d. Total Federal funds authorized e. Federal share of expenditures 244,153.31 f. Federal share of unliquidated obligations 0.00 g. Total Federal share (sum of lines e and f) 244,153.31 h. Unobligated balance of Federal Funds (line d minus g) 510,816.91 Recipient Share: i. Total recipient share required 0.00 j. Recipient share of expenditures 0.00 k. Remaining recipient share to be provided (line i minus j) 0.00 Program Income: I. Total Federal program income earned 0.00

0.00

0.00

0.00

m. Program Income expended in accordance with the deduction alternative

n. Program Income expended in accordance with the addition alternative

o. Unexpended program income (line I minus line m and line n)

11. Indirect Expense							
а. Туре	b. Rate	c. Period From	Period To	d. Ba		. Amount Charged	f. Federal Share
Predetermined	0.56	08/01/2022	06/30/2024		135,276.50	75,754,81	75,754.81
			g. Totals:		135,276.50	75,754.81	75,754.81
12. Remarks: Attach any explanation	ons deemed	necessary or info	rmation required	by Federal sp	oonsoring agency ir	compliance with go	overning legislation:
		Ad	d Attachment	Delete Attach	nment View Attac	chment	
13. Certification: By signing this expenditures, disbursements an am aware that any false, fictitious administrative penalties for fraudand 3801-3812).	d cash rece s, or fraudu	ipts are for the p llent information	ourposes and obj , or the omission	jectives set for of any mate	forth in the terms erial fact, may sub	and conditions of t ject me to criminal	he Federal award. I , civil or
a. Name and Title of Authorized C	ertifying Off	icial					
Prefix: Fir	st Name: 🔣	acı			Middle Name: [		
Last Name: Gaches					Suffix		
Title: Accountant II							
b. Signature of Authorized Certifyin	g Official			c. Telep	hone (Area code, r	umber and extensio	n)
[Chei Gaches				405-74	14-6557		
d. Email Address				e. Date	Report Submitted	14. Agency use	only:
kaci.gaches@okstate.edu				04/28.	/2023	The state of	

# **REVIEWED**

By Zelandonaii Thompson at 3:36 pm, May 12, 2023

ALC/Region: 13060001/02 Short Name: NTIA

Recipient ID: 1159233 Recipient Name: OKLAHOMA STATE UNIVERSITY INST

Award No: 40-09-C13032

Settlement Date From: 7/21/2022 Through: 5/8/2023 1

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474426	\$754,970.22		\$754,970.22
10/26/2022	PAYMENT	VINV	1840143		-\$20,168.99	\$734,801.23
11/04/2022	PAYMENT	VINV	1841473		-\$11,278.55	\$723,522.68
12/15/2022	PAYMENT	VINV	1852165		-\$18,168.85	\$705,353.83
01/10/2023	PAYMENT	VINV	1855805		-\$11,846.80	\$693,507.03
02/10/2023	PAYMENT	VINV	1861257		-\$32,866.47	\$660,640.56
03/07/2023	PAYMENT	VINV	1865343		-\$124,948.89	\$535,691.67
04/07/2023	PAYMENT	VINV	1873128		-\$24,874.76	\$510,816.91
04/28/2023	PAYMENT	VINV	1878098		-\$24,874.76	\$485,942.15
Totals:				\$754,970.22	-\$269,028.07	

Report Generated on 5/8/23 at 10:43:03 AM GMT-04:00

(Follow form Instructions)

OMB Number: 4040-0014 Expiration Date: 02/28/2025

1. Federal Agency and Organizational Element to Which Report is Submitted  US Department of Commerce  2. Federal Grant or Other Idea Agency (To report multiple grant							Number Assigned by Federal se FFR Attachment)
			40	0-09-C13	3032		
Recipient Organization	(Name and complete addre	ss including Zip co	de)				
	ame: Oklahoma State U						
Street1: 401 Whitehu	rst			7			
Street2:			8	Ī			
City: Stillwater		Coun	ty:				
State: OK: Oklahom	a				Province:		
Country: USA: UNITED	STATES			ZIP	/ Postal Code:	74078-	1031
4a. UEI	4b. EIN		5. Recipie	nt Accour	t Number or Id	entifying	Number
VMMJBLMMWSJ4	73-1383996		(To report	multiple g	rants, use FFF	R Attachn	nent)
VINIODENIAMOO	(13 1300330		4-55331	3			
6. Report Type	7. Basis of Accounting	8. Project/Grant	Period		9. Reporting	Period E	End Date
Quarterly		From:	To:		06/3	0/2023	
Semi-Annual	Accrual	08/01/2022	07/31/	2024			
Annual Final							
10. Transactions							Cumulative
CALLER IS NOT A CONTROL OF SAME	or multiple grant reporting)						
	rt multiple grants, also use	FFR attachment	):				
a. Cash Receipts							309,945.65
b. Cash Disbursements							321,621.73
c. Cash on Hand (line a	minus b)						-11,676.08
(Use lines d-o for single	grant reporting)						
Federal Expenditures	and Unobligated Balance:						
d. Total Federal funds a	uthorized						754,970.22
e. Federal share of expe	enditures						321,621.73
f. Federal share of unliq	uidated obligations						0.00
g. Total Federal share (s	sum of lines e and f)						321,621.73
h. Unobligated balance	of Federal Funds (line d mir	nus g)					433,348.49
Recipient Share:							
i. Total recipient share r	equired						0.00
j. Recipient share of exp	penditures						0.00
k. Remaining recipient s	share to be provided (line i n	ninus j)					0.00
Program Income:							
I. Total Federal program	n income earned						0.00
m. Program Income exp	pended in accordance with t	he deduction altern	native				0.00
	ended in accordance with th						0.00
o. Unexpended program income (line I minus line m and line n)							0.00

11. Indirect Expense		***************************************					
a. Type	b. Rate	c. Period From	Period To	d. Bas	e	e. Amount Charged	f. Federal Share
Predetermined	56.00	08/01/2022	06/30/2024	1	83,885.74	102,975.99	102,975.99
	*****		g. Totals:	1	83,885.74	102,975.99	102,975.99
12. Remarks: Attach any explanation	ns deemed	necessary or info	ormation required i	by Federal sp	onsoring agency	in compliance with go	overning legislation:
4-553313 SF425 6.30.23.pdf		Ad	ld Attachment	Delete Attach	ment View At	tachment	
13. Certification: By signing this expenditures, disbursements and am aware that any false, fictitious administrative penalties for fraudand 3801-3812).	d cash rece	ipts are for the pullent information	ourposes and obj	ectives set for of any mate	orth in the term rial fact, may s	s and conditions of tubject me to crimina	the Federal award. I I, civil or
a. Name and Title of Authorized C	ertifying Off	îcial					
Prefix: Fir	st Name: K	aci			Middle Name		
Last Name: Gaches					Suffix:		
Title: Accountant II							
b. Signature of Authorized Certifyin	g Official			c. Telepi	none (Area code	, number and extension	on)
Kaci Gaches (CM G	ach	5 8-2-1	013	405-74	4-6557		
d. Email Address		1170-1170-1170-1170-1170-1170-1170-1170		e. Date I	Report Submitte	14. Agency use	e only:
kaci.gaches@okstate.edu				07/28/	2023		

**REVIEWED** 

By Zelandonaii Thompson at 11:43 am, Aug 02, 2023

ALC/Region: 13060001/02 Short Name: NTIA

Recipient ID: 1159233 Recipient Name: OKLAHOMA STATE UNIVERSITY INST

Award No: 40-09-C13032

Settlement Date From: 7/21/2022 Through: 6/30/2023

Settlement Date	Transaction Type	Document Type	Document No	Authorization	Draws	Account Balance
07/21/2022	AUTHORIZATION	GRANT	474426	\$754,970.22		\$754,970.22
10/26/2022	PAYMENT	VINV	1840143		-\$20,168.99	\$734,801.23
11/04/2022	PAYMENT	VINV	1841473		-\$11,278.55	\$723,522.68
12/15/2022	PAYMENT	VINV	1852165		-\$18,168.85	\$705,353.83
01/10/2023	PAYMENT	VINV	1855805		-\$11,846.80	\$693,507.03
02/10/2023	PAYMENT	VINV	1861257		-\$32,866.47	\$660,640.56
03/07/2023	PAYMENT	VINV	1865343		-\$124,948.89	\$535,691.67
04/07/2023	PAYMENT	VINV	1873128		-\$24,874.76	\$510,816.91
04/28/2023	PAYMENT	VINV	1878098		-\$24,874.76	\$485,942.15
05/08/2023	PAYMENT	VINV	1881355		-\$23,848.88	\$462,093.27
06/07/2023	PAYMENT	VINV	1887533		-\$17,068.70	\$445,024.57
Totals:				\$754,970.22	-\$309,945.65	

Report Generated on 8/1/23 at 3:33:25 PM GMT-04:00