CORPORATE INFORMATION

Please provide the information below so that INFUSE can complete the evaluation of eligibility for participation in the program. Accurate information is needed before any agreement can be proposed or initiated with DOE National Laboratories, including your company's U.S. or Foreign ownership status. All ownership information will be kept strictly confidential.

Please upload the completed form with your RFA application. It will become part of your proposal application package.

| Information Required: | Complete below: |
|---|---|
| Legal Business Name (Signing Entity) | |
| Name 2 (if Division of) * | |
| Name 3 (if "Doing Business As") * | |
| Physical Address (Street) | |
| Street - Line 2 | |
| Street - Line 3 | |
| PO Box | |
| City | |
| | |
| State/Province | |
| Zip/Postal Code | |
| Country | |
| Telephone | |
| Fax | |
| E-Mail | |
| Entity Type (select from list) | ☐ US Small Business ☐ US State or Local Govt |
| | □ US Non-Profit □ Foreign Entity** |
| | US Entity with Foreign |
| | Control/Ownership |
| **Freelongtion nongredien | ☐ US Large Business |
| **Explanation regarding | |
| company ownership, if needed | |
| 100% work performed in US | ☐Request waiver for work abroad, enter % waived: |
| Parent Co. Country of Incorporation | |
| SAM Unique Entity ID | |
| % of Parent Co. annual operating | |
| costs spent by US firm in the US | |
| ***Capitalization: Provide % | |
| breakdown of total company | |
| ownership by owners' country of | |
| citizenship Products created with IP developed | |
| through INFUSE will be largely (>50%) | ☐ YES ☐ NO |
| produced in the United States. | □ YES □ NO |
| produced in the office offices. | |
| Contact Name (to verify information) | |
| | |
| Contact Phone | |
| Contact Email | |
| both/all names. The legal name of the US entity will b **Foreign: ***https://en.wikipedia.org/wiki/Capitali | |
| international organization; (3) any form of business en any country other than the United States or its territori the laws of the United States or a State or other jurisd foreign government, agency, firm, or corporation; and | sterprise or legal entity organized, chartered or incorporated under the laws of es; and (4) any form of business enterprise organized or incorporated under iction within the United States which is owned, controlled or influenced by a (5) any person who is not a citizen or national of the United States. Sovernment to be a Foreign Entity; however, please select this type if you are |
| | State or other jurisdiction within the United States and owned, controlled or |
| This is to certify that, to the best of my know complete, and current as of the date execute | ledge and belief, the information provided herein is accurate, d below. |
| Firm | |
| Name | Signature |
| Title | Date |