

# FEDERAL FINANCIAL REPORT

(Follow form instructions)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Energy	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) DE-FE0029085	Page 1	of 1 pages
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3. Recipient Organization (Name and complete address including Zip code)  
 GSI Environmental Inc., 2211 Norfolk, Suite 1000, Houston, Texas 77098-4054

4a. DUNS Number 181780776	4b. EIN 760195706	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) 114000093 - 530003808	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
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8. Project/Grant Period From: (Month, Day, Year) 10/01/2016	To: (Month, Day, Year) 05/30/2019	9. Reporting Period End Date (Month, Day, Year) 06/30/2018
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10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

<b>Federal Cash (To report multiple grants, also use FFR Attachment):</b>	
a. Cash Receipts	1,199,099.36
b. Cash Disbursements	1,199,099.36
c. Cash on Hand (line a minus b)	0.00

(Use lines d-o for single grant reporting)

<b>Federal Expenditures and Unobligated Balance:</b>	
d. Total Federal funds authorized	1,307,039.00
e. Federal share of expenditures	1,199,099.36
f. Federal share of unliquidated obligations	0.00
g. Total Federal share (sum of lines e and f)	1,199,099.36
h. Unobligated balance of Federal funds (line d minus g)	107,939.64
<b>Recipient Share:</b>	
i. Total recipient share required	330,000.00
j. Recipient share of expenditures	545,900.00
k. Remaining recipient share to be provided (line i minus j)	(215,900)
<b>Program Income:</b>	
l. Total Federal program income earned	0.00
m. Program income expended in accordance with the deduction alternative	0.00
n. Program income expended in accordance with the addition alternative	0.00
o. Unexpended program income (line l minus line m or line n)	0.00

	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
11. Indirect Expense	Overhead	140.38%	10/01/2016	06/30/2018	249,565.06	352,064.85	352,064.85
	G&A	16.70%	10/01/2016	06/30/2018	1,021,399.27	177,700.09	177,700.09
	<b>g. Totals:</b>					1,270,964.33	529,764.94

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:  
 Block 11e reflects adjusted Overhead and G&A per the FY16 Indirect Rate Adjustment Voucher submitted in March 2017. G&A is not charged on Cost Share.

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and intent set forth in the award documents. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official  <div style="font-family: cursive; font-size: 1.2em; color: blue;">Julie Spencer, Contract Administrator</div>	c. Telephone (Area code, number and extension) 512-346-4474
b. Signature of Authorized Certifying Official  <div style="font-family: cursive; font-size: 1.5em; color: blue;">Julie Spencer</div>	d. Email address jasper@gsi-net.com
	e. Date Report Submitted (Month, Day, Year) 07/31/2018

14. Agency use only:

Standard Form 425 - Revised 6/28/2010  
 OMB Approval Number: 0348-0061  
 Expiration Date: 10/31/2011

**Paperwork Burden Statement**  
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0061), Washington, DC 20503.