FORM	CD-451
(REV.	12.14\

U.S. DEPARTMENT OF COMMERCE

X GRANT

COOPERATIVE AGREEMENT

AMENDMENT TO FINANCIAL ASSISTANCE AWARD

AWARD NUMBER 30-10-S13030

CFDA	ND.	AND	NΑ	ME

11.549 - State and Local Implementation Grant Program

PROJECT TITLE

Montana State and Local Implementation Grant Program (MSLIGP)

ĺ	STREET ADDRESS	EFFECTIVE DATE
	State of Montana, Department of Administration	4
į	RECIPIENT NAME	AMENDMENT NUMBER

P.O. Box 200113 124 No. Roberts Street, Mitchell Buildin

JAN 0 4 2016

CITY, STATE ZIP

EXTEND PERIOD OF PERFORMANCE TO (IF APPLICABLE)

Helena, MT 59520

11010114, 1811 00020				
COSTS ARE REVISED AS FOLLOWS:	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$1,816,415.00	\$0.00	\$0.00	\$1,816,415.00
RECIPIENT SHARE OF COST	\$454,104.00	\$0.00	\$0.00	\$454,104.00
TOTAL ESTIMATED COST	\$2,270,519.00	\$0.00	\$0.00	\$2,270,519.00

REASON(S) FOR AMENDMENT

This grant is hereby amended to: 1) acknowledge the receipt and approval of the Phase 2 budget modification submitted December 9, 2015 2) release the Phase 2 reserve of \$908,208.00 (50% of the federal funds), which was previously established in Special Award Condition (SAC) No. 06; 3) updates Grant Specialist information listed under SAC No. 05; 4) updates Recipient contact information listed under SAC No. 02.

All previous terms and conditions remain the same.

This Amendment Document (Form CD-451) signed by the Grants Officer constitutes an Amendment of the above-referenced Award, which may include an obligation of Federal funding. By signing this Form CD-451, the Recipient agrees to comply with the Amendment provisions checked below and attached, as well as previous provisions incorporated into the Award. If not signed and returned without modification by the Recipient within 30 days of receipt, the Grants Officer may unilaterally withdraw this Amendment offer and de-obligate any associated funds.

- X SPECIAL AWARD CONDITIONS
- X LINE ITEM BUDGET

OTHER(S)

SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER	DATE	
Husai Rahman	12/23/	2015
TYPED NAME, TYPED TITLE, AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL	DATE	
Quenn Mess	1/6/2	20/6

Award Number: 30-10-S13030, Amendment Number 4

Federal Program Officer: Michael Dame

Requisition Number: S13030

Employer Identification Number: 810302402

Dun & Bradstreet No: 138184833

Recipient ID: 3045183 Requestor ID: 3045183

Award ACCS Information

Bur Co	eau de f	EØFY.	Rroject-Task		Onj Class	Obligation Amount
61	1	2013	8150000-000	11-00-0000-00-00-00	41-19-00-00	\$0.00

Award Contact Information

Contact Name Contact Type		Email	Phone
Mr. Quinn Ness	Administrative	qness@mt.gov	406-444-6134
Mr. Ronald P Baldwin	Technical	rbaldwin@mt.gov	406-444-2700

NIST Grants Officer:

Husai Rahman 100 Bureau Drive, MS 1650 Gaithersburg, MD 20899-1650 (301) 975-4355

NIST Grants Specialist:

Samantha Wigglesworth 100 Bureau Drive, MS 1650 Gaithersburg, MD 20899-1650 (301) 975-4166