

Grant and Cooperative Agreement

CHOOSE ONE:

- COOPERATIVE AGREEMENT
 GRANT

CHOOSE ONE: EDUCATION FACILITIES RESEARCH SDCR TRAINING

1. GRANT/COOPERATIVE AGREEMENT NUMBER NRC-27-09-113		2. SUPPLEMENT NUMBER M0004		3. EFFECTIVE DATE 09/13/2014		4. COMPLETION DATE			
5. ISSUED TO NAME/ADDRESS OF RECIPIENT (No., Street, City/County, State, Zip) BLACKFEET COMMUNITY COLLEGE HWY 89 E OF BROWNING BROWNING MT 594170000				6. ISSUED BY U.S. NRC - HQ Mailing Address: Acquisition Management Division Mail Stop: 3WFN-05-C64MP Washington DC 20555-0001					
7. TAXPAYER IDENTIFICATION NO. (TIN)				9. PRINCIPAL INVESTIGATOR/ORGANIZATION'S PROJECT OR PROGRAM MGR. (Name & Phone) Mr. William J. Polk Email: Jim_Polk@bfcc.org (406) 338-3272					
8. COMMERCIAL & GOVERNMENT ENTITY (CAGE) NO.									
10. RESEARCH, PROJECT OR PROGRAM TITLE Support Civil and Electrical Engineering, Electronic Engineering Technology and Civil Engineering Technology Degree									
11. PURPOSE See schedule									
12. PERIOD OF PERFORMANCE (Approximately) 09/30/2009 through 09/30/2015									
13A.		AWARD HISTORY			13B.		FUNDING HISTORY		
PREVIOUS		\$500,000.00			PREVIOUS		\$300,000.00		
THIS ACTION		\$0.00			THIS ACTION		\$200,000.00		
CASH SHARE		\$0.00			TOTAL		\$500,000.00		
NON-CASH SHARE		\$0.00							
RECIPIENT SHARE		\$0.00							
TOTAL		\$500,000.00							
14. ACCOUNTING AND APPROPRIATION DATA See Schedule									
PURCHASE REQUEST NO.		JOB ORDER NO.		AMOUNT		STATUS			
SBCR-14-0033									
15. POINTS OF CONTACT									
	NAME		MAIL STOP		TELEPHONE		E-MAIL ADDRESS		
TECHNICAL OFFICER	TUWANDA M. SMITH		03-G01		3014157394		Tuwanda.Smith@nrc.gov		
NEGOTIATOR									
ADMINISTRATOR	M'LITA R. CARR				301-287-0909		MLita.Carr@nrc.gov		
PAYMENTS									
16. THIS AWARD IS MADE UNDER THE AUTHORITY OF: Pursuant to Section 31b and 141b of Atomic Energy Act of 1954, as amended.									
17. APPLICABLE STATEMENT(S), IF CHECKED: <input checked="" type="checkbox"/> NO CHANGE IS MADE TO EXISTING PROVISIONS <input type="checkbox"/> FDP TERMS AND CONDITIONS AND THE AGENCY-SPECIFIC REQUIREMENTS APPLY TO THIS GRANT				18. APPLICABLE ENCLOSURE(S), IF CHECKED: <input type="checkbox"/> PROVISIONS <input type="checkbox"/> SPECIAL CONDITIONS <input type="checkbox"/> REQUIRED PUBLICATIONS AND REPORTS					
UNITED STATES OF AMERICA				COOPERATIVE AGREEMENT RECIPIENT					
CONTRACTING/GRANT OFFICER ERIKA EAM <i>Erika Eam</i>		DATE 09/13/2014		AUTHORIZED REPRESENTATIVE		DATE			

TEMPLATE - ADM001

SUNSI REVIEW COMPLETE

ADM002

Grant and Cooperative Agreement

ITEM NO. (A)	ITEM OR SERVICE (Include Specifications and Special Instructions) (B)	QUANTITY (C)	UNIT (D)	ESTIMATED COST	
				UNIT PRICE (E)	AMOUNT (F)
	<p>CFDA Number: 77.007 DUNS Number: 098710494</p> <p>The purpose of this modification is to provide incremental funding in the amount of \$200,000, thereby increasing the obligated amount from \$300,000.00 to \$500,000.00, and to extend the period of performance through September 30, 2015. As a result of this modification:</p> <p>1. ATTACHMENT A - SCHEDULE, Section A.2 PERIOD OF GRANT, delete in its entirety and replace with the following: "1. The effective date of this Grant is September 30, 2009. The completion date of this Grant is September 30, 2015</p> <p>2. Funds obligated in this grant are available for program expenditures for the period: September 30, 2009 - September 30, 2015"</p> <p>2. A. GENERAL, 2. Total Obligated Amount, delete in its entirety and replace with the following: "\$500,000.00"</p> <p>3. Section A.4, AMOUNT OF AWARD AND PAYMENT PROCEDURES, 1., delete in its entirety and replace with the following: "The total estimated amount of this Award is \$500,000.00 for the six year period."</p> <p>4. Section A.4, AMOUNT OF AWARD AND PAYMENT PROCEDURES, 2., delete in its entirety and replace with the following: "NRC hereby obligates the amount of \$500,000.00 for program expenditures during the period set forth above and in support of the Budget above. The Grantee will be given written notice by the Contracting Officer when additional funds will be added. NRC is not obligated to reimburse the Grantee for the expenditure of amounts in excess of the total obligated amount."</p> <p>Continued ...</p>				

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				UNIT PRICE (E)	AMOUNT (F)
	All other terms and conditions remain the same. 2014-X0200-FEEBASED-7P-7PD001-51-K-167-L2284-4110 Payment: ASAP Period of Performance: 09/30/2009 to 09/30/2015				