

FORM CD-451 (REV 10-98) LF DAO 203-26  U. S. DEPARTMENT OF COMMERCE  <p style="text-align: center;"><b>AMENDMENT TO FINANCIAL ASSISTANCE AWARD</b></p>		<input checked="" type="checkbox"/> GRANT <input type="checkbox"/> COOPERATIVE AGREEMENT <hr/> ACCOUNTING CODE  AWARD NUMBER NT10BIX5570009		
RECIPIENT NAME Merit Network Inc.		AMENDMENT NUMBER 4		
STREET ADDRESS 1000 Oakbrook Drive Suite 200		EFFECTIVE DATE 08/01/2011		
CITY, STATE, ZIP CODE Ann Arbor MI 48104-6815		EXTEND WORK COMPLETION TO N/A		
CFDA NO. AND PROJECT TITLE 11.557 Recovery Act - REACH Michigan Middle Mile Collaborative				
COSTS ARE REVISED AS FOLLOWS	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$33,289,221.00	\$0.00	\$0.00	\$33,289,221.00
RECIPIENT SHARE OF COST	\$8,322,305.00	\$0.00	\$0.00	\$8,322,305.00
TOTAL ESTIMATED COST	\$41,611,526.00	\$0.00	\$0.00	\$41,611,526.00
REASON(S) FOR AMENDMENT To add new Special Award Conditions that incorporate post-award programmatic waivers relating to using Program Income for match, lifting operating lease restrictions, and lifting certain sale/lease restrictions from Awards.				
<p><small>This Amendment approved by the Grants Officer is issued in triplicate and constitute an obligation of Federal funding. By signing the three documents, the Recipient agrees to comply with the Amendment provisions checked below and attached, as well as previous provisions incorporated into the Award. Upon acceptance by the Recipient, two signed Amendment documents shall be returned to the Grants Officer and the third document shall be retained by the Recipient. If not signed and returned without modification by the Recipient within 30 days of receipt, the Grants Officer may unilaterally terminate this Amendment.</small></p> <p><input checked="" type="checkbox"/> Special Award Conditions (Attachment B)</p> <p><input type="checkbox"/> Line Item Budget (Attachment A)</p> <p><input type="checkbox"/> Other(s)</p>				
SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER Alan Conway		TITLE Grants Officer		DATE 08/29/2011
TYPE NAME AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL Ryan Kunzelman		TITLE Grant Compliance Manager		DATE 09/13/2011