FORM CD-451 (REV 10-98) IF DAO 203-26 U. S. DEPARTMENT OF COMMERCE			[X]GRANT []COOPERATIVE AGREEMENT			
FINANCIAL ASSISTANCE AWARD			AWARD NUMBER			
			NT10BIX5570096			
RECIPIENT NAME Virgin Islands Public Finance Authority			AMENDMENT NUMBER			
			6			
STREET ADDRESS 32-33 Kongens Gade			10/17/2011			
CITY, STATE, ZIP CODE St. Thomas VI 00802-0430			EXTEND WORK COMPLETION TO			
			N/A			
CFDA NO. AND PROJECT 11.557 Recovery Act - viNGN	TITLE Comprehensive Community Infr	astructure Program	•			
COSTS ARE REVISED AS FOLLOWS	PREVIOUS ESTIMATED COST	ADD		DEDUCT		TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$58,888,469.00	\$0.00		\$0.00		\$58,888,469.00
RECIPIENT SHARE OF COST	\$29,386,379.00	\$0.00		\$0.00		\$29,386,379.00
TOTAL ESTIMATED COST	\$88,274,848.00	\$0.00		\$0.00		\$88,274,848.00
of acceptance of their Control 2. Effective October 17, on their BTOP project. 3. As per stated in Amen payments under this away 4. The attached letter data 5. NOAA and NTIA will questions to clarify your	amendment is to notify Virgorrective Action Plan (CAF 2011, the stop work order hadment #5 your organization and must be submitted for reced October 17, 2011 is here a continue to monitor your and organization are described or the submitted for t	P) response addr nas been lifted in n is still conside eview and appro- eby incorporated award closely, w	essing all p n accordance ared "high ri oval before d into this a which may i	oints in the inquire with this amend sk" and you will refunds will be disburned mendment by referenced to the include NTIA and	y. Iment, and remain unursed to erence. NIST su	nd VIPFA may resume work nder agency review. Any ASAP.
Recipient agrees to comply wi acceptance by the Recipient, t Recipient. If not signed and re [] Special Award Condi [] Line Item Budget (A [] Other(s)	itions (Attachment B)	eked below and atta all be returned to e Recipient within 3	ched, as well the Grants Off 30 days of rece	as previous provision ficer and the third do	ns incorpor ocument sha	rated into the Award. Upon all be retained by the aterally terminate this Amendment.
SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER Alan Conway			Grants Office	cer		10/24/2011
1 man Convay			1			10/2 1/2011

TITLE
Commissioner Angel E. Dawson

DATE

01/17/2012

TYPE NAME AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL

Angel Dawson