AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. CONTRACT ID CODE	PAGE OF PAGES			
2 AMENDMENT/MODIFICATION NO	3 EFFECTIVE D	ATE I	4 REOL	ISITION/PURCHASE REQ. NO	Is page	1 2 JECT NO (If applicable)		
377	See Block			005457 Item 4	15	see the (mappingally)		
6 ISSUED BY CODE	00518		7. ADM	NISTERED BY (If other than Item 6)	CODE	00518		
Oak Ridge U.S. Department of Energy P.O. Box 2001 Oak Ridge TN 37831			Oak Ridge U.S. Department of Energy P.O. Box 2001 Oak Ridge TN 37831					
8. NAME AND ADDRESS OF CONTRACTOR (No., street	t, county, State and Zi.	P Code)	(x) ^{9A.}	AMENDMENT OF SOLICITATION NO				
OAK RIDGE ASSOCIATED UNIVERS P.O. BOX 117 OAK RIDGE TN 37830-6218	ITIES, INC		x 10A DE	MODIFICATION OF CONTRACT/ORDER N -AC05-060R23100	10			
CODE 041152224	FACILITY CODE		12	2/21/2005				
V1110221	11. THIS ITEM	ONLY APPLIES TO AN		ENTS OF SOLICITATIONS				
separate tetter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire or change an offit to the solicitation and this amendment, and is receive 12 ACCOUNTING AND APPROPRIATION DATA (if re-	OFFERS PRIOR To er already submitted of prior to the opening	O THE HOUR AND DA 1, such change may be ng hour and date specif	TE SPE made by fied.	CIFIED MAY RESULT IN REJECTION OF YI telegram or letter, provided each telegram o	DUR OFF r letter m	ER If by		
See Schedule				DIFIES THE CONTRACT/ORDER NO. AS DE				
ORDER NO. IN ITEM 10A	CT/ORDER IS MOU H IN ITEM 14, PUR	DIFIED TO REFLECT T SUANT TO THE AUTH	THE ADM	ES SET FORTH IN ITEM 14 ARE MADE IN T MINISTRATIVE CHANGES (such as changes DF FAR 43 103(b)		·····		
D. OTHER (Specify type of modification	and authority)							
X Funding Modification	n by autho	rity of 52.2	232-2	22 Limitation of Funds				
E. IMPORTANT: Contractor 🗵 is not.	is required to	sign this document and	return	O copies to the issuin	g office			
14 DESCRIPTION OF AMENDMENT/MODIFICATION Tax ID Number: 62-0476816 DUNS Number: 041152224 Technical Services for Manag The purpose of this modificat funds received from the Depa program. Clause B.4 Obligat	gement of ation is to	the Oak Ridg o obligate f Health and	ge Ir fundi Huma	stitute of Science and	Educ ,677, Worl	,759.80 for		
"Pursuant to the Clause in S funds in the amount of \$1,39 payment of allowable costs a contract through the period Continued Except as provided herein, all terms and conditions of the 15A NAME AND TITLE OF SIGNER (Type or print)	91,288,564 and maximum estimated	.99 are obli m fee to be to end Dece	igate incu ember	ed herewith and made aversed from the effective 31, 2015."	ailai e da:	ole for te of this		
INA. HAME AND THE OF SIGNER (1999 OF PARI)				y L. Crow	UER (19)	ye or pant)		
15B. CONTRACTOR/OFFEROR	1	5C. DATE SIGNED	1	NITED STATES OF AMERICA		16C DATE SIGNED 05/30/2012		
(Signature of person authorized to sign)				(Signature of Contracting Officer)	TANDAO			
NSN 7540-01-152-8070				, S	HANDAH	ID FORM 30 (REV 10-83)		

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED)F
	DE-AC05-06OR23100/377	2	2

NAME OF OFFEROR OR CONTRACTOR

OAK RIDGE ASSOCIATED UNIVERSITIES, INC.

NQ.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
.)	(B)	(C)	(D)	(E)	(F)
	FOB: Destination		П		
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