| AMENDMENT OF SOLICITATION/MODIFIC  | ATION OF C  | ONTRACT  |                           | CONTRACT ID CODE   | PA                      | AGE OF               |                        |
|--|---|--|---------------------------|--|-------------------------|----------------------|------------------------|
| 2. AMENDMENT/MODIFICATION NO.  | 3. EFFECTIVE                                      | DATE   | 4. REQ                    | UISITION/PURCHASE REQ. NO.   | 5. PROJ                 |                      | 2<br>. (If applicable) |
| 386  | See Bloo  | ck 16C   | 12SC                      | 006571   |                         |                      |                        |
| 6. ISSUED BY CODE  | 00518   |  | 7. ADN                    | MINISTERED BY (If other than Item 6)   | CODE                    | 0051                 | <br>8                  |
| Oak Ridge<br>U.S. Department of Energy<br>P.O. Box 2001<br>Oak Ridge TN 37831  |   |  | U.S<br>P.O                | Ridge Department of Energy Box 2001 Ridge TN 37831   |                         |                      |                        |
| 8. NAME AND ADDRESS OF CONTRACTOR (No., street   | t, county, State and                              | I ZIP Code)  | (x) 9A.                   | AMENDMENT OF SOLICITATION NO.  |                         |                      |                        |
| DAK RIDGE ASSOCIATED UNIVERS   | ITIES, II   | NC.  |                           |  |                         |                      |                        |
| P.O. BOX 117   |   |  | 9B.                       | DATED (SEE ITEM 11)  |                         |                      |                        |
| DAK RIDGE TN 37830-6218  |   |  |                           |  |                         |                      |                        |
|  |   |  | X DE                      | . MODIFICATION OF CONTRACT/ORDER NO<br>-AC05-060R23100<br>: DATED (SEE ITEM 13)                          | O.                      |                      |                        |
| CODE 041152224   | FACILITY COL                                      | DE .   |                           | 2/21/2005  |                         |                      |                        |
|  | 11 THIS ITE                                       | M ONLY APPLIES TO A  |                           | ENTS OF SOLICITATIONS  |                         |                      |                        |
| ☐ The above numbered solicitation is amended as set f  |   |  |                           |  | nded [                  | is not ex            |                        |
| separate letter or telegram which includes a reference THE PLACE DESIGNATED FOR THE RECEIPT OF virtue of this amendment you desire to change an office to the solicitation and this amendment, and is receive 12. ACCOUNTING AND APPROPRIATION DATA (If respective) 15. See Schedule   | OFFERS PRIOR er already submit d prior to the ope | TO THE HOUR AND DA<br>ted, such change may be<br>ning hour and date speci<br>Net | TE SPE<br>made t<br>fied. | CIFIED MAY RESULT IN REJECTION OF YOU y telegram or letter, provided each telegram or rease: \$6         | OUR OFFE<br>r letter ma | ER. If by akes refer | ence                   |
| 13. THIS ITEM ONLY APPLIES TO M  | ODIFICATION O                                     | F CONTRACTS/ORDERS   | S. IT MO                  | DIFIES THE CONTRACT/ORDER NO. AS DES   | SCRIBED                 | IN ITEM              | 14.                    |
|  |   |  |                           | ES SET FORTH IN ITEM 14 ARE MADE IN THE<br>MINISTRATIVE CHANGES (such as changes of<br>OF FAR 43.103(b). |                         |                      |                        |
| C. THIS SUPPLEMENTAL AGREEMEN  |   |  |                           |  |                         |                      |                        |
| D. OTHER (Specify type of modification   | and authority)                                    |  |                           |  |                         |                      |                        |
| X Funding Modification   | n by auth   | ority of 52.   | 232-                      | 22 Limitation of Funds   |                         |                      |                        |
| E. IMPORTANT: Contractor X is not,   |   | o sign this document and   |                           |  | office.                 |                      |                        |
| 14. DESCRIPTION OF AMENDMENT/MODIFICATION Tax ID Number: 62-0476816 DUNS Number: 041152224 Technical Services for Manag The purpose of this modifica   | ement of  | the Oak Rido<br>to obligate f  | ge Ii<br>Eund:            | nstitute of Science and<br>ing in the amount of  | Educ                    |                      |                        |
| \$6,619,062.18 for funds rece<br>the Work for Others program.<br>follows:  |   | =  |                           |  |                         |                      | =                      |
| "Pursuant to the Clause in S funds in the amount of \$1,40 payment of allowable costs a Continued  Except as provided herein, all terms and conditions of the state of the | 9,134,24<br>nd maxim                              | 3.05 are obli<br>um fee to be  | igate<br>inc              | ed herewith and made ava   | ailab<br>e dat          | le fo                | or                     |
| 15A. NAME AND TITLE OF SIGNER ( <i>Type or print</i> )   | io accament rele                                  | TOTAL TRANSPORTER  |                           | NAME AND TITLE OF CONTRACTING OFFIC  |                         |                      |                        |
|  |   |  |                           | y L. Crow  |                         | ŕ                    |                        |
| 15B. CONTRACTOR/OFFEROR  |   | 15C. DATE SIGNED   |                           | JNITED STATES OF AMERICA   |                         | 160                  | C. DATE SIGNED         |
| TEL SOME OF CHANGE   |   |  |                           | gnature on File  |                         |                      |                        |
| (Signature of person authorized to sign)   |   |  |                           | (Signature of Contracting Officer)   |                         | 0                    | 6/28/2012              |

| CONTINUATION SHEET | REFERENCE NO. OF DOCUMENT BEING CONTINUED |   |   |
|--------------------|---|---|---|
|                    | DE-AC05-060R23100/386                     | 2 | 2 |

NAME OF OFFEROR OR CONTRACTOR

OAK RIDGE ASSOCIATED UNIVERSITIES, INC.

| ΓΕΜ NO.<br>(A) | SUPPLIES/SERVICES (B)                           | QUANTITY<br>(C) | UNIT<br>(D) | UNIT PRICE<br>(E) | AMOUNT<br>(F) |
|----------------|---|-----------------|-------------|-------------------|---------------|
| (44)           | contract through the period estimated to end    | (0)             | (2)         | (11)              | ( + )         |
|                | December 31, 2015."                             |                 |             |                   |               |
|                | FOB: Destination                                |                 |             |                   |               |
|                | Period of Performance: 01/01/2006 to 12/31/2015 |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |
|                |   |                 |             |                   |               |