AMENDMENT OF SOLICITATION/MODIFIC	1. CONTRACT ID CODE		PAGE OF PAGES					
		-	4.5		6.00	1 <u>24</u>		
	IENDMENT/MODIFICATION NO. 3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO. 5. PF 13SC001338			OJECT NO. (If applicable)		
130 6. ISSUED BY CODE	See Blo	CK 16C		ADMINISTERED BY (If other than Item 6)	CODE			
AMES Site Office U.S. Department of Energy AMES Site Office 9800 South Cass Avenue Argonne IL 60439			AMES Site Office U.S. Department of Energy AMES Site Office 9800 South Cass Avenue Argonne IL 60439					
	county State on	d ZIR Codo)						
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) IOWA STATE UNIVERSITY Attn: ROCHELLE ATHEY 1138 PEARSON HALL AMES IA 500112207			(X) X	9A. AMENDMENT OF SOLICITATION NO. 9B. DATED (SEE ITEM 11) 10A. MODIFICATION OF CONTRACT/ORDER NO. DE -AC02-07CH11358 10B. DATED (SEE ITEM 13)				
CODE 005309844	FACILITY CO	DE		12/04/2006				
	11. THIS IT	EM ONLY APPLIES TO A	MEN	IDMENTS OF SOLICITATIONS				
CHECK ONE A. THIS CHANGE ORDER IS ISSUED F ORDER NO. IN ITEM 10A.	d prior to the ope uired) 12 ODIFICATION C	ening hour and date speci Net OF CONTRACTS/ORDERS (Specify authority) THE	ified. I: S. I1 CHA	· · · · · · · · · · · · · · · · · · ·	45,1 SCRIB	44.43 ED IN ITEM 14.		
C. THIS SUPPLEMENTAL AGREEMEN D. OTHER (Specify type of modification X See Block 14	-	INTO PURSUANT TO AU	UTH	ORITY OF:				
E. IMPORTANT: Contractor X is not.	is required	to sign this document and	d retu	urn 0 copies to the issuing	o office			
14. DESCRIPTION OF AMENDMENT/MODIFICATION Tax ID Number: 42-6004224 DUNS Number: 005309844 DESCRIPTION OF AMENDMENT/MOD Pursuant to Part I, Clause B paragraph (a) of Part II Cla the subject contract, the am is increased from it's incep \$227,703,437.83. FOB: Destination Continued Except as provided herein, all terms and conditions of th	IFICATIO .2 - OBL use I. 1 ount pre tion by	N IGATION OF FU 20-DEAR 970.5 sently obliga \$45,144.43 fr	UNI 523 ate	DS AND FINANCIAL LIMITATI 32-4, OBLIGATION OF FUNDS ed by the Government unde n \$227,658,293.40 to a to	ONS (DE r th tal	EC 2000) of his contract of		
15A. NAME AND TITLE OF SIGNER (<i>Type or print</i>)				6A. NAME AND TITLE OF CONTRACTING OFFIC				
		J	Jennifer A. Stricker					
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED		B. UNITED STATES OF AMERICA		16C. DATE SIGNED		
				Signature on File		_ 12/18/2012		

(Signature of person authorized to sign) NSN 7540-01-152-8070

Previous edition unusable

STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243

(Signature of Contracting Officer)

CONTINUATION SHEET REFERENCE NO. OF DOCUMENT BEING CONTINUED DE-AC02-07CH11358/130

NAME OF OFFEROR OR CONTRACTOR IOWA STATE UNIVERSITY

M NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
A)	(B)	(C)	(D)	(E)	(F)
	Period of Performance: 12/04/2006 to 12/31/2015			1	
	1	1	1		

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OF

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