FORM CD-451 (REV 10-98) LF DAO 203-26 U. S. DEPARTMENT OF COMMERCE			[X]GRANT []COOPERATIVE AGREEMENT ACCOUNTING CODE			
AMENDMENT TO FINANCIAL ASSISTANCE AWARD			award number NT10BIX5570094			
RECIPIENT NAME EXECUTIVE OFFICE OF THE STATE OF MISSISSIPPI			AMENDMENT NUMBER 9			
STREET ADDRESS 550 HIGH STREET SILLERS BUILDING STE 1900			EFFECTIVE DATE 10/01/2016			
CITY, STATE, ZIP CODE JACKSON MS 39201-1113			EXTEND WORK COMPLETION TO 03/31/2017			
CFDA NO. AND PROJECT TITLE 11.557 Recovery Act - Mississippi Education, Safety and Health Network						
COSTS ARE REVISED	PREVIOUS	ADD	DEDUCT	TOTAL		

		ADD		TOTAL
AS FOLLOWS	ESTIMATED COST			ESTIMATED COST
FEDERAL SHARE OF COST	\$70,055,000.00	\$0.00	\$0.00	\$70,055,000.00
RECIPIENT SHARE OF COST	\$13,932,788.00	\$0.00	\$0.00	\$13,932,788.00
TOTAL ESTIMATED COST	\$83,987,788.00	(\$-0.00)	\$0.00	\$83,987,788.00

REASON(S) FOR AMENDMENT

1. This amendment provides for a six-month no cost extension of the Agreement through March 31,2017 per the recipient's request dated September 9, 2016 which is incorporated by reference.

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.

[] Special Award Conditions (Attachment B)

[] Line Item Budget (Attachment A)

[X] Other(s)

SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER	TITLE	date
Alan Conway	Grants Officer	10/12/2016
TYPE NAME AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL Theresa Abadie	TITLE	date 10/12/2016