

FORM CD-451 (REV 10-98) LF DAO 203-26  U. S. DEPARTMENT OF COMMERCE  <b>AMENDMENT TO          FINANCIAL ASSISTANCE AWARD</b>		<input checked="" type="checkbox"/> GRANT <input type="checkbox"/> COOPERATIVE AGREEMENT		
		ACCOUNTING CODE		
		AWARD NUMBER NT10BIX5570102		
RECIPIENT NAME University of Arkansas System		AMENDMENT NUMBER 3		
STREET ADDRESS 4301 W. Markham St, ST63		EFFECTIVE DATE 09/13/2012		
CITY, STATE, ZIP CODE Little Rock AR 72205-7101		EXTEND WORK COMPLETION TO N/A		
CFDA NO. AND PROJECT TITLE 11.557 Recovery Act - The Arkansas Healthcare, Higher Education, Public Safety, & Research Integrated Broadband Initiative				
COSTS ARE REVISED AS FOLLOWS	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$102,131,393.00	\$0.00	\$0.00	\$102,131,393.00
RECIPIENT SHARE OF COST	\$26,450,427.00	\$0.00	\$0.00	\$26,450,427.00
TOTAL ESTIMATED COST	\$128,581,820.00	(\$-0.00)	\$0.00	\$128,581,820.00
<b>REASON(S) FOR AMENDMENT</b> 1.) To lift the temporary partial suspension placed on the award on 8-3-12 and authorize the resumption of the work activities affected;  2.) To issue a partial suspension that prohibits project implementation and construction activities conducted by the subrecipient Arkansas Research and Education Optical Network (ARE-ON), until such time that NTIA determines that its concerns are resolved.				
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.				
<input checked="" type="checkbox"/> Special Award Conditions (Attachment B)  <input type="checkbox"/> Line Item Budget (Attachment A)  <input type="checkbox"/> Other(s)				
SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER Alan Conway		TITLE Grants Officer		DATE 09/20/2012
TYPE NAME AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL Suzanne Alstadt		TITLE		DATE 09/20/2012