

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1 CONTRACT ID CODE	PAGE OF PAGES 1 2
2 AMENDMENT/MODIFICATION NO. 0003	3 EFFECTIVE DATE See Block 16C	4 REQUISITION/PURCHASE REQ NO	5 PROJECT NO (if applicable)
6 ISSUED BY CONSUMER PRODUCT SAFETY COMMISSION DIV OF PROCUREMENT SERVICES 4330 EAST WEST HWY ROOM 523 BETHESDA MD 20814	CODE EMPS	7 ADMINISTERED BY (if other than Item 6) CODE	
8 NAME AND ADDRESS OF CONTRACTOR (No. street, county, State and ZIP Code) DEPARTMENT OF HOMELAND SECURITY ATTN DEBRA APANAVAGE OFFICE OF THE INSPECTOR GENERAL 245 MURRAY DRIVE SW MAIL STOP 2600 BUILDING 410 WASHINGTON DC 20528		(x) 9A AMENDMENT OF SOLICITATION NO	9B DATED (SEE ITEM 11)
CODE 052368391	FACILITY CODE	x 10A MODIFICATION OF CONTRACT/ORDER NO CPSC-I-16-0007	10B DATED (SEE ITEM 13) 09/23/2015

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers  is extended  is not extended.  
 Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning \_\_\_\_\_ copies of the amendment. (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12 ACCOUNTING AND APPROPRIATION DATA (if required)

See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO IN ITEM 10A
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF
X	D OTHER (Specify type of modification and authority) UNILATERAL MODIFICATION, FAR 43.103(b)

E. IMPORTANT: Contractor  is not  is required to sign this document and return \_\_\_\_\_ copies to the issuing office

14 DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)

DUNS Number: 052368391  
 COR: Todd Stevenson  
 Phone: (301) 504-6836  
 Email: tstevenson@cpsc.gov

Modification 0003 to Inter Agency Agreement CPSC-I-16-0007 is hereby issued to extend the period of performance for one year through September 30, 2017.

Period of Performance: 10/01/2016 to 09/30/2017

Continued ...

Except as provided herein all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect

15A NAME AND TITLE OF SIGNER (Type or print)	16A NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Eddie Ahmad
15B CONTRACTOR/OFFEROR  (Signature of person authorized to sign)	15C DATE SIGNED
16B UNITED STATES OF AMERICA  (Signature of Contracting Officer)	16C DATE SIGNED 9/28/16

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED  
CPSC-I-16-0007/0003

PAGE OF  
2 2

NAME OF OFFEROR OR CONTRACTOR  
DEPARTMENT OF HOMELAND SECURITY

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.				



**United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section**

IAA Number CPSC-I-16-0007 - 0000 - 0003  
 GT&C #                      Order #    Amendment/Mod #

<p><b>9. Estimated Agreement Amount (The Servicing Agency completes all information for the estimated agreement amount.)</b>                  (Optional for Assisted Acquisitions)</p>											
<p>Direct Cost _____                  Overhead Fees &amp; Charges _____                  Total Estimated Amount _____ \$0.00</p>	<p>Provide a general explanation of the Overhead Fees &amp; Charges</p>										
<p><b>10. STATUTORY AUTHORITY</b></p>											
<p><b>a. Requesting Agency's Authority (Check One)</b></p> <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">Franchise Fund</td> <td style="text-align:center;">Revolving Fund</td> <td style="text-align:center;">Working Capital Fund</td> <td style="text-align:center;">Economy Act (31 U.S.C. 1535/FAR 17.5)</td> <td style="text-align:center;">Other Authority</td> </tr> <tr> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> </tr> </table> <p>Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority</p>		Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
<p><b>b. Servicing Agency's Authority (Check One)</b></p> <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">Franchise Fund</td> <td style="text-align:center;">Revolving Fund</td> <td style="text-align:center;">Working Capital Fund</td> <td style="text-align:center;">Economy Act (31 U.S.C. 1535/FAR 17.5)</td> <td style="text-align:center;">Other Authority</td> </tr> <tr> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> <td style="text-align:center;"><input checked="" type="checkbox"/></td> <td style="text-align:center;"><input type="checkbox"/></td> </tr> </table> <p>Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority</p>		Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
<p><b>11. Requesting Agency's Scope (State and/or list attachments that support Requesting Agency's Scope.)</b>                  See Attached IAA</p>											
<p><b>12. Roles &amp; Responsibilities for the Requesting Agency and Servicing Agency (State and/or list attachments for the roles and responsibilities for the Requesting Agency and the Servicing Agency.)</b>                  See Attached IAA</p>											

United States Government  
Interagency Agreement (IAA) - Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section

IAA Number CPSC-I-16-0007 - 0000 - 0003  
GT&C # Order # Amendment/Mod #

<p>13. Restrictions (Optional) (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA).</p>
<p>14. Assisted Acquisition Small Business Credit Clause (The Servicing Agency will allocate the socio-economic credit to the Requesting Agency for any contract actions it has executed on behalf of the Requesting Agency.)</p>
<p>15. Disputes: Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume 1, Part 2, Chapter 4700, Appendix 10; Intragovernmental Business Rules.</p>
<p>16. Termination (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)</p> <p style="text-align: center;">30</p> <p>If this agreement is canceled, any implementing contract/order may also be canceled. If the IAA is terminated, the agencies shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.</p> <p>If the Servicing Agency incurs costs due to the Requesting Agency's failure to give the requisite notice of its intent to terminate the IAA, the Requesting Agency shall pay any actual costs incurred by the Servicing Agency as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.</p>
<p>17. Assisted Acquisition Agreements - Requesting Agency's Organizations Authorized To Request Acquisition Assistance for this IAA. (State or attach a list of Requesting Agency's organizations authorized to request acquisition assistance for this IAA.)</p>
<p>18. Assisted Acquisition Agreements - Servicing Agency's Organizations authorized to Provide Acquisition Assistance for this IAA. (State or attach a list of Servicing Agency's organizations authorized to provide acquisition for this IAA.)</p>
<p>19. Requesting Agency Clause(s) (Optional) (State and/or attach any additional Requesting Agency clauses.)</p>

United States Government  
 Interagency Agreement (IAA) - Agreement Between Federal Agencies  
 General Terms and Conditions (GT&C) Section

IAA Number CPSC-I-16-0007 - 0000 - 0003  
 GT&C # Order # Amendment/Mod #

20. Servicing Agency Clause(s) (Optional) (State and/or attach any additional Servicing Agency clauses.)

21. Additional Requesting Agency and/or Servicing Agency Attachments (Optional) (State and/or attach any additional Requesting Agency and/or Servicing Agency attachments.)

22. Annual Review of IAA

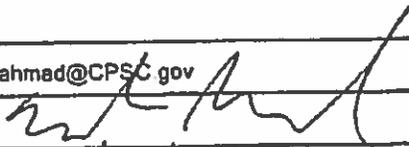
By signing this agreement, the parties agree to annually review the IAA if the agreement period exceeds one year. Appropriate changes will be made by amendment to the GT&C and/or modification to any affected Order(s).

**AGENCY OFFICIAL**

The Agency Official is the highest level accepting authority or official as designated by the Requesting Agency and Servicing Agency to sign this agreement. Each Agency Official must ensure that the general terms and conditions are properly defined, including the stated statutory authorities, and, that the scope of work can be fulfilled per the agreement.

The Agreement Period Start Date (Block 5) must be the same as or later than the signature dates.

Actual work for this IAA may NOT begin until an Order has been signed by the appropriate individuals, as stated in the Instructions for Blocks 37 and 38.

23.	Requesting Agency	Servicing Agency
Name	Eddie Ahmad	Megan H. Allison
Title	Contracting Officer	Director of Judicial Administration
Telephone Number(s)	(301) 504-7884	(202) 372-4442
Fax Number		(202) 372-8304
Email Address	Aahmad@CPSC.gov	Megan.H.Allison@uscg.mil
SIGNATURE		
Approval Date	9/28/16	9/28/16

**United States Government**  
**Interagency Agreement (IAA) – Agreement Between Federal Agencies**  
**Order Requirements and Funding Information (Order) Section**

IAA Number CPSC-I-16-0007 . MOD 0003 Servicing Agency's Agreement  
 GT&C #                      Order #                      Amendment/Mod #                      Tracking Number (Optional)                     

**PRIMARY ORGANIZATION/OFFICE INFORMATION**

<b>24.</b>	<b>Requesting Agency</b>	<b>Servicing Agency</b>
Primary Organization/Office Name	US Consumer Product Safety Comm.	USCG, Administrative Law Judge (ALJ) Program
Responsible Organization/Office Address	4330 East West Highway, Room 523 Bethesda, MD 20814-4408	2703 Martin Luther King Jr Ave SE Washington DC, 20593-7000

**ORDER/REQUIREMENTS INFORMATION**

**25. Order Action (Check One)**

New

**Modification (Mod)** List affected Order blocks being changed and explains the changes being made. For Example: for a performance period mod, state new performance period for this Order in Block 27. Fill out the Funding Modification Summary by Line (Block 26) if the mod involves adding, deleting or changing Funding for an Order Line.

This modification extends the period of performance into FY '17. FY '16 funding has expired and excess funds returned. FY '17 funds are currently unavailable; once an appropriation is enacted and a budget received, it is anticipated funds in the amount of \$500 will be obligated to this IAA.

**Cancellation** Provide a brief explanation for Order cancellation and fill in the Performance Period End Date for the effective cancellation date.

<b>26. Funding Modification Summary by Line</b>	Line # _____	Line # _____	Line # _____	Total of All Other Lines (attach funding details)	Total
Original Line Funding	\$	\$	\$	\$	\$0.00
Cumulative Funding Changes From Prior Mods (addition (+) or reduction (-))	\$	\$	\$	\$	\$0.00
Funding Change for This Mod	\$	\$	\$	\$	\$0.00
<b>TOTAL Modified Obligation</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Total Advance Amount (-)	\$	\$	\$	\$	\$0.00
<b>Net Modified Amount Due</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**27. Performance Period** Start Date 10-01-2016 End Date 09-30-2017  
 For a performance period mod, insert the start and end dates that reflect the new performance period. MM-DD-YYYY MM-DD-YYYY

IAA Order

IAA Number CPSC-I-16-0007  
GT&C #

MOD 0003  
Order # Amendment Mod #

Servicing Agency's Agreement  
Tracking Number (Optional)

28. Order Line/Funding Information													Line Number _____				
Requesting Agency Funding Information									Servicing Agency Funding Information								
ALC			61-00-0001														
Component TAS Requested by 10/1/2014	SP	ATA	ADD	BPDA	EPDA	A	MAIN	SUB	SP	ATA	AID	BPDA	EPDA	A	MAIN	SUB	
											070	2017	2017		0610	000	
OR Current TAS format			61-0100						70170610								
BETC			DIST						COLL								
Object Class Code (Optional)			US TREAS. CODE: 61170100														
BPN			TIN: 520978750						806754677								
BPN + 4 (Optional)			DUNS: 069287522														
Additional Accounting Classification Information (Optional)			0100A17DSE 2017 5258100000 GC00001300 251A0						TIN: 54-6010204 TPMA: 0610 TPIN: 7006								
Requesting Agency Funding Expiration Date 10-01-2016 MM-DD-YYYY									Requesting Agency Funding Cancellation Date 09-30-2020 MM-DD-YYYY								
Project Number & Title																	
Description of Products and/or Services, including the Bona Fide Need for this Order (State or attach a description of products/services, including the bona fide need for this Order.) * FY'17 funds are not presently available for this contract action. The Government's obligation under this contract is contingent upon the availability of appropriated funds from which payment for contract purposes can be made. It is anticipated that once an appropriation is enacted and the budget is received, funds in the amount of \$500.00 will be provided. * CPSC utilizes the services of the USCG ALJs to perform adjudicatory and case management functions with respect to administrative proceedings pursuant to 15 U.S.C. 2064(c) and the CPSC's Rules of Practice for Adjudicative Proceedings pursuant to 16 C.F.R. Part 1025. The U.S. Coast Guard Office of Administrative Law Judge will process, manage, and adjudicate certain CPSC administrative proceeding referred																	
North American Industry Classification System (NAICS) Number (Optional) _____																	
Breakdown of Reimbursable Line Costs									OR Breakdown of Assisted Acquisition Line Cost:								
Unit of Measure									Contract Cost			\$					
Quantity		Unit Price		Total				Servicing Fees			\$						
				\$ 0.00				Total Obligated Cost			\$ 0.00						
Overhead Fees & Charges			\$						Advance for Line (-)			\$					
Total Line Amount Obligated			\$ 0.00						Net Total Cost			\$ 0.00					
Advance Line Amount (-)			\$						Assisted Acquisition Servicing Fees Explanation								
Net Line Amount Due			\$ 0.00														
Type of Service Requirements <input checked="" type="checkbox"/> Severable Service <input type="checkbox"/> Non-severable Service <input type="checkbox"/> Not Applicable																	

**IAA Order**

IAA Number CPSC-I-16-0007  
GT&C #

MOD 0003  
Order # Amendment Mod #

Servicing Agency's Agreement  
Tracking Number (Optional)

**29. Advance Information** (Complete Block 29 if the Advance Payment for Products Services was checked "Yes" on the GT&C.)

Total Advance Amount for the Order \$ \_\_\_\_\_ [All Order Line advance amounts (Block 28) must sum to this total.]

Revenue Recognition Methodology (according to SFAS 7) (Identify the Revenue Recognition Methodology that will be used to account for the Requesting Agency's expense and the Servicing Agency's revenue)

Straight-line Provide amount to be accrued \$ \_\_\_\_\_ and Number of Months \_\_\_\_\_

Accrual Per Work Completed - Identify the accounting posting period:

Monthly per work completed & invoiced

Other Explain other regular period (bimonthly, quarterly, etc.) for posting accruals and how the accrual amounts will be communicated if other than billed. \_\_\_\_\_

**30. Total Net Order Amount:** \$ 0.00

[All Order Line Net Amounts Due for reimbursable agreements and Net Total Costs for Assisted Acquisition Agreements (Block 28) must sum to this total.]

**31. Attachments** (State or list attachments.)

Key project and/or acquisition milestones (Optional except for Assisted Acquisition Agreements)

Other Attachments (Optional)

**BILLING & PAYMENT INFORMATION**

**32. Payment Method** (Check One) (Intra-governmental Payment and Collection (IPAC) is the Preferred Method.)  
If IPAC is used, the payment method must agree with the IPAC Trading Partner Agreement (IPA)

Requesting Agency Initiated IPAC       Servicing Agency Initiated IPAC

Credit Card       Other Explain other payment method and reasoning \_\_\_\_\_

**33. Billing Frequency** (Check One)

[An Invoice must be submitted by the Servicing Agency and accepted by the Requesting Agency BEFORE funds are reimbursed (i.e., via IPAC transaction)]

Monthly       Quarterly       Other Billing Frequency (include explanation) \_\_\_\_\_

**34. Payment Terms** (Check One)

7 days       Other Payment Terms (include explanation) \_\_\_\_\_

**IAA Order**

IAA Number CPSC-1-16-0007  
GT&C #

MOD 0003  
Order # Amendment Mod #

Servicing Agency's Agreement  
Tracking Number (Optional)

**35. Funding Clauses/Instructions (Optional)** (State and/or list funding clauses instructions.)

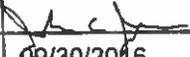
**36. Delivery/Shipping Information for Products (Optional)**

Agency Name	
Point of Contact (POC) Name & Title	
POC Email Address	
Delivery Address /Room Number	
POC Telephone Number	
Special Shipping Information	

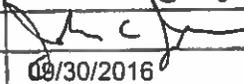
**APPROVALS AND CONTACT INFORMATION**

**37. PROGRAM OFFICIALS**

The Program Officials, as identified by the Requesting Agency and Servicing Agency, must ensure that the scope of work is properly defined and can be fulfilled for this Order. The Program Official may or may not be the Contracting Officer depending on each agency's IAA business process.

	Requesting Agency	Servicing Agency
Name	Todd Stevenson	John C. Johns
Title	Secretary	Managing Attorney Adviser
Telephone Number	(301) 504-6836	(410) 962-7434
Fax Number	(301) 504-0127	(410) 962-1742
Email Address	tstevenson@cpsc.gov	John.C.Johns@uscg.mil
SIGNATURE	tstevenson@cpsc.gov <small>Digitally signed by tstevenson@cpsc.gov</small>	
Date Signed	v <small>Date: 2016.09.30 11:11:39 -0400</small>	09/30/2016

**38. FUNDING OFFICIALS** - The Funds Approving Officials, as Identified by the Requesting Agency and Servicing Agency, certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order. The Requesting Agency Funding Official signs to obligate funds. The Servicing Agency Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Requesting Agency, in accordance with the agreement.

	Requesting Agency	Servicing Agency
Name	James Baker	John C. Johns
Title	Budget Officer	Allowance Fund Control (AFC) Manager
Telephone Number	(301) 504-7575	(410) 962-7434
Fax Number		(410) 962-1742
Email Address	jbaker@cpsc.gov	John.C.Johns@uscg.mil
SIGNATURE		
Date Signed	9/30/2016	09/30/2016

**SAF**

**IAA Order**

IAA Number CPSC-I-16-0007  
GT&C #

MOD 0003  
Order # Amendment/Mod #

Servicing Agency's Agreement  
Tracking Number (Optional)

CONTACT INFORMATION		
<b>FINANCE OFFICE Points of Contact (POCs)</b>		
The finance office points of contact must ensure that the payment (Requesting Agency), billing (Servicing Agency), and advance/accounting information are accurate and timely for this Order.		
<b>39.</b>	<b>Requesting Agency (Payment Office)</b>	<b>Servicing Agency (Billing Office)</b>
Name	Cindy Coszaller	Russell Gibson
Title	Accounting Technician	PO1- Storekeeper
Office Address	CPSC Act Payable Br., AM-160 PO Box 25710, Oklahoma City, OK 73125	2703 Martin Luther King Jr., Ave SE, Stop 7000 Washington, DC 20593-7000
Telephone Number	(405) 954-8250	(202) 372-4443
Fax Number		(202) 372-8304
Email Address	9-AMC-AMZ-CPSC-Accounts-Payable@h	russell.d.gibson@uscg.mil
Signature & Date (Optional)		
<b>40. ADDITIONAL Points of Contacts (POCs) (as determined by each Agency)</b>		
This may include CONTRACTING Office Points of Contact (POCs).		
	<b>Requesting Agency</b>	<b>Servicing Agency</b>
Name	Eddie Ahmad	
Title	Contracting Officer	
Office Address	4330 East West Highway, Rm. 523 Bethesda, MD 20814-4408	
Telephone Number	(301) 504-7884	
Fax Number		
Email Address	aahmad@cpsc.gov	
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		