

2 AMENDMENT/MODIFICATION NO 3 EFFECTIVE DATE 4 REQUISITION/PURCHASE REQ. NO 5 PROJECT NO (If applicable)
 0001 See Block 16C REQ-2100-16-0013

6 ISSUED BY CODE 7 ADMINISTERED BY (If other than Item 6) CODE
 FMPS
 CONSUMER PRODUCT SAFETY COMMISSION
 DIV OF PROCUREMENT SERVICES
 4330 EAST WEST HWY
 ROOM 523
 BETHESDA MD 20814

8 NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) 9A AMENDMENT OF SOLICITATION NO.
 OFFICE OF LANGUAGE SERVICES (x)
 STATE UNITED STATES DEPT OF 9B DATED (SEE ITEM 11)
 2401 E ST NW
 SA-1 14TH FLOOR
 WASHINGTON DC 20522-0001
 10A MODIFICATION OF CONTRACT/ORDER NO.
 CPSC-I-16-0018
 10B DATED (SEE ITEM 13)
 03/21/2016
 CODE 024760907 FACILITY CODE

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) Net Increase: \$30,000.00
 0100A16DSE 2016 5314900000 EXIP002100 25210

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
 D OTHER (Specify type of modification and authority)
 X FUNDING ONLY, 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: 024760907
 COR: Sydney Lucia
 PHONE: 301-504-7252
 EMAIL: SLUCIA@CPSC.GOV

Modification No. 0001 to agreement CPSC-I-16-0018 is being issued to provide additional funding for translations as follows:

- The total amount of this IAA is increased by \$30,000.00 to a new total amount of \$70,000.00.

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 15C DATE SIGNED 16B UNITED STATES OF AMERICA 16C DATE SIGNED
 (Signature of person authorized to sign) (Signature of Contracting Officer) 8/9/16

30

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
CPSC-I-16-0018/0001

PAGE OF
2 2

NAME OF OFFEROR OR CONTRACTOR
OFFICE OF LANGUAGE SERVICES

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Change Item 0001 to read as follows (amount shown is the obligated amount):</p> <p>Period of Performance: March 29, 2016 - September 30, 2016</p> <p>Translations of the CPSC's materials to support the agency's 2011-2016 Strategic Plan, specifically with regard to raising awareness about product safety matters among key stakeholders. Due to language barriers, many foreign stakeholders, including government officials and manufacturers have difficulty understanding U.S. laws and regulations on product safety. We request translations of documents including power point presentations, video scripts, and web content. In addition, we require interpretation services for meetings and training events.</p> <p>VENDOR: U.S. Department of State Office of Language Services - SA1 2201 C Street NW Washington, DC 20522</p> <p>ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT.</p>				30,000.00

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

IAA Number **CPSC-I-16-0018** -0000- **MOD 0001**
 GT&C # _____ Order # Amendment/Mod # _____

9. Estimated Agreement Amount (The Servicing Agency completes all information for the estimated agreement amount.)
 (Optional for Assisted Acquisitions)

Direct Cost	\$70,000.00	Provide a general explanation of the Overhead Fees & Charges 25% of the language services cost is allocated to overhead fees and charges incurred in acquiring linguistic services and managing the language services work-flow to ensure quality and timeliness. These costs are incurred upfront and non-refundable.
Overhead Fees & Charges		
Total Estimated Amount	\$70,000.00	

10. STATUTORY AUTHORITY

a. Requesting Agency's Authority (Check One)

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"/>

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority

b. Servicing Agency's Authority (Check One)

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 type="checkbox"/>	<input checked="" type="checkbox"/>

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority
 Section 193 of P.L. 103-236; US Code: 22 USC 2895a

11. Requesting Agency's Scope (State and or list attachments that support Requesting Agency's Scope.)

12. Rules & 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.)

Appendix A: Interpretation Guidelines.
 Appendix B: Translation Guidelines.

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

IAA Number CPSC-I-16-0018 - 0000 - MOD 0001
GT&C # Order # Amendment/Mod #

13. Restrictions (Optional) (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA.)

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.)

15. Disputes: Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume I, Part 2, Chapter 4700, Appendix 10: Intragovernmental Business Rules.

16. Termination (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)

90 Days

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.

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.

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.)

N/A

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.)

N/A

19. Requesting Agency Clause(s) (Optional) (State and or attach any additional Requesting Agency clauses.)

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

IAA Number CPSC-I-16-0018 0000 MOD 0001
 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)

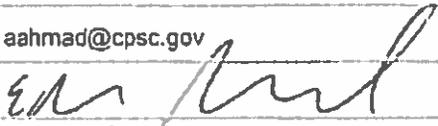
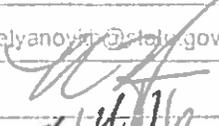
22. Annual Review of IAA
 By signing this agreement, the parties agree to annually review the IAA if the agreement period exceeds one year. Appropriate changes will be made by amendment to the GT&C and/or modification to any affected Order(s).

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	Katherine Yemelyanov
Title	CPSC Contracting Officer	Deputy Director, A/OPR/LS
Telephone Number(s)	(301) 504-7884	202-261-8711
Fax Number	(978) 244-8640	
Email Address	aahmad@cpsc.gov	yemelyanov@state.gov
SIGNATURE		
Approval Date	8/4/16	8/4/16

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

IAA Number CPSC-I-16-0018
GT&C #

MOD 0001
Order # Amendmen/Mod #

Servicing Agency's Agreement
Tracking Number (Optional)

PRIMARY ORGANIZATION/OFFICE INFORMATION					
24.	Requesting Agency			Servicing Agency	
Primary Organization/Office Name	EXIP - Consumer Product Safety Commission			US Department of State Office of Language Services	
Responsible Organization/Office Address	4330 East West Highway Bethesda, MD 20814			SA-01, 2201 C Street NW, Washington, DC 20001	
ORDER/REQUIREMENTS INFORMATION					
25. Order Action (Check One)					
<input type="checkbox"/> New					
<input checked="" type="checkbox"/> 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. Block #26 "Funding Summary Block" is hereby modified to obligate additional funding in the amount of \$30,000.					
<input type="checkbox"/> Cancellation Provide a brief explanation for Order cancellation and fill in the Performance Period End Date for the effective cancellation date.					
26. Funding Modification Summary by Line	Line # 0001	Line #	Line #	Total of All Other Lines (attach funding details)	Total
Original Line Funding	\$40,000.00	\$	\$	\$	\$40,000.00
Cumulative Funding Changes From Prior Mods (addition (+) or reduction (-))	\$30,000.00	\$	\$	\$	\$30,000.00
Funding Change for This Mod	\$	\$	\$	\$	\$0.00
TOTAL Modified Obligation	\$70,000.00	\$0.00	\$0.00	\$0.00	\$70,000.00
Total Advance Amount (-)	\$	\$	\$	\$	\$0.00
Net Modified Amount Due	\$70,000.00	\$0.00	\$0.00	\$0.00	\$70,000.00
27. Performance Period	Start Date	07-26-2016	End Date	09-30-2016	
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-16-0018**
GT&C #

MOD 0001
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										19-00-0001							
Component	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	
TAS Requested by 10/1/2014			061	2016	2016		0100	000			019			X	0113	000	
Current TAS format			DO NOT USE - LEAVE BLANK						DO NOT USE - LEAVE BLANK								
BETC			DISB						COLL								
Object Class Code (Optional)			61160100														
BPN			DUNS: 069287522						02-4760907								
BPN + 4 (Optional)			TIN: 520978750														
Additional Accounting Classification/Information (Optional)			0100A16DSE-2016-5314900000-E XIP2100-25210														
Requesting Agency Funding Expiration Date 09-30-2016 MM-DD-YYYY									Requesting Agency Funding Cancellation Date 09-30-2021 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.) Please refer to Appendix A - Interpretation and/or Appendix B - Translation for Services Estimate																	
North American Industry Classification System (NAICS) Number (Optional)																	
Breakdown of Reimbursable Line Costs										Breakdown of Assisted Acquisition Line Cost:							
Unit of Measure										Contract Cost		\$					
Quantity	Unit Price	Total								Servicing Fees		\$					
1	\$30,000.00	\$ 30,000.00								Total Obligated Cost		\$ 0.00					
Overhead Fees & Charges				\$						Advance for Line (-)		\$					
Total Line Amount Obligated				\$ 30,000.00						Net Total Cost		\$ 0.00					
Advance Line Amount (-)				\$						Assisted Acquisition Servicing Fees Explanation							
Net Line Amount Due				\$ 30,000.00													
Type of Service Requirements																	
<input type="checkbox"/> Severable Service <input checked="" type="checkbox"/> Non-severable Service <input type="checkbox"/> Not Applicable																	

IAA Order

IAA Number CPSC-I-16-0018
GT&C #

MOD 0001
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 SFFAS 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: QUARTERLY

30. Total Net Order Amount: \$ 30,000.00
[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)
Please refer to Appendix B - Translation and/or Interpretation Services Estimate.

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 (TPA).

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-1-16-0018
GT&C #

MOD 0001
Order # Amendment/Mod #

Servicing Agency's Agreement
Tracking Number (Optional)

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

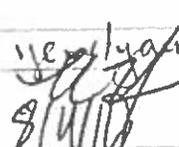
36. Delivery Shipping Information for Products (Optional)

Agency Name	U.S. Consumer Product Safety Commission
Point of Contact (POC) Name & Title	Sylvia Chen
POC Email Address	scchen@cpsc.gov
Delivery Address /Room Number	805
POC Telephone Number	(301) 504-7662
Special Shipping Information	

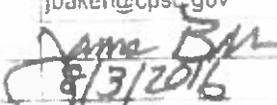
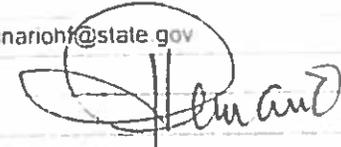
APPROVALS AND CONTACT INFORMATION

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	Richard O'Brien	DEPUTY Katherine Yemelyanov
Title	Director, International Programs	Director, A/OPR/LS
Telephone Number	(301) 504-7054	202-261- 8811
Fax Number		
Email Address	robrien@cpsc.gov	yemelyanov.kh@state.gov
SIGNATURE	robrien@cpsc.gov	
Date Signed		8/11/16

38. FUNDING OFFICIALS - The Funds Approving Officials, as identified by the Requesting Agency and Servicing Agency, certify that the funds 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 signs to work, bill collect and properly account for funds from the Requesting Agency in accordance with the agreement.

	Requesting Agency	Servicing Agency
Name	James Baker	Henry F. Lunario
Title	CPSC Budget Officer	Budget Officer
Telephone Number	(301) 504-7575	202-261-8792
Fax Number		
Email Address	jbaker@cpsc.gov	lunariohf@state.gov
SIGNATURE		
Date Signed	8/3/2016	8/5/16

IAA Order

IAA Number CPSC-I-16-0018
GT&C #

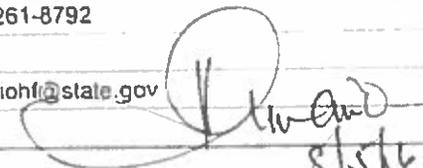
MOD 0001
Order # Amendment/Mod #

Servicing Agency's Agreement
Tracking Number (Optional)

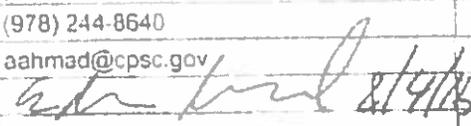
CONTACT INFORMATION

FINANCE OFFICE Points of Contact (POCs)

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.

39.	Requesting Agency (Payment Office)	Servicing Agency (Billing Office)
Name	Cindy Coszalter	Henry F. Lunario
Title	Agency Payment Officer, OFO FAA	Budget Officer
Office Address	P.O. Box 25710 Oklahoma City, OK 73125	US Department of State, A/OPR/LS, SA-01, 2201 C Street NW, Washington, DC 20520
Telephone Number	(405) 954-8250	202-261-8792
Fax Number		
Email Address	cindy.coszalter@faa.gov	lunarioh@state.gov
Signature & Date (Optional)		 8/5/16

40. ADDITIONAL Points of Contacts (POCs) (as determined by each Agency)
This may include CONTRACTING Office Points of Contact (POCs).

	Requesting Agency	Servicing Agency
Name	Eddie Ahmad	
Title	CPSC Contracting Officer	
Office Address	4330 East West Highway, Rm 523 Bethesda, MD 20814-4408	
Telephone Number	(301) 504-7884	
Fax Number	(978) 244-8640	
Email Address	aahmad@cpsc.gov	
Signature & Date (Optional)	 8/9/16	
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)		