



### MODIFICATION OF GRANT OR AGREEMENT

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1. U.S. FOREST SERVICE GRANT/AGREEMENT NUMBER: <b>19-FI-11420000-046 / 19-FO-11420000-311</b>	2. RECIPIENT/COOPERATOR GRANT or AGREEMENT NUMBER, IF ANY:	3. MODIFICATION NUMBER: <b>#001 (FI) / #002 (FO)</b>
4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4):  Eastern Region, State, Private and Tribal Forestry 626 E Wisconsin Ave, Milwaukee WI 53202	5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4):  Eastern Region, State, Private and Tribal Forestry 626 E Wisconsin Ave, Milwaukee WI 53202	
6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county):  Minnesota Department of Natural Resources 500 Lafayette RD N Saint Paul, MN 55155-4002	7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):	

### 8. PURPOSE OF MODIFICATION

CHECK ALL THAT APPLY:	This modification is issued pursuant to the modification provision in the grant/agreement referenced in item no. 1, above.
<input checked="" type="checkbox"/>	CHANGE IN PERFORMANCE PERIOD: Extend Master Fire Agreement & Operating Plan to 06/17/2026
<input type="checkbox"/>	CHANGE IN FUNDING:
<input type="checkbox"/>	ADMINISTRATIVE CHANGES:
<input type="checkbox"/>	OTHER (Specify type of modification):

**Except as provided herein, all terms and conditions of the Grant/Agreement referenced in 1, above, remain unchanged and in full force and effect.**

9. ADDITIONAL SPACE FOR DESCRIPTION OF MODIFICATION (add additional pages as needed):  
A new Master Agreement and Operating Plan will be negotiated, This extension will ensure continuity of the current agreement during the lengthy negotiation and review phases of said new agreement.

### 10. ATTACHED DOCUMENTATION (Check all that apply):

<input type="checkbox"/>	Revised Scope of Work
<input type="checkbox"/>	Revised Financial Plan
<input type="checkbox"/>	Other:

### 11. SIGNATURES

AUTHORIZED REPRESENTATIVE: BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED GRANT/AGREEMENT.

11.A. MN DNR SIGNATURE <b>Patty Thielen</b> Digitally signed by Patty Thielen Date: 2024.01.26 13:54:40 -06'00' (Signature of Signatory Official)	11.B. DATE SIGNED	11.C. U.S. FOREST SERVICE SIGNATURE 11.D. DATE SIGNED <b>ROBERT LUECKEL</b> Digitally signed by ROBERT LUECKEL Date: 2024.05.06 15:14:21 -05'00' (Signature of Signatory Official)
11.E. NAME (type or print): <b>Patty Thielen</b>	11.F. NAME (type or print): <b>ROBERT LUECKEL</b>	
11.G. TITLE (type or print): <b>MN DNR Chief State Forester</b>	11.H. TITLE (type or print): <b>Deputy Regional Forester</b>	
11.I. FWS SIGNATURE <b>WILLIAM MEEKS</b> Digitally signed by WILLIAM MEEKS Date: 2024.02.06 08:03:33 -06'00' (Signature of Signatory Official)	11.J. DATE SIGNED	11.K. BIA SIGNATURE <b>TAMMIE POITRA</b> Digitally signed by TAMMIE POITRA Date: 2024.02.13 14:08:08 -06'00' (Signature of Signatory Official)
11.M. NAME (type or print): <b>Will Meeks</b>	11.N. NAME (type or print): <b>Tammie Poitra</b>	
11.O. TITLE (type or print): <b>Regional Director</b>	11.P. TITLE (type or print): <b>Regional Director</b>	



Forest Service Grant/Agreement Number: 19-FI11420000-046

11.Q. NPS <b>JOHN PEARSON</b> Digitally signed by JOHN PEARSON Date: 2024.05.08 15:48:35 -05'00'	SIGNATURE	11.R. DATE SIGNED	11.S. OPS - HSEM <b>Kristi Rollwagen</b> Digitally signed by Kristi Rollwagen Date: 2024.02.08 16:48:48 -05'00'	SIGNATURE	11.T. DATE SIGNED 02/08/2024
(Signature of Signatory Official)			(Signature of Signatory Official)		
11.U. NAME (type or print): <b>Patrick Pearson</b>			11.V. NAME (type or print): <b>Kristi Rollwagen</b>		
11.W. TITLE (type or print): <b>Regional Chief of Fire and Aviation</b>			11.X. TITLE (type or print): <b>Director</b>		
11.Y. MN DPS, HLS <b>This signature box not used</b>	SIGNATURE	11.Z. DATE SIGNED	11.S. BLM <b>Leah Baker</b> Digitally signed by LEAH BAKER Date: 2024.08.24 10:38:51 -04'00'	SIGNATURE	11.T. DATE SIGNED
(Signature of Signatory Official)			(Signature of Signatory Official)		
11.CC. NAME (type or print):			11.V. NAME (type or print): <b>Leah Baker</b>		
11.EE. TITLE (type or print):			11.X. TITLE (type or print): <b>Associate State Director</b>		
<b>12. G&amp;A REVIEW</b>					
12.A. The authority and format of this modification have been reviewed and approved for signature by: <b>NICOLE PELTIER</b> Digitally signed by NICOLE PELTIER Date: 2024.01.29 15:50:07 -06'00'					12.B. DATE SIGNED
U.S. Forest Service Grants Management Specialist					

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## INSTRUCTIONS FOR FORM FS-1500-19

1. Enter the original U.S. Forest Service agreement number.
2. Enter the cooperator's agreement number, if applicable.
3. Enter the number for this Modification, i.e. 01, 02, or 03. The first modification to an instrument is '01', subsequent modifications receive a subsequent modification number (for example, the fourth modification is '04').
4. Enter the address of the G&A Specialist/Signatory Official responsible for this agreement.
5. Enter the address of the U.S. Forest Service Program/Project Manager or Lead Scientist responsible for this agreement.
6. Enter the cooperator's address.
7. Enter the cooperator's HHS Sub-Account numbers, if funding is provided on this modification (for example: G2412345003) (Only used by NA/S&PF and NRS)
8. Select all boxes that apply:
  - Change in Performance = updated performance period agreed to.
  - Change in Funding = obligation OR de-obligation amount and new totals.
  - Administrative = change in pay address, administrator address, correcting typing errors, etc.
  - Other = any other modification not described, such as update new objective to study plan, change the Principle Investigator, etc.
9. Insert changes such as updated provision, tasks, or any other data needed by the modification, add additional pages as needed.
10. Check all boxes that apply and ensure to attach these documents to the modification. Other attachments could include SF-424 forms.
11. A – D, self explanatory.
11. E – H, Type or print the names of signatory officials.
12. G&A Specialist signs and dates before sending to the individuals in block 11, if all modification data are approved for signature.