

FOURTH AMENDATORY AGREEMENT

THIS FOURTH AMENDATORY AGREEMENT is made and entered into by and between the **CITY AND COUNTY OF DENVER**, a municipal corporation of the State of Colorado (the “City”), and **SMG**, a Pennsylvania general partnership, whose address is 700 14th Street, Denver, Colorado 80202 hereinafter referred to as (“SMG”) together, the “Parties”.

WITNESSETH:

WHEREAS, the City and SMG entered into an Agreement dated November 18, 2008, as amended by an Amendatory Agreement dated January 11, 2012 and an Second Amendatory Agreement dated April 27, 2013 and a Third Amendatory Agreement dated May 23, 2014 pursuant to which SMG provides the City stagehand staffing and payroll services as needed to various City venues and facilities (collectively, the “Agreement”); and

WHEREAS, the Parties wish to amend the Agreement to extend the term and increase the compensation to SMG as follows; and

NOW, THEREFORE, in consideration of the premises and the mutual covenants and obligations herein set forth, the Parties agree as follows:

1. Section 4 of the Agreement, entitled “**Term of Agreement**”, is amended to read as follows:

“**4. Term of Agreement:** The term of this Agreement shall commence on January 1, 2009 (the “Effective Date”) and expire on December 31, 2017, unless earlier terminated in accordance with the terms of the Agreement.”

2. The first sentence of subsection 6.C. of the Agreement is amended to read as follows:

“Notwithstanding any other provision of this Agreement, in no event shall the City be liable under the terms of this Agreement for any amount in excess of the sum of **FORTY MILLION DOLLARS AND ZERO CENTS (\$40,000,000.00)**.”

3. Except as herein amended, the Agreement is affirmed and ratified in each and every particular.

SIGNATURE PAGES FOLLOW

Contract Control Number:

IN WITNESS WHEREOF, the parties have set their hands and affixed their seals at Denver, Colorado as of

SEAL

CITY AND COUNTY OF DENVER

ATTEST:

By _____

APPROVED AS TO FORM:

REGISTERED AND COUNTERSIGNED:

By _____

By _____

By _____



Contract Control Number: THTRS-CE93004-04

Contractor Name: S M G

By: John F. Burns

Name: John F. Burns
(please print) Chief Financial Officer

Title: _____
(please print)

ATTEST: [if required]

By: Sarah D. Meiklejohn

Name: SARAH D. MEIKLEJOHN
(please print)

Title: ADMINISTRATIVE ASSISTANT
(please print)

