

**SUBLEASE AGREEMENT BETWEEN  
THE CITY OF LINCOLN  
AND  
EXPERIENCE WORKS**

This sublease, made as of the 1<sup>st</sup> day of August, 2007 by and between the City of Lincoln, Nebraska, a municipal corporation in the State of Nebraska, hereinafter called the Sublessor, and Experience Works with a principle place of business at PO Box 4040 Des Moines, Iowa, 50333-4040, hereinafter referred to as Sublessee.

WHEREAS, the Sublessor entered into a Lease Agreement with Security National Properties Funding, LLC, leasing 13,718 square feet of office space at Gold's Building, 1010 N Street, Suite 150, Lincoln, Nebraska 68508 and said lease is identified as the "Lease" and Security National Properties Funding, LLC, hereinafter may be identified as "Landlord." The Lease is made a part hereof and attached as Exhibit A.

WHEREAS, the Sublessor wishes to sublet to Sublessee a portion of the City's leased area comprising 151 square feet, said portion hereinafter referred to as the "Premises."

NOW, THEREFORE, IN CONSIDERATION of the promises and mutual covenants herein set forth, the parties agree as follows:

1. Sublease of Premises. Sublessor does hereby sublease to Sublessee, and, Sublessee does hereby sublease from Sublessor, the Premises, at the rent, and upon the terms, covenants and conditions as hereby provided.
2. Term. The term of this Sublease Agreement shall commence on the 1<sup>st</sup> day of August, 2007 and shall terminate on the 30th day of June, 2008.
3. Rent. Annual rent is for 151 square feet of subleased office space. The rent schedule is:

Lease Term	Cost Per Square Foot	Monthly Rent	Total Rent
8/1/07 to 12/31/07	\$11.00	\$138.41	\$692.05
1/1/08 to 6/30/08	\$11.28	\$141.94	\$851.64
<b>Total Rent Owed Under Lease for 8/1/07 to 6/30/08</b>			<b><u>\$1,543.69</u></b>

Sublessee agrees to pay the Sublessor annual rent in the amount shown above, payable in equal monthly installments as shown above, in advance, commencing on the first day of August, 2007 and continuing monthly thereafter on the first day of each month, the last monthly installment to be due on June 1, 2008. Janitorial and utility services are to be provided and paid by the Landlord, Security National Properties Funding, LLC.

4. Leased Premises. Sublessee's rent payment represents payment for 151 square feet as apportioned below:

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- a. Occupied Space. This sublease provides Sublessee with 54 square feet of occupied space at Gold's Building, 1010 N Street, Suite 150, Lincoln, Nebraska, 68508 at the One Stop Career Center.
  - b. Common Space: Common space shall be apportioned according to the percentage of occupied space. The parties agree there is in total 4,889 square feet of occupied space and 8,829 square feet of common space. Sublessee is provided with 1.10% of occupied space. Applying that percentage to the 8,829 square feet of common space, this sublease provides Sublessee with 97 square feet of common space.
5. Sublessee shall be responsible for its own telephone and computer services supplied to the subleased Premises and shall agree to pay for such services.
6. Light Bulbs. If Security National Properties Funding, LLC, as the Landlord, changes and disposes of light bulbs as described in paragraph 10 of the Lease, the Sublessee agrees to pay their proportional share of the cost to the Sublessor in an amount equal to their percentage of the occupied space of the Premises area.
7. Maintenance and Alterations. Sublessee shall maintain their subleased occupied premises in a neat and clean condition. Sublessee shall not make any alterations, additions, installations or improvements.
8. Risk of Loss. The Sublessor is not in any way responsible for the property of Sublessee or any of its employees, agents, invitees, kept, stored or maintained on the premises and in no way assumes liability for any loss of property through fire, theft, pilferage, malicious mischief, or any other happening whatsoever.
9. Condition of Premises. Sublessee acknowledges that it has inspected the premises and is fully satisfied therewith. The Sublessor has made no representations or warranties with regard to the premises except as set forth herein.
10. Sublease. Sublessee shall not assign this lease without the written consent of the Sublessor and Landlord, but shall, in any event, have the right to sublet the subleased premises to any party or governmental subdivision with the approval of the Sublessor and Landlord. Sublessee shall adhere to the requirements in paragraph 19 of the Lease for approval of a sublet and give notice to the Sublessor and Landlord. The City as Sublessor and the Landlord, will respond within 10 days of receiving a request to sublet. Should the rental rate amount to a rental rate above the rental cost per square foot schedule listed in paragraph 3, Sublessee agrees that 50% of the rate above the rental rate will be provided to the Landlord and 30% of the rate above the rental rate will be provided to the City as Sublessor.

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11. Indemnification. To the fullest extent permitted by Nebraska law, Sublessee shall indemnify, defend, and Hold Harmless the Sublessor, its officers, agents, and employees from and against all claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from use of the premises by Sublessee or from failure of Sublessee to keep their Premises in good condition that results in any claim for damage whatsoever, including without limitation, any bodily injury, sickness, disease, death or any injury to or destruction of tangible or intangible property, including any loss of use resulting therefrom, and that are caused in whole or in part by the intentional or negligent act or omission of Sublessee or anyone directly or indirectly employed by Sublessee, or anyone for whose acts any of them may be liable. This section shall not require Sublessee to indemnify or Hold Harmless the Sublessor for any losses, claims, damages and expenses arising out of or resulting from the negligence of the Sublessor.

12. Insurance. During the term of this agreement, Sublessor shall obtain and maintain insurance coverage naming and protecting the Sublessee and Sublessor against claims for damages resulting from (a) bodily injury, including wrongful death, (b) personal injury liability, and (c) property damage which may arise from operations in or about the premises or arising from or connected with the use, conduct or operation of this agreement whether such operations be by Sublessee or by any subcontractor or anyone directly or indirectly employed by either of them.

a. Sublessee shall obtain public liability insurance naming and protecting Sublessee and the Sublessor, its officials, employees, and volunteers as insureds, against claims for damages. The minimum acceptable limits of liability to be provided by such insurance shall be as follows:

A. Bodily Injury and Property Damage	1,000,000 each Occurrence 2,000,000 Aggregate
B. Personal Injury Damage	1,000,000 each Occurrence
C. Contractual Liability	1,000,000 each Occurrence
D. Products Liability and Completed Operations	1,000,000 each Occurrence

13. Terms and Conditions of Sublease.

a. Binding Effect of Lease. The terms of this sublease are in regards to a portion of the premises leased by Sublessor to Sublessee, with such portion subject to the terms and conditions of the attached Lease between the City of Lincoln and Security National Properties Funding LLC,

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marked as Exhibit A and incorporated herein by reference. Except as to terms specifically set forth in this Sublease agreement, the Sublessee shall be bound by all of the terms and conditions and covenants to which Sublessor is bound in its capacity as "Tenant" or "Lessee" under and pursuant to the provisions of the Lease. In the event Sublessee fails to pay any rental when due or fails to keep or perform any other condition or term hereunder, Sublessee shall be subject to the default provisions of the Lease as if it were the "Tenant" or "Lessee" thereunder and Sublessor was the "Landlord" or "Lessor" and Sublessor may avail itself of any and all remedies set forth in the Lease. Sublessee hereby agrees to perform the undertakings of Sublessor (as tenant) under the Lease to the extent the same are applicable to the Premises herein; and to refrain from taking any action or suffering any condition which constitutes a violation of the Lease. It is hereby agreed, however, that Sublessor shall not be in default under this Sublease for failure to perform any work or make any repairs to the Premises or provide services or utilities which are the responsibility of the Landlord under the Lease, but Sublessor shall take all reasonable measures to ensure that Landlord performs such work and repairs.

14. Termination. In the event that the United States Federal Government or the State of Nebraska terminates the Workforce Investment Act Program or no funds are appropriated to the Sublessee by the United States for the purpose of paying rentals for locating in a one stop career center under the Workforce Investment Act Program, the Sublessee shall have the right to terminate this lease upon providing written notice to the City of Lincoln of its intent to terminate which will set forth in said notice the time and date of termination and said notice shall be provided to the City at least 60 days in advance of said termination date.
15. Notices. Any formal notices or communications received by the Sublessor from the Landlord, Security National Properties Funding, LLC will be provided to Sublessee by providing a written copy to the Sublessee's representative located at the One Stop Career Center. Any formal notices or communications by Sublessee to the Sublessor shall be in writing and mailed or personally served upon The City of Lincoln, Attention: Dan Cain, 1010 N Street, Lincoln, Nebraska, 68508.
16. This Sublease may be amended only by written agreement of both parties.
17. Capacity. The undersigned person representing Experience Works does hereby agree and represent that he/she is legally capable to sign this Agreement.

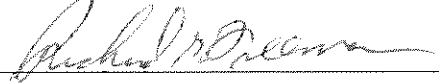
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IN WITNESS WHEREOF, the City of Lincoln, (Sublessor) and Experience Works (Sublessee) have executed this sublease on this \_\_\_\_\_ day of \_\_\_\_\_, 2007.

City of Lincoln  
555 South 10<sup>th</sup> Street  
Lincoln, Nebraska 68509  
SUBLESSOR

Experience Works  
PO Box 4040  
Des Moines, Iowa 50333-4040  
SUBLESSEE

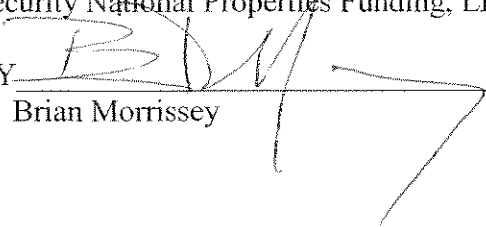
BY \_\_\_\_\_  
Chris Beutler, Mayor of Lincoln

BY   
Richard Freeman, Regional Director  
Experience Works

All parties acknowledge that the above signature on behalf of the City of Lincoln is conditional upon the approval of the Lincoln City Council of Lincoln, Nebraska.

Security National Properties Funding, LLC hereby consents to and approves the terms of the foregoing sublease.

Security National Properties Funding, LLC

BY   
Brian Morrissey

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# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/05/2007

PRODUCER (781)792-2727 FAX (781)792-2728  
Meagher Insurance Agency, Inc.  
800 Hingham Street  
Rockland, MA 02370

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED Experience Works, Inc.  
2200 Clarendon Boulevard  
Suite 1000  
Arlington, VA 22201

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Admiral Insurance Company	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L TR INSSD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	CA000004815-14	07/01/2007	07/01/2008	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ EXCLUDED
	<input checked="" type="checkbox"/> H&NO Auto Liab				PERSONAL & ADV INJURY \$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 4,000,000
<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG \$ 1,000,000
A	AUTOMOBILE LIABILITY	INCLUDED ABOVE			COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
<input checked="" type="checkbox"/> HIRED AUTOS					
<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
	EXCESS/UMBRELLA LIABILITY				AUTO ONLY: AGG \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				EACH OCCURRENCE \$
	<input type="checkbox"/> DEDUCTIBLE				AGGREGATE \$
	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?
	<input type="checkbox"/> YES <input type="checkbox"/> NO				WVC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT \$
	OTHER				E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
GENERAL LIABILITY DEDUCTIBLE IS \$5,000 PER CLAIM INCLUDING LOSS ADJUSTMENT EXPENSES. GENERAL LIABILITY POLICY AGGREGATE IS \$8,000,000.  
CERTIFICATE HOLDER IS INCLUDED AS ADDITIONAL INSURED WITH RESPECT TO PREMISES LEASED BY THE INSURED AT THE GOLD'S BUILDING IN LINCOLN, NEBRASKA. NO COVERAGE EXISTS FOR THE SOLE NEGLIGENCE OF THE ADDITIONAL INSURED.

**CERTIFICATE HOLDER**  
  
City of Lincoln  
Attn: Margaret Blatchford, City Attorney  
575 S. 10th Street  
Lincoln, NE 68508

**CANCELLATION**  
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.  
AUTHORIZED REPRESENTATIVE  
David Meagher/MEASMI