

1. DATE ISSUED MM/DD/YYYY 05/20/2020		1a. SUPERSEDES AWARD NOTICE dated except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA NO. 93.234 - Traumatic Brain Injury_State Demonstration Grant Program			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 90TBSG0040-03-00 Formerly		5. TYPE OF AWARD Demonstration	
4a. FAIN 90TBSG0040		5a. ACTION TYPE Non-Competing Continuation	
6. PROJECT PERIOD MM/DD/YYYY From 06/01/2018		Through MM/DD/YYYY 05/31/2021	
7. BUDGET PERIOD MM/DD/YYYY From 06/01/2020		Through MM/DD/YYYY 05/31/2021	
8. TITLE OF PROJECT (OR PROGRAM) Traumatic Brain Injury State Partnership Program Partner State Funding Opportunity			

**Department of Health and Human Services
Administration For Community Living**

330 C Street, SW
Washington, DC 20201

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
Public Health Service Act, Section 1252, as amended (please see
remarks for full statute)

9a. GRANTEE NAME AND ADDRESS HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF 920 Wildwood Dr Community and Public Health-DUP Jefferson City, MO 65109-5796	9b. GRANTEE PROJECT DIRECTOR Jennifer Braun 920 Wildwood Community and Public Health Jefferson City, MO 65109-5796 Phone: 573-522-2834
10a. GRANTEE AUTHORIZING OFFICIAL Ms. Marcia Mahaney 920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 Phone: 573-751-6014	10b. FEDERAL PROJECT OFFICER Ms. Dana Fink Switzer Building 330 C Street, SW Washington, DC 20201-1401 Phone: 202 795-7604

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 150,000.00	
II Total project costs including grant funds and all other financial participation <input type="checkbox"/> II		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and WageS 24,463.00		c. Less Cumulative Prior Award(s) This Budget Period 0.00	
b. Fringe Benefits 12,965.00		d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 150,000.00	
c. Total Personnel Costs 37,428.00		13. Total Federal Funds Awarded to Date for Project Period 450,000.00	
d. Equipment 0.00		14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):	
e. Supplies 921.00		YEAR	TOTAL DIRECT COSTS
f. Travel 11,783.00		a. 4	d. 7
g. Construction 0.00		b. 5	e. 8
h. Other 13,866.00		c. 6	f. 9
i. Contractual 152,992.00		15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
j. TOTAL DIRECT COSTS → 216,990.00		a. DEDUCTION	
k. INDIRECT COSTS 8,011.00		b. ADDITIONAL COSTS	
l. TOTAL APPROVED BUDGET 225,001.00		c. MATCHING	
m. Federal Share 150,000.00		d. OTHER RESEARCH (Add / Deduct Option)	
n. Non-Federal Share 75,001.00		e. OTHER (See REMARKS)	
		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:	
		a. The grant program legislation	
		b. The grant program regulations.	
		c. This award notice including terms and conditions, if any, noted below under REMARKS.	
		d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.	
		In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.	

REMARKS (Other Terms and Conditions Attached - Yes No)

This action is issued as a non-competing continuation award for the budget period identified in box 7., and federal amount on line 12d.

All of the Terms and Conditions from the prior Notice of Award dated June 6, 2018 remain in effect.

GRANTS MANAGEMENT OFFICIAL:

Tanielle Chandler, Grants Management Officer
Switzer Building
330 C Street, SW
Washington, DC 20201-0003
Phone: N/A

17.OBJ CLASS 41.45	18a. VENDOR CODE ██████████	18b. EIN ██████████	19. DUNS 878092600	20. CONG. DIST. 03
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 0-2994979	b. 90TBSG004003	c. AoD	d. \$150,000.00	e. 75-20-0142
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

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GRANT NO. 90TBSG0040-03-00	

STAFF CONTACTS

1. If you need additional information, please consult the ACL website at <https://acl.gov/grants/managing-grant>. In addition, your assigned Grants Management Specialist and ACL Project Officer are always available to answer questions. For inquiries related to the negotiation of this award or interpreting the fiscal or administrative requirements, policies, or provisions your contact is Grants Management Specialist, **Marlene Spencer** at **Marlene.Spencer@acl.hhs.gov** or **(202) 795-7442**. If you have questions related to program requirements, contact the Program Officer listed in section 10b of the Notice of Award.