



Grant Number: 1U58DP006043-01 REVISED
FAIN: U58DP006043

Principal Investigator(s):
Janet S Wilson, MEd, MPA

Project Title: Missouri Behavioral Risk Factor Surveillance System

Bret Fischer
Director, Division of Administration
MISSOURI STATE DEPT/ HEALTH & SENIOR SRV
920 Wildwood Drive
P.O. Box 570
Jefferson City, MO 65102

Award e-mailed to: grants@health.mo.gov

Budget Period: 03/29/2015 – 03/28/2016
Project Period: 03/29/2015 – 03/28/2020

Dear Business Official:

The Centers for Disease Control and Prevention hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to MISSOURI STATE DEPARTMENT OF HEALTH & SENIOR SERVICES in support of the above referenced project. This award is pursuant to the authority of 301A,311BC,317K2(42USC241A,243BC247BK2) and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,



Pamela L Render
Grants Management Officer
Centers for Disease Control and Prevention

Additional information follows

SECTION I – AWARD DATA – 1U58DP006043-01 REVISED

Award Calculation (U.S. Dollars)

Salaries and Wages	\$15,771
Fringe Benefits	\$7,885
Personnel Costs (Subtotal)	\$23,656
Travel Costs	\$1,000
Consortium/Contractual Cost	\$125,954

Federal Direct Costs	\$150,610
Federal F&A Costs	\$4,542
Approved Budget	\$155,152
Federal Share	\$155,152
TOTAL FEDERAL AWARD AMOUNT	\$155,152

AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

02	\$150,610
03	\$150,610
04	\$150,610
05	\$150,610

Fiscal Information:

CFDA Number: 93.336
EIN: XXXXXXXXXX
Document Number: 006043DP15

IC	CAN	2015	2016	2017	2018	2019
EH	939ZRHM	\$26,374	\$150,610	\$150,610	\$150,610	\$150,610
DP	939ZTGQ	\$128,778				

SUMMARY TOTALS FOR ALL YEARS		
YR	THIS AWARD	CUMULATIVE TOTALS
1	\$155,152	\$155,152
2	\$150,610	\$150,610
3	\$150,610	\$150,610
4	\$150,610	\$150,610
5	\$150,610	\$150,610

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

CDC Administrative Data:

PCC: / **OC:** 4151 / **Processed:** ERAAPPS 03/30/2015

SECTION II – PAYMENT/HOTLINE INFORMATION – 1U58DP006043-01 REVISED

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they

SECTION III – TERMS AND CONDITIONS – 1U58DP006043-01 REVISED

This award is based on the application submitted to, and as approved by, CDC 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 and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
- d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award has been assigned the Federal Award Identification Number (FAIN) U58DP006043. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

This award is funded by the following list of institutes. Any papers published under the auspices of this award must cite the funding support of all institutes.

National Center For Environmental Health (NCEH)

National Center For Chronic Disease Prev And Health Promo (CCDPH)

Treatment of Program Income:
Additional Costs

SECTION IV – DP Special Terms and Conditions – 1U58DP006043-01 REVISED

FUNDING OPPORTUNITY ANNOUNCEMENT NUMBER: DP15-1513
REVISION #1

NOTE 1: ADMINISTRATIVE CORRECTION: The purpose of this revised Notice of Award (NOA) is to correct the name of the Principal Investigator (PI) on the NOA dated March 23, 2015. The PI name is corrected to reflect: Janet S. Wilson, MEd, MPA.

NOTE 2: ADMINISTRATIVE CORRECTION: The purpose of this revised Notice of Award (NOA) also corrects the Indirect Cost language on the NOA dated March 23, 2015 as the stated rate was incorrect. The correct language is:

Indirect Costs: Indirect costs are approved based on the Indirect Cost Rate Agreement dated

January 23, 2014, which calculates indirect costs as Fixed and is approved at a rate of 19.20% of the base, which includes, direct salaries and wages including all fringe benefits. The effective dates of this indirect cost rate are from July 1, 2014 to June 30, 2015.

NOTE 3: Please be advised that the grantee must exercise proper stewardship over Federal funds by ensuring that all cost charged to their cooperative agreement are allowable, allocable, necessary, and reasonable.

NOTE 4: All other terms and conditions issued with the original Notice of Award remain in effect throughout the budget period unless changed in writing by the CDC Grants Management Officer.

PLEASE REFERENCE THE GRANT NUMBER ON ALL CORRESPONDENCE

STAFF CONTACTS

Grants Management Specialist: Annie D Harrison-camacho
Centers for Disease Control and Prevention
Procurement and Grants Office
2920 Brandywine Road, Mail Stop:E09
Atlanta, GA 30341
Email: atc4@cdc.gov **Phone:** 770-488-2098

SPREADSHEET SUMMARY

GRANT NUMBER: 1U58DP006043-01 REVISED

INSTITUTION: MISSOURI STATE DEPT/ HEALTH & SENIOR SRV

Budget	Year 1	Year 2	Year 3	Year 4	Year 5
Salaries and Wages	\$15,771				
Fringe Benefits	\$7,885				
Personnel Costs (Subtotal)	\$23,656				
Travel Costs	\$1,000				
Consortium/Contractual Cost	\$125,954				
TOTAL FEDERAL DC	\$150,610	\$150,610	\$150,610	\$150,610	\$150,610
TOTAL FEDERAL F&A	\$4,542				
TOTAL COST	\$155,152	\$150,610	\$150,610	\$150,610	\$150,610