

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**CDC Procurement and Grants Office**

2920 Brandywine Road  
Atlanta, GA 30341

**NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations)  
PHS ACT, SECT. 318 (42U.S.C. SEC 247C)

1. DATE ISSUED MM/DD/YYYY 04/11/2016	2. CFDA NO. 93.977	3. ASSISTANCE TYPE Project Grant
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1a. SUPERSEDES AWARD NOTICE dated 11/19/2015  
except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO. 6 NH25PS004345-03-01 Formerly 5H25PS004345-03	5. ACTION TYPE Post Award Amendment
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6. PROJECT PERIOD From 01/01/2014	Through 12/31/2018
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7. BUDGET PERIOD From 01/01/2016	Through 12/31/2016
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8. TITLE OF PROJECT (OR PROGRAM)  
IMPRVG STD PRGMS THRU ASSMT, ASSRNC, PLCY DEV & PREV STRAT

9a. GRANTEE NAME AND ADDRESS  
Missouri Dept. of Health and Senior Services/DSS&R  
920 WILDWOOD DR  
COMMUNITY AND PUBLIC HEALTH  
JEFFERSON CITY, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR  
Nicole Massey  
920 WILDWOOD DR  
MISSOURI DEPT OF HLTH  
JEFFERSON CITY, MO 65109  
Phone: [NO DATA]

10a. GRANTEE AUTHORIZING OFFICIAL  
Mr. Bret149358 Fischer  
920 Wildwood Dr  
Jefferson City, MO 65102-0570  
Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER  
Victoria Moody  
1600 Clifton Rd  
Atlanta, GA 30333  
Phone: 800-232-4636

**ALL AMOUNTS ARE SHOWN IN USD**

11. APPROVED BUDGET (Excludes Direct Assistance)	
I Financial Assistance from the Federal Awarding Agency Only	<b>I</b>
II Total project costs including grant funds and all other financial participation	
a. Salaries and Wages .....	513,256.00
b. Fringe Benefits .....	256,628.00
c. Total Personnel Costs .....	769,884.00
d. Equipment .....	0.00
e. Supplies .....	36,276.00
f. Travel .....	35,856.00
g. Construction .....	0.00
h. Other .....	383,199.00
i. Contractual .....	448,552.00
j. TOTAL DIRECT COSTS →	1,673,767.00
k. INDIRECT COSTS	160,904.00
<b>l. TOTAL APPROVED BUDGET</b>	<b>1,834,671.00</b>
m. Federal Share	1,834,671.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION	
a. Amount of Federal Financial Assistance (from item 11m)	1,834,671.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	460,913.00
<b>d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</b>	<b>1,373,758.00</b>
<b>13. Total Federal Funds Awarded to Date for Project Period</b>	<b>5,654,407.00</b>

14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):			
YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a.		d.	
b.		e.	
c.		f.	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:		<b>b</b>
a. DEDUCTION		
b. ADDITIONAL COSTS		
c. MATCHING		
d. OTHER RESEARCH (Add / Deduct Option)		
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)

GRANTS MANAGEMENT OFFICIAL: **Arthur Lusby, Grants Management Officer, Team Lead**

17. OBJ CLASS 41.51	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. 6-939ZRRY	b. 004345AA14	c. PS	d. \$1,181,855.00	e. 75-16-0950
22. a. 6-939ZRLJ	b. 004345AA14	c. PS	d. \$0.00	e. 75-16-0950
23. a. 6-939ZRJQ	b. 004345AA14	c. PS	d. \$191,903.00	e. 75-16-0950

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 2	DATE ISSUED 04/11/2016
GRANT NO. 6 NH25PS004345-03-01	

**Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

# AWARD ATTACHMENTS

Missouri Dept. of Health and Senior  
Services/DSS&R

6 NH25PS004345-03-01

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1. Remaining 75% Funding

**Funding Opportunity Announcement (FOA) Number: PS14-1402**  
**Award Number: 5H25PS004345-03**  
**Award Type: Cooperative Agreement**  
**Applicable Regulations: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards**

**45 CFR Part 75 supersedes regulations at 45 CFR Part 74 and Part 92**

<b>REVISED AWARD INFORMATION</b>
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The purpose of this revised Notice of Award is to award partial funding in the amount of **\$1,373,758**. Previously, **\$460,913** had been awarded, making the current total available award amount **\$1,834,671** of the approved **\$1,834,671** for the Year **03** budget period which is **01/01/2016** through **12/31/2016**.

**This award is fully funded for this budget period.**

**Budget Revision Requirement:** The revised itemized budget in the amount of **\$1,834,671** has been reviewed and found to be acceptable as submitted; therefore, the final revised budget is incorporated into the award by reference. The Budget Revision Requirement in the Notice of the Award has been satisfied. This action is in response to the grantee's correspondence dated **February 11, 2016**.

**Stewardship:** The grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to your cooperative agreement are allowable, allocable, and reasonable and that they address the highest priority needs as they relate to this program.

All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

**PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE**

**Programmatic Contact:**

**Project Officer NCHHSTP:** Victoria Moody  
Division of HIV/AIDS Prevention  
1600 Clifton Rd, MS E-58  
Atlanta, GA 30333  
**Email:**[vcm9@cdc.gov](mailto:vcm9@cdc.gov) **Phone:**404.639.1202

**STAFF CONTACTS**

**Grants Management Specialist:** Bernadette Cunningham  
Center for Disease Control and Prevention  
Office of Grants Services  
2920 Brandywine Road MS E-14  
Atlanta, GA 30341  
**Email:** hts8@cdc.gov **Phone:** 770-488-6135

**Grants Management Officer:** Arthur Lusby  
Centers for Disease Control and Prevention (CDC)  
Office of Grants Services  
2920 Brandywine Road, MS E-15  
Atlanta, GA 30341  
**Email:** alusby@cdc.gov **Phone:** (770) 488-2865 **Fax:** 770-488-2868