Notice of Award

Award# 6 NU58DP006506-03-03

FAIN# NU58DP006506

Federal Award Date: 09/15/2021

Recipient Information

1. Recipient Name

Missouri Department of Health 920 Wildwood Dr Missouri Department of Health Jefferson City, MO 65109-5796 [NO DATA]

- 2. Congressional District of Recipient
- 3. Payment System Identifier (ID)
- 4. Employer Identification Number (EIN)
- 5. Data Universal Numbering System (DUNS)
- 6. Recipient's Unique Entity Identifier
- 7. Project Director or Principal Investigator

Mr. Steve Cramer Section Administrator steve.cramer@health.mo.gov 573-522-2806

8. Authorized Official

Ms Marcia A Mahaney
Director
Marcia.Mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mrs. Rhonda Colbert Grants Management Specialist hvx1@cdc.gov 770-488-2848

10.Program Official Contact Information

Everett Jackson Public Health Advisor pvw4@cdc.gov 1111111111

Federal Award Information

11. Award Number

6 NU58DP006506-03-03

12. Unique Federal Award Identification Number (FAIN) NUSSDP006506

13. Statutory Authority

301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241(a) and 247b(k)(2)], as amended.

14. Federal Award Project Title

Missouri Physical Activity and Nutrition Program (MPAN)

15. Assistance Listing Number

3 430

16. Assistance Listing Program Title

State Physical Activity and Nutrition (SPAN)

17. Award Action Type

NGA Revision

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2020 - End Date 09/29/2021

20. Total Amount of Federal Funds Obligated by this Action
20a. Direct Cost Amount
20b. Indirect Cost Amount

21. Authorized Carryover \$0.00

22. Offset\$0.0023. Total Amount of Federal Funds Obligated this budget period\$884,164.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$884,164.00

26. Project Period Start Date 09/30/2018 - End Date 09/29/2023

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period

Not Available

\$0.00

\$0.00

\$0.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mrs. Rhonda Latimer Grants Management Officer

30. Remarks



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Recipient Information

Recipient Name

Missouri Department of Health

920 Wildwood Dr

Missouri Department of Health

Jefferson City, MO 65109-5796

[NO DATA]

Congressional District of Recipient

03

Payment Account Number and Type

Employer Identification Number (EIN) Data

Universal Numbering System (DUNS)

878092600

Recipient's Unique Entity Identifier

Not Available

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

| (Excludes Direct Assistance) Financial Assistance from the Federal Awarding A | gency Only |
|--|--------------|
| II. Total project costs including grant funds and all | J , , |
| a. Salaries and Wages | \$177,561.00 |
| b. Fringe Benefits | \$110,975.00 |
| c. TotalPersonnelCosts | \$288,536.00 |
| d. Equipment | \$0.00 |
| e. Supplies | \$924.00 |
| f. Travel | \$5,539.00 |
| g. Construction | \$0.00 |
| h. Other | \$18,402.00 |
| i. Contractual | \$512,767.00 |
| j. TOTAL DIRECT COSTS | \$826,168.00 |
| k. INDIRECT COSTS | \$57,996.00 |
| . TOTAL APPROVED BUDGET | \$884,164.00 |
| m. Federal Share | \$884,164.00 |
| n. Non-Federal Share | \$0.00 |

| 34. Accounting Classification Codes | | | | | | |
|-------------------------------------|----------------|---------------------|--------------|---------------------------------|---------------|--|
| FY-ACCOUNT NO. | DOCUMENT NO. | ADMINISTRATIVE CODE | OBJECT CLASS | AMT ACTION FINANCIAL ASSISTANCE | APPROPRIATION | |
| 0-921047C | 18NU58DP006506 | DP | 41.51 | \$0.00 | 75-20-0948 | |



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FAIN# NU58DP006506

Federal Award Date: 09/15/2021

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 |
| Total | \$0.00 | \$0.00 | \$0.00 |

AWARD ATTACHMENTS

Missouri Department of Health

6 NU58DP006506-03-03

1. Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

HHS Non-Discrimination Legal Requirements for Recipients of Federal Financial Assistance

The purpose of this Notice of Award amendment is to notify you that the Centers for Disease Control and Prevention (CDC) incorporated Department of Health and Human Services (HHS) non-discrimination legal requirements for recipients of federal financial assistance into the CDC General Terms and Conditions within your Notice of Award. The new requirements are effective immediately. The requirements are in the General Requirements section of the General Terms and Conditions and are also listed below.

You must administer your project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html and https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html.

- You must take reasonable steps to ensure that your project provides meaningful access
 to persons with limited English proficiency. For guidance on meeting your legal
 obligation to take reasonable steps to ensure meaningful access to your programs or
 activities by limited English proficient individuals, see https://www.lep.gov/.
- For information on your specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and taking appropriate steps to provide effective communication, see http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html.
- HHS funded health and education programs must be administered in an environment free of sexual harassment, see https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html.
- For guidance on administering your project in compliance with applicable federal
 religious nondiscrimination laws and applicable federal conscience protection and
 associated anti-discrimination laws, see https://www.hhs.gov/conscience/conscience-protections/index.html and https://www.hhs.gov/conscience/religious-freedom/index.html.

Please be advised that recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

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 your award number on all correspondence including each page of all attachments.

Office of Grant Services Personnel:

GMS Contact:

Rhonda Colbert, Grants Management Specialist
Grants Management Specialist
Branch 5 Supporting Chronic Diseases and Injury Prevention
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
hvx1@cdc.gov | 770-488-2848 office

^{*}The Grants Management Officer & Project Officer's information can be found on page 1 of this Notice of Award.