

Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU58DP006520-04-01 FAIN# NU58DP006520 Federal Award Date: 07/07/2021

Recipient Information Federal Award Information				
1. Recipient Name Missouri Department of Health 920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 [NO DATA]	 11. Award Number 6 NU58DP006520-04-01 12. Unique Federal Award Identification Number (FAIN) NU58DP006520 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. 			
 Congressional District of Recipient ⁰³ Payment System Identifier (ID) Employer Identification Number (EIN) 	 14. Federal Award Project Title Diabetes and Heart Disease & Stroke Prevent Programs-Improving the Health or Prevention and Management of Diabetes and Heart Disease and Stroke 15. Assistance Listing Number 93.426 16. Assistance Listing Program Title 	f Americans through		
 Data Universal Numbering System (DUNS) 878092600 Recipient's Unique Entity Identifier 	Improving the Health of Americans through Prevention and Management of Dia Stroke-Financed in part by 2018 Prevention and Public Heal 17. Award Action Type Budget Revision	abetes and Heart Disease and		
7. Project Director or Principal Investigator Mr. Steve Cramer Section Administrator steve.cramer@health.mo.gov	18. Is the Award R&D? No Summary Federal Award Financial Inform 19. Budget Period Start Date 06/30/2021 - End Date 06/29/2022	nation		
573-522-2806 8. Authorized Official Mrs. Marcia Mahaney Director, Division of Admnistration marcia.mahaney@health.mo.gov 573-751-6014	 19. Budget Period Start Date 00/39/2021 - End Date 00/29/2022 20. Total Amount of Federal Funds Obligated by this Action 20a. Direct Cost Amount 20b. Indirect Cost Amount 21. Authorized Carryover 22. Offset 	\$0.00 \$7,578.00 (\$7,578.00) \$0.00 \$0.00		
Federal Agency Information CDC Office of Financial Resources 9. Awarding Agency Contact Information Ms. Daryl Barksdale	 23. Total Amount of Federal Funds Obligated this budget period 24. Total Approved Cost Sharing or Matching, where applicable 25. Total Federal and Non-Federal Approved this Budget Period 26. Project Period Start Date 09/30/2018 - End Date 06/29/2023 	\$2,168,396.00 \$0.00 \$2,168,396.00		
GMS xxj8@cdc.gov 770-488-1087	27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	Not Available		
10.Program Official Contact Information Mr. Robert Montierth nxv9@cdc.gov 404.498.5378	 28. Authorized Treatment of Program Income ADDITIONAL COSTS 29. Grants Management Officer – Signature Ms. Stephanie Latham Team Lead, Grants Management Officer 			

30. Remarks

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

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Recipient Information	33. Approved Budget (Excludes Direct Assistance)		
Recipient Name Missouri Department of Health	 Financial Assistance from the Federal Awarding Agency Only Total project costs including grant funds and all other financial participation 		
920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 [NO DATA]	 a. Salaries and Wages b. Fringe Benefits c. TotalPersonnelCosts 	\$423,919.00 \$264,949.00 \$688,868.00	
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	 d. Equipment e. Supplies f. Travel g. Construction h. Other i. Contractual 	\$0.00 \$7,790.00 \$10,216.00 \$0.00 \$37,656.00 \$1,292,981.00	
	j. TOTAL DIRECT COSTS k. INDIRECT COSTS	\$2,037,511.00 \$130,885.00	
31. Assistance TypeCooperative Agreement32. Type of AwardOther	1. TOTAL APPROVED BUDGET m. Federal Share	\$2,168,396.00	
	n. Non-Federal Share	\$2,168,396.00 \$0.00	
34. Accounting Classification Codes			

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9210481	18NU58DP006520	DP	41 51	\$0 00	75-X-0948
1-9390G76	18NU58DP006520	DP	41 51	\$0 00	75-X-0948



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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 NU58DP006520-04-01

1. Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Revised Budget: The purpose of this amended Notice of Award is to approve the **revised budget** submitted by your organization dated June 22, 2021. Funds have been distributed as indicated in the approved budget of this Notice of Award.

Indirect Costs: Indirect costs are approved based on the negotiated indirect cost rate agreement dated March 30, 2021, which calculates indirect costs as follows, a Fixed Rate is approved at a rate of 19% 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, 2021 to June 30, 2022.