#### Notice of Award

Award# 6 NU58DP007495-01-01

FAIN# NU58DP007495

Federal Award Date: 12/14/2023

#### **Recipient Information**

#### 1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

920 Wildwood Dr

-DUP

Jefferson City, MO 65109-5796

[NO DATA]

# 2. Congressional District of Recipient

#### 3. Payment System Identifier (ID)

1446000987B7

# 4. Employer Identification Number (EIN) 446000987

- 5. Data Universal Numbering System (DUNS) 878092600
- 6. Recipient's Unique Entity Identifier (UEI)

  UETLXV8NG8F4

#### 7. Project Director or Principal Investigator

Dr. Sandra Hentges sandra.hentges@health.mo.gov 5735222862

#### 8. Authorized Official

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

#### **Federal Agency Information**

CDC Office of Financial Resources

#### 9. Awarding Agency Contact Information

Ms. LaKasa Wyatt lgw5@cdc.gov 770-488-2728

#### 10.Program Official Contact Information

Desiree Brown Program Officer jwu1@cdc.gov 11111111111

#### **Federal Award Information**

#### 11. Award Number

6 NU58DP007495-01-01

#### 12. Unique Federal Award Identification Number (FAIN)

NU58DP007495

#### 13. Statutory Authority

Public Health Service Act, as amended, Section 301(a) and Section 317K, 42 U.S.C. 241(a); 42 U.S.C. 247b-12

#### 14. Federal Award Project Title

BOLD Public Health Programs to Address Alzheimer's Disease and Related Dementias

#### 15. Assistance Listing Number

93 334

#### 16. Assistance Listing Program Title

The Healthy Brain Initiative: Technical Assistance to Implement Public Health Actions related to Cognitive Health, Cognitive Impairment, and Caregiving at the S

#### 17. Award Action Type

**Budget Revision** 

#### 18. Is the Award R&D?

No

## **Summary Federal Award Financial Information**

19. Budget Period Start Date	09/30/2023	- End Date 09/29/2024	

20. Total Amount of Federal Funds Obligated by this Action	\$0.00
20a. Direct Cost Amount	\$15,251.00
20b. Indirect Cost Amount	(\$15,251.00)

**21.** Authorized Carryover

**22.** Offset \$0.00

23. Total Amount of Federal Funds Obligated this budget period

**24.** Total Approved Cost Sharing or Matching, where applicable \$270,000.00

25. Total Federal and Non-Federal Approved this Budget Period \$720,000.00

**26.** Period of Perfomance Start Date 09/30/2023 - End Date 09/29/2028

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

\$720,000.00

\$0.00

\$450,000.00

### ${\bf 28. \ Authorized \ Treatment \ of \ Program \ Income}$

ADDITIONAL COSTS

#### 29. Grants Management Officer - Signature

Ms. Pamela Render Grants Management Officer

#### 30. Remarks

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## **Recipient Information**

#### **Recipient Name**

MISSOURI DEPARTMENT OF HEALTH &

SENIOR SERVICES

920 Wildwood Dr

-DUP

Jefferson City, MO 65109-5796

[NO DATA]

**Congressional District of Recipient** 

03

**Payment Account Number and Type** 

1446000987B7

**Employer Identification Number (EIN) Data** 

446000987

**Universal Numbering System (DUNS)** 

878092600

Recipient's Unique Entity Identifier (UEI)

UETLXV8NG8F4

#### 31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

33.	Approved Bu	aget
(Ev	cludes Direct A	ccicta

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

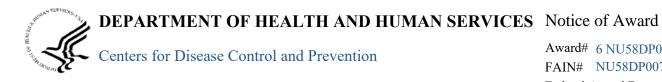
a. Salaries and Wages	\$33,507.00
b. Fringe Benefits	\$21,408.00
c. TotalPersonnelCosts	\$54,915.00
d. Equipment	\$0.00
e. Supplies	\$1,977.00
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$7,150.00
i. Contractual	\$374,536.00
j. TOTAL DIRECT COSTS	\$438,578.00
k. INDIRECT COSTS	\$11,422.00
1. TOTAL APPROVED BUDGET	\$450,000.00
m. Federal Share	\$450,000.00

#### 34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-939ZRJC	23NU58DP007495	DP	410Q	93.334	\$0.00	75-23-0948

n. Non-Federal Share

\$270,000.00



Award# 6 NU58DP007495-01-01 FAIN# NU58DP007495

Federal Award Date: 12/14/2023

#### **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 & SENIOR SERVICES

6 NU58DP007495-01-01

1. 7495 Budget Revision 11-28-23

Revised Budget: The purpose of this amended Notice of Award is to approve the revised budget submitted by your organization dated November 28, 2023. Funds have been distributed as indicated in the approved budget of this Notice of Award.