1. DATE ISSUED N	/M/DD/YYYY	1a. SUPERSE	EDES AWARD NOTI	CE dated 09/25/2018			
01/08/2019		except that any additions or restrictions previously imposed remain in effect unless specifically rescinded					
<b>2. CFDA NO.</b> 93.747 - Elder Abus	se Prevention In	terventions Pro	ogram				
3. ASSISTANCE TYP	E Cooperative	Agreement					
4. GRANT NO. 90EJSG0003-02-05			5. TYPE OF AWARD				
Formerly			Demonstration				
4a. FAIN 90EJSG00	03		5a. ACTION TYPE	Post Award Amendment			
6. PROJECT PERIO	D MM/DD	YYYY		MM/DD/YYYY			
From	09/01/2	2016	Through	08/31/2019			
7. BUDGET PERIOD	MM/DD	YYYY	_	MM/DD/YYYY			
From	00/01/2	017	Through	09/21/2010			

## Department of Health and Human Services Administration For Community Living

**AOA Elder Justice & Adult Protective Services APS Grants to States** 

330 C Street, SW Washington, DC 20201

## **NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations)
OAA Sect 411 and 751; Title XX of SSA, Subtitle B, Section 2042;
amended by ACA, subtitle H, EJ

## 8. TITLE OF PROJECT (OR PROGRAM)

State Grants to Enhance Adult Protective Services Missouri Program Narrative

9a. GRANTEE NAME AND ADDRESS		9h GRANT	EE PROJECT DIRECTOR					
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF			Ms. Michelle Humphrey					
Alternate Name: MISSOURI STATE DEPT/ HEALTH & SENIOR SRV			920 Wildwood Drive					
920 Wildwood Dr			Div of Senior and Disability S					
Div of Senior and Disability S			Jefferson City, MO 65109-5796					
Jefferson City, MO 65109-5796			573-526-8502					
10a. GRANTEE AUTHORIZING OFFICIAL		10b. FEDER	AL PROJECT OFFICER					
Ms. Tonya R Loucks			esha Gurley					
920 WILDWOOD DR			Switzer Building					
Jefferson City, MO 65109-5796		330 C Street, SW						
Phone: 573-751-6014		Washii	ngton, DC 20201-0003					
		Phone: 202-795-7358						
ALL A	AMOUNTS ARE	SHOWN IN U	SD					
11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD C	OMPUTATION					
I Financial Assistance from the Federal Awarding Agency Only	II	a. Amount o	f Federal Financial Assistance (from		328,844.00			
II Total project costs including grant funds and all other financial participation		b. Less Unobligated Balance From Prior Budget Periods				122,844.00		
a. Salaries and WageS	94,300.00	c. Less Cumulative Prior Award(s) This Budget Period				206,000.00		
b. Fringe Benefits	54,693.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION			0.00			
c. Total Personnel Costs	148,993.00	· ·			412,000.00			
	0.00	(Subject to the excilability of funds and estimatery progress of the project):						
d. Equipment		YEAR	TOTAL DIRECT COSTS	YEAR	TOTA	L DIRECT COSTS		
e. Supplies	0.00	a. 3	TOTAL DIRECT COSTS	d. 6	1017	L DINECT COSTS		
f. Travel	4,031.00	b. 4		e. 7				
g. Construction	0.00	c. 5		f. 8				
h. Other	3,014.00		NCOME SHALL BE USED IN ACCORD WITH	ONE OF THE FOLLOW	ING			
i. Contractual	217.994.00	ALTERNATIVES a.	DEDUCTION			<b>L</b>		
	,	b. c.	ADDITIONAL COSTS MATCHING			b		
j. TOTAL DIRECT COSTS	374,032.00	d. e.	OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)					
k. INDIRECT COSTS	23,494.00		D IS BASED ON AN APPLICATION SUBMITTE					
TOTAL APPROVED BUDGET	397.526.00	ON THE ABOVE OR BY REFERE	TITLED PROJECT AND IS SUBJECT TO THE T NCE IN THE FOLLOWING:	ERMS AND CONDITION	IS INCORPORAT	ED EITHER DIRECTLY		
I. TOTAL APPROVED BUDGET	397,320.00	a. b.	The grant program legislation The grant program regulations.					
m	328,844.00	c. d.	This award notice including terms and condition: Federal administrative requirements, cost princi	s, if any, noted below un	der REMARKS.	this grant		
m. Federal Share	320,044.00	In the event the	In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of					
n. Non-Federal Share	68,682.00		ance of the grant terms and conditions is ac ne grant payment system.	knowledged by the gr	antee when fur	ds are drawn or otherwise		
REMARKS (Other Terms and Conditions Attached - Yes	[:	X No)						
SIGNIFICANT REBUDGETING	_							
This amendment is being issued to provide ACL's approval for the budget rev	ision request subm	nitted by the gra	ntee via GrantSolutions on 12/21/20	18. Categorical an	nounts reflec	t budget modifications		
in the direct, and facilities and administrative cost levels as requested.	•	. 0		-		-		
All of the Terms and Conditions from the prior Notice of Award remain in effect	ot.							

## GRANTS MANAGEMENT OFFICIAL:

Sherlonda L Blue, Grants Management Specialist Switzer Building 330 C Street, SW

Washington, DC 20201-0003 Phone: 202-795-7310

17.OBJ CLA	<b>ASS</b> 41.45	18a. VENDOR CODE	18b. E	EIN EIN	19. DUNS	878092600	20. CONG. DIST.	03
FY-ACCOUNT NO.		DOCUMENT NO.		ADMINISTRATIVE CODE		IT ACTION FIN ASST	APPROPRIATION	
21. a.	6-2994405	b. 90EJSG000301	C.	AOA	d.	\$0.00	e. 7	75-16-0142
22. a.	6-2994405	b. 90EJSG000302	C.	AOA	d.	\$0.00	e. 7	75-16-0142
23. a.		b.	C.		d.		e.	