Notice of Award

Award# 6 NE110E000072-02-11

FAIN# NE110E000072

Federal Award Date: 10/24/2024

Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

920 Wildwood Dr

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 (UEI)
 UETLXV8NG8F4
- 7. Project Director or Principal Investigator

Nicole Cooper

Senior Public Health Program Associate

nicole.cooper@health.mo.gov

5735266960

8. Authorized Official

Mrs. Marcia Mahanev

Director, Division of Admnistration

marcia.mahaney@health.mo.gov

573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mr. Derick Wheeler, II

Grants Management Specialist

tie2@cdc.gov

678-475-4972

10.Program Official Contact Information

Gabrielle N Bires

Program Officer

ugt2@cdc.gov

404-368-3908

Federal Award Information

11. Award Number

6 NE11OE000072-02-11

12. Unique Federal Award Identification Number (FAIN)
NE110E000072

13. Statutory Authority

317(K)(2) OF PHSA 42USC 247B(K)(2)

14. Federal Award Project Title

Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems

15. Assistance Listing Number

93 96

16. Assistance Listing Program Title

CDC's Collaboration with Academia to Strengthen Public Health

17. Award Action Type

Notification of a Contractor or Consultant

18. Is the Award R&D?

No

Summary Federal Award Financial Information

40	D., J., t. D., J. J. Ch., t. D., t.	10/01/0000	E J D-4-	11/00/0004
19	Rudget Period Start Date	12/01/2023	- End Date	11/30/2024

	20.). Total Amount of Federal Funds Obligated by this Action				
l		20a. Direct Cost Amount				
		20b. Indirect Cost Amount				
l	21.	Authorized Carryover				

22. Offset

23. Total Amount of Federal Funds Obligated this budget period \$8,348,782.00

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved this Budget Period

26. Period of Performance Start Date 12/01/2022 - End Date 11/30/2027

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

\$67,275,636.00

\$8,348,782.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mr. Damond Barnes

Grants Management Officer

30. Remarks

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Recipient Information

Recipient Name

MISSOURI DEPARTMENT OF HEALTH &

SENIOR SERVICES

920 Wildwood Dr

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 (UEI)

UETLXV8NG8F4

31. Assistance Type

Project Grant

32. Type of Award

Other

(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	\$598,140.00			
b. Fringe Benefits	\$355,044.00			
c. TotalPersonnelCosts	\$953,184.00			
d. Equipment	\$0.00			
e. Supplies	\$6,750.00			
f. Travel	\$59,274.00			
g. Construction	\$0.00			

 h. Other
 \$746,024.00

 i. Contractual
 \$6,383,059.00

 j. TOTAL DIRECT COSTS
 \$8,148,291.00

 k. INDIRECT COSTS
 \$200,491.00

 l. TOTAL APPROVED BUDGET
 \$8,348,782.00

m. Federal Share \$8,348,782.00

n. Non-Federal Share \$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-9390JXA	23NE11OE000072A2	OE	410U	93.967	\$0.00	75-2224-0943
3-9390L1Z	23NE11OE000072A1C6	OE	410U	93.967	\$0.00	75-X-0140
3-9390EV2	23NE11OE000072A3	OE	410U	93.967	\$0.00	75-23-0959
4-9390LFF	23NE11OE000072A2	OE	410U	93.967	\$0.00	75-2324-0943
4-9390MV6	23NE11OE000072DMIC6	OE	410U	93.967	\$0.00	75-X-0140
4-9390MFC	23NE11OE000072C5	OE	410U	93.967	\$0.00	75-2124-0943

33. Approved Budget



Award# 6 NE11OE000072-02-11 FAIN# NE110E000072

Federal Award Date: 10/24/2024

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 NE11OE000072-02-11

1. NE11OE000072--Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Contractor: The purpose of this amended Notice of Award is to acknowledge receipt of all required elements for the Contractors below. The contractors listed below are approved. This approval is in response to the request submitted by your organization dated October 22, 2024.

1. Name of Contractor: iLead Consulting and Training

Stewardship: The recipient 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 AND FOA NUMBER ON ALL CORRESPONDENCE