

1. DATE ISSUED MM/DD/YYYY 06/30/2016 | 2. CFDA NO. 93.733 | 3. ASSISTANCE TYPE Cooperative Agreement

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2920 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

1a. SUPERSEDES AWARD NOTICE dated 07/28/2015
except that any additions or restrictions previously imposed remain
in effect unless specifically rescinded

4. GRANT NO. 6 NU38IP000874-01-01
Formerly 1U38TP000874-01 | 5. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY
From 09/30/2015 Through 09/29/2017

7. BUDGET PERIOD MM/DD/YYYY
From 09/30/2015 Through 09/29/2017

8. TITLE OF PROJECT (OR PROGRAM)
MISSOURI IMMUNIZATION INTEROPERABILITY EXPANSION & ENHANCEMENT

9a. GRANTEE NAME AND ADDRESS
Missouri Dept. of Health and Senior Services/DSS&R
930 Wildwood Dr
Missouri Department of Health and Senior Services
Jefferson City, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
Ms. Cathy Sullivan
920 WILDWOOD DRIVE
PO BOX 570
MISSOURI DEPT OF HHS
JEFFERSON CITY, MO 65102-0570

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Cathy Sullivan
920 WILDWOOD DRIVE
PO BOX 570
MISSOURI DEPT OF HHS
JEFFERSON CITY, MO 65102-0570
Phone: [NO DATA]

10b. FEDERAL PROJECT OFFICER
Susan Brown
1600 Clifton Rd
Atlanta, GA 30333
Phone: 404-718-1026

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)	
I Financial Assistance from the Federal Awarding Agency Only	
II Total project costs including grant funds and all other financial participation I	
a. Salaries and Wages	85,486.00
b. Fringe Benefits	36,118.00
c. Total Personnel Costs	121,604.00
d. Equipment	0.00
e. Supplies	3,600.00
f. Travel	0.00
g. Construction	0.00
h. Other	3,952.00
i. Contractual	757,948.00
j. TOTAL DIRECT COSTS →	887,104.00
k. INDIRECT COSTS	23,348.00
l. TOTAL APPROVED BUDGET	910,452.00
m. Federal Share	910,452.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION	
a. Amount of Federal Financial Assistance (from item 11m)	910,452.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	910,452.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	0.00
13. Total Federal Funds Awarded to Date for Project Period	910,452.00

14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):			
YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a.		d.	
b.		e.	
c.		f.	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:		b
a.	DEDUCTION	
b.	ADDITIONAL COSTS	
c.	MATCHING	
d.	OTHER RESEARCH (Add / Deduct Option)	
e.	OTHER (See REMARKS)	

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

a. The grant program legislation
b. The grant program regulations.
c. This award notice including terms and conditions, if any, noted below under REMARKS.
d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached - Yes No)
12 Month No Cost Extension

GRANTS MANAGEMENT OFFICIAL: Anella Higgins

17. OBJ CLASS 41.51	18a. VENDOR CODE	18b. EIN	19. DUNS 878092600	20. CONG. DIST. 03
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 5-939015U	b. 000874IE15	c. IP	d. \$0.00	e. 75-X-0951
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

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GRANT NO. 6 NU38IP000874-01-01	

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 Dept. of Health and Senior
Services/DSS&R

6 NU38IP000874-01-01

1. Missouri874

NO COST EXTENSION

The purpose of this amended Notice of Award is to grant a twelve month no cost extension for the budget period /project period. The revised budget/project period end dates are September 30, 2015 through September 29, 2017, as requested in correspondence dated June 1, 2016. Unobligated funds remaining on September 29, 2016 may continue to be used during the extended period; however; no additional new funds have been or will be awarded to support this award. All activities are expected to be completed on or before the extension period of September 29, 2017. New activities are not authorized.

A. ASSISTANCE AWARD CLOSEOUT REPORTING REQUIREMENTS

Grantee must submit closeout reports in a timely manner. Unless the Grants Management Specialist/Grants Management Officer (GMS/GMO) approves a deadline extension the grantee must submit all closeout reports within 90 days after the last day of the final budget period. Reporting timeframe is September 30, 2014 through September 29, 2017. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

The final Federal Financial Report (FFR) SF 425 is required and must be submitted through eRA Commons: (eRa Commons website: (<http://era.nih.gov>). Due Date: December 29, 2017.

The FFR should only include those funds authorized and disbursed during the timeframe covered by the report. The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. There must be no discrepancies between the final FFR expenditure data and the Payment Management System's (PMS) cash transaction data.

If the FFR is not finalized by the due date, an interim FFR must be submitted, marked NOT FINAL, and an amount of un-liquidated obligations should be annotated to reflect unpaid expenses. Electronic versions of the form can be downloaded into Adobe Acrobat and completed on-line by reviewing, http://www.whitehouse.gov/sites/default/files/omb/assets/grants_forms/SF-425.pdf.

B. FINAL PERFORMANCE REPORT - CLOSE-OUT

All manuscripts published as a result of the work supported in part or whole by the cooperative grant must be submitted with the progress reports.

An original plus two copies of the reports must be mailed to the GMS for approval by the GMO by the due date: December 29, 2017. Ensure the Award and Program Announcement numbers shown above are on the reports.

Michael Vance, Grants Management Specialist
U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
Office of the Chief Operating Office
Office of Financial Resources - Office of Grants Services
Infectious Disease Service Branch - Team 1
2920 Brandywine Road, NE MS E15
Atlanta, GA 30341
Email: MVance@cdc.gov

The final and other programmatic reports required by the terms and conditions of the NoA are the following.

Final Performance Report: An original and two copies are required. At a minimum, the report should include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted through eRA Commons no later than 90 days after the end of the project period. This report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and Human Services' Payment Management Services (PMS), you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

If the final reports (FFR and Final Progress Report) cannot be submitted within 90 days after the end of the project period, in accordance with 2 CFR Parts 200.343 (Closeout), 225 and 230, the grantee must submit a letter requesting an extension that includes the justification for the delay and state the expected date the CDC Procurement and Grants Office will receive the reports. All required documents must be mailed to the business contact identified in Staff Contacts.

Equipment Inventory Report: An original and two copies of a complete inventory must be submitted for all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. The inventory list must include the description of the item, manufacturer serial and/or identification number, acquisition date and cost, percentage of Federal funds used in the acquisition of the item. The grantee should also identify each item of equipment that it wishes to retain for continued use in accordance with 2 CFR Parts 200, 215.37 or 2 CFR Part 215.71. These requirements do apply to equipment purchased with non-federal funds for this program. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award referenced in the cover letter. CDC will notify the grantee if transfer to title will be required and provide disposition instruction on all major equipment. Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously sponsored by the Federal Government may be retained, sold, or otherwise disposed of, with no further obligation to the Federal Government. If no equipment was acquired under this award, a negative report is required.

Final Invention Statement: An original and two copies of a Final Invention Statement are required. Electronic versions of the form can be downloaded by visiting <http://www.hhs.gov/forms/hhs568.pdf>. If no inventions were conceived under this assistance award, a negative report is required. This statement may be included in a cover letter.

If you have any questions, please contact Michael Vance, Grants Management Specialist at 770-488-2686 or email at MVance@cdc.gov.

All other terms and conditions issued with the original award remain effect throughout the budget period, unless changed in writing, by the Grants Management Officer.

PLEASE REFERENCE THE AWARD NUMBER ON ALL CORRESPONDENCE