

1. DATE ISSUED MM/DD/YYYY | 2. CFDA NO. | 3. ASSISTANCE TYPE
 09/30/2016 | 93.073 | 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)311,317(C)PHSACTi42USC241,243,247B

1a. SUPERSEDES AWARD NOTICE dated 09/20/2016
 except that any additions or restrictions previously imposed remain
 in effect unless specifically rescinded

4. GRANT NO. | 5. ACTION TYPE
 6 NU50DD000001-01-03 | Post Award
 Formerly | Amendment

6. PROJECT PERIOD MM/DD/YYYY | MM/DD/YYYY
 From 08/01/2016 | Through 07/31/2021

7. BUDGET PERIOD MM/DD/YYYY | MM/DD/YYYY
 From 08/01/2016 | Through 07/31/2017

8. TITLE OF PROJECT (OR PROGRAM)
 National Center on Birth Defects and Developmental Disabilities (NCBDDD)

9a. GRANTEE NAME AND ADDRESS
 State of Missouri
 920 Wildwood Dr
 Jefferson City, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
 Loise Wambuguh
 920 Wildwood Drive
 Jefferson City, MO 65102-0570
 Phone: 573-751-6343

10a. GRANTEE AUTHORIZING OFFICIAL
 Mr. Bret Fischer
 920 WILDWOOD DR
 JEFFERSON CITY, MO 65109-5796
 Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER
 William Paradies
 Centers for Disease Control and Prevention
 CCHP/NCBDDD/DBDDD/BDB
 Atlanta, GA 30333
 Phone: 404-498-3919

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)

| | | |
|--|-------------------|----------|
| I Financial Assistance from the Federal Awarding Agency Only | | I |
| II Total project costs including grant funds and all other financial participation | | |
| a. Salaries and Wages | 125,418.00 | |
| b. Fringe Benefits | 62,709.00 | |
| c. Total Personnel Costs | 188,127.00 | |
| d. Equipment | 0.00 | |
| e. Supplies | 27,251.00 | |
| f. Travel | 87,489.00 | |
| g. Construction | 0.00 | |
| h. Other | 7,735.00 | |
| i. Contractual | 45,000.00 | |
| j. TOTAL DIRECT COSTS → | 355,602.00 | |
| k. INDIRECT COSTS | 44,398.00 | |
| l. TOTAL APPROVED BUDGET | 400,000.00 | |
| m. Federal Share | 400,000.00 | |
| n. Non-Federal Share | 0.00 | |

12. AWARD COMPUTATION

| | |
|---|-------------------|
| a. Amount of Federal Financial Assistance (from item 11m) | 400,000.00 |
| b. Less Unobligated Balance From Prior Budget Periods | 0.00 |
| c. Less Cumulative Prior Award(s) This Budget Period | 400,000.00 |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION | 0.00 |
| 13. Total Federal Funds Awarded to Date for Project Period | 400,000.00 |

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. 2 | | d. 5 | |
| b. 3 | | e. 6 | |
| c. 4 | | f. 7 | |

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

- a. DEDUCTION
- b. ADDITIONAL COSTS
- c. MATCHING
- d. OTHER RESEARCH (Add / Deduct Option)
- e. OTHER (See REMARKS)

b

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARING 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)

GRANTS MANAGEMENT OFFICIAL: Patricia French, Grants Management Officer

| | | | | | | | | | |
|------------------|---------------|------------------|---------------------|---------------------|-----------------|----------|-----------|-----------------|----|
| 17. OBJ CLASS | 41.51 | 18a. VENDOR CODE | | 18b. EIN | | 19. DUNS | 878092600 | 20. CONG. DIST. | 03 |
| FY-ACCOUNT NO. | DOCUMENT NO. | CFDA | ADMINISTRATIVE CODE | AMT ACTION FIN ASST | APPROPRIATION | | | | |
| 21. a. 6-939061A | b. 000001DD16 | c. 93.073 | d. DD | e. \$0.00 | f. 75-16-0956 | | | | |
| 22. a. 6-93906FV | b. 000001DD16 | c. 93.073 | d. DD | e. \$0.00 | f. 75-1519-0943 | | | | |
| 23. a. | b. | c. | d. | e. | f. | | | | |

NOTICE OF AWARD (Continuation Sheet)

| | |
|--------------------------------|---------------------------|
| PAGE 2 of 2 | DATE ISSUED 09/30/2016 |
| GRANT NO. 6 NU50DD000001-01-03 | |

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

State of Missouri

6 NU50DD000001-01-03

1. Revised Terms and Conditions

FUNDING OPPORTUNITY ANNOUNCEMENT (FOA) NUMBER: DD16-1605
GRANT # NU50DD000001 -01
Revision 03

ADDITIONAL TERMS AND CONDITIONS OF THIS AWARD

The purpose of this revised Notice of Award (NOA) is to respond to your email dated August 31, 2016. Your request has been approved as follows:

1) REVISED BUDGET:

- Salaries & Wages increased by \$659 from \$124,759 to \$125,418
- Fringe Benefits increased by \$329 from \$62,380 to \$62,709
- Supplies decreased by \$2,967 from \$30,218 to \$27,251
- Other increased by \$1,746 from \$5,989 to \$7,735
- Indirect costs increased by \$233 from \$44,165 to \$4,398

SUMMARY STATEMENT: The purpose of this revised Notice of Award (NOA) is to respond to your email dated August 31, 2016, which provided responses to the Summary Statement. This request has been reviewed and approved.

Please be advised that the grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, necessary, and reasonable.

All 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 YOUR AWARD NUMBER ON ALL CORRESPONDENCE.

Natasha Grant
Grants Management Specialist (GMS)
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
ngrant@cdc.gov | 770-488-1649

Patricia French
Grants Management Officer (GMO)
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
Pff6@cdc.gov | 770-488-2849