

1. DATE ISSUED MM/DD/YYYY 07/06/2018 | 2. CFDA NO. 93.116 | 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

1a. SUPERSEDES AWARD NOTICE dated 04/19/2018  
except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO. 6 NU52PS004711-04-03  
Formerly 5U52PS004711-02 | 5. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY  
From 01/01/2015 Through 12/31/2018

7. BUDGET PERIOD MM/DD/YYYY  
From 01/01/2018 Through 12/31/2018

**NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations)  
SEC 301(A), SEC 317 PHS ACT AS AMENDED (42 U.S.C. 247B-6)

8. TITLE OF PROJECT (OR PROGRAM)  
Tuberculosis Elimination and Laboratory

9a. GRANTEE NAME AND ADDRESS  
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF  
Alternate Name: MISSOURI STATE DEPT/ HEALTH & SENIOR SRV  
920 Wildwood Dr  
DIVISION OF SENIOR & DISABILITY SERVICES  
Jefferson City, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR  
Ms. Rachael Hahn  
930 WILDWOOD DR  
STATE OF MISSOURI  
JEFFERSON CITY, MO 65109-5796  
Phone: 573-751-6137

10a. GRANTEE AUTHORIZING OFFICIAL  
Ms. Patricia Bedell  
920 WILDWOOD DR  
Division of Administration  
JEFFERSON CITY, MO 65109-5796  
Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER  
Dawn Tuckey  
1600 Clifton Rd  
Atlanta, GA 30333  
Phone: 404-639-8120

**ALL AMOUNTS ARE SHOWN IN USD**

11. APPROVED BUDGET (Excludes Direct Assistance)

I Financial Assistance from the Federal Awarding Agency Only		<input type="checkbox"/>
II Total project costs including grant funds and all other financial participation		<input type="checkbox"/>
a. Salaries and Wages .....	146,000.00	
b. Fringe Benefits .....	77,384.00	
c. Total Personnel Costs .....	223,384.00	
d. Equipment .....	9,772.00	
e. Supplies .....	33,319.00	
f. Travel .....	19,815.00	
g. Construction .....	0.00	
h. Other .....	9,269.00	
i. Contractual .....	326,496.00	
j. TOTAL DIRECT COSTS →	622,055.00	
k. INDIRECT COSTS	47,804.00	
<b>l. TOTAL APPROVED BUDGET</b>	<b>669,859.00</b>	
m. Federal Share	669,859.00	
n. Non-Federal Share	0.00	

12. AWARD COMPUTATION

a. Amount of Federal Financial Assistance (from item 11m)	669,859.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	334,930.00
<b>d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</b>	<b>334,929.00</b>
<b>13. Total Federal Funds Awarded to Date for Project Period</b>	<b>2,691,660.00</b>

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. 5		d. 8	
b. 6		e. 9	
c. 7		f. 10	

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)

APPROVED FINAL FUNDING IN THE AMOUNT OF \$334,929

GRANTS MANAGEMENT OFFICER Arthur Lusby, Grants Management Officer, Team Lead

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.	8-9211183	b. 004711PS15	c. 93.116	d. PS	e. \$40,662.00	f. 75-18-0950	
22. a.	8-9213485	b. 004711PS15	c. 93.116	d. PS	e. \$253,133.00	f. 75-18-0950	
23. a.	8-9214095	b. 004711PS15	c. 93.116	d. PS	e. \$41,134.00	f. 75-18-0950	

NOTICE OF AWARD (Continuation Sheet)

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**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
<b>Total</b>	\$0.00	\$0.00	\$0.00

NOTICE OF AWARD (Continuation Sheet)

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Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
01/01/2015	12/31/2015	Annual	03/30/2016
01/01/2016	12/31/2016	Annual	03/31/2017
01/01/2017	12/31/2017	Annual	03/31/2018
01/01/2018	12/31/2018	Annual	03/31/2019

# AWARD ATTACHMENTS

MISSOURI STATE DEPT/ HEALTH & SENIOR SRV

6 NU52PS004711-04-03

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1. PS4711-04 FINAL FUNDING T&C

**Notice of Funding Opportunity (NOFO): PS15-1501**

**Award Number: U52PS004711-04 AMENDMENT**

**Award Type: Cooperative Agreement**

**Applicable Regulations: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards**

**ADDITIONAL TERMS AND CONDITIONS**

**PURPOSE:** This amended Notice of Award is to award additional funding in the amount of **\$ 334,929**. Previously, **\$ 334,930** had been awarded, making the current total available award amount **\$ 669,859** of the approved **\$ 669,859** for the Year 04 budget period which is **01/01/2018** through **12/31/2018**.

**P&C: \$ 282,091**

**HRD: \$ 12,176**

**LAB: \$ 40,662**

**This award is fully funded for this budget period.**

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

**Office of Grants Services Contact:**

**Louvern Asante, Grants Management Specialist**

**Centers for Disease Control**

**Infectious Diseases Services Branch**

**Telephone: (770) 488-2835**

**Email: [Lha5@cdc.gov](mailto:Lha5@cdc.gov)**

**PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE**