



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU58DP006883-02-02

FAIN# NU58DP006883

Federal Award Date: 10/22/2021

Recipient Information

1. Recipient Name
HEALTH AND SENIOR SERVICES, MISSOURI
DEPARTMENT OF
920 WILDWOOD DR
Missouri Department of Health and Senior Services
JEFFERSON CITY, MO 65109-5796
2. Congressional District of Recipient
03
3. Payment System Identifier (ID)
4. Employer Identification Number (EIN)
5. Data Universal Numbering System (DUNS)
878092600
6. Recipient's Unique Entity Identifier
7. Project Director or Principal Investigator
Venkata Garikapaty
Venkata.Garikapaty@health.mo.gov
573-526-0452
8. Authorized Official
Mrs. Marcia Mahaney
Director, Division of Administration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources
9. Awarding Agency Contact Information
Ms. Ayanna Williams
omg5@cdc.gov
404.498.5095

10. Program Official Contact Information
Marquisette Glass Lewis
Program Officer
grp2@cdc.gov
111 111 1111

Federal Award Information

11. Award Number
6 NU58DP006883-02-02
12. Unique Federal Award Identification Number (FAIN)
NU58DP006883
13. Statutory Authority
301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241(a) and 247b(k)(2)], as amended.
14. Federal Award Project Title
Missouri Behavioral Risk Factor Surveillance System
15. Assistance Listing Number
93.336
16. Assistance Listing Program Title
Behavioral Risk Factor Surveillance System
17. Award Action Type
Budget Revision
18. Is the Award R&D?
No

Summary Federal Award Financial Information

Table with 2 columns: Item Number and Amount. Includes rows for Budget Period Start Date, Total Amount of Federal Funds Obligated, Authorized Carryover, Offset, Total Amount of Federal Funds Obligated this budget period, Total Approved Cost Sharing or Matching, Total Federal and Non-Federal Approved this Budget Period, Project Period Start Date, and Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period.

28. Authorized Treatment of Program Income
ADDITIONAL COSTS
29. Grants Management Officer - Signature
Keisha Thompson

30. Remarks



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<p><b>Recipient Information</b></p> <p><b>Recipient Name</b>          HEALTH AND SENIOR SERVICES, MISSOURI          DEPARTMENT OF          920 WILDWOOD DR          Missouri Department of Health and Senior Services          JEFFERSON CITY, MO 65109-5796</p> <p><b>Congressional District of Recipient</b>          03</p> <p><b>Payment Account Number and Type</b>          [REDACTED]</p> <p><b>Employer Identification Number (EIN) Data</b>          [REDACTED]</p> <p><b>Universal Numbering System (DUNS)</b>          878092600</p> <p><b>Recipient's Unique Entity Identifier</b>          Not Available</p>
<p><b>31. Assistance Type</b>          Cooperative Agreement</p> <p><b>32. Type of Award</b>          Other</p>

<b>33. Approved Budget</b> (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	\$55,913.00
b. Fringe Benefits	\$35,566.00
c. Total Personnel Costs	\$91,479.00
d. Equipment	\$0.00
e. Supplies	\$1,371.00
f. Travel	\$2,840.00
g. Construction	\$0.00
h. Other	\$2,915.00
i. Contractual	\$489,954.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$588,559.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$17,381.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$605,940.00</b>
<b>m. Federal Share</b>	<b>\$605,940.00</b>
<b>n. Non-Federal Share</b>	<b>\$0.00</b>

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-921P807	20NU58DP006883	DP	41.51	\$0.00	75-21-0948
1-93900ZR	20NU58DP006883	DP	41.51	\$0.00	75-21-0948
1-93900ZS	20NU58DP006883	DP	41.51	\$0.00	75-21-0948
1-93900ZX	20NU58DP006883	DP	41.51	\$0.00	75-21-0948
1-9390AVT	20NU58DP006883	DP	41.51	\$0.00	75-21-0947
1-9390GR3	20NU58DP006883C5	DP	41.51	\$0.00	75-2124-0943
1-939ZCUC	20NU58DP006883	DP	41.51	\$0.00	75-21-0948



**DEPARTMENT OF HEALTH AND HUMAN SERVICES** Notice of Award

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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
Total	\$0.00	\$0.00	\$0.00

## AWARD ATTACHMENTS

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

6 NU58DP006883-02-02

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1. Terms and Conditions

## ADDITIONAL TERMS AND CONDITIONS OF AWARD

**Revised Budget:** The purpose of this amended Notice of Award is to approve the **revised budget** submitted by your organization dated September 28, 2021 . Funds have been distributed as indicated in the approved budget of this Notice of Award.

**Indirect Costs:** Indirect costs are approved based on the negotiated indirect cost rate agreement dated March 30, 2021, which calculates indirect costs as follows, a Final is approved at a rate of 19.0% of the base, which includes, direct salaries and wages including all fringe benefits. The effective dates of this indirect cost rate are from July 1, 2021 to June 30, 2022.