

1. DATE ISSUED MM/DD/YYYY 12/14/2016
 2. CFDA NO. 93.944
 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 12/07/2016
 except that any additions or restrictions previously imposed remain
 in effect unless specifically rescinded

4. GRANT NO. 6 NU62PS004009-05-01
 Formerly 5U62PS004009-04
 5. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY
 From 01/01/2013 Through 12/31/2017

7. BUDGET PERIOD MM/DD/YYYY
 From 01/01/2017 Through 12/31/2017

NOTICE OF AWARD
 AUTHORIZATION (Legislation/Regulations)
 307,317K2 PHSA,42USC241,247BK2,PL108

8. TITLE OF PROJECT (OR PROGRAM)
 The HIV/AIDS Surveillance Program monitors the number of HIV and AIDS cases diagn

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

9b. GRANTEE PROJECT DIRECTOR
 Mr. Ken Palermo
 930 Wildwood Dr
 POB 570
 Jefferson City, MO 65102-0570
 Phone: 573-751-6086

10a. GRANTEE AUTHORIZING OFFICIAL
 Mr. Bret Fischer
 920 Wildwood Dr
 Jefferson City, MO 65102-0570
 Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER
 Lydia BLASINI ALCIVAR
 1600 Clifton Rd
 Atlanta, GA 30333
 Phone: 404-639-5200

ALL AMOUNTS ARE SHOWN IN USD

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|--|-------------------|
| 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 | 87,930.00 |
| b. Fringe Benefits | 43,922.00 |
| c. Total Personnel Costs | 131,852.00 |
| d. Equipment | 0.00 |
| e. Supplies | 1,385.00 |
| f. Travel | 4,821.00 |
| g. Construction | 0.00 |
| h. Other | 8,069.00 |
| i. Contractual | 62,705.00 |
| j. TOTAL DIRECT COSTS → | 208,832.00 |
| k. INDIRECT COSTS | 31,117.00 |
| l. TOTAL APPROVED BUDGET | 239,949.00 |
| m. Federal Share | 239,949.00 |
| n. Non-Federal Share | 0.00 |

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| 12. AWARD COMPUTATION | |
| a. Amount of Federal Financial Assistance (from item 11m) | 239,949.00 |
| b. Less Unobligated Balance From Prior Budget Periods | 0.00 |
| c. Less Cumulative Prior Award(s) This Budget Period | 159,949.00 |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION | 80,000.00 |
| 13. Total Federal Funds Awarded to Date for Project Period | 2,879,124.00 |

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|---|--------------------|-------|--------------------|
| 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. 6 | | d. 9 | |
| b. 7 | | e. 10 | |
| c. 8 | | f. 11 | |

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

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

GRANTS MANAGEMENT OFFICIAL: **Arthur Lusby, Grants Management Officer, Team Lead**

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|---------------------|------------------|-----------|---------------------|---------------------|
| 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 |
| 21. a. 7-9391154 | b. 004009PS15 | c. 93.944 | d. PS | e. \$0.00 |
| 22. a. 7-939056S | b. 004009PS15 | c. 93.944 | d. PS | e. \$80,000.00 |
| 23. a. | b. | c. | d. | e. |

NOTICE OF AWARD (Continuation Sheet)

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|--------------------------------|---------------------------|
| PAGE 2 of 2 | DATE ISSUED 12/14/2016 |
| GRANT NO. 6 NU62PS004009-05-01 | |

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 NU62PS004009-05-01

1. Terms and Conditions of this Award

Funding Opportunity Announcement (FOA) Number: PS13-1302
Award Number: 1 U62 PS004009-05 (Revision I)
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
45 CFR Part 75 supersedes regulations at 45 CFR Part 74 and Part 92

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| ADDITIONAL TERMS AND CONDITIONS OF THIS AWARD |
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Approved Funding: The purpose of this revised Notice of Award is to award an additional **\$80,000** in supplemental funding to support the **National HIV Surveillance System (NHSS)** For the Year **05** budget period which is **1/01/2017** through **12/31/2017**.

The purpose of the supplemental funds is to support and focus on routine data linkage and integration to improve HIV prevention program monitoring and evaluation. Health departments will implement strategies for sharing HIV testing and HIV case surveillance data between these two programs to improve the accuracy of data on new and pre-existing HIV diagnoses and linkage to HIV medical care among persons newly diagnosed with HIV infection.

REVISED BUDGET REQUIREMENT: By **February 1, 2017** the grantee must submit a revised budget with a narrative justification and work plan. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the Staff Contacts section of this notice before the due date.

Stewardship: The grantee 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 your award number on all correspondence including each page of all attachments.