

1. DATE ISSUED MM/DD/YYYY | 2. CFDA NO. | 3. ASSISTANCE TYPE  
 03/21/2018 | 93.940 | 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)  
 [AWARD AUTHORITY NOT DEFINED FOR PS10-10136.NU2G]

1a. SUPERSEDES AWARD NOTICE dated 12/14/2017  
 except that any additions or restrictions previously imposed remain  
 in effect unless specifically rescinded

4. GRANT NO. | 5. ACTION TYPE  
 6 NU62PS924577-01-01 | Post Award  
 Formerly | Amendment

6. PROJECT PERIOD MM/DD/YYYY | MM/DD/YYYY  
 From 01/01/2018 | Through 12/31/2022

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

8. TITLE OF PROJECT (OR PROGRAM)  
 Integrated HIV Surveillance and Prevention Programs for Health Departments

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

9b. GRANTEE PROJECT DIRECTOR  
 Ms. Nicole Massey  
 920 WILDWOOD DR  
 MISSOURI DEPT OF HLTH  
 JEFFERSON CITY, MO 65109  
 Phone: [NO DATA]

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

10b. FEDERAL PROJECT OFFICER  
 Mary Allen  
 1600 Clifton Rd  
 Atlanta, GA 30333  
 Phone: 404-639-5200

**ALL AMOUNTS ARE SHOWN IN USD**

<b>11. APPROVED BUDGET (Excludes Direct Assistance)</b>	
I Financial Assistance from the Federal Awarding Agency Only	<b>I</b>
II Total project costs including grant funds and all other financial participation	
a. Salaries and Wages .....	242,147.00
b. Fringe Benefits .....	128,211.00
c. Total Personnel Costs .....	370,358.00
d. Equipment .....	0.00
e. Supplies .....	110,102.00
f. Travel .....	13,209.00
g. Construction .....	0.00
h. Other .....	17,934.00
i. Contractual .....	528,515.00
j. TOTAL DIRECT COSTS →	1,040,118.00
k. INDIRECT COSTS	79,257.00
<b>l. TOTAL APPROVED BUDGET</b>	<b>1,119,375.00</b>
m. Federal Share	1,119,375.00
n. Non-Federal Share	0.00

<b>12. AWARD COMPUTATION</b>	
a. Amount of Federal Financial Assistance (from item 11m)	1,119,375.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	1,119,375.00
<b>d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</b>	<b>0.00</b>
<b>13. Total Federal Funds Awarded to Date for Project Period</b>	<b>1,119,375.00</b>

<b>14. RECOMMENDED FUTURE SUPPORT</b> (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	

<b>15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:</b>		<b>b</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)

GRANTS MANAGEMENT OFFICIAL: **Edna Green, 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	
21. a.	8-93909SC	b. 18NU62PS924577		c. 93.940		d. PS		e. \$0.00	f. 75-18-0950
22. a.	8-93909SM	b. 18NU62PS924577		c. 93.940		d. PS		e. \$0.00	f. 75-18-0950
23. a.		b.		c.		d.		e.	f.

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>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

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
01/01/2018	12/31/2018	Annual	03/31/2019
01/01/2019	12/31/2019	Annual	03/30/2020
01/01/2020	12/31/2020	Annual	03/31/2021
01/01/2021	12/31/2021	Annual	03/31/2022
01/01/2022	12/31/2022	Annual	03/31/2023

# AWARD ATTACHMENTS

Missouri Dept. of Health and Senior  
Services/DSS&R

6 NU62PS924577-01-01

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1. Terms & Conditions

Notice of Funding Opportunity (NOFO): PS18-1802

Award Number: 6 NU62PS924577-01-01

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

**REVISED NOTICE OF COOPERATIVE AGREEMENT**

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**PURPOSE:** This revised Notice of Award approves your response to the Revised Budget Requirements. We have reviewed the revised budget justification and work plan submitted by your organization dated January 31, 2018 and find both to be acceptable. Therefore, the Revised Budget Requirement noted in the terms and conditions of your award dated December 14, 2017, has been satisfied.

These funds have been approved by cost categories for redirection as follows:

CATEGORY A 100%			
Category	Category A (Approved)	Category A (Revised)	REDIRECTED FUNDS
Salary & Wages	\$234,074	\$242,147	\$8,073
Fringe	\$123,921	\$128,211	\$4,290
Consultants	\$0	\$0	\$0
Equipment	\$0	\$0	\$0
Supplies	\$138,248	\$110,102	-\$28,146
Travel	\$15,582	\$13,209	-\$2,373
Other	\$10,629	\$17,934	\$7,305
Contractual	\$520,310	\$528,515	\$8,205
<i>Total Direct Costs</i>	<i>\$1,042,764</i>	<i>\$1,040,118</i>	<i>-\$2,646</i>
Indirect costs	\$76,611	\$79,257	\$2,646
<b>Total Approved Costs</b>	<b>\$1,119,375</b>	<b>\$1,119,375</b>	<b>\$0</b>

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

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 AWARD NUMBER ON ALL CORRESPONDENCE**

**GMS Contact:**

Rhonda Colbert

Grants Management Specialist

Centers for Disease Control and Prevention (CDC)  
Office of the Chief Operating Officer (OCOO)  
Office of Financial Resources (OFR)  
Office of Grants Services (OGS)  
Infectious Diseases Branch (IDSB)  
Infectious Disease Services Branch  
2960 Brandywine Rd, MS E-15  
Atlanta, GA 30341-4146  
[Hvx1@cdc.gov](mailto:Hvx1@cdc.gov) | Phone: 770-488-2848

**GMO Contact:**

Edna Green  
Sr. Grants Management Officer  
Centers for Disease Control and Prevention (CDC)  
Office of the Chief Operating Officer (OCOO)  
Office of Financial Resources (OFR)  
Office of Grants Services (OGS)  
Infectious Diseases Branch (IDSB)  
2960 Brandywine Rd, MS E-15  
[EGreen@cdc.gov](mailto:EGreen@cdc.gov) | 770-488-2858 Office

***\*The Project Officer's information can be found on page 1 of this Notice of Award.***