

1. DATE ISSUED MM/DD/YYYY 12/05/2019		1a. SUPERSEDES AWARD NOTICE dated 10/07/2019 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA NO. 93.118 - Acquired Immunodeficiency Syndrome (AIDS) Activity			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 6 NU65PS923714-01-02 Formerly		5. TYPE OF AWARD Other	
4a. FAIN NU65PS923714		5a. ACTION TYPE Post Award Amendment	
6. PROJECT PERIOD MM/DD/YYYY From 09/30/2019		Through 09/29/2020	
7. BUDGET PERIOD MM/DD/YYYY From 09/30/2019		Through 09/29/2020	
8. TITLE OF PROJECT (OR PROGRAM) Strategic Partnerships and Planning to Support Ending the HIV Epidemic in the United States			

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources**

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulations)
[AWARD AUTHORITY NOT DEFINED FOR PS10-10136.NU2G]

9a. GRANTEE NAME AND ADDRESS
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
920 Wildwood Dr
Jefferson City, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
Ms. Christine Smith
920 Wildwood Drive
Jefferson City, MO 65109-5796
Phone: 573-751-6439

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Tonya R Loucks
920 Wildwood Drive
Jefferson City, MO 65109-5796
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

11. APPROVED BUDGET (Excludes Direct Assistance)	
I Financial Assistance from the Federal Awarding Agency Only	
II Total project costs including grant funds and all other financial participation I	
a. Salaries and WageS	41,365.00
b. Fringe Benefits	24,819.00
c. Total Personnel Costs	66,184.00
d. Equipment	0.00
e. Supplies	1,500.00
f. Travel	23,427.00
g. Construction	0.00
h. Other	1,798.00
i. Contractual	215,000.00
j. TOTAL DIRECT COSTS →	307,909.00
k. INDIRECT COSTS	14,163.00
l. TOTAL APPROVED BUDGET	322,072.00
m. Federal Share	322,072.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION	
a. Amount of Federal Financial Assistance (from item 11m)	322,072.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	322,072.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	0.00
13. Total Federal Funds Awarded to Date for Project Period	322,072.00

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:

<ul style="list-style-type: none"> 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)
The revised budget is approved.

GRANTS MANAGEMENT OFFICIAL:
Arthur Lusby, Grants Management Officer, Team Lead
2960 Brandywine Rd
Mailstop TV-2
Atlanta, GA 30341-5509
Phone: 770.488.2865

17.OBJ CLASS 41.51	18a. VENDOR CODE	18b. EIN	19. DUNS 878092600	20. CONG. DIST. 03
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 9-9390D7H	b. 19NU65PS923714	c. PS	d. \$0.00	e. 75-19-0120
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

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GRANT NO. 6 NU65PS923714-01-02	

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

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
09/30/2019	09/29/2020	Final	12/28/2020

AWARD ATTACHMENTS

Missouri Department of Health

6 NU65PS923714-01-02

1. Terms and Conditions

Notice of Funding Opportunity (NOFO): PS19-1906

Award Number: 1 NU65PS923714-01-02

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: The purpose of this amended notice of award is to approve the **Budget Revision** as submitted on October 29, 2019. The activities have been reviewed and found to be appropriate and consistent with program objectives. Therefore, the request is incorporated by reference.

These funds have been approved by cost categories as follows:

Budget Category	Approved Budget	Revised Budget	Total Revised Budget
Salaries & Wages	\$ 25,269	\$ (3,366)	\$ 21,903
Fringe Benefits	\$ 13,312	\$ (1,559)	\$ 11,753
Equipment	\$ -	\$ -	\$ -
Supplies	\$ 1,020	\$ 180	\$ 1,200
Travel	\$ 4,725	\$ (1,575)	\$ 3,150
Contractual	\$ 433,893	\$ 7,531	\$ 441,424
Other Cost	\$ 5,430	\$ 810	\$ 6,240
Total Direct Costs	\$ 483,649	\$ 2,021	\$ 485,670
Indirect Costs	\$ 8,719	\$ (2,021)	\$ 6,698
Total Approved Budget	\$ 492,368	\$ -	\$ 492,368

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

Grants Management Specialist Contact:

Rhonda Burton, MSc.
Grants Management Specialist
Centers for Disease Control and Prevention
Office of Grants Services
Email: bgr2@cdc.gov
Telephone: 770-488-1381

PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE