

1. DATE ISSUED MM/DD/YYYY 04/25/2017 | 2. CFDA NO. 93.074 | 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

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
SEC391(A)317(K)OPPHS42U.S.C.SEC241A 247B

1a. SUPERSEDES AWARD NOTICE dated 03/16/2016
except that any additions or restrictions previously imposed remain
in effect unless specifically rescinded

4. GRANT NO. 6 NU90TP000531-03-10
Formerly 3U90TP000531-03S2 | 5. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY From 07/01/2012 Through 06/30/2017

7. BUDGET PERIOD MM/DD/YYYY From 07/01/2014 Through 06/30/2015

8. TITLE OF PROJECT (OR PROGRAM) TP12-1201 HPP AND PHEP COOPERATIVE AGREEMENTS

9a. GRANTEE NAME AND ADDRESS Missouri Dept. of Health and Senior Services/DSS&R
PO BOX 570
Missouri Department of Health and Senior Services
Jefferson City, MO 65102-0570

9b. GRANTEE PROJECT DIRECTOR Ms. MELISSA N FRIEL611626
912 WILDWOOD DRIVE - P.O. BOX 570
DIVISION OF ADMINISTRATION
JEFFERSON CITY, MO 65102
Phone: (573) 751-8589

10a. GRANTEE AUTHORIZING OFFICIAL Mr. Haroun Kamara
PO BOX 570
COMMUNITY AND PUBLIC HEALTH
Jefferson City, MO 65102-0570
Phone: 573-522-9152

10b. FEDERAL PROJECT OFFICER Brandi Jordan
1600 Clifton Rd
Atlanta, GA 30333
Phone: (404) 639-7856

ALL AMOUNTS ARE SHOWN IN USD

| | |
|--|----------------------|
| 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 | 82,614.00 |
| b. Fringe Benefits | 14,459.00 |
| c. Total Personnel Costs | 97,073.00 |
| d. Equipment | 257,286.00 |
| e. Supplies | 68,674.00 |
| f. Travel | 56,192.00 |
| g. Construction | 0.00 |
| h. Other | 14,866,458.00 |
| i. Contractual | 1,746,356.00 |
| j. TOTAL DIRECT COSTS → | 17,092,039.00 |
| k. INDIRECT COSTS | 14,337.00 |
| l. TOTAL APPROVED BUDGET | 17,106,376.00 |
| m. Federal Share | 17,106,376.00 |
| n. Non-Federal Share | 0.00 |

| | |
|---|----------------------|
| 12. AWARD COMPUTATION | |
| a. Amount of Federal Financial Assistance (from item 11m) | 17,106,376.00 |
| b. Less Unobligated Balance From Prior Budget Periods | 0.00 |
| c. Less Cumulative Prior Award(s) This Budget Period | 17,106,376.00 |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION | 0.00 |
| 13. Total Federal Funds Awarded to Date for Project Period | 80,631,630.52 |

| | | | |
|---|--------------------|------|--------------------|
| 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. | | d. | |
| b. | | e. | |
| c. | | f. | |

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

GRANTS MANAGEMENT OFFICIAL: Shicann Phillips

| | | | | |
|---------------------|------------------|-----------|---------------------|---------------------|
| 17. OBJ CLASS 41.51 | 18a. VENDOR CODE | 18b. EIN | 19. DUNS 878092600 | 20. CONG. DIST. 04 |
| FY-ACCOUNT NO. | DOCUMENT NO. | CFDA | ADMINISTRATIVE CODE | AMT ACTION FIN ASST |
| 21. a. 5-93902YK | b. TP00053115 | c. 93.074 | d. TP | e. \$0.00 |
| 22. a. | b. | c. | d. | e. |
| 23. a. | b. | c. | d. | e. |

NOTICE OF AWARD (Continuation Sheet)

| | |
|--------------------------------|---------------------------|
| PAGE 2 of 2 | DATE ISSUED 04/25/2017 |
| GRANT NO. 6 NU90TP000531-03-10 | |

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 NU90TP000531-03-10

1. Terms and Conditions

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

AWARD INFORMATION

Programmatic Restriction:

NOTE 1: PROGRAMMATIC RELEASE of RESTRICTION: The purpose of this amended Notice of Award is to lift \$177,940 of the restriction placed on PHEP base funds in the Notice of Award dated March 16, 2016. We (CDC) have reviewed your organization request submitted on March 03, 2017 and find it to be acceptable

NOTE 2: REDIRECTION: The revised Notice of Award redirects **PHEP Base** funds in the amount of \$350,000 as requested in your letter dated February 24, 2017. Please refer to the revised cost categories below:

| Totals | Original | Adjustment | Revised | |
|---------------|-----------------|-------------------|-----------------|--|
| Personnel | \$ 82,614.00 | | \$ 82,614.00 | |
| Fringe | \$ 14,459.00 | | \$ 14,459.00 | |
| Travel | \$ 56,192.00 | \$ (28,350.00) | \$ 27,842.00 | |
| Equipment | \$ 257,286.00 | | \$ 257,286.00 | |
| Supplies | \$ 68,674.00 | \$ (7,000.00) | \$ 61,674.00 | |
| Other | \$ 87,488.00 | \$ (43,665.00) | \$ 43,823.00 | |
| Contractual | \$ 1,746,356.00 | \$ 79,015.00 | \$ 1,825,371.00 | |
| Total Direct | \$ 2,313,069.00 | \$ - | \$ 2,313,069.00 | |
| Indirect Cost | \$ 14,337.00 | | \$ 14,337.00 | |
| Total | \$ 2,327,406.00 | | \$ 2,327,406.00 | |
| | | | | |

NOTE 2B: These funds are approved for the current fiscal year budget period only and will be available through June 30, 2017.

NOTE 3: 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, and reasonable.

NOTE 4: All 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 FOA AND AWARD NUMBER ON ALL CORRESPONDENCE

Financial Contacts:

Shicann Phillips, Grants Management Officer

Center for Disease Control and Prevention
Office of Financial Resources Office of Grants Services
2960 Brandywine Rd
Atlanta, GA 30341
Email: ibq7@cdc.gov
Phone: 770-488-2809

Rose Mosley, Grants Management Specialist

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2960 Brandywine Rd
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