



Recipient Information

- 1. Recipient Name**
MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES
920 Wildwood Dr
Community and Public Health-DUP
Jefferson City, MO 65109-5796
[NO DATA]
- 2. Congressional District of Recipient**
03
- 3. Payment System Identifier (ID)**
1446000987B7
- 4. Employer Identification Number (EIN)**
446000987
- 5. Data Universal Numbering System (DUNS)**
878092600
- 6. Recipient's Unique Entity Identifier (UEI)**
UETLXV8NG8F4
- 7. Project Director or Principal Investigator**

Jennifer Braun
Jennifer.Braun@health.mo.gov
573-522-2834
- 8. Authorized Official**

Mrs. Marcia Mahaney
Director, Division of Administration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

AOD Traumatic Brain Injury State Demonstration Grant Program

9. Awarding Agency Contact Information

Mrs. Aiesha Gurley
Grants Management Specialist
aiesha.gurley@acl.hhs.gov
202-793-7384

10. Program Official Contact Information

Ms. Dana Fink
dana.fink@acl.hhs.gov
202 795-7604

Federal Award Information

- 11. Award Number**
90TBSG0040-03-03
- 12. Unique Federal Award Identification Number (FAIN)**
90TBSG0040
- 13. Statutory Authority**
Public Health Service Act, Section 1252, as amended (please see remarks for full statute)
- 14. Federal Award Project Title**
Traumatic Brain Injury State Partnership Program Partner State Funding Opportunity
- 15. Assistance Listing Number**
93.234
- 16. Assistance Listing Program Title**
Traumatic Brain Injury_State Demonstration Grant Program
- 17. Award Action Type**
Project Period Closeout
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date	06/01/2020	- End Date	05/31/2022
20. Total Amount of Federal Funds Obligated by this Action			(\$24,369.21)
20a. Direct Cost Amount			\$289,329.47
20b. Indirect Cost Amount			\$0.00
21. Authorized Carryover			\$21,707.68
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$150,000.00
24. Total Approved Cost Sharing or Matching, where applicable			\$75,001.00
25. Total Federal and Non-Federal Approved this Budget Period			\$200,631.79
26. Period of Performance Start Date	06/01/2018	- End Date	05/31/2022
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance			\$725,633.79

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Aiesha Gurley
Grants Management Officer

30. Remarks

FFR were reviewed and approved in PMS. FCOE was verified in PMS.



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<p>31. Assistance Type Cooperative Agreement</p> <p>32. Type of Award Demonstration</p>

33. 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	
a. Salaries and Wages	\$24,463.00
b. Fringe Benefits	\$12,965.00
c. Total Personnel Costs	\$37,428.00
d. Equipment	\$0.00
e. Supplies	\$921.00
f. Travel	\$11,783.00
g. Construction	\$0.00
h. Other	(\$10,503.21)
i. Contractual	\$174,699.68
j. TOTAL DIRECT COSTS	\$214,328.47
k. INDIRECT COSTS	\$8,011.00
l. TOTAL APPROVED BUDGET	\$222,339.47
m. Federal Share	\$147,338.47
n. Non-Federal Share	\$75,001.00

34. Accounting Classification Codes						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
8-2994979	90TBSG004002	AoD	41.45	93.234	\$0.00	75-18-0142
9-2994979	90TBSG004002	AoD	41.45	93.234	(\$490.00)	75-19-0142
9-2994979	90TBSG004003	AoD	41.45	93.234	\$0.00	75-19-0142
0-2994979	90TBSG004003	AoD	41.45	93.234	(\$23,879.21)	75-20-0142