

1. DATE ISSUED MM/DD/YYYY 03/25/2020		1a. SUPERSEDES AWARD NOTICE dated 03/02/2020 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA No. 93.940 - HIV Prevention Activities_Health Department Based			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 6 NU62PS924577-03-02 Formerly		5. TYPE OF AWARD Other	
4a. FAIN NU62PS924577		5a. ACTION TYPE Post Award Amendment	
6. PROJECT PERIOD MM/DD/YYYY From 01/01/2018		Through 12/31/2022	
7. BUDGET PERIOD MM/DD/YYYY From 01/01/2020		Through 12/31/2020	

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

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

9a. GRANTEE NAME AND ADDRESS HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF 920 Wildwood Dr Missouri Dept. of Health and Senior Services Jefferson City, MO 65109-5796	9b. GRANTEE PROJECT DIRECTOR Ms. Christine Smith 920 Wildwood Drive Jefferson City, MO 65109-5796 Phone: 573-751-6439
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10a. GRANTEE AUTHORIZING OFFICIAL Ms. Marcia Mahaney 920 WILDWOOD DR 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
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ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 4,477,487.00	
II Total project costs including grant funds and all other financial participation		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and Wages	923,648.00	c. Less Cumulative Prior Award(s) This Budget Period 1,119,374.00	
b. Fringe Benefits	553,950.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 3,358,113.00	
c. Total Personnel Costs	1,477,598.00	13. Total Federal Funds Awarded to Date for Project Period 13,432,461.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT	
e. Supplies	411,461.00	(Subject to the availability of funds and satisfactory progress of the project):	
f. Travel	89,798.00	YEAR	TOTAL DIRECT COSTS
g. Construction	0.00	a. 4	d. 7
h. Other	75,734.00	b. 5	e. 8
i. Contractual	2,106,690.00	c. 6	f. 9
j. TOTAL DIRECT COSTS	4,161,281.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
k. INDIRECT COSTS	316,206.00	a. DEDUCTION	
l. TOTAL APPROVED BUDGET	4,477,487.00	b. ADDITIONAL COSTS	
m. Federal Share	4,477,487.00	c. MATCHING	
n. Non-Federal Share	0.00	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 - FINANCIAL ASSISTANCE in the amount of: \$3,358,113.00) Yes No

GRANTS MANAGEMENT OFFICIAL:

Edna Green, Grants Management Officer
2939 Flowers Rd
Mailstop TV2
Atlanta, GA 30341-5509
Phone: 770-488-2858

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. 0-93909SC	b. 18NU62PS924577	c. 93.940	d. PS	e. \$2,805,066.00
22. a. 0-93909SM	b. 18NU62PS924577	c. 93.940	d. PS	e. \$553,047.00
23. a. 9-93909SC	b. 18NU62PS924577	c. 93.940	d. PS	e. \$0.00
				f. APPROPRIATION
				f. 75-20-0950
				f. 75-20-0950
				f. 75-19-0950

NOTICE OF AWARD (Continuation Sheet)

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GRANT NO. 6 NU62PS924577-03-02	

FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
24.a. 9-93909SM	b. 18NU62PS924577	c. 93.940	d. PS	e. \$0.00	f. 75-19-0950

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
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

AWARD ATTACHMENTS

Missouri Department of Health

6 NU62PS924577-03-02

1. PS18-1802 Missouri Year 3 Additional Funding Terms and Conditions

Notice of Funding Opportunity (NOFO): PS18-1802

Award Number: NU62PS924577-03

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: This revised Notice of Award is to award additional funding in the amount of **\$3,358,113**. Previously, **\$1,119,374** had been awarded, making the current total available award amount **\$4,477,487** of the approved budget **\$4,477,487** for the Year **03** budget period which is **01/01/2020** through **12/31/2020**.

COMPONENTS:

Component A, HIV Prevention: \$2,805,066

Component A HIV Surveillance: \$553,047

This award is fully funded for this budget period.

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

GMS Contact:

Emmanuella Lamothe, Grants Management Specialist

Centers for Disease Control

Infectious Diseases Services Branch

Telephone: (770) 498-5772

Email: OMY9@cdc.gov

PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE