1. DAT 07	E ISSUED MM/DD/YYYY 2. CFDA NO. 3. ASSI /27/2017 93.116 COO	STANCETYPE Operative Agreement	35	DEPARTMENT OF HE				
exce	PERSEDES AWARD NOTICE dated 04/12/	/2017 sed remain		CDC Office o	f Financial Re	sources		
_	fect unless specifically rescinded	E ACTION TYPE	4		ndywine Road ı, GA 30341			
	NU52PS004680-03-02	5. ACTION TYPE Post Award			.,			
	merly 5U52PS004680-02	Amendment						
	JECT PERIOD MM/DD/YYYY	MM/DD/YYYY	7	NOTICE	OF AWAR	חס		
Fron	01/01/2015	Through 12/31/2019	⅃	AUTHORIZATION				
	GET PERIOD MM/DD/YYYY	MM/DD/YYYY	SEC	301(A), SEC 317 PHS AC	T AS AMENDE	=D (42 H S C 247B-6)		
Fron	01/01/2017	Through 12/31/2017	SEC 301(A), SEC 317 PHS ACT AS AMENDED (42 U.S.C. 247B-6)					
	E OF PROJECT (OR PROGRAM)					7		
Ken	tucky Tuberculosis Elimin	ation and Laboratory	Program	Cooperative Agreem	ent 2015	to 2019		
9a. GR	ANTEE NAME AND ADDRESS		9b. GRANTI	EE PROJECT DIRECTOR				
275	lth & Family Services, Kentu E Main St # hslgwa nkfort, KY 40621-1000	cky Cabinet for	275 E. HS2E-B KENTUCE	ert Lee Brawley MAIN STREET KY DEPT FOR PUBLIC HE	ALTH			
10a G	RANTEE AUTHORIZING OFFICIAL			ORT, KY 40621				
	Robert Lee Brawley		Paul	AL PROJECT OFFICER				
	E. MAIN STREET			ifton Rd				
HS21	- -			Atlanta, GA 30333				
	FUCKY DEPT FOR PUBLIC HEALTH NKFORT, KY 40621		Phone: 404-639-8120					
	ne: 502-564-4478							
11 APP	ROVED BUDGET (Excludes Direct Assistance)	ALL AMOUNTS AR						
	icial Assistance from the Federal Awarding Agency	Only		COMPUTATION of Federal Financial Assistance (from	Hom 44ml	507 016 00		
	project costs including grant funds and all other fine			bligated Balance From Prior Budget		587,916.00 4,693.00		
a.	Salaries and Wages			nulative Prior Award(s) This Budget P		384,793.00		
	Esta D St	181,237.00		OF FINANCIAL ASSISTANCE THE		198,430.00		
b.	Fringe Benefits	142,065.00	13. Total Fed	ieral Funds Awarded to Date for Pr	roject Period	1,726,713.00		
C.	Total Personnel Costs	323,302.00	14. RECOM	MENDED FUTURE SUPPORT the availability of funds and satisfactor				
d.	Equipment	0.00			· · · · · · · · · · · · · · · · · · ·			
e.	Supplies	6,230.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS		
f.	Travel	-			d. 7 e. 8			
g.	Construction	•			f. 9			
h.	Other	0.00	15 8800884	NCOME SHALL BE USED IN ACCORD WITH (
	Contractual	30,188.00	ALTERNATIVE	S:	DRE OF THE FOLLOWIN	° —		
i.		111,852.00		DEDUCTION ADDITIONAL COSTS		b		
j.	TOTAL DIRECT COSTS ———	524,483.00	d.	MATCHING OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)				
k.	INDIRECT COSTS	63,433.00	48					
l.	TOTAL APPROVED BUDGET	587,916.00	ON THE ABOVE OR BY REFERE	D IS BASED ON AN APPLICATION SUBMITTE TITLED PROJECT AND IS SUBJECT TO THE TE NCE IN THE FOLLOWING: The grant program legislation The grant program regulations.	D TO, AND AS APPROV ERMS AND CONDITIONS	ED BY, THE FEDERAL AWARDING AGENCY INCORPORATED EITHER DIRECTLY		
m.	Federal Share	587,916.00	d.	This award notice including terms and conditions Federal administrative requirements, cost princip	, if any, noted below under les and audit requirement	r REMARKS.		
n.	Non-Federal Share	0.00	prevail. Accept	re are conflicting or otherwise inconsistent pa ance of the grant terms and conditions is act to grant payment system.	olicies applicable to the	grant the shove order of precedence shall		

GRANTS MANAGEMENT OFFICIAL: Arthur Lusby, Grants Management Officer, Team Lead

× Yes

REMARKS (Other Terms and Conditions Attached -

APPROVED FINAL ROUND FUNDING

17. OBJ CLASS	41.51	18a,	VENDOR CODE 16106	004	39B5 -	18b, EIN	N	610600439	19. DUNS	927049767	T :	20. CONG. DIST. 06
FY-ACC	DUNT NO.		DOCUMENT NO.		CFDA			ADMINISTRATIVE CODE	AMT	ACTION FIN ASST		APPROPRIATION
21 . a. 7-92	11183	b.	004680PS15	C.	93.11	6 0	d.	PS	e.	\$32,353.00	f.	75-17-0950
22. a. 7-92	13485	b.	004680PS15	c.	93.11	6 0	d.	PS	e.	\$142,674.00	f.	75-17-0950
23. a. 7-92	14095	b.	004680PS15	c.	93.11	6 0	d.	PS	е.	\$23,403.00	f.	75-17-0950

No)

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of	3		DATE ISSUED 07/27/2017	
GRANT NO. 6 NU		NU	52PS004680-03-02	

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)

7	PAGE	3	of	3		DATE ISSUED 07/27/2017	
	GRANT NO. 6 N		NU	52PS004680-03-02			

Federal Financial Report Cycle							
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date				
01/01/2015	12/31/2015	Annual	03/30/2016				
01/01/2016	12/31/2016	Annual	03/31/2017				
01/01/2017	12/31/2017	Annual	03/31/2018				

AWARD ATTACHMENTS

Health & Family Services, Kentucky Cabinet for

6 NU52PS004680-03-02

1. PS4680-03 T&C

Notice of Funding Opportunity (NOFO): PS15-1501

Award Number: U52PS004680-03 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

<u>PURPOSE</u>: This amended Notice of Award is to award additional funding in the amount of \$203,123. Previously, \$384,793 had been awarded, making the current total available award amount \$587,916 of the approved \$587,916 for the Year 03 budget period which is 09/30/2016 through 09/29/2017.

P&C: \$162,319 HRD: \$ 8,451 LAB: \$ 32,353

Use of Unobligated Funds: This NoA includes use of Year 01 unobligated funds in the amount of \$4,693, which has been applied as an offset to the currently approved funding level for this budget period. The use of unobligated funds is approved based on the Year 01 Federal Financial Report (FFR) dated March 30, 2016. The amount of this NoA will be subject to reduction if the final amount of unobligated funds is less than the amount of unobligated funds reported on the referenced FFR

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

Office of Grants Services Contact:

Louvern Asante, Grants Management Specialist Centers for Disease Control Infectious Diseases Services Branch Telephone: (770) 488-2835

Email: Lha5@cdc.gov

PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE