

1. DATE ISSUED MM/DD/YYYY 07/06/2018	2. CFDA NO. 93.116	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
1a. SUPERSEDES AWARD NOTICE dated 04/18/2018 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded			NOTICE OF AWARD AUTHORIZATION (Legislation/Regulations) SEC 301(A), SEC 317 PHS ACT AS AMENDED (42 U.S.C. 247B-6)
4. GRANT NO. 6 NU52PS004680-04-02 Formerly 5U52PS004680-02		5. ACTION TYPE Post Award Amendment	
6. PROJECT PERIOD MM/DD/YYYY From 01/01/2015		Through 12/31/2019	
7. BUDGET PERIOD MM/DD/YYYY From 01/01/2018		Through 12/31/2018	

8. TITLE OF PROJECT (OR PROGRAM)
Kentucky Tuberculosis Elimination and Laboratory Program Cooperative Agreement 2015 to 2019

9a. GRANTEE NAME AND ADDRESS Health & Family Services, Kentucky Cabinet for 275 E Main St # hs1gwa Frankfort, KY 40621-1000	9b. GRANTEE PROJECT DIRECTOR Dr Robert Lee Brawley 275 E. MAIN STREET HS2E-B KENTUCKY DEPT FOR PUBLIC HEALTH FRANKFORT, KY 40621
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10a. GRANTEE AUTHORIZING OFFICIAL Dr Robert Lee Brawley 275 E. MAIN STREET HS2E-B KENTUCKY DEPT FOR PUBLIC HEALTH FRANKFORT, KY 40621 Phone: 502-564-4478	10b. FEDERAL PROJECT OFFICER Mr. Paul Regan 1600 Clifton Rd E-10 DTBE/FSB Atlanta, GA 30333 Phone: 404-639-6496
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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) 651,398.00	
II Total project costs including grant funds and all other financial participation <input type="checkbox"/>		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and Wages	151,840.00	c. Less Cumulative Prior Award(s) This Budget Period 325,698.00	
b. Fringe Benefits	118,620.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 325,700.00	
c. Total Personnel Costs	270,460.00	13. Total Federal Funds Awarded to Date for Project Period 2,378,111.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT	
e. Supplies	75,288.00	(Subject to the availability of funds and satisfactory progress of the project):	
f. Travel	52,292.00	YEAR	TOTAL DIRECT COSTS
g. Construction	0.00	a. 5	d. 8
h. Other	73,577.00	b. 6	e. 9
i. Contractual	126,637.00	c. 7	f. 10
j. TOTAL DIRECT COSTS →	598,254.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
k. INDIRECT COSTS	53,144.00	a. DEDUCTION b. ADDITIONAL COSTS c. MATCHING d. OTHER RESEARCH (Add / Deduct Option) e. OTHER (See REMARKS)	
l. TOTAL APPROVED BUDGET	651,398.00	b	
m. Federal Share	651,398.00	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:	
n. Non-Federal Share	0.00	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.	

REMARKS (Other Terms and Conditions Attached - ☒ Yes ☐ No)

APPROVED FINAL FUNDING IN THE AMOUNT OF \$325,700

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

17. OBJ CLASS	41.51	18a. VENDOR CODE	1610600439B5	18b. EIN	610600439	19. DUNS	927049767	20. CONG. DIST.	06
FY-ACCOUNT NO.		DOCUMENT NO.		CFDA		ADMINISTRATIVE CODE		AMT ACTION FIN ASST	APPROPRIATION
21. a.	8-9211183	b.	004680PS15	c.	93.116	d.	PS	e.	\$47,245.00
22. a.	8-9213485	b.	004680PS15	c.	93.116	d.	PS	e.	\$239,626.00
23. a.	8-9214095	b.	004680PS15	c.	93.116	d.	PS	e.	\$38,829.00

NOTICE OF AWARD (Continuation Sheet)

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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
01/01/2015	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
01/01/2018	12/31/2018	Annual	03/31/2019

AWARD ATTACHMENTS

Health & Family Services, Kentucky Cabinet for

6 NU52PS004680-04-02

1. PS4680-04 FINAL FUNDING T&C

Notice of Funding Opportunity (NOFO): PS15-1501

Award Number: U52PS004680-04 AMENDMENT

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
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PURPOSE: This amended Notice of Award is to award additional funding in the amount of **\$325,700.** Previously, **\$325,698** had been awarded, making the current total available award amount **\$651,398** of the approved **\$651,398** for the Year 04 budget period which is **01/01/2018** through **12/31/2018**.

P&C: \$ 266,279

HRD: \$ 12,176

LAB: \$ 47,245

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