1. DATE ISSUED MM/E 04/08/2016	93.940	3. ASSISTANCE TYPE Cooperative Agreement						
<b>1a. SUPERSEDES AWARD NOTICE dated</b> 11/25/2015 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded								
4. GRANT NO. 6 NU62PS003695-05-01 Formerly 5U62PS003695-05			5. ACTION TYPE Post Award Amendment					
6. PROJECT PERIOD From	MM/DD/YYYY 01/01/2012		Through	MM/DD/YYYY 12/31/2016				
7. BUDGET PERIOD From	MM/DD/YYYY 01/01/2016		Through	MM/DD/YYYY 12/31/2016				

Kentucky Cabinet for Health & Family Services

#### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **Centers for Disease Control and Prevention CDC Procurement and Grants Office**

2920 Brandywine Road Atlanta, GA 30341

## **NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations) 307,317K2 PHSA,42USC241,247BK2,PL108

### 8. TITLE OF PROJECT (OR PROGRAM)

9a. GRANTEE NAME AND ADDRESS

PS12-1201 COMPREHENSIVE HIV PREVENTION PROJECT FOR HEALTH DEPTS

275	tucky Cabinet for H E Main St nkfort, KY 40601-23	-	Services		275 E M Frankfo	D Sams Main St ert, KY 40601-2321 5025646539x4286				
Kar 275 Fran	ANTEE AUTHORIZING OFFICIA en D Sams E Main St Lkfort, KY 40601-23: Le: 5025646539x4286				Earl 1600 Cl Atlanta	AL PROJECT OFFICER Banks ifton Rd ., GA 30333 404-639-5200				
			ALL AMO	UNTS ARI						
-	ROVED BUDGET (Excludes Direct					COMPUTATION				
	cial Assistance from the Federal A	0 0 , ,		П		of Federal Financial Assistance (from	•	-	1,096,66	
II Total	project costs including grant funds	and all other financial part	icipation			obligated Balance From Prior Budget				0.00
a.	Salaries and Wages		128,709.00			nulative Prior Award(s) This Budget P  FOF FINANCIAL ASSISTANCE THIS	-		341,98	
b.	Fringe Benefits		85,648.00			deral Funds Awarded to Date for Pr		-	754,68 7,178,99	
C.	Total Personnel Costs		214	357.00	14. RECOM	MENDED FUTURE SUPPORT	,		1110,00	77.00
d.	Equipment		211		(Subject to t	he availability of funds and satisfactor	ry progress of the	e project):		
e.	Supplies		72	0.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL	DIRECT COS	3TS
f.	Travel			,550.00	a. b.		d. e.			
g.	Construction		13	0.00			f.			
h.	Other		51	,308.00		INCOME SHALL BE USED IN ACCORD WITH (	ONE OF THE FOLLO	WING		
i.	Contractual			,158.00	a. b.	DEDUCTION ADDITIONAL COSTS			b	
j.	TOTAL DIRECT COST	rs <b>—</b>	1,053	,340.00	c. d.	MATCHING OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)				•
k.	INDIRECT COSTS		43	,327.00		RD IS BASED ON AN APPLICATION SUBMITTE	D TO AND AS APPR	OVED BY THE FEI	DERAL AWARDING	G AGENCY
l.	TOTAL APPROVED BUD	OGET	1,096	,667.00	ON THE ABOVE OR BY REFERE a. b.	TITLEO PROJECT AND IS SUBJECT TO THE TENCE IN THE FOLLOWING:  The grant program legislation  The grant program regulations.	ERMS AND CONDITIO	ONS INCORPORATE		
m.	Federal Share		1,096,	667.00	c. d.	This award notice including terms and conditions Federal administrative requirements, cost princip	oles and audit requirer	ments applicable to the	•	
n.	Non-Federal Share			0.00	prevail. Accep	ere are conflicting or otherwise inconsistent p tance of the grant terms and conditions is act the grant payment system.	olicies applicable to knowledged by the o	the grant, the abor grantee when funds	e order of preced are drawn or oth	dence shall nerwise
REI	MARKS (Other Terms and Con	ditions Attached -	<b>X</b> Yes		No)					

9b. GRANTEE PROJECT DIRECTOR

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

17. OBJ CL	ASS 41.51	18a. VENDOR CODE	1610600439B5	18b. EIN	610600439	19. DUNS	927049767	20. CONG. DIST.	06
F	Y-ACCOUNT NO.	DOCU	MENT NO.		ADMINISTRATIVE CODE	AMT	ACTION FIN ASST	APPROPRIA	TION
21. a.	6-939ZRAG	b. 0036	595PS15	C.	₽S	d.	\$754,681.00	e. 75-16	5-0950
22. a.		b.		C.		d.		e.	
23. a.		b.		C.		d.		e.	

# NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of	2	DATE ISSUED
		04/08/2016
GRANT NO.	6 NU	62PS003695-05-01

# **Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$14,388.00	\$14,388.00
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	\$14,388.00	\$14,388.00

# **AWARD ATTACHMENTS**

Kentucky Cabinet for Health & Family Services

6 NU62PS003695-05-01

1. T&C

**Funding Opportunity Announcement (FOA): PS12-1201** 

**Award Number: U62 PS003695-05** 

Applicable Cost Principles: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

### AWARD INFORMATION

<u>PURPOSE</u>: This revised Notice of Award is to award additional funding in the amount of <u>\$754,681</u>. Previously, <u>\$341,986</u> had been awarded, making the current total available award amount <u>1,096,667</u> of the approved <u>\$1,096,6673</u> for the Year 05 budget period which is <u>1/1/2016</u> through <u>12/31/2016</u>. Future funds remain subject to availability.

The new funds are distributed as follows:

CATEGORY A: \$754,681

Direct Assistance (DA): DA is awarded in the amount of \$14,388 in this budget period. The total DA funded for fiscal year 2016 is \$14,388 (100%).

### **REVISED BUDGET:**

CDC anticipates resolution of all Fiscal Year 2016 budget related issues prior to your next allotment of 2016 funds. After CDC confirmation of the amount of the final budget allotment, the Office of Grants Services (OGS) will generate an electronic mail (e-mail) notification which will request your submission of a final revised budget for the full amount of your award (total available 12 month budget allocation). Upon receipt of your revised budget OGS will issue you a revised NOA which will reflect the total amount of funding for the budget period.

FINAL REVISED BUDGET REQUIREMENT: Submission of the final revised budget with narrative justification and work plan is deferred until confirmation of the final budget allocation for Fiscal Year 2016.

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, necessary and reasonable.

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 REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE

### **Office of Grant Services Personnel:**

Freda Johnson, Grants Management Specialist Centers for Disease Control and Prevention (CDC) Office of the Chief Operating Officer (OCOO) Infectious Disease Services Branch 2920 Brandywine Rd, MS E-15 Atlanta, GA 30341-4146

Phone: 770-488-3107

Fax: 770-488-2868

Gladys T. Gissentanna, M.S., CGMS Grants Management Officer Centers for Disease Control and Prevention (CDC) Office of the Chief Operating Officer (OCOO) Infectious Disease Services Branch 2920 Brandywine Road, NE, Mail-Stop E-15, Atlanta, GA 30341-4146

Phone: (770) 488-2741 Fax: 770-488-2868