1. DATE ISSUED MM/DD/YYYY 2. CFDA NO. 3. ASSISTANCE TYPE 04/11/2018 93.753 Cooperative Agreement 1a. SUPERSEDES AWARD NOTICE dated 12/06/2017 except that any additions or restrictions previously imposed remain			DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention CDC Office of Financial Resources			
in effect unless specifically rescinded		-		dywine Roa GA 30341	d	
4. GRANT NO. 6 NUE1EH001264-03-05 Formerly 5UE1EH001264-02 6 Award Amendment						
6. PROJECT PERIOD MM/DD/YYYY	MM/DD/YYYY		NOTICE	OF AWA	RD	
05/30/2011	rough 09/29/2018	AUTHORIZATION (Legislation/Regulations)		s)		
09/90/2010	MM/DD/YYYY rough 09/29/2018	Sect 301 and 307 PHS Act(42 USC Sect 241 and 247), amend			7), amended	
8. TITLE OF PROJECT (OR PROGRAM) CHILDHOOD LEAD POISONING PREVEN	TION: PRIMARY AND S	ECONDAR	Y INTERVENTION			
9a. GRANTEE NAME AND ADDRESS		9b. GRANTI	E PROJECT DIRECTOR			
Health & Family Services, Kentucky 275 E Main St # 5wa Frankfort, KY 40601-2321	Cabinet for	275 E M Kentuck Frankfo	an Lawson Lain St Ly Cabinet for Health Drt, KY 40621 502-564-2154 ext4412	and Famil	y Servi.	ces
10a. GRANTEE AUTHORIZING OFFICIAL			AL PROJECT OFFICER			
Ms. Bethlyn Shepherd 275 E Main St HS2WA FRANKFORT, KY 40621 Phone: 502-564-2154			Ms. Carolina Lecours 4770 Buford Highway Atlanta, GA 30341 Phone: 404-498-1256			
1. APPROVED BUDGET (Excludes Direct Assistance)	ALL AMOUNTS AR		IN USD COMPUTATION			
I Financial Assistance from the Federal Awarding Agency Only			of Federal Financial Assistance (from			772,292.0
II Total project costs including grant funds and all other financia	Il participation		bbligated Balance From Prior Budget I nulative Prior Award(s) This Budget P			0.0 772,292.0
a. Salaries and Wages	117,407.00		F OF FINANCIAL ASSISTANCE THIS	-		0.0
b. Fringe Benefits	94,605.00	13. Total Fe	deral Funds Awarded to Date for Pr	oject Period		1,473,918.0
c. Total Personnel Costs d. Equipment	212,012.00		MENDED FUTURE SUPPORT he availability of funds and satisfactor	y progress of the	e project):	
e. Supplies	0.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTA	L DIRECT COSTS
f. Travel	1,627.00	1		d. 7		
g. Construction	7,951.00	6		e. 8 f. 9		
h. Other		15. PROGRAM	INCOME SHALL BE USED IN ACCORD WITH C		VING	
		ALTERNATIVE	S: DEDUCTION			
i. Contractual	405,711.00	a. b. c.	ADDITIONAL COSTS MATCHING			b
	→ 705,301.00	d. e.	OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)			
j. TOTAL DIRECT COSTS			RD IS BASED ON AN APPLICATION SUBMITTE TITLED PROJECT AND IS SUBJECT TO THE TE			
k. INDIRECT COSTS	66,991.00	OR BY REFERE	INCE IN THE FOLLOWING:			
	772,292.00	OR BY REFERE a. b.	The grant program legislation The grant program regulations.	16		
k. INDIRECT COSTS		OR BY REFERE a. b. c. d.	The grant program legislation The grant program regulations. This award notice including terms and conditions Federal administrative requirements, cost princip	les and audit requiren	nents applicable to	
 k. INDIRECT COSTS I. TOTAL APPROVED BUDGET 	772,292.00	OR BY REFERE a. b. c. d. In the event th prevail. Accept	The grant program legislation The grant program regulations. This award notice including terms and conditions	les and audit requiren olicies applicable to	nents applicable to the grant, the at	oove order of precedence

GRANTS MANAGEMENT OFFICIAL: Tiffany-392250 Mannings

17. OBJ CLASS 41.51	18a. VENDOR CODE 16106	00439B5	18b.EIN 610600	439 19. DUNS	927049767	20. CONG. DIST.	06
FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRAT	IVE CODE AMT A	CTION FIN ASST	APPROPRIATI	ON
21.a. 7-93907XP	b. 16EH001264PPHF17	c. 93.75	3 d. EH	e.	\$0.00	f. 75-X-	-0947
22. a.	b.	С.	d.	e.		f.	
23. a.	b.	C.	d.	e.		f.	

PAGE 2 of	3	DATE ISSUED 04/11/2018
GRANT NO.	6 NU	JE1EH001264-03-05

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)

PAGE 3 of	3	DATE ISSUED
		04/11/2018
GRANT NO. 6 NUE1EH001264-03-05		

Federal Financial Report Cycle					
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date		
09/30/2014	09/29/2015	Annual	12/28/2015		
09/30/2015	09/29/2017	Annual	12/28/2017		
09/30/2016	09/29/2018	Annual	12/28/2018		

AWARD ATTACHMENTS

Health & Family Services, Kentucky Cabinet for

6 NUE1EH001264-03-05

1. Revised Terms

ADDITIONAL TERMS AND CONDITIONS OF AWARD

The purpose of this amendment is to approve the Principal Investigator change to Ms. Susan Lawson. This is in response to the request submitted by your organization dated March 7, 2018.

The purpose of this amendment is to also approve the Authorizing Official Representative change to Ms. Bethlyn Shepherd. This is in response to the request submitted by your organization dated March 14, 2018.

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, and reasonable.

All other terms and conditions issued with this award remain in effect, unless otherwise changed, in writing, by the Grants Management Officer.

CLOSEOUT REQUIREMENTS

Recipients must submit closeout reports in a timely manner. Unless the Grants Management Specialist/Grants Management Officer (GMS/GMO) approves a deadline extension the recipient must submit all closeout reports within 90 days of the period of performance end date. Reporting timeframe is 09/30/2014 through 09/29/2018. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

All manuscripts published as a result of the work supported in part or whole by the cooperative grant must be submitted with the performance progress reports.

The final and other programmatic reports required by the terms and conditions of the NoA are the following.

Final Performance Progress and Evaluation Report (PPER): This report should include the information specified in the NOFO and is submitted after solicitation from the GMS/GMO via <u>www.grantsolutions.gov</u>. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under OMB Number 0920-1132, "Performance Progress and Monitoring Report", Expiration Date 8/31/2019.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted to the GMO/GMS no later than 90 days after the period of performance end date. To submit the FFR, login to <u>www.grantsolutions.gov</u>, select "Reports" from the menu bar and then click on Federal Financial Reports.

Reporting timeframe for Document number 0012641LP14: September 30, 2014 – September 29, 2016 Reporting timeframe for Document number 001264TA15: September 30, 2015 – September 29, 2017 Reporting timeframe for Document number 16EH001264: September 30, 2016 – September 29, 2017 Reporting timeframe for Document number 16EH001264PPHF17: September 30, 2017 – September 29, 2018

This report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and Human Services' Payment Management Services (PMS), you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

If the final reports (FFR and PPER) cannot be submitted within 90 days after the end of the period of performance, in accordance with 45 CFR Part 75.381 (Closeout), the recipient must submit a letter requesting an extension that includes the justification for the delay and state the expected date the CDC Office of Grants Services will receive the reports. All required documents must be submitted to the business contact identified in

CDC Staff Contacts.

Equipment Inventory Report: A complete inventory must be submitted with final PPER documents for all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. The inventory list must include the description of the item, manufacturer serial and/or identification number, acquisition date and cost, percentage of Federal funds used in the acquisition of the item. The recipient should also identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. These requirements do apply to equipment purchased with non-federal funds for this program. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award referenced in the cover letter. CDC will notify the recipient if transfer to title will be required and provide disposition instruction on all major equipment. Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously sponsored by the Federal Government may be retained, sold, or otherwise disposed of, with no further obligation to the Federal Government. If no equipment was acquired under this award, a negative report is required.

Final Invention Statement: A Final Invention Statement must be submitted with the final PPER documents. Electronic versions of the form can be downloaded by visiting <u>http://grants1.nih.gov/grants/hhs568.pdf</u>. If no inventions were conceived under this assistance award, a negative report is required. This statement may be included in a cover letter.

CDC CONTACTS

GMO Contact:

Grants Management Officer: Tiffany Mannings Centers for Disease Control and Prevention (CDC) Office of Grants Services 2960 Brandywine Road, Mail Stop E-01 Atlanta, GA 30341 Email: <u>TMannings@cdc.gov</u> Phone: 770-488-2515 Fax: 770-488-2670

GMS Contact:

Victoria McBee, Grants Management Specialist Centers for Disease Control and Prevention (CDC) Office of Grants Services 2960 Brandywine Road, Mail Stop E-01 Atlanta, GA 30341 Telephone: 770-488-2825 Email: yig9@cdc.gov

Programmatic Contact:

Carolina Lecours, Project Officer Division of Emergency and Environmental Health Services National Center for Environmental Health Centers for Disease Control and Prevention (CDC) 4770 Buford Highway - Mailstop F58 Atlanta, Georgia 30341 Phone: 404-498-1256 E-mail address: nbo3@cdc.gov