	SSUED MM/DD/YYYY 2. CFDA NO. 3. ASSIST 93.945 Coop	TANCE TYPE erative Agreem	nent	;	DEPARTMENT OF HEA		
except	ERSEDES AWARD NOTICE dated 10/19/2 that any additions or restrictions previously impose at unless specifically rescinded	2017 d remain				dywine Road	ources
	TNO. U58DP003983-05-04	s. <u>Астюн түре</u> Post Award Amendment			Aliania,	GA 30341	
6. PROJE	### 07/01/2012 ##################################	MM/DD/YY Through 06/30/2 MM/DD/YY	2018	301(a)	AUTHORIZATION (and 317(k)(2) of the Public	Health Service	gulations) Act, [42 U.S.C. Section
	07/01/2016 OF PROJECT (OR PROGRAM) APPLICATION FOR FIVE YEAR	FUNDING OPPOR		STATE	241(a) and 247b		nded.
	NTEE NAME AND ADDRESS	6.			E PROJECT DIRECTOR		
275 Publ Fran	th & Family Services, Kentuc E Main St ic Health Protection/Saf. kfort, KY 40601-2321	ky Cabinet for		275 EAS KENTUCK FRANKFO Phone:	ri Wood T MAIN STREET, HS2W-I Y CABINET FOR HLTH&F/ RT, KY 40621 502-564-7996		n.
Dr. 275 Offi Fran	ANTEE AUTHORIZING OFFICIAL Connie Gayle White M.D. E. Main Street ce of Health Equity kfort, KY 40621-0001 e: 502-564-3970			Michel 1600 Cl Atlanta	AL PROJECT OFFICER e Mercier ifton Rd , GA 30333 770-488-4112		
11. APPR	ROVED BUDGET (Excludes Direct Assistance)	ALL AMO	DUNTS ARE		N USD COMPUTATION		
I Financ	cial Assistance from the Federal Awarding Agency C project costs including grant funds and all other final Salaries and Wages	ncial participation		a. Amount o b. Less Uno	of Federal Financial Assistance (from bligated Balance From Prior Budget I nulative Prior Award(s) This Budget P	Periods	720,208.00 58,965.00 661,243.00
b.	Fringe Benefits	115,736.50 89,956.22			OF FINANCIAL ASSISTANCE THIS		0.00
C.	Total Personnel Costs				HENDED FUTURE SUPPORT	oject Penou	2,242,009.00
d.	Equipment		,692.72	(Subject to t	he availability of funds and satisfactor	ry progress of the p	roject):
e.	Supplies	13	0.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
f.	Travel		,591.60 ,629.83	a. 6 b. 7		d. 9 e. 10	
a.	Construction			c. 8		f. 11	
h.	Other		0.00	15. PROGRAM	INCOME SHALL BE USED IN ACCORD WITH	l	G
i.	Contractual		,531.00	ALTERNATIVE:	DEDUCTION		
	TOTAL DIRECT COSTS ———		,581.25	8. 6.	ADDITIONAL COSTS MATCHING OTHER RESEARCH (Add (Deduct Online)		e
j.	INDIRECT COSTS		,026.40	•	OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)		
	TOTAL APPROVED BUDGET		,181.60),208.00	ON THE ABOVE OR BY REFERE	D IS BASED ON AN APPLICATION SUBMITTE TITLED PROJECT AND IS SUBJECT TO THE TO NCE IN THE FOLLOWING: The great program legislation	D TO, AND AS APPROV ERMS AND CONDITIONS	ED BY, THE FEDERAL AWARDING AGENCY INCORPORATED EITHER DIRECTLY
m	Federal Share	720	,208.00	c. d	The grant program regulations. This award notice including terms and conditions Federal administrative requirements, cost princip	, if any, noted below unde des and audit requirement	r REMARKS. Is applicable to this grant.
	Non-Federal Share	720	0.00	prevail. Accept	re are conflicting or otherwise inconsistent p ance of the grant terms and conditions is ac the grant payment system.	olicies applicable to the	grant, the above order of precedence shall

GRANTS MANAGEMENT OFFICIAL: Patricia French, Grants Management Officer

REMARKS (Other Terms and Conditions Attached -

× Yes

17. OBJ CLASS 41.51	18a. VENDOR CODE 16106	00439B5 18b. E	IN 610600439	19. DUNS 927049767	20. CONG. DIST. 06
FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 7-939ZREX	b. 003983DP14	c. 93.945	d. DP	e. \$0.00	f. 75-17-0948
22. a.	b.	C.	d.	в.	f,
23. a.	b.	C.	d.	е.	f.

No)

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of	3	DATE ISSUED 01/09/2018
GRANT NO. 6 NU		J58DP003983-05-04

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
		01/09/2018
GRANT NO.	6 NU	J58DP003983-05-04

Federal Financial Report Cycle					
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date		
07/01/2012	06/30/2013	Annual	09/28/2013		
07/01/2013	06/30/2014	Annual	09/28/2014		
07/01/2014	06/30/2015	Annual	09/28/2015		
07/01/2015	06/30/2016	Annual	09/28/2016		
07/01/2016	06/30/2018	Annual	09/28/2018		

Notice of Funding Opportunity (NOFO) Number: DP12-1210

Award Number NU58DP003982-05

Revision 04

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Redirection: The purpose of this amended Notice of Award is to approve the redirection request submitted by your organization dated November 9, 2017. Funds have been distributed as indicated in the approved budget of this Notice of Award.

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

The state of

PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE

Administrative Contacts: **Grants Management Officer**, Patricia French
Centers for Disease Control
Office of Grants Services
2960 Brandywine Road
Atlanta, Georgia 30341
Telephone: 770-488-2849
Email: PFrench@cdc.gov

Grants Management Specialist: Keisha Thompson Center for Disease Control and Prevention CDC / ATSDR 2960 Brandywine Road MS.E-01 Atlanta, GA 30341 Phone: 770-488-2681

Phone: 770-488-2681 Email: dwt6@cdc.gov

AWARD ATTACHMENTS

Health & Family Services, Kentucky Cabinet for

6 NU58DP003983-05-04

1. Terms and Conditions