


1. DATE ISSUED: 03/16/2018		2. PROGRAM CFDA: 93.914		 <p>NOTICE OF AWARD AUTHORIZATION (Legislation/Regulation) Public Health Service Act, Title XXVI, Section 2603b Public Health Service Act Section 2603(b), 42 U.S.C 300ff-13(b) FY 2007 Title XXVI of the PHS Act, 42 U.S.C. section 300-ff-11 et seq (as amended), Part A Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) Public Health Service Act, Sections 2601-2610 Public Health Service Act, Sections 2601-2610 (42 USC 300ff-11 – 300ff-20), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87) Public Health Service Act, Sections 2601-2610, and 2693(b)(2)(A) (42 USC 300ff-11 – 300ff-20, and 300ff-121(b)(2)(A)), as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87)</p>																																											
3. SUPERSEDES AWARD NOTICE dated: 01/29/2018 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.																																															
4a. AWARD NO.: 6 H89HA00002-28-01		4b. GRANT NO.: H89HA00002				5. FORMER GRANT NO.: BRH890002																																									
6. PROJECT PERIOD: FROM: 04/04/1991 THROUGH: 02/28/2019																																															
7. BUDGET PERIOD: FROM: 03/01/2018 THROUGH: 02/28/2019																																															
8. TITLE OF PROJECT (OR PROGRAM): HIV EMERGENCY RELIEF PROJECT GRANTS																																															
9. GRANTEE NAME AND ADDRESS: BROWARD COUNTY BOARD/CNTY COMMISSIONERS PO BOX 14740 Ft Lauderdale, FL 33302-4740 DUNS NUMBER: 066938358				10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR) William E Green BROWARD COUNTY BOARD/CNTY COMMISSIONERS 115 S. Andrews Avenue Fort Lauderdale, FL 33301-1818																																											
11. APPROVED BUDGET: (Excludes Direct Assistance) <input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation <table style="width: 100%; border-collapse: collapse;"> <tr><td>a. Salaries and Wages :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>b. Fringe Benefits :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>c. Total Personnel Costs :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>d. Consultant Costs :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>e. Equipment :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>f. Supplies :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>g. Travel :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>h. Construction/Alteration and Renovation :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>i. Other :</td><td style="text-align: right;">\$7,237,115.00</td></tr> <tr><td>j. Consortium/Contractual Costs :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>k. Trainee Related Expenses :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>l. Trainee Stipends :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>m. Trainee Tuition and Fees :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>n. Trainee Travel :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>o. TOTAL DIRECT COSTS :</td><td style="text-align: right;">\$7,237,115.00</td></tr> <tr><td>p. INDIRECT COSTS (Rate: % of S&W/TADC) :</td><td style="text-align: right;">\$0.00</td></tr> <tr><td>q. TOTAL APPROVED BUDGET :</td><td style="text-align: right;">\$7,237,115.00</td></tr> <tr><td> i. Less Non-Federal Share:</td><td style="text-align: right;">\$0.00</td></tr> <tr><td> ii. Federal Share:</td><td style="text-align: right;">\$7,237,115.00</td></tr> </table>				a. Salaries and Wages :	\$0.00	b. Fringe Benefits :	\$0.00	c. Total Personnel Costs :	\$0.00	d. Consultant Costs :	\$0.00	e. Equipment :	\$0.00	f. Supplies :	\$0.00	g. Travel :	\$0.00	h. Construction/Alteration and Renovation :	\$0.00	i. Other :	\$7,237,115.00	j. Consortium/Contractual Costs :	\$0.00	k. Trainee Related Expenses :	\$0.00	l. Trainee Stipends :	\$0.00	m. Trainee Tuition and Fees :	\$0.00	n. Trainee Travel :	\$0.00	o. TOTAL DIRECT COSTS :	\$7,237,115.00	p. INDIRECT COSTS (Rate: % of S&W/TADC) :	\$0.00	q. TOTAL APPROVED BUDGET :	\$7,237,115.00	i. Less Non-Federal Share:	\$0.00	ii. Federal Share:	\$7,237,115.00	12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE: a. Authorized Financial Assistance This Period \$7,237,115.00 b. Less Unobligated Balance from Prior Budget Periods i. Additional Authority \$0.00 ii. Offset \$0.00 c. Unawarded Balance of Current Year's Funds \$0.00 d. Less Cumulative Prior Awards(s) This Budget Period \$3,329,163.00 e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION \$3,907,952.00 13. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project) <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width: 30%;">YEAR</th> <th>TOTAL COSTS</th> </tr> <tr> <td colspan="2" style="text-align: center;">Not applicable</td> </tr> </table>		YEAR	TOTAL COSTS	Not applicable	
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15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: A=Addition B=Deduction C=Cost Sharing or Matching D=Other Estimated Program Income: \$0.00				[A]																																											
16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: a. The grant program legislation cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 75 as applicable. In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.																																															
REMARKS: (Other Terms and Conditions Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) This award includes the following sources of funding: FY18 FRML - \$6,672,244 FY18 MAI - \$564,871																																															

Total Funding - \$7,237,115						
Electronically signed by Brad Barney , Grants Management Officer on : 03/16/2018						
17. OBJ. CLASS: 41.15		18. CRS-EIN: 1596000531A1	19. FUTURE RECOMMENDED FUNDING: \$0.00			
FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
18 - 3773007	93.914	18H89HA00002	\$3,603,986.00	\$0.00	FRML	HIV1-18
18 - 3773006	93.914	18H89HA00002	\$303,966.00	\$0.00	MAI	HIV1-18

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. This revised Notice of Award (NoA) provides additional FY18 funding for the purposes of continuation of services and is based on need to avoid any interruption of providing services to HIV individuals. All prior terms and conditions remain in effect unless specifically removed.

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Contacts

NoA Email Address(es):

Name	Role	Email
Omeed Rackal	Employee	orackal@broward.org
Neil Walker	Employee	newalker@broward.org
Leonard N Jones	Authorizing Official, Communication Contact	ljones@broward.org
Karla A Drummond	Business Official	kdrummond@broward.org
William E Green	Program Director	wgreen@broward.org

Note: NoA emailed to these address(es)

Program Contact:

For assistance on programmatic issues, please contact Tempestt Woodard at:
MailStop Code: 09W13A
HAB/DMHAP
5600 Fishers Lane
RM 09W13A
Rockville, MD, 20857-
Email: twoodard@hrsa.gov
Phone: (301) 945-9384

Division of Grants Management Operations:

For assistance on grant administration issues, please contact Marie Mehaffey at:
OFAM/DGMO/HRHB
5600 Fishers Lane
Rockville, MD, 20852-
Email: MMehaffey@hrsa.gov
Phone: (301) 945-3934