



Grant Number: 5H79SM061869-02
FAIN: SM061869

Program Director:
 Tracy Moseman

Project Title: Now is the Time Project AWARE State Education Agency Grants

Grantee Address	Business Address
MONTANA STATE OFFICE/PUBLIC INSTRUCTION Superintendent PO Box 202501 Helena, MT 596202501	Montana Office of Public Instruction Administrator, Centralized Services Division PO Box 202501 Helena, MT 596202501

Budget Period: 09/30/2015 – 09/29/2016
Project Period: 09/30/2014 – 09/29/2019

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$1,950,000 (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to MONTANA STATE OFFICE/PUBLIC INSTRUCTION in support of the above referenced project. This award is pursuant to the authority of 520A of the PHS Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on “Grants” then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the “Terms and Conditions” is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,

Roger George
 Grants Management Officer
 Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 5H79SM061869-02

Award Calculation (U.S. Dollars)

Salaries and Wages	\$826,707
Fringe Benefits	\$311,508
Personnel Costs (Subtotal)	\$1,138,215
Supplies	\$74,992
Consortium/Contractual Cost	\$424,892
Travel Costs	\$162,656
Other	\$93,646
Direct Cost	\$1,894,401
Indirect Cost	\$55,599
Approved Budget	\$1,950,000
Federal Share	\$1,950,000
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$1,950,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
2	\$1,950,000
3	\$1,950,000
4	\$1,950,000
5	\$1,950,000

*Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number: 93.243
 EIN: 1810302402C2
 Document Number: 14SM61869A
 Fiscal Year: 2015

IC	CAN	Amount
SM	C96J045	\$1,696,500
SM	C96J053	\$253,500

IC	CAN	2015	2016	2017	2018
SM	C96C805		\$1,950,000	\$1,950,000	\$1,950,000
SM	C96J045	\$1,696,500			
SM	C96J053	\$253,500			

SM Administrative Data:

PCC: AWARE-S / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 5H79SM061869-02

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box

6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 5H79SM061869-02

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:

Additional Costs

SECTION IV – SM Special Terms and Conditions – 5H79SM061869-02

REMARKS:

This Award reflects acceptance of the Attestation Letter signed and dated on February 19, 2015 by the Authorized Representative, stating that there are no budget changes above 25% of the total previous budget period in response to the continuation application request.

*Note the following breakdown of component costs is applicable: Component 1 costs cannot exceed 87% of the total award; Component 1 SEA costs cannot exceed 15%; the Project Evaluation costs cannot exceed 10%; and the LEA cost cannot be less than 75%. Component 2 costs cannot exceed 13% of the total award.

All budgeted Indirect Costs are restricted and may not be used for any purpose until a negotiated indirect cost rate agreement is finalized and submitted to the Division of Grants Management, SAMHSA. If the rate is not finalized and submitted by the end of the current budget year (9/29/2016), the funds must be reported as an unobligated balance of funds on the Federal Financial Report (SF-425).

All discretionary grant continuation applications must be submitted electronically through Grants.gov. If you are eligible for a continuation grant, an email of notification will be sent to your organization's business official as identified in the HHS Checklist, Part C.

SPECIAL CONDITIONS OF AWARD:

None.

SPECIAL TERMS OF AWARD:

None.

STANDARD TERMS OF AWARD:

Refer to the following SAMHSA website for Standard Terms of Award:

<http://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>
(Cooperative Agreement)

UPDATED KEY STAFF

Key Staff positions are listed below:

Tracy Moseman, Project Director/Coordinator @ 20% Level of Effort
Lead Project Evaluator, TBD

LEA#1 Project Manager, TBD
LEA#2 Project Manager, TBD
LEA#3 Project Manager, TBD

All changes in key staff including level of effort must be sent electronically to the GPO including a biographical sketch and other documentation and information as stated above who will make a recommendation for approval or disapproval to the assigned Grants Management Specialist. Only the GMO, SAMHSA may approve Key Staff Changes.

REPORTING REQUIREMENTS:

Submission of a Programmatic Annual Report is due no later than October 30, 2016.

Please submit your Programmatic (annual) Report to
DGMProgressReports@samhsa.hhs.gov **and copy your Program Official.** (HARD COPIES
SUBMISSION IS NOT REQUIRED)

Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award.

It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS:

Ivory Howard, Program Official
Phone: (240) 276-0423 **Email:** Ivory.Howard@samhsa.hhs.gov

Ernest Stevens, Grants Specialist
Phone: (240) 276-0631 **Email:** Ernest.Stevens@samhsa.hhs.gov **Fax:** (240) 276-1430