



Centers for Disease Control and Prevention

National Center for STLT Public Health Infrastructure and Workforce

Strengthening Public Health Systems and Services through National Partnerships to Improve and
Protect the Nation's Health

CDC-RFA-PW-24-00800101SUPP24

08/26/2024

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Part 1. Overview Information

Federal Agency Name:

Federal Centers for Disease Control and Prevention (CDC)

Notice of Funding Opportunity (NOFO) Title:

Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

Announcement Type:

Revision - Type 3 - (Competitive supplement) Additional funds requested to expand the scope of work have elapsed.

Agency Notice of Funding Opportunity Number:

CDC-RFA-PW-24-00800101SUPP24

Assistance Listings Number:

93.421

Key Dates:

Due Date for Applications 08/26/2024

08/26/2024

Application must be successfully submitted to Grants.gov by 11:59 pm Eastern Standard Time on the deadline date.

Additional Overview Content:

This supplemental funding is only available to the organizations awarded under Funding Strategy 1 of CDC-RFA-PW-24-0080: Strengthening Public Health Systems and Services through

National Partnerships to Improve and Protect the Nation's Health. Eligible recipients may submit applications for FY24 CIO Project Plans according to the Population of Focus Category and Population of Focus Description for which they received initial funding in FY24. CDC expects to award projects in late September 2024. Awards issued under this supplemental NOFO will be added to the Year 1/FY 2024 budget period; therefore, CDC is requesting applicants submit proposals for a 10-month budget period (September 30, 2024-July 31, 2025).

Executive Summary

The purpose of this notice of funding opportunity (NOFO) is to announce the availability of supplemental funding for the organizations that were awarded funding under Funding Strategy 1 of CDC-RFA-PW-24-0080: Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health. This supplemental opportunity is the “Funding Strategy 2: Project Plans” highlighted on page 12 of 51 in the initial Notice of Funding Opportunity, CDC-RFA-PW24-0080. Per the initial NOFO, organizations will submit “Work Plans in Response to Project Plans” and budgets that align with the population of focus category and selected population of focus ONLY for which they were awarded funding under Funding Strategy 1. Applications received that do not align with the population of focus of initial award will be deemed non-responsive and will not be considered.

The CDC-RFA-PW-24-0080 recipients are eligible to submit applications for new FY24 CIO Project Plans that match the Population of Focus Category (A, B, or C) and Population of Focus Description for which they received initial funding in FY24. This supplemental funding opportunity enables recipients to engage in capacity-building assistance (CBA) priorities as identified in the CIO Project Plans attached to this publication. Recipients may refer to their Funding Strategy 1 Notice of Award to determine the Category and Population of Focus they’re approved to build capacity for under this supplemental opportunity.

Key program outcomes are to improve organizational and systems infrastructure and performance across the public health system to improve health outcomes and reduce health inequities. The program will fund organizations with demonstrated capability, expertise, resources, national reach, and a track record of providing CBA. CBA is defined as the activities that strengthen and maintain the necessary structures, systems, processes, and competencies to more effectively and efficiently operate and sustain programs or ensure organizational strength. Under this mechanism, CBA should be delivered through technical assistance, training, information sharing, technology transfer, or materials development. Recipients are expected to provide CBA to their population of focus in the following strategic areas: organizational capacity and performance improvement; workforce; data modernization, informatics and information technology; partnership development and engagement; and policy and programs. CDC and recipients will evaluate and measure completion of activities and demonstrate achievement of program outcomes. This NOFO details the second funding strategy of the CBA program’s two-part funding strategy. Applicants are eligible to submit applications for CIO Project Plans that match the Population of Focus Category and Population of Focus Description for which they received initial funding in FY24. . Individual awards will vary depending on the activities and approximate funding available for each CIO Project Plan.

Measurable outcomes of the program will be in alignment with one (or more) of the following performance goal(s) for the National Center for STLT Public Health Infrastructure and Workforce

Healthy People 2030 goal(s)

- [Public Health Infrastructure](#)
- [Health Care Access and Quality](#)
- [Health IT](#)
- [Workforce](#)
- [Health Communication](#)
- [Health Policy](#)

This announcement is only for non-research activities supported by CDC. If research is proposed, the application will not be considered. For purposes of this NOFO, research is defined as set forth in 45 CFR 75.2 and, for further clarity, as set forth in 42 CFR 52.2 (see eCFR :: 45 CFR 75.2 -- Definitions and <https://www.gpo.gov/fdsys/pkg/CFR-2007-title42-vol1/pdf/CFR-2007-title42-vol1-sec52-2.pdf>). In addition, for purposes of research involving human subjects and available exceptions for public health activities, please see 45 CFR 46.102(l) ([https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-46/subpart-A/section-46.102#p-46.102\(l\)](https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-46/subpart-A/section-46.102#p-46.102(l))).

Section I. Funding Opportunity Description

Statutory Authority

The program is authorized under sections 317(k)(2) and 307 of the Public Health Service Act (42 U.S.C. Sections 247b(k)(2) and 242l, as amended).

Background

The purpose of this notice of funding opportunity (NOFO) is to announce the availability of supplemental funding for the organizations that were awarded under Funding Strategy 1 of CDC-RFA-PW-24-0080: Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health.

CDC-RFA-PW-24-0080 establishes a capacity-building assistance (CBA) program to improve the overall performance of the public health system. The cooperative agreement funds organizations with demonstrated capability, expertise, resources, national reach, and a track record of providing CBA. Program outcomes are to improve organizational and systems infrastructure and performance across the public health system to ultimately improve health outcomes and reduce health inequities. Recipients will address CBA needs for a population of focus in one of three population categories: A) Governmental Public Health Departments; B) Workforce Segments in Governmental Public Health Departments; or C) Public Health System Components.

The CBA program has a two-part funding strategy—this NOFO details the second funding strategy. Under Funding Strategy 2, supplemental projects may be announced annually, each

budget period during the performance period. This supplement includes CIO Project Plans that address a number of public health priorities and is only open to applicants awarded under Funding Strategy 1 of CDC-RFA-PW24-0080. Recipients of CDC-RFA-PW-24-0080 are eligible to submit applications for new CIO Project Plans that match the Population of Focus Category (A, B, or C) and Population of Focus Description for which they were awarded under Funding Strategy 1. These supplemental projects are subject to the availability of funds and agency priorities. Funding Strategy 1 recipients may refer to their Notice of Award to determine the Category and Population of Focus they're approved to build capacity for under this supplemental opportunity.

Purpose

The purpose of this NOFO is to announce supplemental funds available under a capacity-building assistance (CBA) program to improve the overall performance of the public health system.

Program Implementation

Recipient Activities

Recipients are expected to provide CBA through this program to a specific population of focus. All funded activities must build capacity of the approved population of focus outlined in the recipient's Funding Strategy 1 Notice of Award. Populations of focus are organized into three categories as outlined in the "population(s) of focus" section of this NOFO.

The applicant should address work to be done in the 5 strategic areas (and related activities) as outlined in the Strategies and Activities column of the program logic model below. Within the project narrative submitted, applicants must clearly identify and address one or more of the strategic areas, as they describe the CBA to be provided to their selected population of focus. The activities listed below serve as examples and the lists are not exhaustive. Applicants should propose activities based on priority needs of the selected population of focus and the applicant's organizational capacity and experience to address those needs. Recipients of this funding are expected to complement and leverage, but not duplicate, activities and funding from other federal awards.

Strategies and Activities	Short-term Outcomes	Intermediate Outcomes	Long-term Outcomes
Capacity-building assistance (CBA) providers will: - Support the CBA* needs of the populations of focus** related to the following strategic areas: - Organizational Capacity and Performance Improvement - Workforce	Development and implementation of quality CBA services and products will result in: Increased availability of and access to CBA services and products that address the strategic areas	Use of CBA services and products will result in: Increased awareness and understanding of recommended processes, policies, programs, and practices within the strategic areas	Implementation of processes, policies, programs, and practices will result in: Improved organizational and systems capacity and capability to address equity

○ Data modernization, Informatics, and Information Technology ○ Partnership Development and Engagement ○ Policy and Programs <i>*CBA services and products may include, but not be limited to, technical assistance, training, information sharing, technology transfer, and/or materials development</i> <i>**For a description of the population of focus, see section 2</i>	Increased awareness of best/promising practices and/or tools by populations of focus of CBA services and products Increased use of CBA services and products by populations of focus	Enhanced skill and ability to support decision-making toward processes, policies, programs, and practices within the strategic areas Increased implementation and sharing of recommended processes, policies, programs, and practices within the strategic areas	focused public health priorities Improved effectiveness of organizational and systems infrastructure and performance Improved health outcomes and reduced health inequities
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Example Activities

1. Organizational Capacity and Performance Improvement – Activities to improve and strengthen capacities that are needed for stronger agency infrastructure and to support basic public health protections. CBA provided may address needs, such as:
 - Strengthening organizational capacity and competencies (i.e., human resources, financial management)
 - Prioritizing and implementing diversity, equity, inclusion, and accessibility within the organization, including support for organizational policies and practices to strengthen health equity
 - Supporting communications efforts, including communications planning, risk communication, social marketing, public information officer support, etc.
 - Using and implementing quality improvement, performance management, accreditation, and strategic planning
 - Supporting change management and efforts to sustain, improve, or modify organizational structures or processes to meet needs or address efficiencies, including restructuring and cross-jurisdictional sharing.
2. Workforce – Activities to develop and maintain a diverse workforce within the public health system with cross-cutting skills and competencies. CBA provided may address needs, such as:
 - Recruiting, developing, and retaining qualified workers (building and sustaining the workforce)
 - Identifying and assessing workforce gaps, training, and education needs
 - Developing and ensuring access to quality training and education that addresses identified needs.
 - Developing and facilitating use of standards, competencies, and best practices for public health training and workforce development programs.

- Implementing culturally-appropriate, evidence-based, or evidence-informed strategies to develop and sustain supportive work environments.
3. Data Modernization, Informatics, and information technology – Activities to develop and deploy scalable, responsive and sustainable technologies, policies, and methods to implement high-quality data and analytical capabilities to support the Essential Public Health Services (EPHS). CBA provided may address needs, such as:
- Enhancing the use and capabilities of informatics in public health
 - Collecting, accessing, analyzing, interpreting, and using data from a variety of sources to guide public health planning and decision-making
 - Developing and carrying out processes to manage data modernization activities that are step-wise, adaptive, and oriented to the overall success of organizations
 - Identifying and reporting current capacity, gaps, and opportunities to modernize data systems and infrastructure
4. Partnership Development and Engagement – Activities to improve development and maintenance of results-driven partnerships at various levels. CBA provided may address needs, such as:
- Conducting health assessment and improvement planning to address specific public health issues, population health needs, and determinants of health
 - Engaging with community populations, partners, and multiple sectors (transportation agencies, academic institutions, law enforcement, healthcare and others) in identifying and addressing health problems through collaborative processes
 - Establishing and maintaining trust with community members and populations most impacted by key public health decision-making
 - Engaging community members and populations using community-driven, culturally-informed approaches to improve health outcomes
 - Identifying successful practices and developing new mechanisms to inform, mobilize, and engage the public and private sectors in collaborative efforts
5. Policy and Programs— Activities to develop, improve, and use evidence-based and promising practices in policies, processes, and programs aimed at improving the health of the community, addressing disparities, and increasing equity. CBA provided may address needs, such as:
- Developing, implementing, scaling up, maintaining, and evaluating programs, policies, and processes to support prevention and wellness.
 - Engaging community populations, partners, and multiple sectors in activities that contribute to informing, evaluating, and providing evidence related to programs, laws, and policies that affect public health.
 - Developing and supporting tools and technical assistance to equitably advance evidence-based or evidence-informed laws, policy, and programs.
 - Facilitating knowledge and adoption of evidence-based and evidence-informed policy, programs, and initiatives.
 - Identifying and promoting innovations and models of excellence that can contribute to new approaches.

In a cooperative agreement, CDC program staff are substantially involved in post-award program activities, above and beyond routine grant monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out efforts undertaken as part of the award, and recipients agree to the responsibilities therein, as detailed in and consistent with the NOFO, issued Notice of Award (NOA), and [General Terms and Conditions of Non-research Awards](#). CDC activities for this program are as follows:

- Collaborate to ensure coordination and implementation of activities to provide capacity-building assistance (CBA) to governmental and nongovernmental components of the public health system.
- Provide guidance and appropriate clearances of products co-branded or co-authored by CDC.
 - Recipients are reminded that requests to use the CDC logo must be approved in writing by CDC via license agreement for products developed under the award.
- Provide technical assistance and recommendations to recipients to improve the quality and effectiveness of work plans, evaluation strategies, products and services, and collaborative activities with other organizations.
- Support ongoing opportunities to foster networking, communication, coordination, and collaboration, and serve as a conduit for information exchange, including fostering collaboration between recipients that would not normally interact or collaborate on public health efforts.
 - Efforts may include hosting recipient meetings (frequency to be determined post-award) and collaborative spaces within grants management systems.
- Collaborate to compile and publish accomplishments, best practices, performance criteria, and lessons learned during the period of performance.
- Collaborate, as appropriate, to assess progress toward meeting strategic and operational goals and objectives and to establish measurement and accountability processes for documenting outcomes, such as increased performance improvements and best or promising practices.

CDC Substantial Involvement in Review of Products Developed under the Award

Recipients are encouraged to incorporate peer review, responsible authorship, and publication standards when developing products supported in whole or in part with CDC program funds. Products that have express permission to use the CDC logo or are co-authored by CDC require CDC clearance. In addition, CDC staff will be given an opportunity to review and provide feedback on products developed in whole or in part with CDC program funds. The primary purpose of the CDC review of items not using the CDC logo or co-authored by CDC is to ensure factual accuracy of all product information pertaining to the description of CDC programs, products, initiatives, policies, guidelines, and recommendations.

Review of such products is part of CDC's substantial involvement to maximize the quality and effectiveness of products and services developed with federal funds and to ensure consistency with applicable federal laws and regulations. Recipients will coordinate with CDC on the submission of such products and the timing needed for CDC to conduct its review, but any

review will not act to prevent timely publication. In addition, CDC reminds recipients that products developed with funds provided under this award are subject to the inclusion of certain funding acknowledgment and appropriate disclaimers as outlined in the [General Terms and Conditions of Non-research Awards](#).

Funding Strategy

N/A

Section II. Award Information

Type of Award:

CA (Cooperative Agreement)

CDC substantial involvement in this program appears in the Activities Section above.

Award Mechanism:

U38

Fiscal Year Funds:

2024

Approximate Total Supplemental Funding:

\$228,000,000

This amount is subject to availability of funds. Includes direct and indirect costs.

The funding levels (e.g., "approximate total supplemental funding," etc.) represent approximate funding across multiple CIO Project Plans. Individual awards will vary depending on the activities and approximate funding available for each CIO Project Plan.

Refer to the "CIO Project Plans Overview" and the CIO Project Plans attachments to review project plan details.

Approximate Number of Awards:

48

Approximate Average Award:

\$0

This amount is for the budget period only and includes direct costs and indirect costs as applicable.

Floor of Individual Award Range:

\$0

Ceiling of Individual Award Range:

\$0

This ceiling is for a 12-month budget period.

The Public Health Infrastructure Center (PHIC) advises recipients to disregard the statement "This ceiling is for a 12-month budget period" above and the "Period of Performance Length" below. The statements are system-generated and do not take into account PW24-0080 does not have a ceiling and the supplement will be awarded after the start of the Year 1 budget period.

Projects awarded under this supplement will have a 10-month budget period. The period of performance will not exceed July 31, 2029, in accordance with the period of performance for the PW24-0080 program. Award amounts will vary based on the number of project plan awarded.

Anticipated Award Date:

September 30, 2024

Budget Period Length:

10 month(s)

Period of Performance Length:

5 year(s)

If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 CFR Part 75, currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

Section III. Eligibility Information

Eligible Applicants

The following recipients may submit an application:

Eligibility Category:

00 (State governments)

01 (County governments)

02 (City or township governments)

06 (Public and State controlled institutions of higher education)

07 (Native American tribal governments (Federally recognized))

11 (Native American tribal organizations (other than Federally recognized tribal governments))

12 (Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education)

13 (Nonprofits without 501(c)(3) status with the IRS, other than institutions of higher education)

20 (Private institutions of higher education)

25 (Others (see text field entitled "Additional Information on Eligibility" for clarification))

Additional Information on Eligibility

- Nonprofits having a 501(c)(6) status with the IRS are also eligible

Eligible applications will be reviewed for responsiveness in accordance with the factors below.

Non-responsive applications will not advance to merit (Phase II) review.

This funding opportunity is only available to organizations that received funding under Funding Strategy 1 of CDC-RFA-PW-24-0080: Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health in July 2024. Per the initial NOFO, organizations will submit “Work Plans in Response to Project Plans” and budgets that align with the population of focus category and selected population of focus ONLY for which they were awarded funding under Funding Strategy 1. Applications received that do not align with the population of focus of initial award will be deemed non-responsive and will not be considered. Recipients may refer to their Funding Strategy 1 Notice of Award to determine the Category and Population of Focus they’re approved to build capacity for under this supplemental opportunity. If a recipient submits an application for a project plan intended to build capacity for a population of focus that differs from the one noted in their Funding Strategy 1 Notice of Award, the application will be deemed non-responsive and will not advance to merit (Phase II) review for funding consideration. In addition, applications submitted by organizations not funded under Funding Strategy 1 will be deemed non-responsive and will not advance to merit (Phase II) review for funding consideration.

Required Registrations

An organization must be registered at the three following locations before it can submit an application for funding at www.grants.gov.

PLEASE NOTE: Effective April 4, 2022, applicants must have a Unique Entity Identifier (UEI) at the time of application submission (SF-424, field 8c). The UEI is generated as part of SAM.gov registration. Current SAM.gov registrants have already been assigned their UEI and can view it in SAM.gov and Grants.gov. Additional information is available on the [GSA website](https://www.gsa.gov), [SAM.gov](https://sam.gov), and [Grants.gov- Finding the UEI](https://www.grants.gov).

a. Unique Entity Identifier (UEI):

All applicant organizations must obtain a Unique Entity Identifier (UEI) number by registering in SAM.gov prior to submitting an application. A UEI number is a unique twelve-digit identification number assigned to the registering organization.

If funds are awarded to an applicant organization that includes sub-recipients, those sub-recipients must provide their UEI numbers before accepting any funds.

b. System for Award Management (SAM):

The SAM is the primary registrant database for the federal government and the repository into which an entity must submit information required to conduct business as a recipient. All applicant organizations must register with SAM, and will be assigned a SAM number and a Unique Entity Identifier (UEI). All information relevant to the SAM number must be current at all times during which the applicant has an application under consideration for funding by CDC. If an award is made, the SAM information must be maintained until a final financial report is submitted or the final payment is received, whichever is later. The SAM registration process can require 10 or more business days, and registration must be renewed annually. NOFO applicants are to initiate their SAM registrations as soon as possible. Additional information about

registration procedures may be found at <https://www.cdc.gov/grants/applying/sam.html>, [SAM.gov](#) and the [SAM.gov Knowledge Base](#).

c. Grants.gov:

The first step in submitting an application online is registering your organization at www.grants.gov, the official HHS E-grant Web site. Registration information is located at the "Applicant Registration" option at www.grants.gov.

All applicant organizations must register at www.grants.gov. The one-time registration process usually takes not more than five days to complete. Applicants should start the registration process as early as possible.

Cost Sharing or Matching

Cost Sharing / Matching Requirement:

No

Cost sharing or matching funds are not required for this program. Although no statutory matching requirement for this NOFO exists, leveraging other resources and related ongoing efforts to promote sustainability is strongly encouraged.

Other

Special Requirements

Note: Title 2 of the United States Code Section 1611 states that an organization described in Section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting a grant, loan, or an award.

Maintenance of Effort

Maintenance of effort (MOE) is not required for this program.

Section IV. Application and Submission Information

Address to Request Application Package

Applicants may access the application at www.grants.gov. Additional information about applying for CDC grants and cooperative agreements can be found here: <https://www.cdc.gov/grants/applying/pre-award.html>.

If the applicant encounters technical difficulties with Grants.gov, the applicant should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week, with the exception of all Federal Holidays. The Contact Center provides customer service to the applicant community. The extended hours will provide applicants support around the clock, ensuring the best possible customer service is received any time it is needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by email, fax, CD's or thumb drives of applications will not be accepted.

Content and Form of Application Submission

Unless specifically indicated, this announcement requires submission of the following information:

The CIO Project Plans are organized in this supplemental NOFO by Population of Focus Category (A, B, or C). These instructions apply to all projects. Each CDC-RFA-PW-24-0080 recipient is eligible to submit Work Plans in Response to CIO Project Plans that match the Population of Focus Category and Population of Focus Description for which the organization competed and was awarded funds under Funding Strategy 1 in July 2024. Applicants may refer to their Funding Strategy 1 Notice of Award to determine the Category and Population of Focus they are approved to build capacity for under this supplemental opportunity. The CIO Project Plans are included as attachments to this supplemental NOFO. Applicants are permitted to submit responses to multiple CIO Project Plans in accordance with the responsiveness criteria outlined in this NOFO.

Applicants must submit a Work Plan in Response to CIO Project Plan template for each CIO Project Plan for which they would like consideration. CDC is advising applicants to submit proposals for a 10-month budget period (September 30, 2024–July 31, 2025) to perform activities within the PW24-0080 Year 1 budget period. Applicants should not propose work with the intention of carrying funding and activities into the next budget period. Each submission must include the proposed strategic areas and accompanying activities, process measures, outputs, outcomes, and outcome measures for the 10-month budget period. Additionally, each submission must include a description of the recipient's organizational capacity and program experience as it relates to the work outlined in the corresponding CIO Project Plan. Upon completion of each Work Plan in Response to CIO Project Plan, create and save a master merge of all individual files to one PDF document. The master document must be uploaded and submitted as the "Project Narrative" on Grants.gov.

Full CIO Project Plans are accessible on the [Public Health Infrastructure Virtual Engagement \(PHIVE\)](#) platform. The Work Plans in Response to CIO Project Plans must be submitted via PHIVE and Grants.gov. A copy of the work plan template is available as an attachment on Grants.gov. Recipients are expected to carry out program capacity-building strategic areas and activities to achieve the program outcomes and to identify and document additional outcomes accomplished. The CBA efforts performed under each project should work toward the short-term and intermediate outcomes outlined in the CIO Project Plan.

Applicants must also create a separate budget narrative to accompany each Work Plan in Response to CIO Project Plan. Upon completion of each budget narrative, create and save a master merge of all individual files to one PDF document. The master budget narrative will be uploaded and submitted as the "Budget Narrative" on Grants.gov. A detailed budget narrative is required for each work plan.

General instructions for submitting Work Plans in Response to CIO Project Plans on Grants.gov:

1. **Submit:** individual Work Plans in Response to CIO Project Plans and budget workbooks on [PHIVE](#)
2. **Save:** master Project Narrative and master Budget Narrative documents
3. **Go to:** Grants.gov

4. **Select:** "Applicants"
5. **Select:** "Apply for Grants"
6. **Select:** "Get Application Package"
7. **Insert** the Notice of Funding Opportunity Number only, formatted as: CDC-RFA-PW-24-00800101SUPP24
8. **Download** application package
9. **Complete** the Budget Information for Non-constructions Programs (SF424A) form
10. **Complete** the Application for Federal Domestic Assistance-Short Organizational Form (SF425)
11. **Upload** the master Project Narrative and master Budget Narrative documents
12. **Upload** the Indirect Cost Rate Agreement
13. **Follow instructions** to submit the application package to Grants.gov

Project Abstract

A **Project Abstract** must be completed in the Grants.gov application forms. The Project Abstract must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This abstract must not include any proprietary/confidential information.

Note the Project Abstract should reflect the entire submission. If applicants respond to multiple CIO Project Plans, the Project Abstract must cover all applications.

Project Narrative

A **Project Narrative** must be submitted with the application forms. The project narrative can be uploaded using PDF, Word, or Excel file formats when submitting via Grants.gov. The narrative must be submitted in the following format:

- 300: Maximum number of pages
- Font size: 12 point unreduced, Times New Roman
- Double spaced
- Page margin size: One inch
- Number of all narrative pages; not to exceed the maximum number of pages.

Applicants will use PHIC's "Work Plan in Response to CIO Project Plan" template in the [PHIVE](#) platform to create their work plan(s) in response to CIO Project Plans. A copy of the work plan template is available as an attachment on Grants.gov. PHIC recognizes the narrative format listed above is not feasible with the Work Plan in Response to CIO Project Plan template. This is CDC NOFO template language and applicants will not be required to adhere to the bulleted format list above. As a reminder, applicants must create and save one master merge of all individual Work Plan in Response to CIO Project Plan PDFs. The master document must be uploaded and submitted as the "Project Narrative" on Grants.gov. Applicants will also create and save one master merge of all individual Budget Narratives. The master budget narrative will be uploaded and submitted as the "Budget Narrative" on Grants.gov.

The Work Plans in Response to CIO Project Plan must include the proposed strategic areas and their accompanying activities, outputs, performance measures (process and outcome), and outcomes for the budget period. The Work Plans in Response to CIO Project Plans include a project description, organizational capacity, and program experience of the applicant as they relate to the CIO Project Plan.

The narrative should address activities to be conducted over the entire Period of Performance and must include the following items in the order listed.

The Project Narrative must include the information as required in the Work Plan in Response to CIO Project Plan template:

1. **Project Description** - Describe your overall plan for achieving the outcomes outlined in the CIO Project Plan.
2. **Work Plan** - Describe the activities, outputs, performance measures (process and outcome), and outcomes related to the selected NOFO strategic areas and outcomes. Provide the following information for each program strategic area:
 - **Activities:** List the proposed activities related to each strategic area selected.
 - *Example activity: Planning and hosting a community roundtable offering strategies to convene partners. Propose activities that fit within the description of the selected strategies.*
 - **Process Measures:** Propose at least one process measure for each strategic area selected. Process measures are used to track implementation progress of the proposed activities. Effective measures indicate a unit of measurement (proportion, percentage, etc.) and direction of change (increase, decrease, maintain, etc.).
 - *Example process measure: To maintain participation level of the previous year, at least 20 of 35 organizations invited will attend the community roundtable event.*
 - **Outputs:** List the expected outputs related to each strategic area selected. Outputs are the direct, tangible results of activities (e.g., resources, tools, and products to be developed).
 - *Example output: Development of a peer-to-peer learning portal for roundtable participants.*
 - **Program Outcomes:** For each strategic area selected, use the list to select the program outcome that relates to the expected budget period outcome(s) and proposed outcome measure(s). Outcomes are the changes that occur as a result of the work completed.
 - **Budget Period Outcomes:** List the expected budget period outcomes related to the selected program outcome. Budget period outcomes are the desired project results achieved by the end of the budget period (July 31, 2025). Program outcomes selected above may be included as budget period outcomes.
 - *Example budget period outcome: Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health.*
 - **Outcome Measures:** Propose at least one outcome measure for each program outcome selected. Outcome measures are used to track progress toward achieving the expected outcomes. Effective measures indicate a unit of measurement (proportion, percentage, etc.) and direction of change (increase, decrease, maintain, etc.).

- *Example outcome measure: At least 50% of attendees who complete the training evaluation indicate they will partner with at least one new community organization to address a public health need.*
3. Organizational Capacity - Describe your capacity to successfully complete the project outlined in the CIO Project Plan. Include your organization's relevant staffing, systems, and resources.
 4. Organizational Experience - Describe your experience as it relates to the project outlined in the CIO Project Plan. Include products developed; services, training, and technical assistance provided; and relevant target populations supported.
 5. Collaborative Work - Describe your plan for collaboration as it relates to the project outlined in the CIO Project Plan. Include specific organizations or entities as applicable.
 6. Sub-contractual Work - Describe your plan for sub-contractual work. Include recommended criteria for identifying and selecting subcontractors.
 7. Budget Information - Provide a line-item budget for the allocation of funds.

Additional information may be included in the application appendices. The appendices must be uploaded to the "Other Attachments Form" of application package in Grants.gov. Note: appendices will not be counted toward the narrative page limit. This additional information includes:

The budget can include both direct costs and indirect costs as allowed. Indirect costs could include the cost of collecting, managing, sharing and preserving data.

Indirect costs on grants awarded to foreign organizations and foreign public entities and performed fully outside of the territorial limits of the U.S. may be paid to support the costs of compliance with federal requirements at a fixed rate of eight percent of modified total direct costs exclusive of tuition and related fees, direct expenditures for equipment, and subawards in excess of \$25,000. Negotiated indirect costs may be paid to the American University, Beirut, and the World Health Organization.

If requesting indirect costs in the budget, a copy of the indirect cost rate agreement is required. Include a copy of the current negotiated federal indirect cost rate agreement or cost allocation plan approval letter.

The applicant can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address: <https://www.cdc.gov/grants/documents/Budget-Preparation-Guidance.docx>

Additional information submitted via Grants.gov can be uploaded in PDF, Word, or Excel file formats, and should be named:

- Project Abstract Summary
- Table of Contents for Entire Submission
- Budget Narrative (compiled as one master pdf file)
- Project Narrative (work plans compiled as one master PDF file)
- Nonprofit organization IRS status forms, if applicable
- Indirect cost rate, if applicable
- Budget summary spreadsheet (Excel)

- CVs/Resumes for key staff engaged in project activities

10: Maximum number of allowable electronic attachments

Submission Dates and Times

This announcement is the definitive guide on application content, submission, and deadline. It supersedes information provided in the application instructions. If the application submission does not meet the deadline published herein, it will not be eligible for review and the recipient will be notified the application did not meet the submission requirements.

This section provides applicants with submission dates and times. Applications that are submitted after the deadlines will not be processed.

If Grants.gov is inoperable and cannot receive applications, and circumstances preclude advance notification of an extension, then applications must be submitted by the first business day on which Grants.gov operations resume.

Application Deadline Date

Number Of Days from Publication 30

08/26/2024

Explanation of Deadlines: Application must be successfully submitted to Grants.gov by 11:59 pm Eastern Time on the deadline date.

N/A

Employee Whistleblower Rights and Protections

All recipients of an award under this NOFO will be subject to a term and condition that applies the requirements set out in 41 U.S.C. § 4712, “Enhancement of contractor protection from reprisal for disclosure of certain information” and 48 Code of Federal Regulations (CFR) section 3.9 to the award, which includes a requirement that recipients and subrecipients inform employees in writing (in the predominant native language of the workforce) of employee whistleblower rights and protections under 41 U.S.C. § 4712. For more information see: <https://oig.hhs.gov/fraud/whistleblower/>.

Copyright Interest Provisions

This provision is intended to ensure that the public has access to the results and accomplishments of public health activities funded by CDC. Pursuant to applicable grant regulations and CDC’s Public Access Policy, Recipient agrees to submit into the National Institutes of Health (NIH) Manuscript Submission (NIHMS) system an electronic version of the final, peer-reviewed manuscript of any such work developed under this award upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication. Also at the time of submission, Recipient and/or the Recipient’s submitting author must specify the date the final manuscript will be publicly accessible through PubMed Central (PMC). Recipient and/or Recipient’s submitting author must also post the manuscript through PMC within twelve (12) months of the publisher's official date of final publication; however the author is strongly encouraged to make the subject manuscript available as soon as possible. The recipient must obtain prior approval from the CDC for any exception to this provision.

The author's final, peer-reviewed manuscript is defined as the final version accepted for journal publication, and includes all modifications from the publishing peer review process, and all graphics and supplemental material associated with the article. Recipient and its submitting authors working under this award are responsible for ensuring that any publishing or copyright agreements concerning submitted articles reserve adequate right to fully comply with this provision and the license reserved by CDC. The manuscript will be hosted in both PMC and the CDC Stacks institutional repository system. In progress reports for this award, recipient must identify publications subject to the CDC Public Access Policy by using the applicable NIHMS identification number for up to three (3) months after the publication date and the PubMed Central identification number (PMCID) thereafter.

Funding Restrictions

Funding Restrictions:

Restrictions, which must be taken into account while writing the budget, are as follows:

- Recipients may not use funds for research.
- Recipients may not use funds for clinical care.
- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual.
- Recipients may not generally use HHS/CDC/ATSDR funding for the purchase of furniture or equipment. Any such proposed spending must be identified in the budget.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

See [Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on anti-lobbying restrictions for CDC recipients](#).

- Recipients may not use funds to support projects where the primary activity is planning and implementation of a conference or meeting. CDC-RFA-PW-24-0080 is not a conference grant; therefore, conferences and convenings funded under this mechanism must be ancillary to the individual project. Projects where the primary goal or activity is to plan and implement a convening are more appropriate for a conference grant or contract.
- Recipients may not use funds to advise or support federal advisory committees or other inherently federal activities.

- Recipients may not use funds to hire staff and place them at a federal agency to perform work on behalf of the agency.
- This mechanism may not be used to acquire goods or services to benefit CDC or its mission. For example, funds may not be used to develop materials on behalf of CDC or its programs, or to conduct surveys and submit the data solely to CDC for its use. Such activities are more appropriate for a contract mechanism. This is a financial assistance mechanism, and the primary benefit is to the public.

The recipient can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address:

<http://www.cdc.gov/grants/interestedinapplying/applicationprocess.html>

Other Submission Requirements

Application Submission

Submit the application electronically by using the forms and instructions posted for this funding opportunity on www.Grants.gov.

Note: Application submission is not concluded until successful completion of the validation process. After submission of your application package, recipients will receive a "submission receipt" email generated by Grants.gov. Grants.gov will then generate a second e-mail message to recipients which will either validate or reject their submitted application package. This validation process may take as long as two (2) business days. Recipients are strongly encouraged check the status of their application to ensure submission of their application package is complete and no submission errors exists. To guarantee that you comply with the application deadline published in the Notice of Funding Opportunity, recipients are also strongly encouraged to allocate additional days prior to the published deadline to file their application. Non-validated applications will not be accepted after the published application deadline date.

In the event that you do not receive a "validation" email within two (2) business days of application submission, please contact Grants.gov. For instructions on how to track your application, refer to the e-mail message generated at the time of application submission or review the Applicants section on www.grants.gov.

Electronic Submission of Application:

Applications must be submitted electronically by using the forms and instructions posted for this notice of funding opportunity at www.grants.gov. Applicants can complete the application package using Workspace, which allows forms to be filled out online or offline. All application attachments must be submitted using a PDF file format. Instructions and training for using Workspace can be found at www.grants.gov under the "Workspace Overview" option.

Applications submitted through www.Grants.gov, are electronically time/date stamped and assigned a tracking number. The Authorized Organizational Representative (AOR) will receive an e-mail notice of receipt when HHS/CDC receives the application. The tracking number serves to document submission and initiate the electronic validation process before the application is made available to CDC for processing.

If the recipient encounters technical difficulties with Grants.gov, the recipient should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week. The Contact Center provides customer service to the recipient community. The extended hours will provide recipients support around the clock, ensuring the best possible customer service is received any time it's needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by e-mail, fax, CD's or thumb drives of applications will not be accepted.

After consulting with the Grants.gov Support Center, if the technical difficulties remain unresolved and electronic submission is not possible to meet the established deadline, organizations may submit a request prior to the application deadline by email to the Grants Management Specialist/Officer for permission to submit a paper application. An organization's request for permission must: (a) include the Grants.gov case number assigned to the inquiry, (b) describe the difficulties that prevent electronic submission and the efforts taken with the Grants.gov Support Center (c) be submitted to the Grants Management Specialist/Officer at least 3 calendar days prior to the application deadline. Paper applications submitted without prior approval will not be considered.

Section V. Application Review Information

Eligible recipients are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the CDC-RFA-PW-24-00800101SUPP24 Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application.

Criteria

Eligible recipients will be evaluated against the following criteria:

Work Plan

Maximum Points: 45

For each Work Plan in Response to CIO Project Plan submitted, the extent to which the applicant:

1. Describes a plan to adequately achieve the CBA program outcomes and carry out the proposed activities (5 points).
2. Develops a complete and comprehensive plan for the budget period (5 points).
3. Demonstrates how the plan will focus on priority CBA that addresses the needs of the population of focus.
 1. Strategies - describe the program strategies that will be used to address the needs of the population of focus and relate to the recipient activities (5 points)
 2. Activities - describe activities that are achievable and likely to lead to the attainment of identified outcomes (10 points)
 3. Outputs - describe deliverables/outputs that are a thorough representation of the direct results of the activities (5 points)

4. Outcomes - describe program outcomes that are achievable and address the purpose of the project plan (5 points)
5. Performance measures (process and outcome) - describe measures to assess achievement toward program outcomes (10 points)

Organizational Capacity

Maximum Points: 25

For each Work Plan in Response to CIO Project Plan submitted, the extent to which the applicant:

1. Describes the entity's staffing plans that will be used to support the project activities (8 points)
2. Describes systems that will be used to support the project activities (10 points)
3. Describes organizational resources that will be used to support the project activities (7 points)

Organizational Experience

Maximum Points: 25

For each Work Plan in Response to CIO Project Plan submitted, the extent to which the applicant:

1. Demonstrates content expertise as it relates to the project (10 points)
2. Describes prior CBA provided (products developed, services, training, and technical assistance provided) (10 points)
3. Demonstrates a relationship with the target population (5 points)

Collaboration, if required in CIO Project Plan

Maximum Points: 5

For each Work Plan in Response to CIO Project Plan submitted, the extent to which the applicant:

1. Demonstrates an ability to build and/or access specific organizations or entities that are appropriate for accomplishing the outlined project outcomes - if required by the CIO Project Plan (5 points)

The Budget Narrative must include the following headers:

- Salaries and wages
- Fringe benefits
- Consultant costs
- Equipment
- Supplies
- Travel
- Other categories
- Contractual costs
- Total direct costs
- Indirect costs
- Total costs

For guidance on completing a detailed budget, visit [Application Resources | Grants | CDC](#)

Review and Selection Process

Review

Eligible applications will be jointly reviewed for responsiveness by National Center for STLT Public Health Infrastructure and Workforce and Office of Grants Services (OGS). Incomplete applications and applications that are non-responsive will not advance through the review process. Recipients will be notified in writing of the results.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in Section V. Application Review Information, subsection entitled "Criteria".

Applications deemed eligible and responsive will be compiled and reviewed according to the Population of Focus Category (A, B, or C) and Population of Focus Description listed in the corresponding CIO Project Plan. The applicants are eligible to apply for CIO Project Plans that match the Population of Focus Category (A, B, or C) and Population of Focus Description for which they competed and were awarded funding under Funding Strategy 1 of CDC-RFA-PW-24-0080. Applications will undergo a merit review if 2 or more organizations submit responsive proposals in response to a CIO Project Plan. If a merit review process is required, applications will be reviewed by a panel of 3 subject matter experts. Following merit review, each application will be marked approved and funded or approved and unfunded. In the event a technical review is more efficient (i.e., there is only one responsive proposal submitted for a CIO Project Plan), the technical review will be held in place of a merit review. When a technical review is used, work plans will not be scored, but will indicate if the project will be funded. Each proposal reviewed will receive feedback and guidance regarding required revisions (for funded projects) in place of scoring.

Selection

In addition, the following factors may affect the funding decision:

Final funding determinations for awards made under Funding Strategy 2 will be based on application scores from the merit review process and consideration for CDC's funding priority and preferences outlined below. These considerations may result in CDC funding outside of ranked order.

- In instances where a project plan identifies intent to build capacity on a national level, preference will be given to organizations that demonstrate national scope and capacity for national reach. This preference aligns with the program intent to fund activities that build knowledge, capacities, and capabilities across multiple jurisdictions.
 - For the purposes of this program, national scope is defined as the mandated or approved ability of the applicant to extend programs and services across the US, which includes the states, territories, and tribal nations. Evidence of a national scope of work must be reflected in the applicant's articles of incorporation, bylaws, signed board resolutions, or other official documentation indicating approval to work on a national level.

- Applications will be sorted by project plan title and ranked by score. CDC may fund applications out of rank order to ensure that organizations with national scope and capacity for national reach are awarded.

CDC will provide justification for any decision to fund out of rank order.

Anticipated Announcement and Award Dates

Notification will be provided via Notice of Award and is expected no later than September 30, 2024.

Section VI. Award Administration Information

Award Notices

Successful recipients will receive a Notice of Award (NoA) from the CDC Office of Grants Services. The NoA shall be the only binding, authorizing document between the recipient and CDC. The NoA will be signed by an authorized Grants Management Officer and e-mailed to the program director. A copy of the NoA will be emailed to the recipient fiscal officer identified in the application.

Unsuccessful recipients will receive notification of the results of the application review via email.

Administrative and National Policy Requirements

Continuing Continuations -

[AR-4: HIV/AIDS Confidentiality Provisions](#)

[AR-8: Public Health System Reporting Requirements](#)

[AR-9: Paperwork Reduction Act Requirements](#)

[AR-10: Smoke-Free Workplace Requirements](#)

[AR-11: Healthy People 2030](#)

[AR-12: Lobbying Restrictions](#)

[AR-13: Prohibition on Use of CDC Funds for Certain Gun Control Activities](#)

[AR-14: Accounting System Requirements](#)

[AR-15: Proof of Non-profit Status](#)

[AR-20: Conference Support](#)

[AR-21: Small, Minority, And Women-owned Business](#)

[AR 23: Compliance with 45 C.F.R. Part 87](#) [AR-25: Data Management and Access](#)

[AR-24: Health Insurance Portability and Accountability Act Requirements](#)

[AR-26: National Historic Preservation Act of 1966](#)

[AR-27: Conference Disclaimer and Use of Logos](#)

[AR-28: Inclusion of Persons Under the Age of 21 in Research](#)

[AR-29: Compliance with EO13513, "Federal Leadership on Reducing Text Messaging while Driving", October 1, 2009](#)

[AR-30: Information Letter 10-006, -Compliance with Section 508 of the Rehabilitation Act of 1973](#)

[AR-32: Appropriations Act, General Provisions](#)

[AR-37: Prohibition on certain telecommunications and video surveillance services or equipment for all awards issued on or after August 13, 2020](#)

If you receive an award, you must follow all applicable nondiscrimination laws. You agree to this when you register in [SAM.gov](#). You must also submit an Assurance of Compliance ([HHS-690](#)). To learn more, see the [HHS Office for Civil Rights website](#).

Reporting

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, <http://www.USASpending.gov>

Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2) similar information on all sub-awards/subcontracts/consortiums over \$30,000.

For the full text of the requirements under the FFATA and HHS guidelines, go to:

- <https://www.gpo.gov/fdsys/pkg/PLAW-109publ282/pdf/PLAW-109publ282.pdf>
- https://www.frs.gov/documents/ffata_legislation_110_252.pdf
- <http://www.hhs.gov/grants/grants/grants-policies-regulations/index.html#FFATA>.

Each funded recipient must provide CDC with an Performance Progress and Monitoring Report (PPMR) submitted via www.Grantsolutions.gov:

1. The interim progress report is due no less than 120 days before the end of the budget period. The Interim Progress report will serve as the non-competing continuation applications, and must contain the following elements:
 1. Standard Form ("SF") 424S Form.
 2. SF-424A Budget Information-Non-Construction Programs.
 3. Budget Narrative.
 4. Indirect Cost Rate Agreement.
 5. Project Narrative.

Additionally, funded recipients must provide CDC with an original, plus two hard copies of the following reports:

2. Biannual (twice per year) progress report, due in the late fall/early winter of the budget period.
3. Quarterly financial report, due every 90 days of the budget period.
4. Federal Financial Report (FFR)(SF425): (Required) The annual FFR form (SF-425) is required and must be submitted through the Payment Management System (PMS) 90 days after the end of the budget period.
5. The Final Performance Report is due 90 days after the end of the period of performance. The Final FFR is due 90 days after the end of the period of performance and must be submitted through the Payment Management System (PMS).

Termination

CDC may impose other enforcement actions in accordance with 45 CFR 75.371- Remedies for Noncompliance, as appropriate.

The Federal award may be terminated in whole or in part as follows:

- (1) By the HHS awarding agency or pass-through entity, if the non-Federal entity fails to comply with the terms and conditions of the award;
- (2) By the HHS awarding agency or pass-through entity for cause;
- (3) By the HHS awarding agency or pass-through entity with the consent of the non-Federal entity, in which case the two parties must agree upon the termination conditions, including the effective date and, in the case of partial termination, the portion to be terminated; or
- (4) By the non-Federal entity upon sending to the HHS awarding agency or pass-through entity written notification setting forth the reasons for such termination, the effective date, and, in the case of partial termination, the portion to be terminated. However, if the HHS awarding agency or pass-through entity determines in the case of partial termination that the reduced or modified portion of the Federal award or subaward will not accomplish the purposes for which the Federal award was made, the HHS awarding agency or pass-through entity may terminate the Federal award in its entirety.

Reporting of Foreign Taxes (International/foreign projects only)

A. Valued Added Tax (VAT) and Customs Duties – Customs and import duties, consular fees, customs surtax, valued added taxes, and other related charges are hereby authorized as an allowable cost for costs incurred for non-host governmental entities operating where no applicable tax exemption exists. This waiver does not apply to countries where a bilateral agreement (or similar legal document) is already in place providing applicable tax exemptions and it is not applicable to Ministries of Health. Successful applicants will receive information on VAT requirements via their Notice of Award.

B. The U.S. Department of State requires that agencies collect and report information on the amount of taxes assessed, reimbursed and not reimbursed by a foreign government against commodities financed with funds appropriated by the U.S. Department of State, Foreign

Operations and Related Programs Appropriations Act (SFOAA) (“United States foreign assistance funds”). Outlined below are the specifics of this requirement:

1) Annual Report: The recipient must submit a report on or before November 16 for each foreign country on the amount of foreign taxes charged, as of September 30 of the same year, by a foreign government on commodity purchase transactions valued at 500 USD or more financed with United States foreign assistance funds under this grant during the prior United States fiscal year (October 1 – September 30), and the amount reimbursed and unreimbursed by the foreign government. [Reports are required even if the recipient did not pay any taxes during the reporting period.]

2) Quarterly Report: The recipient must quarterly submit a report on the amount of foreign taxes charged by a foreign government on commodity purchase transactions valued at 500 USD or more financed with United States foreign assistance funds under this grant. This report shall be submitted no later than two weeks following the end of each quarter: April 15, July 15, October 15 and January 15.

3) Terms: For purposes of this clause:

“Commodity” means any material, article, supplies, goods, or equipment;

“Foreign government” includes any foreign government entity;

“Foreign taxes” means value-added taxes and custom duties assessed by a foreign government on a commodity. It does not include foreign sales taxes.

4) Where: Submit the reports to the Director and Deputy Director of the CDC office in the country(ies) in which you are carrying out the activities associated with this cooperative agreement. In countries where there is no CDC office, send reports to VATreporting@cdc.gov.

5) Contents of Reports: The reports must contain:

- a. recipient name;
- b. contact name with phone, fax, and e-mail;
- c. agreement number(s) if reporting by agreement(s);
- d. reporting period;
- e. amount of foreign taxes assessed by each foreign government;
- f. amount of any foreign taxes reimbursed by each foreign government;
- g. amount of foreign taxes unreimbursed by each foreign government.

6) Subagreements. The recipient must include this reporting requirement in all applicable subgrants and other subagreements.

Section VII. Agency Contacts

CDC encourages inquiries concerning this announcement.

For **programmatic technical assistance and general inquiries**, contact:

First Name:

Caroline

Last Name:

Sulal

Project Officer

Department of Health and Human Services

Centers for Disease Control and Prevention

Street 1:

Street 2:

City:

State:

Zip:

Telephone:

Email:

NationalPartnersCoAg@cdc.gov

For **financial, grants management, budget assistance and general inquiries**, contact:

Address:

First Name:

Erica

Last Name:

Stewart

Grants Management Specialist

Department of Health and Human Services

Office of Grants Services

Street 1:

Street 2:

City:

State:

Zip:

Telephone:

Email:

EStewart1@cdc.gov

Section VIII. Other Information

Other CDC Notice of Funding Opportunities can be found at www.grants.gov.