

GF/B46/EDP04 Decision on the Secretariat's Recommendation on Funding from the 2020-2022 Allocation

Approved on 13 December 2021

The Board:

1. Approves the funding recommended for each country disease component, and its constituent grants, as listed in Table 1 of GF/B46/ER04 ("Table 1");
2. Acknowledges each country disease component's constituent grants will be implemented by the proposed Principal Recipients listed in Table 1, or any other Principal Recipient(s) deemed appropriate by the Secretariat in accordance with Global Fund policies;
3. Affirms the funding approved under this decision (a) is subject to the availability of funding, and (b) shall be committed in annual tranches; and
4. Delegates to the Secretariat authority to redistribute the overall upper-ceiling of funding available for each country disease component among its constituent grants, provided that the Technical Review Panel (the "TRP") validates any redistribution that constitutes a material change from the program and funding request initially reviewed and recommended by the TRP.

This decision does not have material budgetary implications for operating expenses.

Table 1: Secretariat’s Recommendation on Funding from the 2020-2022 Allocation

Please note that each country name is [linked](#) to the extranet site where supporting documents are available for review.

| N | Applicant | Disease Component | Grant Name ¹ | Grant End Date | Currency | Total Program Budget ² | Catalytic Funds in Grant | Domestic Commitment ³ | Unfunded Quality Demand |
|---|---|-------------------|-------------------------|----------------|----------|-----------------------------------|--------------------------|---|-------------------------|
| 1 | Chad | HIV/TB, RSSH | TCD-C-MOH | 31/12/2024 | EUR | 59,795,413 | 1,813,300 | HIV: 18,496,542 TB: 2,452,350 | 15,151,514 |
| 2 | Guyana | HIV/TB | GUY-C-MOH | 31/12/2024 | US\$ | 4,114,326 | - | HIV: 15,290,437 TB: 2,940,402 | 236,512 |
| 3 | Mali | Malaria | MLI-M-CRS | 31/12/2024 | EUR | 70,685,959 | - | Malaria: 12,032,783 | 14,818,420 |
| 4 | Mauritania | HIV, TB, Malaria | MRT-Z-SENL | 31/12/2024 | US\$ | 19,591,501 | - | HIV: 5,340,000 TB: 767,361 Malaria: 2,965,663 RSSH: 18,974,359 | 343,674 |
| 5 | Multicountry HIV EECA APH | HIV | QMZ-H-AUA | 31/12/2024 | US\$ | 13,000,000 | - | Multicountry grants exempt from co-financing requirements | 4,568,630 |
| 6 | Multicountry TB Asia TEAM | TB | QSE-T-IOM | 31/12/2024 | US\$ | 7,500,000 | - | Multicountry grants exempt from co-financing requirements | 5,235,259 |
| 7 | Multicountry TB Asia UNDP | TB | QSD-T-UNDP | 31/12/2024 | US\$ | 4,000,000 | - | Multicountry grants exempt from co-financing requirements | - |
| 8 | Tunisia | HIV | TUN-H-ONFP | 31/12/2024 | US\$ | 5,698,985 | 900,000 | Commitment Letter to be endorsed 6 months after grant signature. Numbers subject to adjustments pending final outcome of 2017-2019 compliance review. | 1,184,730 |

¹ The Grant names are subject to change based on the ISO code.

² The Program budget for the Grant may be higher than the Program budget being recommended to the Board for approval where COVID-19 Response Mechanism funding has been integrated into the Grant.

³ Domestic commitments pertain to the disease programs and exclude other specific commitments for RSSH, unless otherwise specified. Commitments for disease specific programs and RSSH are subject to local currency value fluctuation against US dollar and Euro currencies. Please note that the domestic commitments included in this report are recorded as of the date of the GAC meeting and may be updated during implementation for countries that have been granted policy flexibilities.