



Recipient Information

1. Recipient Name

EXECUTIVE OFFICE OF THE STATE OF
NEW JERSEY
50 East State Street
7th Floor

TRENTON, NEW JERSEY 08625

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1216000928N3

5. Data Universal Numbering System (DUNS)

784995503

6. Recipient's Unique Entity Identifier

S6ZRV3S11Q21

7. Project Director or Principal Investigator

Grant Administrator

BudgetOffice@dcf.nj.gov

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

Sona Cook
Grants Management Officer
sona.cook@acf.hhs.gov
214-767-2973

10. Program Official Contact Information

Jennifer Haight
Program Authorizing Official
ACYF - Children's Bureau
Jennifer.haight@acf.hhs.gov
(202)205-7212

Federal Award Information

11. Award Number

2601NJCILP

12. Unique Federal Award Identification Number (FAIN)

2601NJCILP

13. Statutory Authority

Section 477 of SSA

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.674

16. Assistance Listing Program Title

John H. Chafee Foster Care Program for Successful Transition to Adulthood

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2025

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2025 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2027

\$574,462.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$2,297,848.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

Sona Cook
Grants Management Officer

Footnotes

This transaction provides 4th quarter funding.



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2601NJCILP

FAIN# 2601NJCILP

Federal Award Date: September 8, 2026

Recipient Information

EXECUTIVE OFFICE OF THE STATE OF NEW JERSEY

50 East State Street

7th Floor

TRENTON, NEW JERSEY 08625

Employer Identification Number (EIN): 1216000928N3

Data Universal Numbering System (DUNS): 784995503

Recipient's Unique Entity Identifier: S6ZRV3S11Q21

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-26-1545	2026,G994415	\$2,297,848.00	\$574,462.00	\$2,297,848.00	G-2601NJCILP	Formula

Terms and Conditions

Terms and Conditions for the John H. Chafee Foster Care Program for Successful Transition to Adulthood program can be found on the Administration for Children & Families website.

The link to the website is listed below:

<https://www.acf.hhs.gov/grants/mandatory-formula-block-and-entitlement-grants>

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters .

Effective 10/01/2025, the Administration for Children and Families adopted the 2 CFR 200, the terms and conditions for this program are currently being updated and will be available soon at <https://acf.gov/grants/manage-grant/grant-award/award-terms>.