



## Recipient Information

### 1. Recipient Name

EXECUTIVE OFFICE OF THE STATE OF NEW  
JERSEY  
50 E State St  
Trenton, NJ 08608-1715  
609-888-7356

### 2. Congressional District of Recipient

12

### 3. Payment System Identifier (ID)

1216000928N3

### 4. Employer Identification Number (EIN)

216000928

### 5. Data Universal Numbering System (DUNS)

784995503

### 6. Recipient's Unique Entity Identifier (UEI)

S6ZRV3S11Q21

### 7. Project Director or Principal Investigator

Ms. Doris Windle  
dcf.Budget-Contracting@dcf.nj.gov  
111-222-3344

### 8. Authorized Official

Ms. Doris Windle  
dcf.Budget-Contracting@dcf.nj.gov  
111-222-3344

## Federal Agency Information

ACF/ACYF Office of Mandatory Grants

### 9. Awarding Agency Contact Information

Mrs. Melinda Burnett  
Financial Management Specialist  
Melinda.Burnett@acf.hhs.gov  
816-426-5983

### 10. Program Official Contact Information

Mr. Joseph Bock  
Associate Commissioner  
joe.bock@acf.hhs.gov  
202-205-8594

## Federal Award Information

### 11. Award Number

2301NJAIPP-00

### 12. Unique Federal Award Identification Number (FAIN)

2301NJAIPP

### 13. Statutory Authority

Sec 473A of the Social Security Act

### 14. Federal Award Project Title

FY 2023 Adoption and Legal Guardianship Incentive Program

### 15. Assistance Listing Number

93.603

### 16. Assistance Listing Program Title

Adoption and Legal Guardianship Incentive Payments

### 17. Award Action Type

New

### 18. Is the Award R&D?

No

## Summary Federal Award Financial Information

19. Budget Period Start Date 10/01/2022 - End Date 08/31/2026

20. Total Amount of Federal Funds Obligated by this Action \$644,000.00

20a. Direct Cost Amount

20b. Indirect Cost Amount

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period \$0.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$644,000.00

26. Period of Performance Start Date 10/01/2022 - End Date 08/31/2026

27. Total Amount of the Federal Award including Approved  
Cost Sharing or Matching this Period of Performance \$644,000.00

### 28. Authorized Treatment of Program Income

ADDITIONAL COSTS

### 29. Grants Management Officer - Signature

Ms. Sona Cook  
Grants Management Officer

## 30. Remarks



# Department of Health and Human Services

## Administration for Children and Families

### Notice of Award

Award# 2301NJAIPP-00

FAIN# 2301NJAIPP

Federal Award Date: 09/22/2023

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##### Payment Account Number and Type

1216000928N3

##### Employer Identification Number (EIN) Data

216000928

##### Universal Numbering System (DUNS)

784995503

##### Recipient's Unique Entity Identifier (UEI)

S6ZRV3S11Q21

##### 31. Assistance Type

Formula

##### 32. Type of Award

Mandatory

#### 33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$0.00
b. Fringe Benefits	\$0.00
c. Total Personnel Costs	\$0.00
d. Equipment	\$0.00
e. Supplies	\$0.00
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$644,000.00
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$644,000.00
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$644,000.00
m. Federal Share	\$644,000.00
n. Non-Federal Share	\$0.00

#### 34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-G99AI22	2301NJAIPP	ACFCYF	41.15	93.603	\$595,945.00	75-2223-1536
3-G99AI23	2301NJAIPP	ACFCYF	41.15	93.603	\$48,055.00	75-2324-1536