Notice of Award

Award# 2401NJAIPP-00 FAIN# 2401NJAIPP

Federal Award Date: 09/13/2024

# **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

**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)**S6ZRV3S11O21

#### 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

2401NJAJPP-00

12. Unique Federal Award Identification Number (FAIN)

2401NJAIPP

#### 13. Statutory Authority

Sec 473A of the Social Security Act

#### 14. Federal Award Project Title

FY 2024 Adoption and Legal Guardianship Incentive Program

### 15. Assistance Listing Number

93 60

#### 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** 10/01/2023 - **End Date** 08/31/2027

#### 20. Total Amount of Federal Funds Obligated by this Action

\$448,000.00

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

\$0.00

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved this Budget Period \$448,000.00

26. Period of Performance Start Date 10/01/2023 - End Date 08/31/2027

**27.** Total Amount of the Federal Award including Approved

Cost Sharing or Matching this Period of Performance

\$448,000.00

### 28. Authorized Treatment of Program Income

ADDITIONAL COSTS

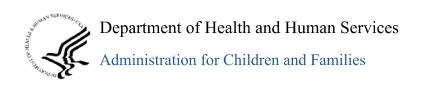
#### 29. Grants Management Officer - Signature

Ms. Sona Cook

Grants Management Officer

#### 30. Remarks

\*\*\*\*\*\* Batch Remarks\*\*\*\*\*\*Access to your notices of award, at your convenience, is now available through GrantSolutions. You may view a recorded training or access quick training guides on the Grant Recipient Support and Reference page.



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**JERSEY** 

50 E State St

Trenton, NJ 08608-1715

609-888-7356

### **Congressional District of Recipient**

12

### **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

. 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. TotalPersonnelCosts	\$0.00					
d. Equipment	\$0.00					
e. Supplies	\$0.00					

g. Construction	\$0.00
h. Other	\$448,000.00
i. Contractual	\$0.00

j. TOTAL DIRECT COSTS \$448,000.00
k. INDIRECT COSTS \$0.00
l. TOTAL APPROVED BUDGET \$448,000.00

m. Federal Share \$448,000.00

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
4-G99AI23	2401NJAIPP	ACFCYF	41.15	93.603	\$11,276.00	75-2324-1536
4-G99AI24	2401NJAIPP	ACFCYF	41.15	93.603	\$436,724.00	75-2425-1536

33. Approved Budget

f. Travel

(Excludes Direct Assistance)

\$0.00