



## 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

dcf.askrpf@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

Joseph Bock  
Associate Commissioner  
ACYF - Children's Bureau  
joe.bock@acf.hhs.gov  
202-205-8594

## Federal Award Information

### 11. Award Number

2400NJNCAN

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

2400NJNCAN

### 13. Statutory Authority

42 USC 5101, Sec. 106(a)

### 14. Federal Award Project Title

\*See Remarks

### 15. Catalog of Federal Domestic Assistance (CFDA) Number

93.669

### 16. CFDA Program Title

Child Abuse and Neglect State Grants

### 17. Award Action Type

Supplement

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

\*See Remarks

## Summary Federal Award

### 19. Budget Period Start Date 10-01-2023

### 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 10-01-2023 -

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

## Financial Information

End Date 09-30-2028

\$0

\*See Remarks

\*See Remarks

\*See Remarks

\*See Remarks

\$2,768,974.00

\*See Remarks

\*See Remarks

End Date 09-30-2028

\*See Remarks

### 28. Authorized Treatment of Program Income

\*See Remarks

### 29. Grants Management Officer – Signature

Sona Cook  
Grants Management Officer

## Footnotes



Department of Health and Human Services  
Administration for Children and Families

Notice of Award

Award # 2400NJNCAN

FAIN# 2400NJNCAN

Federal Award Date: May 14, 2024

**Recipient Information**

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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>			
75-24-1536	2024,G992372	\$2,768,974.00	\$0	\$2,768,974.00		G-2400NJNCAN	Formula

**Terms and Conditions**

Terms and Conditions for this 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.

This award action reflects the correction of the budget and project period end date that was reflected on the original Notice of Award issued on 25 April 2024.