Notice of Award

Award # 2401NJPKIN FAIN# 2401NJPKIN

Federal Award Date: September 12, 2024

Recipient Information

1. Recipient Name

EXECUTIVE OFFICE OF THE STATE OF **NEW JERSEY** 50 East State Street PO Box 717

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

Sanford.Starr@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

2401NJPKIN

12. Unique Federal Award Identification Number (FAIN)

13. Statutory Authority

Public Law 115-123

14. Federal Award Project Title

*See Remarks

15. Catalog of Federal Domestic Assistance (CFDA) Number

93.556

16. CFDA Program Title

MaryLee Allen Promoting Safe and Stable Families Program

17. Award Action Type

New

18. Is the Award R&D?

*See Remarks

Financial Information Summary Federal Award

19. Budget Period Start Date 10-01-2023

20. Total Amount of Federal Funds Obligated by this

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

End Date 09-30-2025

\$177,212

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$177,212

*See Remarks

*See Remarks

End Date 09-30-2025

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer - Signature



Sona Cook

Grants Management Officer

Footnotes

This award action reflects an equal distribution to state and territory recipients based on available funding to states/territories. Calculations are based on the reduced funds that were made available by Congress for 2024.



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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>	Allotment	Award this action	Cumulative Grant Award to Date	Document Number	Funding Type
75-24-1512	2024,G996480		\$177,212	\$177,212	G-2401NJPKIN	Discretionary

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

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.

If you have any questions about accessing grant notices of award utilizing the Unified Experience, please contact the GrantSolutions Help Desk at help@grantsolutions.gov.

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