# Notice of Award

Award # 2501NJPKIN FAIN# 2501NJPKIN

Federal Award Date: September 17, 2025

# **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

2501NJPKIN

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

#### 13. Statutory Authority

Public Law 115-123

## 14. Federal Award Project Title

\*See Remarks

#### 15. Assistance Listing Number

93.556

#### 16. Assistance Listing 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 10-01-2024

# 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 10-01-2024 -

27. Total Amount of the Federal Award including

Approved Cost Sharing or Matching

End Date 09-30-2026

\$190,196

\*See Remarks

\*See Remarks \*See Remarks

\*See Remarks

\$190,196

\*See Remarks

\*See Remarks

End Date 09-30-2026

\*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. Calculations are based on the reduced funds that were made available by Congress for 2025.



Notice of Award Award # 2501NJPKIN FAIN# 2501NJPKIN

Federal Award Date: September 17, 2025

# **Recipient Information**

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

Appropriation	<u>CAN</u>	Allotment	Award this action	Cumulative Grant Award to Date	Document Number	Funding Type
75-25-1512	2025,G996480		\$190,196	\$190,196	G-2501NJPKIN	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.

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