Notice of Award

Award# 2601NJGARD-00 FAIN# 2601NJGARD

Federal Award Date: 10/09/2025

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) S6ZRV3S11Q21

7. Project Director or Principal Investigator

Bill Henderson william.henderson@dhs.state.nj.us 609-292-0672

8. Authorized Official

Bill Henderson william.henderson@dhs.state.nj.us 609-292-0672

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

2601NJGARD-00

12. Unique Federal Award Identification Number (FAIN)

2601NJGARD

13. Statutory Authority

Title IV-E of the Social Security Act -

14. Federal Award Project Title

FY 2026 Guardianship Assistance

15. Assistance Listing Number

93.090

16. Assistance Listing Program Title

Guardianship Assistance Program Grant (for States)

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 10/01/2025 - **End Date** 09/30/2026

20. Total Amount of Federal Funds Obligated by this Action

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

\$1,901,513.00

24. Total Approved Cost Sharing or Matching, where applicable25. Total Federal and Non-Federal Approved this Budget Period

\$1,901,513.00

26. Period of Performance Start Date 10/01/2025 - End Date 09/30/2026

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

\$1,901,513.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Janice H. Realeza Grants Management Officer

30. Remarks

****** Batch Remarks****** Effective 10/01/2025, the Administration for Children and Families adopted the 2 CFR 200, the terms and conditions for this program are currently being updated and will be available soon at https://acf.gov/grants/manage-grant/grant-award/award-terms.



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\$0.00

\$1,901,513.00

\$0.00

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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

Entitlement

32. Type of Award

Mandatory

33	3. Approved Budget
(E	xcludes Direct Assistance)
I.	Financial Assistance from

a. Salaries and Wages

I. Financial Assistance from the Federal Awarding Agency Only

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

	Ψ0.00
b. Fringe Benefits	\$0.00
c. TotalPersonnelCosts	\$0.00
d. Equipment	\$0.00
e. Supplies	\$0.00
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$1,901,513.00
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$1,901,513.00
k. INDIRECT COSTS	\$0.00
1. TOTAL APPROVED BUDGET	\$1,901,513.00

34. Accounting Classification Codes

FY-ACCO	OUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
6-G99	94101	2601NJGARD	ACFCYF	41.15	93.090	\$1,901,513.00	75-26-1545

m. Federal Share

n. Non-Federal Share

AWARD ATTACHMENTS

EXECUTIVE OFFICE OF THE STATE OF NEW JERSEY

2601NJGARD-00

1. Computation

Computation of Grant Award

Batch No. 1 - Revision: 0 Guardianship Assistance EIN: 1216000928N3 New Jersey

EIN: 1216000928N3 **New Je** DUNS: 784995503

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Federal Shares of Expenditure	Payments	Payments - Recovery Act	Payments -w/Agreement	Administration	Training	Demonstration	TOTAL
1. Allowable Grantee Claims For Period 04/01/25 - 06/30/25 a. Current Claims b. Prior Adjustments c. Reinstatements d. Defferals and Disallowances e. Fees and Collections f. Previously Awarded Expenditure							
g. Net Claims ((1a+1b+1c) - (1d+1e+1f))	0	0	0	0	0	0	0
2. Funds Advanced to Grantee For Period 04/01/25 - 06/30/25							
3. Other Adjustments							
4. Expenditure Awarded This Action ((1g-2)+3)	0	0	0	0	0	0	0
Federal Shares of Estimate							
5. Funds Being Advanced to Grantee For Period 10/01/25 - 12/31/25 a. Estimate b. Collections c. Previously Awarded Estimate	1,075,479	0	0	789,174	36,860	0	1,901,513 0
6. Estimate Awarded This Action ((5a-5b)-5c)	1,075,479	0	0	789,174	36,860	0	1,901,513
7. Total Certified for Grant Award (4+6)	\$1,075,479	\$0	\$0	\$789,174	\$36,860	\$0	\$1,901,513

<u>Appropriation</u>	<u>Year</u>	CAN	Grant Document	<u>Amount</u>
75-26-1545	2026	G994101	2601NJGARD	\$1,901,513

Remarks

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