



Department of Health and Human Services

Administration for Children and Families

Notice of Award

Award# 90TP0061-03-03

FAIN# 90TP0061

Federal Award Date: 12/19/2022

Recipient Information

1. Recipient Name

EXECUTIVE OFFICE OF THE STATE OF NEW
JERSEY
20 W State St
Trenton, NJ 08608-1206
609-888-7356

2. Congressional District of Recipient

12

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

Ms. Lenore Scott
Administrator
Lenore.Scott@dcf.nj.gov
609-888-7393

8. Authorized Official

Ms. Lambrie Thornton
Program Support Specialist 2, Assistance Programs
lambrie.thornton@dcf.nj.gov
732-882-5102

Federal Agency Information

ACF/OCC Office of Discretionary Grants

9. Awarding Agency Contact Information

Ms. Sheri Harmon
Grants Management Specialist
sheri.harmon@acf.hhs.gov
206-615-2558

10. Program Official Contact Information

Mr. Richard Gonzales
richard.gonzales@acf.hhs.gov
202 401-5138

Federal Award Information

11. Award Number

90TP0061-03-03

12. Unique Federal Award Identification Number (FAIN)

90TP0061

13. Statutory Authority

42 USC 9858

14. Federal Award Project Title

New Jersey Preschool Development Grant

15. Assistance Listing Number

93.434

16. Assistance Listing Program Title

ESSA Preschool Development Grants Birth through Five

17. Award Action Type

No Cost Extension

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 12/31/2021 - End Date 12/30/2023

20. Total Amount of Federal Funds Obligated by this Action \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$10,362,720.70

22. Offset \$0.00

23. Total Amount of Federal Funds Obligated this budget period \$11,178,750.00

24. Total Approved Cost Sharing or Matching, where applicable \$6,462,441.21

25. Total Federal and Non-Federal Approved this Budget Period \$17,641,191.21

26. Period of Performance Start Date 12/31/2019 - End Date 12/30/2023

27. Total Amount of the Federal Award including Approved
Cost Sharing or Matching this Period of Performance \$49,687,420.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Trisha Smith
Grants Officer

30. Remarks

The request for no-cost extension, changing the budget and project period end date from 12/30/2022 to 12/30/2023, is approved to complete the activities identified in the application.

Quarterly reports will be required and there may be no change in scope during the extension period.



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Payment Account Number and Type

1216000928N3

Employer Identification Number (EIN) Data

216000928

Universal Numbering System (DUNS)

784995503

Recipient's Unique Entity Identifier (UEI)

S6ZRV3S11Q21

33. Approved Budget

(Excludes Direct Assistance)

I. 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. Total Personnel Costs	\$0.00
d. Equipment	\$0.00
e. Supplies	\$0.00
f. Travel	\$1,150.00
g. Construction	\$0.00
h. Other	\$19,022,464.71
i. Contractual	\$8,980,297.20
j. TOTAL DIRECT COSTS	\$28,003,911.91
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$28,003,911.91
m. Federal Share	\$21,541,470.70
n. Non-Federal Share	\$6,462,441.21

31. Assistance Type

Project Grant

32. Type of Award

Other

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
2-G990180	90TP006103	ACFOCC	41.51	93.434	\$0.00	75-2122-1536



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35. Terms And Conditions

STANDARD TERMS

1. All previously issued terms and conditions remain in effect.