

Department of Health and Human Services Administration for Children and Families

Notice of Award Award # 2202NJCWSS FAIN# 2202NJCWSS Federal Award Date: May 27, 2022

Recipient Information

Recipient Name
 New Jersey
 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.askrfp@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

2202NJCWSS
12. Unique Federal Award Identification Number (FAIN)
2202NJCWSS
13. Statutory Authority
Tit IVB Subpart 1 Soc Sec
14. Federal Award Project Title
*See Remarks
15. Catalog of Federal Domestic Assistance (CFDA) Number
93.645
16. CFDA Program Title
Stephanie Tubbs Jones Child Welfare Services Program
17. Award Action Type
New

18. Is the Award R&D? *See Remarks

Summary Federal Award Financial Information

19. Budget Period Start Date 10-01-2021	End Date 09-30-2022		
20. Total Amount of Federal Funds Obligated by this	\$5,180,542.00		
Action			
20a. Direct Cost Amount	*See Remarks		
20b. Indirect Cost Amount Administrative Offset	*See Remarks		
21. Authorized Carryover	*See Remarks		
22. Offset	*See Remarks		
23. Total Amount of Federal Funds Obligated this	\$5,180,542.00		
budget period			
24. Total Approved Cost Sharing or Matching, where	*See Remarks		
applicable			
25. Total Federal and Non-Federal Approved	*See Remarks		
26. Project Period Start Date 10-01-2021 -	End Date 09-30-2022		
27. Total Amount of the Federal Award including	*See Remarks		
Approved Cost Sharing or Matching			

28. Authorized Treatment of Program Income *See Remarks 29. Grants Management Officer – Signature



Footnotes

Grants Management Officer



Recipient Information

New Jersey 50 East State Street, 7th Floor TRENTON, NEW JERSEY 08625 Employer Identification Number (EIN): XXXXXXXXX Data Universal Numbering System (DUNS): 784995503 Recipient's Unique Entity Identifier: S6ZRV3S11Q21 Object Class: 41.15

Financial Information								
Appropriation	CAN	<u>Allotment</u>	Award this action	Cumulative Grant <u>Award to Date</u>	Document Number	Funding Type		
75-22-1536	2022,G998000	\$5,180,542.00	\$5,180,542.00	\$5,180,542.00	G-2202NJCWSS	Formula		

Terms and Conditions



Department of Health and Human Services Administration for Children and Families Notice of Award Award # 2202NJCWSS FAIN# 2202NJCWSS Federal Award Date: May 27, 2022

Stephanie Tubbs Jones Child Welfare Services Program Supplemental Terms and Conditions

By acceptance of awards for this program, the grantee agrees to comply with the requirements included in both the General and Supplemental Terms and Conditions for this program.

The administration of this program is authorized under Title IV, Part B, Subpart 1, sections 421-425, and section 428 of the Social Security Act (the Act).

The program is codified at 42 U.S.C. §§621-625, 628 and the program-specific implementing regulations are located at 45 CFR Parts 1355 and 1357. As applicable to insular areas identified under 45 CFR §97.11, 45 CFR Part 97 – Consolidation of Grants, applies to this program.

The Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards is located under 45 CFR Part 75. In accordance with 45 CFR §75.101 Applicability, this program must comply with 45 CFR Part 75 in its entirety. No exceptions were identified.

Additional applicable regulations and requirements can be found in the General Terms and Conditions for Mandatory: Formula, Block and Entitlement Grants.

The Federal Financial Participation (FFP) rate, per section 424(a) of the Act, is 75 percent of the amount expended for this program. States only. In accordance with Section 424(f) of the Act, the FFP percentage may be reduced based on a determination that the State failed to meet performance standards for caseworker visits with children in foster care. The Children's Bureau will notify the State of any adjustment to the matching requirements.

The States and Tribes are required to contribute the remaining 25 percent of the total expended for this program. States and Tribes contribution may be in cash, donated funds, and non-public third-party in-kind contributions. See 45 CFR §1357.30(e) for States and 45 CFR §1357.40(d)(5)(ii) for Tribes. States only. In accordance with section 424(d) of the Act, any amount of non-federal expenditures exceeding the amount spent under the State plan developed for this subpart in fiscal year 2005 on foster care maintenance payments will not be considered match for Title IV, Part B, Subpart 1 of the Act.

This program has an Administrative Cost requirement. According to sections 422(b)(14) and 424(e) of the Act grantees must limit administrative costs to no more than 10 percent of the Federal funds. Section 422(c)(1) of the Act defines administrative costs.

Funding (project) period and obligation period. In accordance with 45 CFR §1357.30(i) for States and 45 CFR §1357.40(d)(5)(iv) for Tribes, this program has a 2-year project/obligation period starting the first day of the Federal Fiscal Year, October 1, for which funds were awarded and ending the last day of the following Federal Fiscal Year, September 30. Any Federal funds not obligated by the end of the respective obligation period will be recouped by this Department.

Liquidation period: In accordance with 45 CFR §75.309(b), all obligated Federal funds awarded under this grant must be liquidated no later than 90 days after the end of the funding/obligation period. Any Federal funds not liquidated by December 30 will be recouped by this Department.

The expenditure reporting form used is the SF-425 Federal Financial Report. This report is submitted annually and must be submitted no later than December 30, which is 90 days following the end of each Federal Fiscal year. Two SF-425 reports must be submitted for each grant award: an interim report covering year one of the project period and a final report (cumulative) covering the entire project period. These annual reports must be submitted electronically through the HHS Payment Management System (PMS)

In accordance with 45 CFR §§1357.15 and 1357.16, a five-year Child and Family Services Plan, or Annual Progress and Service Report and CFS-101 forms are required no later than June 30 each year. These reports must establish goals and objectives for a five-year period, provide information on accomplishments and progress made during the previous fiscal year, and provide updates on program areas selected for improvement and other activities planned in the next year. These annual reports must be submitted to the appropriate ACF Regional Office.

Real Property Reports (SF-429s). The SF-429 Real Property forms are not applicable to this program. Purchase, construction, and major renovation are not an allowable activity or expenditure under this grant.

These program-specific Supplemental Terms and Conditions are effective on the date shown in the footer at the bottom of the page and will remain in effect until updated. They will be updated and reissued only as needed whenever a new program-specific statute, regulation, or other requirement is enacted or whenever any of the applicable existing Federal statutes, regulations, policies, procedures, or restrictions is amended, revised, altered, or repealed.



Remarks

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