# Notice of Award

Award # 2501NJCILP FAIN# 2501NJCILP

Federal Award Date: May 9, 2025

### **Recipient Information**

#### 1. Recipient Name

EXECUTIVE OFFICE OF THE STATE OF **NEW JERSEY** 50 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

BudgetOffice@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

2501NJCILP

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

2501NJCILP

#### 13. Statutory Authority

Section 477 of SSA

#### 14. Federal Award Project Title

\*See Remarks

#### 15. Assistance Listing Number

93.674

#### 16. Assistance Listing Program Title

John H. Chafee Foster Care Program for Successful Transition to Adulthood

#### 17. Award Action Type

Supplement

#### 18. Is the Award R&D?

\*See Remarks

# **Summary Federal Award**

19. Budget Period Start Date 10-01-2024

#### 20. Total Amount of Federal Funds Obligated by this Action

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

# **Financial Information**

End Date 09-30-2026

\$574,462

\*See Remarks

\*See Remarks

\*See Remarks

\*See Remarks

\$1,723,386

\*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 the issuance of FY 2025, 3rd Quarter funding for the Chafee Independent Living Grant Program.



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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	CAN	Allotment	Award this action	Cumulative Grant Award to Date	<b>Document Number</b>	Funding Type
75-25-1545	2025,G994415	\$2,297,848	\$574,462	\$1,723,386	G-2501NJCILP	Formula

#### **Terms and Conditions**

Terms and Conditions for the John H. Chafee Foster Care Program for Successful Transition to Adulthood 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.