Notice of Award

Award# 2201NJGARD-06 FAIN# 2201NJGARD

Federal Award Date: 10/13/2022

Recipient Information

1. Recipient Name

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

TRENTON, NJ 08625-1715

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

Ms. Susan Iglesias Susan.Iglesias@dcf.nj.gov 11111111111

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 2201NJGARD-06

12. Unique Federal Award Identification Number (FAIN) 2201NJGARD

13. Statutory Authority

Title IV-E of the Social Security Act -

14. Federal Award Project Title

FY 2022 Guardianship Assistance

15. Assistance Listing Number

16. Assistance Listing Program Title

Guardianship Assistance Program Grant (for States)

17. Award Action Type

Supplement/Change for Expansion

18. Is the Award R&D?

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 Action

(\$70,510.00)

20a, Direct Cost Amount 20b. Indirect Cost Amount

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

\$6,817,417.00

24. Total Approved Cost Sharing or Matching, where applicable

\$0.00 \$6,746,907.00

25. Total Federal and Non-Federal Approved this Budget Period

26. Period of Perfomance Start Date 10/01/2021 - End Date 09/30/2022

27. Total Amount of the Federal Award including Approved

Cost Sharing or Matching this Period of Performance

\$6,746,907.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

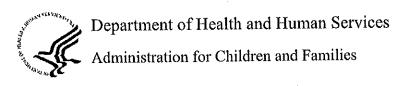
29. Grants Management Officer - Signature

Ms. Sona Cook

Grants Management Officer

30. Remarks

****** Batch Remarks***** Access to your notices of award, at your convenience, is now available through GrantSolutions. You may view a recorded training here or access quick training guides on the Grant Recipient Support and Reference page.



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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

(Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding	
II. Total project costs including grant funds and a	ll other financial participation
a. Salaries and Wages	\$0.00
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	\$6,746,907.00
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$6,746,907.00

34. Accounting Classification Codes

Ī	FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
	2-G994101	2201NJGARD	ACFCYF	41.15	93,090	(\$70,510.00)	75-22-1545

I. TOTAL APPROVED BUDGET

k. INDIRECT COSTS

m. Federal Share

n. Non-Federal Share

33. Approved Budget

\$0.00

\$0.00

\$6,746,907.00

\$6,746,907.00