



Recipient Information

- 1. Recipient Name**
DEPT FAMILY & PROTECTIVE SER
PO BOX 149030
Mail Code E-654
Austin, TX 78714-9030
512-438-3240
- 2. Congressional District of Recipient**
10
- 3. Payment System Identifier (ID)**
1742639167A1
- 4. Employer Identification Number (EIN)**
742639167
- 5. Data Universal Numbering System (DUNS)**
808730360
- 6. Recipient's Unique Entity Identifier (UEI)**
PIUAVVCB7Y41
- 7. Project Director or Principal Investigator**
Ms. Tamela Griffen
Tamela.Griffin@dfps.state.tx.us
111-222-3344
- 8. Authorized Official**
Ms. Kristene Blackstone
Kristene.Blackstone@dfps.state.tx.us
111-222-3344

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**
2401TXAIPP-00
- 12. Unique Federal Award Identification Number (FAIN)**
2401TXAIPP
- 13. Statutory Authority**
Sec 473A of the Social Security Act
- 14. Federal Award Project Title**
FY 2024 Adoption and Legal Guardianship Incentive Program
- 15. Assistance Listing Number**
93.603
- 16. Assistance Listing Program Title**
Adoption and Legal Guardianship Incentive Payments
- 17. Award Action Type**
New
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date	10/01/2023	- End Date	08/31/2027
20. Total Amount of Federal Funds Obligated by this Action	\$3,680,000.00		
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		
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00		
25. Total Federal and Non-Federal Approved this Budget Period	\$3,680,000.00		
26. Period of Performance Start Date	10/01/2023	- End Date	08/31/2027
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$3,680,000.00		

- 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 or access quick training guides on the Grant Recipient Support and Reference page.



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Congressional District of Recipient 10
Payment Account Number and Type 1742639167A1
Employer Identification Number (EIN) Data 742639167
Universal Numbering System (DUNS) 808730360
Recipient's Unique Entity Identifier (UEI) P1UAVVCB7Y41
31. Assistance Type Formula
32. Type of Award Mandatory

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	\$0.00
g. Construction	\$0.00
h. Other	\$3,680,000.00
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$3,680,000.00
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$3,680,000.00
m. Federal Share	\$3,680,000.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
4-G99AI24	2401TXAIPP	ACFCYF	41.15	93.603	\$3,587,372.00	75-2425-1536
4-G99AI23	2401TXAIPP	ACFCYF	41.15	93.603	\$92,628.00	75-2324-1536