



Recipient Information

1. Recipient Name

Social Services, California Department of
744 P Street, MS 9-4-72

SACRAMENTO, CALIFORNIA 95814

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1946001347A7

5. Data Universal Numbering System (DUNS)

613673185

6. Recipient's Unique Entity Identifier

LDJ1MM9L56K7

7. Project Director or Principal Investigator Grant Administrator

noname@gmail.com

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

Edward Pniak
Grants Management Officer
edward.pniak@acf.hhs.gov
2026176896

10. Program Official Contact Information

Ruth Friedman
Director
Office of Child Care
ruth.friedman@acf.hhs.gov
202-690-6782

Federal Award Information

11. Award Number

2334CACCDD

12. Unique Federal Award Identification Number (FAIN)

2334CACCDD

13. Statutory Authority

Child Care and Development Block Grant Act of 1990, as amended

14. Federal Award Project Title

*See Remarks

15. Catalog of Federal Domestic Assistance (CFDA) Number

93.575

16. CFDA Program Title

Child Care and Development Block Grant

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2022

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 10-01-2022 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2025

\$406,157,063.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$533,227,894.00

*See Remarks

*See Remarks

End Date 09-30-2025

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

Edward Pniak

Footnotes

Grants Management Officer



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2334CACCCDD

FAIN# 2334CACCCDD

Federal Award Date: January 31, 2023

Recipient Information

Social Services, California Department of
744 P Street, MS 9-4-72
SACRAMENTO, CALIFORNIA 95814

Employer Identification Number (EIN): 1946001347A7

Data Universal Numbering System (DUNS): 613673185

Recipient's Unique Entity Identifier: LDJ1MM9L56K7

Object Class: 41.15

Financial Information

| <u>Appropriation</u> | <u>CAN</u> | <u>Allotment</u> | <u>Award this action</u> | <u>Cumulative Grant</u> | <u>Document Number</u> | <u>Funding Type</u> |
|----------------------|--------------|------------------|--------------------------|-------------------------|------------------------|---------------------|
| | | | | <u>Award to Date</u> | | |
| 75-23-1515 | 2023,G996005 | | \$406,157,063.00 | \$533,227,894.00 | 2334CACCCDD | Discretionary |

Terms and Conditions

This grant award represents an obligation for the Child Care and Development Fund. Mandatory and Matching funds are subject to the requirements of Section 418 of Title IV-A of the Social Security Act as amended by Title VI of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, P.L. 104-193, effective October 1, 1996 (CFDA 93.596). Discretionary funds are subject to the requirements of the Child Care and Development Block Grant Act of 1990, as amended (CFDA 93.575).

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at: <https://www.acf.hhs.gov/grants/post-award-requirements>

Funds included in this award will be made available through the DHHS Payment Management System (PMS). Questions pertaining to payments should be directed to DHHS Division of Payment Management, Post Office Box 6021, Rockville, MD 20852; telephone 1-877-614-5533.

Remarks

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