



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF ECONOMIC STABILITY

Lori A. Weaver  
Commissioner

Karen E. Hebert  
Director

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9474 1-800-852-3345 Ext. 9474  
Fax: 603-271-4230 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

August 14, 2025

The Honorable Ken Weyler, Chairman  
Fiscal Committee of the General Court and

Her Excellency, Governor Kelly A. Ayotte  
and the Honorable Council  
State House  
Concord, NH 03301

**REQUESTED ACTION**

Pursuant to the provisions of RSA 14:30-a, VI, authorize the Department of Health and Human Services, Division of Economic Stability, to accept and expend \$106,303 from the federal Department of Health and Human Services, Administration for Children and Families, Office of Head Start, to fund the State's Head Start Collaborative, effective upon Fiscal Committee and Governor and Executive Council approval through June 30, 2026, and authorize the allocation of these funds in the account(s) below. 100% Federal.

**05-95-045-451110-23370000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: DIV ECONOMIC STABILITY, CHILD DEVELOPMENT, HEAD START STATE COLLABORATIVE**

Class/Object	Class Title	SFY 26 Budget	Increase (Decrease) Amount	Revised Budget
<b>Revenue</b>				
000-404460-16	Federal Funds	\$ 18,697	\$ 106,303	\$ 125,000
	General Funds	\$ -	\$ -	\$ -
Total Revenue:		\$ 18,697	\$ 106,303	\$ 125,000
<b>Expense</b>				
010-500100	Personal Services Perm	\$ -	\$ 63,824	\$ 63,824
020-500200	Current Expenses	\$ 8,112		\$ 8,112
026-500251	Organizational Dues	\$ -	\$ 600	\$ 600
038-500176	Technology-Software	\$ -	\$ 3,000	\$ 3,000
041-500801	Audit Fund Set Aside	\$ 134		\$ 134
060-500601	Benefits	\$ -	\$ 28,884	\$ 28,884
067-500557	Training of Providers	\$ -	\$ 3,000	\$ 3,000
070-500700	In State Travel Reimb	\$ 570		\$ 570
080-500710	Out Of State Travel Reimb	\$ 9,881		\$ 9,881
102-500731	Contracts For Program Svcs	\$ -	\$ 6,995	\$ 6,995
Total Expense:		\$ 18,697	\$ 106,303	\$ 125,000

The Honorable Ken Weyler, Chairman  
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### EXPLANATION

The Department of Health and Human Services requests to accept and expend the full Head Start Collaborative grant for State Fiscal Year 2026, which totals \$125,000. A portion of the grant was included in the SFY 2026-2027 budget; this request is to accept the remainder of the grant.

The Head Start Collaborative Office (HSCO) collaborates with local Head Start grantees to ensure that high quality services are provided to eligible pregnant women and children, from birth through age five years, and their families, as well as fosters collaboration between Head Start and state and local programs and organizations serving or supporting young children and their families. Approval of this request enables support of childcare/Head Start program quality improvement initiatives to increase the health, safety and well-being of participating children and improve programs' ability to prepare children to be successful in school and in life.

Funds will be budgeted as follows:

Class 010 - PERSONAL SERVICES PERM CLASS - STAFF WAGES

Class 026 – ORGIZATIONAL DUES - MEMBERSHIPS TO NATIONAL AND NE HEADSTART

Class 038 - TECHNOLOGY - SOFTWARE - SURVEY SOFTWARE

Class 060 - BENEFITS - STAFF BENEFITS

Class 067 – TRAINING OF PROVIDERS - TRAINING WITH NH HEADSTART PROGRAMS

Class 102 - CONTRACTS FOR PROGRAM SERVIC - CONSULTANT FOR FUTURE PLANNING

Source of Funds: Federal only.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully Submitted,



for:

Lori A. Weaver  
Commissioner



Recipient Information
<p><b>1. Recipient Name</b> NEW HAMPSHIRE DEPARTMENT OF HEALTH &amp; HUMAN SERVICES 129 Pleasant St Concord, NH 03301-3852 [NO DATA]</p> <p><b>2. Congressional District of Recipient</b> 02</p> <p><b>3. Payment System Identifier (ID)</b> 1026000618B3</p> <p><b>4. Employer Identification Number (EIN)</b> 026000618</p> <p><b>5. Data Universal Numbering System (DUNS)</b> 011040545</p> <p><b>6. Recipient's Unique Entity Identifier (UEI)</b> LA2HR1U97VC6</p> <p><b>7. Project Director or Principal Investigator</b>  Alexandra Amaral HSCO Administrator alexandra.amaral@dhhs.nh.gov (603) 271-4759</p> <p><b>8. Authorized Official</b>  Mr. Jotham Spreeman Administrator of Operations jotham.c.spreeman@dhhs.nh.gov 603-271-1021</p>
<p><b>Federal Agency Information</b> ACF/OHS Region I Grants Office</p> <p><b>9. Awarding Agency Contact Information</b> Ms. Heather Colwell Grants Management Officer heather.colwell@acf.hhs.gov 214-767-8850</p> <p><b>10. Program Official Contact Information</b> Ms. Heather L Wanderski Program Operations Division Director heather.wanderski@acf.hhs.gov 202-205-5923</p>

Federal Award Information
<p><b>11. Award Number</b> 01CD004092-05-00</p> <p><b>12. Unique Federal Award Identification Number (FAIN)</b> 01CD004092</p> <p><b>13. Statutory Authority</b> 42 USC 9801 ET SEQ</p> <p><b>14. Federal Award Project Title</b> Head Start Collaboration Office</p> <p><b>15. Assistance Listing Number</b> 93.600</p> <p><b>16. Assistance Listing Program Title</b> Head Start</p> <p><b>17. Award Action Type</b> Non-Competing Continuation</p> <p><b>18. Is the Award R&amp;D?</b> No</p>

Summary Federal Award Financial Information	
<b>19. Budget Period Start Date</b>	07/01/2025 - End Date 06/30/2026
<b>20. Total Amount of Federal Funds Obligated by this Action</b>	\$125,000.00
20a. Direct Cost Amount	\$125,000.00
20b. Indirect Cost Amount	\$0.00
<b>21. Authorized Carryover</b>	\$0.00
<b>22. Offset</b>	\$0.00
<b>23. Total Amount of Federal Funds Obligated this budget period</b>	\$0.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>	\$33,490.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>	\$158,490.00
<b>26. Period of Performance Start Date</b>	07/01/2021 - End Date 06/30/2026
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>	\$817,046.00

**28. Authorized Treatment of Program Income**  
ADDITIONAL COSTS

**29. Grants Management Officer – Signature**  
Ms. Heather Colwell  
Grants Management Officer

<b>30. Remarks</b>
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Recipient Information
<b>Recipient Name</b> NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES 129 Pleasant St Concord, NH 03301-3852 [NO DATA]
<b>Congressional District of Recipient</b> 02
<b>Payment Account Number and Type</b> 1026000618B3
<b>Employer Identification Number (EIN) Data</b> 026000618
<b>Universal Numbering System (DUNS)</b> 011040545
<b>Recipient's Unique Entity Identifier (UEI)</b> LA2HR1U97VC6

<b>31. Assistance Type</b> Discretionary Grant
<b>32. Type of Award</b> Service

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	\$63,824.00
b. Fringe Benefits	\$37,156.00
c. Total Personnel Costs	\$100,980.00
d. Equipment	\$0.00
e. Supplies	\$800.00
f. Travel	\$9,500.00
g. Construction	\$0.00
h. Other	\$13,720.00
i. Contractual	\$0.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$125,000.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$0.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$125,000.00</b>
<b>m. Federal Share</b>	<b>\$125,000.00</b>
<b>n. Non-Federal Share</b>	<b>\$33,490.00</b>

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
5-G014122	01CD00409205	ACFOHS	41.51	93.600	\$125,000.00	75-25-1536



**35. Terms And Conditions**

**STANDARD TERMS**

1. The *ACF Standard Terms and Conditions* applies to all ACF awards and is located on the [Award Terms and Conditions](#) page. The *Supplemental Terms and Conditions* herein are additional requirements applicable to the program named below.

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

1. The administration of this program is authorized under the Head Start Act, as amended by the Improving Head Start for School Readiness Act of 2007, Public Law 110-134 at <https://eclkc.ohs.acf.hhs.gov/policy/head-start-act>.

2. The program is codified at 42 U.S.C. 9831 et seq at <https://eclkc.ohs.acf.hhs.gov/policy/head-start-act/sec-636-statement-purpose>

3. Implementing program regulations are published as the Head Start Program Performance Standards at 45 CFR Parts 1301 to 1305, <https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii>. Additional program guidance is located on the Early Childhood Learning & Knowledge Center (ECLKC), <https://eclkc.ohs.acf.hhs.gov/>. Recipients must act in compliance with the Program Instructions and Information Memoranda. For full text, go to <https://eclkc.ohs.acf.hhs.gov/policy/pi> and <https://eclkc.ohs.acf.hhs.gov/policy/im>.

4. This award is subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements (UAR) for HHS Awards found at 45 CFR Part 75 at <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-75>.

**a. For awards issued before October 1, 2024**, HHS adopted from the federalwide UAR [2 CFR 200](#):

- i. Subpart D – Post Federal Award Requirements – Closeout at [2 CFR 200.344](#)

**b. For awards issued on or after October 1, 2024**, per the Federal Register (FR), [89 FR 80055](#), HHS' UAR at 45 CFR Part 75 includes eight (8) regulatory provisions that HHS adopted from the federalwide UAR [2 CFR 200](#). This award is subject to the following eight (8) regulatory provisions in 2 CFR 200:

- i. Subpart A – Acronyms and Definitions – [2 CFR 200.1](#) “Modified Total Direct Cost (MTDC)”
- ii. Subpart D – Post Federal Award Requirements – Disposition of Equipment at [2 CFR 200.313\(e\)](#)
- iii. Subpart D – Post Federal Award Requirements – Supplies at [2 CFR 200.314\(a\)](#)
- iv. Subpart D – Post Federal Award Requirements – Micro-purchase thresholds at [2 CFR 200.320](#)
- v. Subpart D – Post Federal Award Requirements – Fixed amount subawards at [2 CFR 200.333](#)
- vi. Subpart D – Post Federal Award Requirements – Closeout at [2 CFR 200.344](#)
- vii. Subpart E – Cost Principles – Indirect Costs – De minimis rate at [2 CFR 200.414\(f\)](#)
- viii. Subpart F – Audit Requirements – Single Audit at [2 CFR 200.501](#)



## Department of Health and Human Services

### Administration for Children and Families

## Notice of Award

Award# 01CD004092-05-00

FAIN# 01CD004092

Federal Award Date: 06/25/2025

5. This award is subject to Executive Orders in the Federal Register available at <https://www.federalregister.gov/presidential-documents/executive-orders>

6. This award is subject to requirements or limitations in any applicable Appropriations Act available at <https://crsreports.congress.gov/>.

7. This award is subject to the Administrative and National Policy Requirements at <https://www.acf.hhs.gov/grants/administrative-and-national-policy-requirements>.

8. This award is subject to the HHS Grants Policy Statement (HHS GPS).

**a. For awards issued before October 1, 2024**, this award is subject to the HHS Grants Policy Statement: <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf> This includes requirements in Parts I and II. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS.

**b. For awards issued on or after October 1, 2024**, this award is subject to the requirements of the [HHS Grants Policy Statement \(HHS GPS\)](#) that are applicable based on your recipient type and the purpose of this award. This includes requirements in Parts I and II available at <https://www.hhs.gov/grants-contracts/grants/grants-policies-regulations/index.html>. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS.

### **COST SHARING OR MATCHING (NON-FEDERAL SHARE) OF PROGRAM FUNDING**

9. Recipients are required to meet a non-federal share of the project cost, in accordance with Section 640(b) of the Head Start Act, [42 U.S.C. § 9835\(b\)](#). Recipients must provide at least 20 percent of the total approved cost of the project. The total approved cost of the project is the sum of the ACF (federal) share and the non-federal share. The non-federal share may be met by cash or in-kind contributions. Any shared costs or matching funds and all contributions, including cash and third-party in-kind contributions, must be accepted as part of the recipient's cost-sharing or matching when such contributions meet all criteria listed in [45 CFR § 75.306](#).

10. The responsible HHS official may approve a waiver of all or a portion of the non-federal match requirement based on a recipient's written application submitted for the budget period and any supporting evidence the responsible HHS official requires. In deciding whether to grant a waiver, the responsible HHS official will consider the circumstances specified at section 640(b) of the Act and whether the recipient made a reasonable effort to comply with the non-federal match requirement.

**a. Matching Waiver Pursuant to 48 U.S.C. 1469a(d)** Matching requirements (including in-kind contributions) of less than \$200,000 are waived under awards made to the governments of American Samoa, Guam, the U.S. Virgin Islands, and the Commonwealth of the Northern Mariana Islands (other than those consolidated under other provisions of 48 U.S.C. 1469) pursuant to 48 U.S.C. 1469a(d). This waiver applies whether the matching required under the award equals or exceeds \$200,000.

### **FINANCIAL REPORTING**

11. The OMB approved Financial Reporting form for this program is the Federal Financial Reports (SF-425). This form must be submitted in the Payment Management System (PMS) as described in ACF-PI-OHS-24-01: <https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-ohs-24-01>.



## Department of Health and Human Services

### Administration for Children and Families

## Notice of Award

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FAIN# 01CD004092

Federal Award Date: 06/25/2025

a. PMS SF-425 Information: <https://pms.psc.gov/grant-recipients/ffr-updates.html>

b. For support using PMS, contact your PMS Liaison Accountant: <https://pms.psc.gov/find-pms-liaison-accountant.html>

c. Post-Award Reporting Forms and Instructions: <https://www.grants.gov/forms/forms-repository/post-award-reporting-forms>

12. *Obligation Deadline:* Funds must be obligated within the budget period established by the Notice of Award (NoA) on Line 19. If funds cannot be obligated within the established budget period, recipients may apply to carryover the balance or for a no-cost extension, as applicable, in Head Start Enterprise System (HSES) applications. Applications for a carryover balance should be initiated once the actual unobligated balance is known (generally during the period allowed for preparation and submission of the annual Federal Financial Report. Applications for a no-cost extension must be submitted at least 10 calendar days before the end of the period of performance of the award.

13. *Liquidation Deadline:*

a. Recipients must liquidate all financial obligations incurred under the Federal award no later than 90 calendar days after the end date of the budget period, except for the final budget period, unless the Federal awarding agency or pass-through entity authorizes an extension,

b. During the final budget period within a period of performance recipients must liquidate all financial obligations incurred under the Federal award no later than 120 calendar days after the end date of the period of performance unless the Federal awarding agency or pass-through entity authorizes an extension. Any funds not expended by this timeframe must be returned to the U.S. Department of Health and Human Services.

### PROGRAM REPORTING

14. The OMB approved Program Report form for this program is the Head Start Program Information Report (PIR, OMB Control No. 0970-0427). All grant recipients and sub-recipients are required to submit a PIR for Head Start and Early Head Start programs annually. PIR submissions are only accepted electronically using the Head Start Enterprise System (HSES).

a. PIR guidance, reference materials, change highlights and frequently asked questions are available at: <http://eclkc.ohs.acf.hhs.gov/pir>.

b. For assistance and/or support contact the HSES help desk at [help@hsesinfo.org](mailto:help@hsesinfo.org)

### PROPERTY REPORTING

15. This award is subject to the Property Related T&Cs found at <https://www.acf.hhs.gov/grants/manage-grant/grant-award/property-terms>.

16. The OMB approved property reporting is the following:

a. *Real Property Reports (SF-429s).* The SF-429 Real Property forms are applicable to this program and must be submitted as described in ACF-PI-HS-17-03: <https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-hs-17-03>.

i. For assistance accessing the SF-429: <https://home.grantsolutions.gov/home/recipient-oldc-training->



## Department of Health and Human Services

Administration for Children and Families

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### [resources/](#)

ii. For assistance completing the SF-429s, please contact [OGM-RealProperty429@acf.hhs.gov](mailto:OGM-RealProperty429@acf.hhs.gov)

iii. Under 45 CFR §75.323, all real property, equipment, and intangible property acquired or improved with ACF funds must be held in trust by the non-federal entity as trustee for the beneficiaries of the project or program under which the property was acquired or improved. Post-award requirements of Part 1303 must be met and the federal interest resulting from purchase, construction and major renovation activities must be protecting by filing or posting a notice of federal interest as required by 45 CFR §1303.46 - §1303.49.

b. Tangible Property Report (SF-428s). The SF-428-B Tangible Personal Property Report -Final Report must be submitted as described in ACF-PI-OHS-24-01: <https://eclkc.ohs.acf.hhs.gov/policy/pi/acf-pi-ohs-24-01>. The SF-428-C Tangible Personal Property Report – Disposition Request/Report must be submitted as described in the Tangible Personal Property Guidance: [https://www.acf.hhs.gov/grants/manage-grant/property/tangible-property#book\\_content\\_0](https://www.acf.hhs.gov/grants/manage-grant/property/tangible-property#book_content_0)

i. The fillable SF-428 forms must be completed and uploaded in the Grant Notes section of GS. The Category Type of the Grant Note is Tangible Personal Property Report (SF-428).

ii. Downloadable version of fillable SF-428: <https://www.grants.gov/forms/forms-repository/post-award-reporting-forms>

iii. *GS User Guide*: Grant Notes: [Microsoft Word - User Guide Recipient Grants List and Details GRANTS LIST .docx \(grantsolutions.gov\)](#) and [Quick Sheet: Grant Notes \(grantsolutions.gov\)](#)

### **EFFECTIVE PERIOD**

17. These program-specific *Supplemental Terms and Conditions* are effective on the date shown in the top right 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. These program-specific *Supplemental Terms and Conditions* are applicable to your award when they have been incorporated by reference in your Notice of Award or subsequent award amendments.

### **POINTS OF CONTACT**

18. Points of contact for additional information or questions concerning either the operation of the program or related financial matters can be found in the Head Start Enterprise System (HSES).

### **AWARD PAYMENT**

19. This award will be paid through the Department of Health and Human Services, Payment Management Services, operating under the Program Support Center (PSC). The PSC provides automated award payment and cash management services from awards issued by Federal Government Awarding Agencies through the centralized payment system, Payment Management System (PMS). For more detailed information on payment through PMS, go to <https://pms.psc.gov/>. Drawing funds from PMS indicates acceptance and agreement to the T&Cs of the award.

### **UNIQUE ENTITY IDENTIFIER (UEI) NOTICE**



**Department of Health and Human Services**

Administration for Children and Families

Notice of Award

Award# 01CD004092-05-00

FAIN# 01CD004092

Federal Award Date: 06/25/2025

20. All applicants and recipients must have an active System for Award Management (SAM) registration and UEI issued. ACF recommends that organizations start the renewal process at least 30 days prior to expiration to avoid delays in federal funding. Entities can search for help at [Federal Service Desk](#) (FSD) any time or request help from an FSD agent Monday–Friday 8 a.m. to 8 p.m. ET at [https://www.fsd.gov/gsafsd\\_sp](https://www.fsd.gov/gsafsd_sp). This award is subject to requirements as set forth in 2 CFR 25.110.

# AWARD ATTACHMENTS

NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES

01CD004092-05-00

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1. Remarks

### **30. REMARKS (Continued from previous page)**

This grant action awards \$125,000 for the 07/01/2025-06/30/2026 budget period.

This grant is subject to the requirements for contribution of the non-federal match and approval of key staff, the limitations on development and administrative costs and employee compensation, and prior written approval for the purchase of equipment and other capital expenditures and the purchase, construction and major renovation of facilities as specified in Attachment 1.

As per Program Instruction ACF-PI-HS-24-01, the grantee is required to submit one semi-annual SF-425 report and one annual SF-425 report. For this grant, SF-425 reports must be received by:

- Semi-Annual Report in PMS: 1/30/2026
- Annual Report in PMS: 9/30/2026