## **Paperwork Reduction Act Submission**

Please read the instruction before completing this form. For additional forms or assistance in completing this forms, contact your agency's Paperwork Reduction Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 Seventeenth St. NW, Washington, DC 20503.

1. Agency/Sub agency Originating Request: <b>U.S. Department of Housing and Urban Development</b> Office of Public and Indian Housing Real Estate Assessment Center	2. OMB Control Number: a. 2577-0026 b. None					
<ul> <li>3. Type of information collection: (check one) <ul> <li>a.</li> <li>New Collection</li> <li>B.</li> <li>Revision of a currently approved collection</li> <li>C.</li> <li>Extension of a currently approved collection</li> <li>d.</li> <li>Reinstatement, without change, of previously approved collection for which approval has expired</li> <li>e.</li> <li>Reinstatement, with change, of previously approved collection for which approval has expired</li> <li>f.</li> <li>Existing collection in use without an OMB control number</li> </ul> For b-f, note item A2 of Supporting Statement instructions.</li></ul>	<ul> <li>4. Type of review requested: (check one) <ul> <li>a. X Regular</li> <li>b. Emergency - Approval requested by</li> <li>c. Delegated</li> </ul> </li> <li>5. Small entities: Will this information collection have a significant economic impact on a substantial number of small entities? <ul> <li>Yes X No</li> </ul> </li> <li>6. Requested expiration date: <ul> <li>a. X Three years from approval date</li> <li>b. Other (specify)</li> </ul> </li> </ul>					
<ol> <li>Title: Public Housing Operating Fund Program: Operating Budget ar 8. Agency form number(s): (if applicable) HUD52574</li> </ol>	nd Related Form					
9. Keywords: Housing, public housing operating subsidy, budget						
<ol> <li>Affected public: (mark primary with "P" and all others that apply with "X")</li> <li>a. Individuals or households</li> <li>e. Farms</li> <li>b. Business or other for-profit</li> <li>f. Federal Government</li> <li>c. P Not-for-profit institutions</li> <li>g. X State, Local or Tribal Government</li> </ol>	<ul> <li>the PHA's Board of Commissioners. PHAs use the information as a grams and plans to provide control over operations and achieve objectives.</li> <li>12. Obligation to respond: (mark primary with "P" and all others that apply with "X")</li> <li>a. Voluntary</li> <li>b. P Required to obtain or retain benefits</li> </ul>					
13. Annual reporting and recordkeeping hour burden:       3,141         a. Number of respondents       3,141         b. Total annual responses       3,141         Percentage of these responses collected electronically       50%         c. Total annual hours requested       24,034         d. Current OMB inventory       24,034         e. Difference (+,-)       1         f. Explanation of difference:       1. Program change:         2. Adjustment:       2	<ul> <li>14. Annual reporting and recordkeeping cost burden: (in thousands of dollars) Do not include costs based on the hours in item 13.</li> <li>a. Total annualized capital/startup costs</li> <li>b. Total annual costs (O&amp;M)</li> <li>c. Total annualized cost requested</li> <li>d. Current OMB inventory</li> <li>e. Difference</li> <li>f. Explanation of difference:</li> <li>1. Program change:</li> <li>2. Adjustment:</li> </ul>					
<ul> <li>15. Purpose of Information collection: (mark primary with "P" and all others that ap with "X")</li> <li>a. P Application for benefits</li> <li>b. Program evaluation</li> <li>c. General purpose statistics</li> <li>d. Audit</li> </ul>	a. <b>X</b> Recordkeeping b. Third party disclosure					
17. Statistical methods:       18.         Does this information collection employ statistical methods?       18.         Yes       X       No	ency contact: (person who can best answer questions regarding the content of this mission) me: Essence Moody one: (202) 475-8946					

# **19. Certification for Paperwork Reduction Act Submissions**

On behalf of the U.S. Department of Housing and Urban Development, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9.

**Note:** The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320/8(b)(3). appear at the end of the instructions. The certification is to be made with reference to those regulatory provisions as set forth in the instructions.

The following is a summary of the topics, regarding the proposed collections of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It uses plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention periods for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of the information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary, required for a benefit, or mandatory);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to collected (see note in item 19 of the instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of these provisions, identify the item below and explain the reason in item 18 of the Supporting Statement.

Signature of Senior Officer or Designee:	Date:
X	
Colette Pollard, Departmental Reports Management Officer,	
Office of the Chief Information Officer	
OMB-83-1	10/95

#### **Supporting Statement for Paperwork Reduction Act Submissions**

### A. Justification

- 1. Procedures to assure sound management practices by public housing agencies (PHAs) are required by Section 6(c)(4) of the United States Housing Act of 1937 and Section 11 of the Consolidated Annual Contributions Contract (ACC). The ACC is between a PHA and the United States of America, acting by and through the Secretary of HUD, and requires PHAs to prepare and have approved by their Board of Commissioners an annual operating budget in a manner and using such forms as prescribed by HUD. Only "troubled" PHAs are required to submit operating budgets and salary schedules to HUD. 24 CFR Part 990 is the applicable HUD regulation (see **Exhibit A**). PHAs are no longer required to use HUD budget forms in a prescribed format, with the exception of the Board Resolution which is used to approve the PHA's operating budget and is a required submission by all PHAs to HUD.
- 2. Approximately 3,141 PHAs are required to submit their operating budgets and salaries schedules to HUD. The PHA Board Resolution (form HUD-52574) approving the PHA's operating budget must be submitted to the appropriate FO prior to the beginning of the PHA's fiscal year. All PHAs are required to prepare an operating budget and submit same to their Board of Commissioners for approval prior to their operating subsidy being approved by HUD. The HUD required Board Resolution form used by the Board of Commissioners to approve the PHA's annual operating budget is

Form HUD-52574, PHA Board Resolution, Approving Operating Budget (see Exhibit B).

- 3. PHAs described in paragraph 2 above are required to submit their budgets to HUD electronically by email or they may send a hard copy by US Mail or other carrier.
- 4. REAC is not aware of any duplication of efforts to collect this data. Any data already submitted to HUD will not be requested again.
- 5. The information being collected has no significant impact on small businesses or other small entities.
- 6. HUD requests program funds annually in the Departmental Budget. Congress appropriates PHA operating funds annually. The operating subsidy funds are obligated to the PHAs annually and can only be obligated by HUD for the year in which the funds were appropriated by Congress. Therefore, HUD has to fund operating budgets for PHAs annually and cannot collect this information less frequently.
- 7. There are no special circumstances that require the collection of information to be inconsistent with the guidelines in 5 CFR 1320.6.
- 8. HUD published a Notice of Proposed Information Collection for Public Comment in the *Federal Register*, Volume77, Page 50151, on August 20, 2012. HUD received no comments on this proposed collection.
- 9. No payments or gifts are provided to respondents.
- 10. Assurance of confidentiality is neither provided nor needed because PHA budgets are passed at public Board of Commissioner meetings.
- 11. No sensitive questions are being asked.

12. The estimated annual burden hours and annual costs to respondents are provided in the table below. The hourly cost for response is assuming a Clerk's annual salary of \$42,209 at a GS7/1 level rate (Salary Table 2012-GS) or an hourly rate of \$20.22. HUD estimates that the annual burden hours for the operating budget required for the 3,141 PHAs for the form HUD-52574 required for all PHAs averages .17 hours each.

PHA Burden Hours and Cost								
HUD Form Number	Number of Respondents	Frequency of Responses	Estimated Hours	Total Annual Burden Hours	x	Hourly Rate	=	Total Annual Cost
52574	3,141	1	.17	24,034		\$20.22		\$10,797
Total								\$10,797

- 13. There are no addition costs to the respondents.
- 14. The estimated annualized costs to the federal government for the collection for HUD Form 52574 is based on a Clerk's annual salary of \$42,209 at a GS7/1 level rate (Salary Table 2012-GS) or an hourly rate of \$20.22), which is \$20.22 per hour.

Estimated Annual Cost to the Federal Government – Staff								
HUD Form Number	Number of Respondents	Frequency of Responses	Estimated Hours	Total Annual Burden Hours	x	Hourly Rate	=	Total Annual Cost
52574	3,141	1	2	6,282		\$20.22		\$127,022

- 15. This is an Extension of a currently approved collection.
- 16. This information will not be published.
- 17. HUD is not seeking approval to not display the expiration date of the OMB approval. The OMB approval number and expiration date are on the form. See Exhibit D, the OMB disclosure statement.
- 18. There are no exceptions to the certification statement identified in item 19 of the OMB 83-I.

#### **B.** Collections of Information Employing Statistical Methods

N/A