

**U.S. DEPARTMENT OF
HOUSING AND URBAN DEVELOPMENT**

PRIVACY THRESHOLD ANALYSIS (PTA)

**[Insert System, Project, or Information
Collection Name]**

[Insert Name of Program Office]

Instruction & Template

2 August 2018

PRIVACY THRESHOLD ANALYSIS (PTA)

The PTA is a compliance form developed by the Privacy Branch to identify the use of Personally Identifiable Information (PII) across the Department. The PTA is the first step in the PII verification process, which focuses on these areas of inquiry:

- Purpose for the information,
- Type of information,
- Sensitivity of the information,
- Use of the information,
- And the risk to the information.

Please use the attached form to determine whether a Privacy Impact Assessment (PIA) is required under the E-Government Act of 2002 or a System of Record Notice (SORN) is required under the Privacy Act of 1974, as amended.

Please complete this form and send it to your program Privacy Liaison Officer (PLO). If you have no program Privacy Liaison Officer, please send the PTA to the HUD Privacy Branch:

Marcus Smallwood, Acting, Chief Privacy Officer
Privacy Branch
U.S. Department of Housing and Urban Development

privacy@hud.gov

Upon receipt from your program PLO, the HUD Privacy Branch will review this form. If a PIA or SORN is required, the HUD Privacy Branch will send you a copy of the PIA and SORN templates to complete and return.

PRIVACY THRESHOLD ANALYSIS (PTA)

SUMMARY INFORMATION

Project or Program Name:	CoC Consolidated Program Application		
Program:	<input type="text"/>		
CSAM Name (if applicable):	E-Snap	CSAM Number (if applicable):	Click here to enter text.
Type of Project or Program:	<input type="text"/>	Project or status:	<input type="text"/>
Date first developed:	August 2, 2018	Pilot launch date:	Click here to enter a date.
Date of last PTA update:	Click here to enter a date.	Pilot end date:	Click here to enter a date.
ATO Status (if applicable)	<input type="text"/>	ATO expiration date (if applicable):	Click here to enter a date.

PROJECT OR PROGRAM MANAGER

Name:	Tonya Proctor		
Office:	Click here to enter text.	Title:	Deputy Director
Phone:	202-402-6070	Email:	Tonya.Proctor@hud.gov

INFORMATION SYSTEM SECURITY OFFICER (ISSO) (IF APPLICABLE)

Name:	Click here to enter text.		
Phone:	Click here to enter text.	Email:	Click here to enter text.

SPECIFIC PTA QUESTIONS

1. Reason for submitting the PTA:

Please provide a general description of the project and its purpose so a non-technical person could understand. If this is an updated PTA, please describe what changes and/or upgrades triggering the update to this PTA. If this is a renewal please state whether there were any changes to the project, program, or system since the last version.

The regulatory authority to collect this information is contained in 24 CFR Part 578, and is authorized by the McKinney-Vento Act, as amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 (42 U.S.C. 11371 et seq.) which states that “The Secretary shall award grants, on a competitive basis, and using the selection criteria described in section 427, to carry out eligible activities under this subtitle for projects that meet the program requirements under section 426, either by directly awarding funds to project sponsors or by awarding funds to unified funding agencies.”(SEC.422(a))

The CoC Homeless Assistance Grant Application (OMB 2506-0112), also called the CoC Consolidated Application, includes a CoC Application and CoC Priority Listing that collect information from the statewide and local CoCs, and a Project Application that collects information from the individual project applicants within those CoCs. The CoC Consolidated Application is necessary for the selection of proposals submitted to HUD (by nonprofit organizations, states, local governments, instrumentalities of states and local governments, and Public Housing Authorities) for the grant funds available through the CoC Program.

The purpose of this information collection is to determine each CoC’s progress toward: 1) promoting community-wide commitment to the goal of ending homelessness, including homelessness among the specific subpopulations of the chronically homeless, families, youth and veterans; 2) provide funding for efforts by nonprofit organizations, states, local governments, instrumentalities of states and local governments, and Public Housing Authorities to quickly re-house homeless individuals and families into permanent housing while minimizing the trauma and dislocation caused to individuals, families, and communities by homelessness; and 3) promote access to, and effective utilization of mainstream programs and programs funded with State or local resources in order to increase self-sufficiency among individuals and families experiencing homelessness. The information also allows HUD to assess project quality according to the threshold criteria established annually by the CoC Program Competition Notice of Funding Availability (NOFA) and according to 24 CFR part 578.

2. Does this system employ the following technologies?

If you are using these technologies and want coverage under the respective PIA for that technology, please stop here and contact the HUD Privacy Branch for further guidance.

Social Media

	<input type="checkbox"/> Web portal ² (e.g., SharePoint) <input type="checkbox"/> Contact Lists <input checked="" type="checkbox"/> Public website (e.g. A website operated by HUD, contractor, or other organization on behalf of the HUD) <input type="checkbox"/> None of these
--	--

<p>3. From whom does the Project or Program collect, maintain, use, or disseminate information? Please check all that apply.</p>	<input checked="" type="checkbox"/> This program collects no personally identifiable information ³ <input type="checkbox"/> Members of the public <input type="checkbox"/> HUD employees/contractors (list programs): <input type="checkbox"/> Contractors working on behalf of HUD <input type="checkbox"/> Employees of other federal agencies <input type="checkbox"/> Other (e.g. business entity)
--	--

<p>4. What specific information about individuals is collected, generated or retained?</p>
<p>Please provide a specific description of information collected, generated, or retained (such as full names, maiden name, mother’s maiden name, alias, social security number, passport number, driver’s license number, taxpayer identification number, patient identification number, financial account, credit card number, street , internet protocol, media access control, telephone number, mobile number, business number, photograph image, x-rays, fingerprints, biometric image, template date(e.g. retain scan, well-defined group of people),vehicle registration number, title number and information about an individual that is linked or linkable to one of the above (e.g. date of date, place of birth, race, religion, weight, activities, geographical indicators, employment information, medical information, education information, financial information) and etc.</p> <p><i>The Continuum of Care Program Applications are not designed to capture information about individuals. Information is only collected about nonprofit organizations, states, local governments, instrumentalities of states and local governments, and Public Housing Authorities. Information about the projects that the organizations are applying to fund is never collected on an individual level and is only ever collected in aggregate.</i></p> <p><i>The HUD and government-wide standard forms included with the application do not collect information about individuals and only collect information at the organization or aggregate level. These forms include the</i></p>

² Informational and collaboration-based portals in operation at HUD and its programs that collect, use, maintain, and share limited personally identifiable information (PII) about individuals who are “members” of the portal or “potential members” who seek to gain access to the portal.

³ HUD defines personal information as “Personally Identifiable Information” or PII, which is any information that permits the identity of an individual to be directly or indirectly inferred, including any information that is linked or linkable to that individual, regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department. “Sensitive PII” is PII, which if lost, compromised, or disclosed without authorization, could result in substantial harm, embarrassment, inconvenience, or unfairness to an individual. For the purposes of this PTA, SPII and PII are treated the same.

<p>4(a) Does the project, program, or system retrieve information from the system about a U.S. Citizen or lawfully admitted permanent resident aliens by a personal identifier?</p>	<p><input checked="" type="checkbox"/> No. Please continue to next question. <input type="checkbox"/> Yes. If yes, please list all personal identifiers used:</p>
<p>4(b) Does the project, program, or system have an existing System of Records Notice (SORN) that has already been published in the Federal Register that covers the information collected?</p>	<p><input type="checkbox"/> No. Please continue to next question. <input checked="" type="checkbox"/> Yes. If yes, provide the system name and number, and the Federal Register citation(s) for the most recent complete notice and any subsequent notices reflecting amendment to the system</p>
<p>4(c) Has the project, program, or system undergone any significant changes since the SORN?</p>	<p><input type="checkbox"/> No. Please continue to next question. <input checked="" type="checkbox"/> Yes. If yes, please describe.</p>
<p>4(d) Does the project, program, or system use Social Security Numbers (SSN)?</p>	<p><input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes.</p>
<p>4(e) If yes, please provide the specific legal authority and purpose for the collection of SSNs:</p>	<p>Click here to enter text.</p>
<p>4(f) If yes, please describe the uses of the SSNs within the project, program, or system:</p>	<p>Click here to enter text.</p>
<p>4(g) If this project, program, or system is an information technology/system, does it relate solely to infrastructure?</p> <p><i>For example, is the system a Local Area Network (LAN) or Wide Area Network (WAN)?</i></p>	<p><input checked="" type="checkbox"/> No. Please continue to next question. <input type="checkbox"/> Yes. If a log kept of communication traffic, please answer this question.</p>
<p>4(h) If header or payload data⁴ is stored in the communication traffic log, please detail the data elements stored.</p>	
<p>Click here to enter text.</p>	

⁴ Header: Information that is placed before the actual data. The header normally contains a small number of bytes of control information, which is used to communicate important facts about the data that the message contains and how it is to be interpreted and used. It serves as the communication and control link between protocol elements on different devices.

Payload data: The actual data to be transmitted, often called the payload of the message (metaphorically borrowing a term from the space industry!) Most messages contain some data of one form or another, but some actually contain none: they are used only for control and communication purposes. For example, these may be used to set up or terminate a logical connection before data is sent.

<p>5. Does this project, program, or system connect, receive, or share PII with any other HUD programs or systems?</p>	<p><input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. If yes, please list: Click here to enter text.</p>
<p>6. Does this project, program, or system connect, receive, or share PII with any external (non-HUD) partners or systems?</p>	<p><input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. If yes, please list: Click here to enter text.</p>
<p>6(a) Is this external sharing pursuant to new or existing information sharing access agreement (MOU, MOA, etc.)?</p>	<p><input type="text"/></p> <p>Please describe applicable information sharing governance in place:</p>
<p>7. Does the project, program, or system provide role-based training for personnel who have access in addition to annual privacy training required of all HUD personnel?</p>	<p><input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. If yes, please list:</p>
<p>8. Per NIST SP 800-53 Rev. 4, Appendix J, does the project, program, or system maintain an accounting of disclosures of PII to individuals/agencies who have requested access to their PII?</p>	<p><input checked="" type="checkbox"/> No. What steps will be taken to develop and maintain the accounting: <input type="checkbox"/> Yes. In what format is the accounting maintained:</p>
<p>9. Is there a FIPS 199 determination?⁵</p>	<p><input checked="" type="checkbox"/> Unknown. <input type="checkbox"/> No. <input type="checkbox"/> Yes. Please indicate the determinations for each of the following:</p> <p>Confidentiality: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Integrity: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p> <p>Availability: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High</p>

⁵ FIPS 199 is the [Federal Information Processing Standard](#) Publication 199, Standards for Security Categorization of Federal Information and Information Systems and is used to establish security categories of information systems.

PRIVACY THRESHOLD ANALYSIS REVIEW

(TO BE COMPLETED BY PROGRAM PLO)

Program Privacy Liaison Reviewer:	Click here to enter text.
Date submitted to Program Privacy Office:	Click here to enter a date.
Date submitted to HUD Privacy Branch:	Click here to enter a date.
Program Privacy Liaison Officer Recommendation: <i>Please include recommendation below, including what new privacy compliance documentation is needed.</i>	
Click here to enter text.	

(TO BE COMPLETED BY THE HUD PRIVACY BRANCH)

HUD Privacy Branch Reviewer:	Click here to enter text.
Date approved by HUD Privacy Branch:	Click here to enter a date.
PTA Expiration Date:	Click here to enter a date.

DESIGNATION

Privacy Sensitive System:	<input type="text"/> If "no" PTA adjudication is complete.
Category of System:	<input type="text"/> If "other" is selected, please describe: Click here to enter text.
Determination:	<input type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> HUD Policy for Computer-Readable Extracts Containing Sensitive PII applies. <input type="checkbox"/> Privacy Act Statement required. <input type="checkbox"/> Privacy Impact Assessment (PIA) required. <input type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Paperwork Reduction Act (PRA) Clearance may be required. Contact your program PRA Officer. <input type="checkbox"/> A Records Schedule may be required. Contact your program Records Officer.
PIA:	<input type="text"/> If covered by existing PIA, please list: Click here to enter text.

SORN:

If covered by existing SORN, please list: [Click here to enter text.](#)

HUD Privacy Branch Comments:

Please describe rationale for privacy compliance determination above.

[Click here to enter text.](#)

DOCUMENT ENDORSMENT

DATE REVIEWED:
PRIVACY REVIEWING OFFICIALS NAME:

By signing below, you attest that the content captured in this document is accurate and complete and meet the requirements of applicable federal regulations and HUD internal policies.

SYSTEM OWNER

<< INSERT NAME/TITLE >>

<< INSERT PROGRAM OFFICE >>

Date

CHIEF PRIVACY OFFICER

<< INSERT NAME/TITLE >>

OFFICE OF ADMINISTRATION

Date