**Proposed AFI PPR Short Form**

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

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| 1. Federal Agency and Organization Element to Which Report is Submitted *Pre-populated from Notice of Award (NOA)* | 2. Federal Grant or Other Identifying Number Assigned by Federal Agency*Pre-populated from NOA* | 3a. DUNS Number*Pre-populated from NOA* |
| 3b. EIN*Pre-populated from NOA* |
| 4. Recipient Organization (Name and complete address including zip code) *Pre-populated from NOA* | 5. Optional: Recipient Identifying Number or Account Number*Optional, enter the account or other identifying number that the grantee has assigned to the award reported on this form.* |
| 6. Project/Grant Period | 7. Reporting Period End Date *(MM,DD, YYYY)**Generated by OLDC* | 8. Final Report? *[ ]*  Yes [ ]  No*Generated by OLDC* |
| Start Date: *(MM, DD, YYYY)* *Pre-populated from NOA* | End Date: *(MM, DD, YYYY)* *Pre-populated from NOA* |
| 9. Report Frequency*Generated by OLDC* |
| 10. Optional: Performance Narrative*Optional. Grantees that want to provide a performance narrative can upload the narrative as a file.* |
| **11. Certification:****I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.** |
| 11a. Typed or Printed Name and Title of Authorized Certifying Official*Generated by OLDC, based on user account.* | 11c. Telephone *(area code, number and extension)*  |
|  | 11d. Email Address  |
| 11b. Signature of Authorized Certifying Official*Generated by OLDC, based on user account.* | 11e. Date Report Submitted *(MM, DD, YYYY)* *Generated by OLDC* |

**The Short Form consists of select questions from the Long Form, as indicated by the item numbers.**

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| **AFI PPR Short Form** NOTE: In this section, report cumulative data for this grant, i.e. data from the date of award through the end of this reporting period, unless otherwise specified.  |
| **Item** | **Data Element** | **Prior Report Data** | **Current Report Data** |
| **AFI-C003** | Total number of AFI IDAs opened.Enter the total number of IDAs opened under this grant. Include accounts transferred to this AFI IDA project from another AFI IDA project held by your organization. | *Pre-populated from prior report* |  |
| **AFI-C004** | Current total number of AFI IDAs open. Enter the number AFI IDAs open under this grant as of the last day of this reporting period. **(Not cumulative.)** | *Pre-populated from prior report* |  |
| **AFI-C006** | Total amount of AFI IDA holder savings deposits in AFI IDAs.Enter the total amount of savings that AFI IDA holders have deposited into AFI IDAs under this grant. | *Pre-populated from prior report* | **$** |
| **AFI-C007** | Current total amount of AFI IDA holder savings balances in AFI IDAs.Enter the balance amount of AFI IDA holder savings in AFI IDAs under this grant as of the last day of this reporting period. **(Not cumulative.)** | *Pre-populated from prior report* | **$** |
| **AFI-C034** | Total number of AFI IDA holders who made a matched withdrawal for any allowable use.Enter the total number of AFI IDA holders who made a matched withdrawal for first-home purchase, business capitalization, postsecondary education or training, or for a transfer to the AFI IDA of a dependent or spouse. | *Pre-populated from prior report* |  |
| **AFI-C036** | Total amount of AFI IDA holder savings withdrawn from an AFI IDA for a matched withdrawal.Enter the total amount of AFI IDA holder savings withdrawn for a matched withdrawal for first-home purchase, business capitalization, postsecondary education or training, or for a transfer to the AFI IDA of a dependent or spouse. | *Pre-populated from prior report* | **$** |
| **AFI-C037** | Total amount of federal AFI grant funds disbursed as matching funds for matched withdrawals. Enter the total amount of federal AFI grant funds disbursed for matched withdrawals.  | *Pre-populated from prior report* | **$** |
| **AFI-C038** | Total amount of non-federal cash disbursed as matching funds for matched withdrawals. Enter the total amount of federal AFI grant funds disbursed for matched withdrawals. | *Pre-populated from prior report* | **$***Check: cannot be less than AFI -C037* |
| **AFI-C057** | Total number of AFI IDA holders who exited this project without a matched withdrawal.Enter the total number AFI IDA holders who exited this project without a matched withdrawal. Include AFI IDA holders transferred to a different AFI grant held by your organization.  | *Pre-populated from prior report* |  |
| **AFI-C058** | Total amount of AFI IDA holder savings withdrawn/re-assigned due to project exit for any reason without a matched withdrawal.Enter the total amount of AFI IDA holder savings withdrawn/re-assigned due to project exit for any reason without a matched withdrawal.  | *Pre-populated from prior report* | **$** |