



OMB Control Number xxxx-xxxx
Expiration Date xx/xx/xxxx

U.S. Department of Housing and Urban Development Grant Feedback Report (GF) and Instructions

General Reporting Instructions and Specifications for Discretionary Grants

2016

This reporting requirement is approved under the Paperwork Reduction Act of 1995, OMB Control No. xxx-xxxx, expiring xx/xx/xxxx. Persons are not required to respond to this collection of information unless it displays a currently valid OMB number. Public reporting burden for this collection is estimated to average xxx,xxx hours per year. This estimate includes the burden to collect data that the respondent would not otherwise collect as part of its usual and customary practice or as part of its EEO requirements.

The respondent's obligation to reply to this information request is codified in "Administrative Provisions" located at 42 USC 3535(r). The reasons for the collection and reporting of information are general program oversight, evaluation, and performance assessment. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden, to the U. S. Department of Housing and Urban Development, Office of Strategic Planning and Management, Grants Management and Oversight, 451 7th Street, S.W., Room 3156, Washington, D.C. 20410 (Paperwork Reduction Project xxxx-xxxx).



I. GENERAL INSTRUCTIONS

Using the instructions contained in this document, respondent grantees may submit a Grant Feedback Report (GF) to the United States Department of Housing and Urban Development (HUD) in order to facilitate communication, coordination, and technical assistance with their program office. Each grantee may submit a GF containing updates on the progress in producing grant-specific deliverables when compared to the milestones for deliverables outlined in the grant award document as well as other response information. The GF is an optional report which grantees may submit once per 12 months. Please note these competitively awarded grants are also referred to as discretionary grants in this document.

The instructions and performance reporting form for completing the GF can be found in Appendix A. Should changes in definitions resulting from new legislation or related regulations occur, appropriate revisions will be issued to reflect these changes.

The primary purposes of the Grant Feedback report (GF) are to:

1. Determine progress in meeting deliverables and performance expectations;
2. Identify and mitigate potential threats to the overall success of the discretionary grant;
3. Use the results to prioritize technical assistance for grantees and sub-grantees; and
4. Enhance the responsiveness of the Department to grantees facing challenges and obstacles.

II. COVERED PROGRAMS

Respondent grantees administering competitively awarded HUD grants that receive funding for fixed or known periods to carry out specific activities may utilize the GF specifications and general reporting instructions unless otherwise stated in the grant award document.

Competitively awarded grants made through the following HUD programs are covered under the GF reporting requirements:

- Titles I [42 U.S.C. 1437 et seq.] and II 1 of the United States Housing Act of 1937;
- Section 202 of the Housing Act of 1959 [12 U.S.C. 1701q];
- Section 106 of the Housing and Urban Development Act of 1968 [12 U.S.C. 1701x];



- The Fair Housing Act [42 U.S.C. 3601 et seq.];
- Title I [42 U.S.C. 5301 et seq.] and section 810 1 of the Housing and Community Development Act of 1974;
- Section 201 of the Housing and Community Development Amendments of 1978 [12 U.S.C. 1715z-1a];
- The Congregate Housing Services Act of 1978 [42 U.S.C. 8001 et seq.];
- Section 222 of the Housing and Urban-Rural Recovery Act of 1983;
- Section 3616a of 42 USC;
- Title IV of the McKinney-Vento Homeless Assistance Act [42 U.S.C. 11360 et seq.]; and
- Titles II [42 U.S.C. 12721 et seq.], III, and IV and section 811 [42 U.S.C. 8013] of the Cranston-Gonzalez National Affordable Housing Act.

Continuum of Care discretionary grants authorized under the Mc Kinney-Vento Homeless Assistance Act and Choice Neighborhood discretionary grants subject to section 24 of the United States Housing Act of 1937 are excluded from the GF requirements.

Each respondent grantee should review the HUD Notice of Award to familiarize himself or herself with the specific programmatic reporting requirements outlined in the Terms and Conditions that apply to the grant program. The Terms and Conditions will provide more detailed information on the applicable reporting requirements.

III. DUE DATE

Electronic GF files may be submitted once per 12 months. The specified 12 month submission period starts October 1 and concludes September 30. The table below shows the reporting period per submission.

| Report Period | Maximum # of Submissions per Report Period |
|--------------------------|--|
| October 1 - September 30 | 1 |

IV. SUBMISSION PROCEDURES

Information contained in the GF must be submitted or inputted directly to an online portal via technical instructions available through the appropriate Regional Office or the HUD website.

A GF may be provided once per 12 months.



APPENDIX A
GRANT FEEDBACK REPORT AND INSTRUCTIONS

Purpose

This grant feedback report is intended to serve as a tool for improved communication, coordination, and performance for the US Department of Housing and Urban Development (HUD) award recipients. Throughout this form, "award" indicates any project, initiative, grant, agreement, program, or task funded by HUD. A separate form will be provided for each of your HUD awards.

Administrative

Please provide or change any missing or incorrect information in the following fields:

- a. CFDA Number: (AUTO-POPULATED FIELD)
- b. Fiscal Year of Appropriation: (AUTO-POPULATED FIELD)
- c. Grant Program Name: (AUTO-POPULATED FIELD)
- d. Grant Number: (AUTO-POPULATED FIELD)
- e. Completion & Submission Date: (AUTO-POPULATED FIELD)
- f. Name of Person Completing Form:
- g. Total Award Funding: (AUTO-POPULATED FIELD)
- h. Start Date: (AUTO-POPULATED FIELD)
- i. End Date: (AUTO-POPULATED FIELD)
- j. Days of Performance Period: (COMPUTED FIELD: END DATE - START DATE)
- k. Days Elapsed: (COMPUTED FIELD: SUBMISSION DATE - START DATE)
- l. Percentage Elapsed: (COMPUTED FIELD: DAYS ELAPSED / DAYS OF PERF. PERIOD)

Award Activity

1. Please describe every key activity that is currently underway and/or has been completed during the reporting period.

| Activity/Milestone/Function | Due Date | Progress Status: NOT STARTED; STARTED BUT NOT ON TRACK; STARTED AND ON TRACK; COMPLETED | Percentage Complete | Comments and/or Explanation |
|------------------------------------|----------|--|---------------------|-----------------------------|
| | | | | |
| | | | | |
| | | | | |
| <i>(SECTION EXPANDS AS NEEDED)</i> | | | | |

2. Please indicate every key activity that will be undertaken during the next reporting period.

| Activity/Milestone/Function | Due Date | Progress Status: NOT STARTED; STARTED BUT NOT ON TRACK; STARTED AND ON TRACK; COMPLETED | Percentage Complete | Comments and/or Explanation |
|------------------------------------|----------|--|---------------------|-----------------------------|
| | | | | |
| | | | | |
| | | | | |
| <i>(SECTION EXPANDS AS NEEDED)</i> | | | | |

- 3. Please state approximate percentage of deliverables for the award completed to date.
- 4. Overall, the award is on target to accomplish its stated goals.
1= Strongly Disagree 2=Disagree 3=Agree 4=Strongly Agree
- 5. Since the start of the award, does your organization or any of the award's sub-awardees, contractors, or partners have any unresolved audit findings?
1=Yes, there are unresolved audit findings 2=No, there are no unresolved audit findings
- 6. Any concern, current or anticipated, with your sub-awards, contracts, or partnerships?
1=No 2=Yes
- 7. Does the award face any other challenges or obstacles, current or anticipated?
1=No 2=Yes
- 8. Is assistance required in overcoming anything related to 6 or 7?
1=No 2=Yes
- 9. The assistance you have received from HUD has helped resolve your challenges or obstacles?
*1= Strongly Disagree 2=Disagree 3=Agree 4=Strongly Agree
5=NA, No Assistance Received from HUD*
- 10. Has the award or your organization had any media coverage?
*1=Yes, only positive 2=Yes, it has only been negative
3=Yes, both positive and negative 4=No media coverage*
- 11. Was the award properly staffed during the reporting period?
*1=No, we currently have vacancies & plan to fill them in the next 30 days
2=No, we currently have vacancies & plan to fill them in 31 to 60 days
3=No, we currently have vacancies & we anticipate filling them 61+ days
4=No, we currently have vacancies and do not plan to fill them
5=Yes, we are fully staffed*

Award Budget

- 12. Please state the total HUD award funds spent to date.
- 13. Is the award currently on budget (based on the award's official budget)?
1=No 2=Yes
- 14. Does the award need, or will it need, a change to its official budget?
*1=Yes, we need a change to the budget now 2=Yes, we anticipate needing a budget change
3=No, we do not have or anticipate a need to change the budget*
- 15. Do you anticipate all award funds being spent by the end of the award period?
1=No 2=Yes
- 16. What is the award's match/leverage dollar requirement?
- 17. Please state the match/leverage funds spent to date.
- 18. Is the award on track to meet its match/leverage amount of funds?
*1=Yes, we've met the match/leverage amount 2=Yes, we anticipate meeting the match/leverage amount
3=No, we will not meet the match/leverage amount*

Program Impact

- 19. The award is making progress toward all its goals, objectives, outcomes, program impacts.
1= Strongly Disagree 2=Disagree 3=Agree 4=Strongly Agree
- 20. We foresee any changes needed to the current goals, objectives, outcomes or impacts.
1= Strongly Disagree 2=Disagree 3=Agree 4=Strongly Agree
- 21. Would you consider applying again for this type of grant program?
1=No 2=Yes
- 22. Are there any promising, innovative, or best practices to share?
1=No 2=Yes
- 23. Based on your experience, would you be willing to do future business with the program office after the completion of this grant?
- 24. Would you be comfortable in providing constructive feedback on your experience with the program office? If yes, we'll contact you.
1=No 2=Yes
- 25. Would you like to have a conversation with your HUD point of contact?
1=No 2=Yes

Narrative Feedback (IF A COMMENT IS SPECIFIC TO AN ITEM ABOVE, THEN PLEASE INDICATE THE ITEM NUMBER IN YOUR NARRATIVE.)

Public reporting burden for this collection of information is estimated to average 30 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.