

# Paperwork Reduction Act Submission

Please read the instruction before completing this form. For additional forms or assistance in completing this form, 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.

<p>1. Agency/Sub agency Originating Request:  <b>U.S. Department of Housing and Urban Development</b>                  Office of Public and Indian Housing</p>	<p>2. OMB Control Number:                  a. 2577-0083                  b. <input type="checkbox"/> None</p>																																		
<p>3. Type of information collection: (check one)</p> <p>a. <input type="checkbox"/> New Collection                  b. <input checked="" type="checkbox"/> Revision of a currently approved collection                  c. <input type="checkbox"/> Extension of a currently approved collection                  d. <input type="checkbox"/> Reinstatement, <b>without change</b>, of previously approved collection for which approval has expired                  e. <input type="checkbox"/> Reinstatement, <b>with change</b>, of previously approved collection for which approval has expired                  f. <input type="checkbox"/> Existing collection in use without an OMB control number</p> <p>For b-f, note item A2 of Supporting Statement instructions.</p>	<p>4. Type of review requested: (check one)</p> <p>a. <input checked="" type="checkbox"/> Regular                  b. <input type="checkbox"/> Emergency - Approval requested by                  c. <input type="checkbox"/> Delegated</p> <p>5. Small entities: Will this information collection have a significant economic impact on a substantial number of small entities?  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>6. Requested expiration date:                  a. <input checked="" type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other (specify)</p>																																		
<p>7. Title:                  Family Report, MTW Family Report, MTW Expansion Family Report</p>																																			
<p>8. Agency form number(s): (if applicable)                  Form HUD-50058 Family Report, Form HUD-50058 MTW Family Report, Form HUD-50058 MTW Expansion Family Report</p>																																			
<p>9. Keywords:                  'Housing, Low-Income Housing, Tenants, Family Report; Social Security, Supplemental Security Income, wages, unemployment benefits'</p>																																			
<p>10. Abstract:                  Tenant data is collected to understand demographic, family profile, income, and housing information for participants in the Public Housing, Section 8 Housing Choice Voucher, Section 8 Project Based Certificate, Section 8 Moderate Rehabilitation, Moving to Work Demonstration, and MTW Expansion programs. This data also allows HUD to monitor the performance of programs and the performance of public housing agencies that administer the programs. No changes to the currently approved HUD-50058 and HUD-50058 MTW. The HUD-50058 MTW Expansion is a new form, a derivative of the HUD-50058 and HUD-50058 MTW, created to be able to collect data from the MTW expansion PHAs. The MTW expansion PHAs are the 100 PHAs designated as MTW pursuant to the 2016 Expansion Statute.</p>																																			
<p>11. Affected public: (mark primary with "P" and all others that apply with "X")</p> <p>a. <input checked="" type="checkbox"/> Individuals or households    e. <input type="checkbox"/> Farms                  b. <input type="checkbox"/> Business or other-for-profit    f. <input type="checkbox"/> Federal Government                  c. <input type="checkbox"/> Not-for-profit institutions    g. <input checked="" type="checkbox"/> State, Local or Tribal Government</p>	<p>12. Obligation to respond: (mark primary with "P" and all others that apply with "X")</p> <p>a. <input type="checkbox"/> Voluntary                  b. <input checked="" type="checkbox"/> Required to obtain or retain benefits                  c. <input type="checkbox"/> Mandatory</p>																																		
<p>13. Annual reporting and recordkeeping hour burden:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. Number of respondents</td> <td style="text-align: right;">4153</td> </tr> <tr> <td>b. Total annual responses</td> <td style="text-align: right;">2,933,713.00</td> </tr> <tr> <td>    Percentage of these responses collected electronically</td> <td style="text-align: right;">100%</td> </tr> <tr> <td>c. Total annual hours requested</td> <td style="text-align: right;">1,104,087.33</td> </tr> <tr> <td>d. Current OMB inventory</td> <td style="text-align: right;">1,104,087.33</td> </tr> <tr> <td>e. Difference (+, -)</td> <td style="text-align: right;">0</td> </tr> <tr> <td>f. Explanation of difference:</td> <td></td> </tr> <tr> <td>    1. Program change:</td> <td style="text-align: right;">0</td> </tr> <tr> <td>    2. Adjustment:</td> <td></td> </tr> </table>	a. Number of respondents	4153	b. Total annual responses	2,933,713.00	Percentage of these responses collected electronically	100%	c. Total annual hours requested	1,104,087.33	d. Current OMB inventory	1,104,087.33	e. Difference (+, -)	0	f. Explanation of difference:		1. Program change:	0	2. Adjustment:		<p>14. Annual reporting and recordkeeping cost burden: (in thousands of dollars)                  Do not include costs based on the hours in item 13.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. Total annualized capital/startup costs</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>b. Total annual costs (O&amp;M)</td> <td style="text-align: right;">\$19,321,528.33</td> </tr> <tr> <td>c. Total annualized cost requested</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>d. Current OMB inventory</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>e. Difference</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>f. Explanation of difference:</td> <td></td> </tr> <tr> <td>    1. Program change:</td> <td></td> </tr> <tr> <td>    2. Adjustment:</td> <td></td> </tr> </table>	a. Total annualized capital/startup costs	\$0.00	b. Total annual costs (O&M)	\$19,321,528.33	c. Total annualized cost requested	\$0.00	d. Current OMB inventory	\$0.00	e. Difference	\$0	f. Explanation of difference:		1. Program change:		2. Adjustment:	
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<p>15. Purpose of Information collection: (mark primary with "P" and all others that apply with "X")</p> <p>a. <input type="checkbox"/> Application for benefits    e. <input checked="" type="checkbox"/> Program planning or management                  b. <input checked="" type="checkbox"/> Program evaluation    f. <input checked="" type="checkbox"/> Research                  c. <input checked="" type="checkbox"/> General purpose statistics    g. <input checked="" type="checkbox"/> Regulatory or compliance                  d. <input type="checkbox"/> Audit</p>	<p>16. Frequency of recordkeeping or reporting: (check all that apply)</p> <p>a. <input type="checkbox"/> Recordkeeping    b. <input type="checkbox"/> Third party disclosure                  c. <input checked="" type="checkbox"/> Reporting:</p> <table style="width: 100%;"> <tr> <td>1. <input type="checkbox"/> On occasion</td> <td>2. <input type="checkbox"/> Weekly</td> <td>3. <input checked="" type="checkbox"/> Monthly</td> </tr> <tr> <td>4. <input checked="" type="checkbox"/> Quarterly</td> <td>5. <input type="checkbox"/> Semi-annually</td> <td>6. <input checked="" type="checkbox"/> Annually</td> </tr> <tr> <td>7. <input type="checkbox"/> Biannually</td> <td>8. <input type="checkbox"/> Other (describe)</td> <td></td> </tr> </table>	1. <input type="checkbox"/> On occasion	2. <input type="checkbox"/> Weekly	3. <input checked="" type="checkbox"/> Monthly	4. <input checked="" type="checkbox"/> Quarterly	5. <input type="checkbox"/> Semi-annually	6. <input checked="" type="checkbox"/> Annually	7. <input type="checkbox"/> Biannually	8. <input type="checkbox"/> Other (describe)																										
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<p>17. Statistical methods:                  Does this information collection employ statistical methods?  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Agency contact: (person who can best answer questions regarding the content of this submission)                  Name: <b>Wendalyn Hovendick</b>                  Phone: <b>202-402-3709</b></p>																																		

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## 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 collect (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 Program Official: Marianne Nazzaro  X	Date:
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Signature of Senior Officer or Designee:  X Colette Pollard, Departmental Reports Management Officer, Office of the Chief Information Officer	Date:
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# Supporting Statement for Paperwork Reduction Act Submissions

## A. Justification

### 1. Why is this information necessary? Identify any legal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating/authorizing the collection of information.

This Paperwork Reduction Act submission describes the new form added to this collection, the HUD-50058 MTW Expansion Family Report, which is a derivative of the Form HUD-50058. The Form HUD-50058 Family Report and Form HUD-50058 Moving to Work (MTW) Family Report, a derivative of the Form HUD-50058, have no updates at this time.

The Office of Public and Indian Housing of the Department of Housing and Urban Development (HUD) provides funding to Public Housing Agencies (PHAs) to administer assisted housing programs. The Form HUD-50058, Form HUD-50058 MTW Family Report, and Form HUD-50058 MTW Expansion Family Report solicit demographic, family profile, income and housing information on the entire nationwide population of tenants residing in assisted housing. This information allows HUD to monitor and evaluate its programs as required under the following:

- The United States Housing Act of 1937 (42 U.S.C 1437 et seq.)
- Housing and Community Development Act of 1987 (42 U.S.C. 3543(a) – authorizes PHAs to collect social security data)
- Title VI of the Civil Rights Act of 1964 (42 U. S. C. 2000d);
- The Fair Housing Act (42 U. S. C. 3601-19)
- Quality Housing and Work Responsibility Act of 1998 (Public Law 105-276 Title V)
- HUD Appropriations Act of 1996 (Public Law 104-134 Section 204)
- 2016 MTW Expansion Statute – Fiscal Year 2016 Appropriations Act (Public Law 114-113 Section 239)
- “Electronic Transmission of Required Family Data for Public Housing, Indian Housing, and the Section 8 Rental Certificate, Rental Voucher, and Moderate Rehabilitation Programs” (24 CFR Part 908)
- 24 CFR Part 5 (5.210 through 5.240)

The Form 50058, Form 50058-MTW, and Form 50058-MTW Expansion provide information about program participants at the time of an action that can affect program participation and rental subsidy calculation. Actions include admittance to the program, annual reexamination of income, change of unit, and end of program participation.

For all household members, the Form 50058, Form 50058-MTW, and Form 50058-MTW Expansion collects name, address, social security number, ethnicity, race, citizenship, gender, assets, income, and expected income. Additional data is collected on employment status, assistance received under other federal assistance programs (TANF, Medicaid, etc.). For head of households, benefits such as health insurance provided by employers is provided for households participating in the Family Self-Sufficiency (FSS) and/or MTW Self-Sufficiency programs. Finally, the form also shows the Total Tenant Payment each household contributes towards rent, and other information about rental subsidy calculations.

### 2. How is the information collected and how is the information to be used?

This information is collected from participants in the Office of Public and Indian Housing’s public housing and housing choice voucher (HCV programs). It is collected from program participants by Public Housing Agencies (PHAs), who in turn submit the data to HUD using form HUD-50058, Form 50058-MTW, and Form 50058-MTW Expansion. PHAs are typically chartered independent entities established by the state legislature to administered affordable housing programs in a jurisdiction. Some are units of local government.

The information is collected from tenants at any time there is a change in circumstances or an action that can affect the calculation of rental subsidy to a participating household. This includes annual reexaminations of households to

determine if there have been any changes to households that can affect participation in the program or rental subsidy calculation. This information is collected from residents in a variety of formats. PHAs typically hold face-to-face interviews with adult household members to discuss any changes of circumstances or actions. This information is then used by PHA staff to fill out the Form HUD-50058, Form HUD-50058 MTW, or HUD-50058 MTW Expansion. Some PHAs allow program participants to provide the information to PHA staff via telephone or written communication; however, this is a matter of PHA policy.

PHAs are required to submit any revised HUD-50058s, 50058-MTWs, 50058-MTW Expansion forms to HUD monthly, and to provide at least one HUD-50058, 50058-MTW, or 50058-MTW Expansion for each household annually.

This information is utilized for the subsequent purposes:

- Analyze assisted housing programs;
- Determine the occupancy level of public housing and calculate the operating subsidy in accordance with 24 CFR 990;
- Permit PHAs to monitor their own reporting to identify favorable and unfavorable trends;
- Monitor PHAs and participants for compliance with program regulations and requirements;
- Fraud detection and prevention via rent/income monitoring;
- Housing inventory and development of program initiatives with emphasis on the housing of special needs groups; and
- Make available accurate demographic information depicting tenant characteristics to Congress and other interested parties (however, this data is scrubbed of any personally identifiable information).

Occasionally, this data is used for research purposes, such as modeling the effect of proposed rent reforms. Research may be conducted by research firms under contract to HUD. However, this data is scrubbed of personally identifiable information such as social security numbers and names before it is used for this purpose, and all procedures for handling of confidential information, such as restricted access by contractors and secure facilities, are followed.

**3. Describe whether, and to what extent, the collection of information is automated (item 13b1 of OMB form 83-i). If it's not automated, explain why not. Also describe any other efforts to reduce burden.**

Several vendors offer Housing Agency management software, including creation/submission of 50058s. HUD offers a free software program called Family Reporting Software (FRS) to all PHAs. Data collected via Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports is electronically submitted by the PHAs into the PIH Information Center (PIC) on a monthly basis. PIC is an automated database system which exchanges this data, between Housing Authorities and Local HUD Offices. This data repository is also accessible to HUD Headquarters and field offices.

**4. Is this information collected elsewhere? If so, why cannot any similar information already available be used or modified.**

Tenant Characteristics directly impact the amount of subsidy for which a household is eligible under HUD's programs. HUD's eligibility requirements are distinct from any other federal program requirements, such as TANF, WIC, or SNAPs. Different programs use distinct household composition data to determine program eligibility. Therefore, while program participants may be reporting some of this information to other federal agencies, they are not reporting all of this data and it cannot be obtained through any other agency. Further, HUD requires a participant's social security number to verify tenant income, which affects rental subsidy calculation. This is necessary to ensure that the maximum number of families can be served in the public housing and housing choice voucher programs.

**5. Does the collection of information impact small businesses or other small entities (item 5 of OMB form 83-i)? Describe any methods used to minimize burden.**

This information collection has no impact on small businesses or other small entities.

**6. Describe the consequence to Federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.**

Failure to collect this data at least annually would impede HUD's ability to provide accurate subsidy to PHAs, create effective program polices, measure the impact of these program policies and funding, and provide accurate information to OMB, Congress and the public.

**7. Explain any special circumstances that would cause an information to be collected in a manner:**

- requiring respondents to report information to the agency more than quarterly;  
Although public housing agencies are only required to submit data annually for each participating household, families move into and out of subsidized units throughout the year. Therefore, the agencies complete Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports for individual families at different times during the year. HUD requires all agencies to electronically submit the forms that they have completed to the PIC system at least monthly. The Department received OMB approval on September 6, 2006, to require PHAs with less than 100 units to submit Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports data monthly as opposed to quarterly.
- requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it;  
**Not Applicable**
- requiring respondents to submit more than an original and two copies of any document;  
**Not Applicable**
- requiring respondents to retain records other than health, medical, government contract, grant-in-aid, or tax records for more than three years;  
**Not Applicable**
- in connection with a statistical survey, that is not designed to produce valid and reliable results than can be generalized to the universe of the study;  
**Not Applicable**
- requiring the use of statistical data classification that has not been reviewed and approved by OMB;  
**Not Applicable**
- that includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or  
**Not Applicable**
- requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.  
**Not Applicable**

8. **Identify the date and page number of the *Federal Register* notice (and provide a copy) soliciting comments on the information. Summarize public comments and describe actions taken by the agency in response to these comments. Describe all efforts to consult with persons outside the agency to obtain them.**

For the Form HUD-50058 and Form HUD-50058 MTW, HUD published a Notice of Proposed Information Collection for Public Comments in the *Federal Register*, Volume 81; Number 186; Page 66070, dated September 26, 2016. The public was given until November 25, 2016, to submit comments on the proposed information collection. HUD received no comments on this proposed collection.

For the Form HUD-50058 MTW Expansion, HUD published a Notice of Proposed Information Collection for Public Comments in the *Federal Register*, Volume 84; Number 160; Page 42943, dated August 19, 2019.

9. **Explain any payments or gifts to respondents, other than remuneration of contractors or grantees.**

No payment or gift will be granted to the respondents.

10. **Describe any assurance of confidentiality provided to respondents and the basis for assurance in statute, regulation or agency policy.**

In accordance with the Federal Privacy Act of 1974, 5 U.S.C. 552a, public housing agencies must inform applicants and resident families about possible Federal Government uses of information contained on Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports, and the systems to monitor reductions in subsidy payment errors. Form HUD-9886 *Authorization for the Release of Information/Privacy Act Notice*, is used to inform residents of the authority for the collection of information, the purpose of the data collection, and the uses of the information collected by the PHAs pursuant to the agencies' obligation to submit information to HUD. Tenants give consent for the collection and use of information by signing Form HUD-9886.

Access to PIC and thus the collection of 50058 information is highly restricted. HUD staff seeking access to the PIC system must request access through HUD's Digital Identity and Access Management System (DIAMS) and be approved for such access by their immediate supervisor. The request must be specific as to the nature of the access (view only, submissions, etc.) to ensure integrity. PHA access must be requested through the agency's respective field office. Access is time-limited and must be renewed periodically.

Demographic data provided to Congress and other interested parties is scrubbed of any personally identifiable information. In instances where research may be conducted by research firms under contract to HUD, this data is scrubbed of personally identifiable information and all procedures for handling of confidential information, such as restricted access by contractors and secure facilities, are followed.

11. **Justify any questions of a sensitive nature, such as sexual, religious beliefs, and other matters that are commonly considered private**

Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports do not collect information of a sensitive nature such as sexual behavior and attitudes or religious beliefs. Private information such as income, social security numbers and public benefits, however, is required. This information is required for proper administration of the assisted housing programs and for monitoring program performance. This information is used to determine the amount of subsidy for which each participant household is eligible. Without this information, HUD and PHAs cannot determine program eligibility and the amount of federal subsidy each PHA is to receive in order to continue to operate the public housing and housing choice voucher programs. Please refer to section ten for steps taken to attain the consent of residents to collect such information.

12. **Estimate public burden: number of respondents, frequency of response, annual hour burden. Read the complete instructions on the form 83i. Explain how the burden was estimated. Generally, estimates should not include burden hours for customary and usual business practices. Provide a table to describe the elements of the burden. Break out each form used.**
- if this collection uses more than one form, provide separate estimates for each form and aggregate the hour burdens in item 13 of OMB Form 83i; and

- provide estimates of annualized cost to respondents for the hour burdens for collections of information, identifying and using appropriate wage rate categories.
- The cost of contracting out or paying outside parties for information collection activities should not be included here. Instead this cost should be included in Item 13.

**Summary:**

<b>Estimate of the Hour Burden of the Collection of Information</b>	
Number of responses	2,933,713.00
Frequency of Response	Annually
Annual Hour Burden	1,104,087.33
Estimated Annual Cost to Respondents	\$19,321,528.33

It takes approximately 40 minutes for PHA staff to collect and input new admission data into each Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports record. Only a portion of the data fields are filled out at each time the form is completed. The fields that are filled are dependent upon the action type or reason for the form’s completion. After the initial year of the forms’ use, the action type for the form will be recertification rather than new submission. The time it takes to complete a recertification is approximately half that of a new submission. Pre-entry of key information from the previous year is responsible for this time reduction.

Through consultation with financial experts in HUD-HHQ Office Field Operations, an amount of \$17.50 has been approximated to represent the national average as well as the average of the hourly rate for a clerical data entry as well as quality control on the entries.

**Detailed:**

<b>Information Collection</b>	<b>Number of Respondents (PHAs with Responses)</b>	<b>*Average Number of Responses per Respondent</b>	<b>Total Annual Responses</b>	<b>Burden Hours per Response</b>	<b>Total Hours</b>	<b>Hourly Cost</b>	<b>Total Annual Cost</b>
Form HUD-50058 New Admission	4,014	87	349,218.00	0.66667 (40 Minutes)	232,812.00	\$17.50	\$4,074,210.00
Form HUD-50058 Recertification	4,014	583	2,340,162.00	0.33333 (20 Minutes)	780,054.00	\$17.50	\$13,650,945.00
Form HUD-50058 MTW New Admission	39	529	20,631.00	0.66667 (40 Minutes)	13,754.00	\$17.50	\$240,695.00
Form HUD-50058 MTW Recertification	39	4,018	156,702.00	0.33333 (20 Minutes)	52,234.00	\$17.50	\$914,095.00
Form HUD-50058 MTW Expansion New Admission	100	87	8,700.00	0.66667 (40 Minutes)	5,800.00	\$17.50	\$101,500.00
Form HUD-50058 MTW Expansion Recertification	100	583	58,300.00	0.33333 (20 Minutes)	19,433.33	\$17.50	\$340,083.33
<b>Totals</b>	<b>4,153</b>		<b>2,933,713.00</b>		<b>1,104,087.33</b>		<b>19,321,528.33</b>

\*Average Number of Responses per Respondent = Total Annual Responses / Number of Respondents

**Estimated annualized hourly cost to respondents (PHA); Form HUD-50058:** To report using Form HUD-50058 Family Report, it will cost the average PHA \$1,015.00 annually to enter and submit all data for New Admission and \$3,400.83 annually for Recertification.

- Total Cost for all PHAs; Form HUD-50058 Family Report New Admissions =
  - 232,812.00 Total Hours X \$17.50/hour = \$4,074,210.00
- Cost per PHA = \$4,074,210.00 Total cost for all PHAs ÷ 4,014 PHAs (with responses) = \$1,015.00 per PHA annually
- Total Cost for all PHAs; Form HUD -50058 Family Report Recertification =
  - 780,054.00 Total Hours X \$17.50/hour = \$13,650,945.00
- Cost per PHA = \$13,650,945.00 Total cost for all PHAs ÷ 4,014 PHAs (with responses) = \$3,400.83 per PHA annually

**Estimated annualized hourly cost to respondents (PHA); Form HUD-50058 MTW:** To report using Form HUD-50058 MTW Family Report, it will cost the average PHA \$6,171.67 annually to enter and submit all data for New Admissions and \$23,438.33 annually for Recertification.

The annual burden is calculated by determining the following:

- Total Cost for all PHAs; Form HUD-50058 MTW Family Report New Admission =
  - 13,754.00 Total Hours X \$17.50/hour= \$240,695.00
- Cost per PHA = \$240,695.00 Total cost for all PHAs ÷ 39 PHAs (with responses) = \$ 6,171.67 per PHA annually
- Total Cost for all PHAs; Form HUD-50058 MTW Family Report Recertification =
  - 52,234.00 Total Hours X \$17.50/hour= \$914,095.00
- Cost per PHA = \$914,095.00 Total cost for all PHAs ÷ 39 PHAs (with responses) = \$23,438.33 per PHA annually

**Estimated annualized hourly cost to respondents (PHA); Form HUD-50058 MTW Expansion:** To report using Form HUD-50058 MTW Expansion Family Report, it will cost the average PHA \$1,015.00 annually to enter and submit all data for New Admissions and \$3,400.83 annually for Recertification.

The annual burden is calculated by determining the following:

- Total Cost for all PHAs; Form HUD-50058 MTW Expansion Family Report New Admission =
  - 5,800.00 Total Hours X \$17.50/hour= \$101,500.00
- Cost per PHA = \$101,500.00 Total cost for all PHAs ÷ 100 PHAs (with responses) = \$1,015.00 per PHA annually
- Total Cost for all PHAs; Form HUD-50058 MTW Expansion Family Report Recertification =
  - 19,433.33 Total Hours X \$17.50/hour= \$340,083.33
- Cost per PHA = \$340,083.33 Total cost for all PHAs ÷ 100 PHAs (with responses) = \$3,400.83 per PHA annually

**13. Estimate of the annual cost to respondents or recordkeepers (do not include the cost of hour burden shown in Items 12 and 14). Read the complete instructions on the form 83i.**

*Total annual capital and startup cost burden to PHA:*

Estimating annual capital and startup cost burdens to PHAs is difficult to determine. Most respondents (PHAs) utilize automated software for the collection, transmission and storage of Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports. Several vendors provide software services to PHAs however, the software is used for several day-to-day business functions not, exclusively form reporting.

Additionally, HUD provides all PHAs with free Family Reporting Software (FRS). PHAs can use this software to electronically submit Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports data to PIC.



*Total operation and maintenance of services components:*

Estimating the cost to PHAs for the transmission of the Family Reports is difficult to estimate because of the difference in PHA, size, organization structure and administrative capability. A significant cost factor that can be tracked is the time involved to collect the data, fill out the form and electronically submit the data. This information is provided in section 12.

**14. Estimate annualized costs to the Federal government.**

The estimated annualized cost to the Federal government is \$3,143,000. Based on most recent data available, the total annual cost to maintain the PIC system, which includes the modules for the Form HUD-50058, Form HUD-50058 MTW, and Form HUD-50058 MTW Expansion Family Reports, is \$893,000. The developmental cost is \$1,700,000. The cost to HUD headquarters staff to monitor the system is \$150,000 (5%-6% of contractor cost). HUD estimates that contractors and HUD staff spend 40% of their time on maintenance and monitoring the modules. The annual cost of HUD headquarters staff labor to monitor the module is approximately \$100,000. The annual cost of HUD headquarters staff to maintain the module is \$300,000.

**15. Explain any program changes or adjustments reported in items 13 and 14 of the OMB Form 83i.**

Item 14 contains a reference to the Form HUD-50058 MTW Expansion, which is a new form that is a derivative of the HUD-50058 and Form HUD-50058 MTW. The Form HUD-50058 MTW Expansion Family Report will be submitted by PHAs into a new area of the PIC system that is currently being developed. The Form HUD-50058 and Form HUD-50058 MTW Family Reports will continue to be submitted in the PIC system in their existing modules. The PHAs that will be submitting the Form HUD-50058 MTW Expansion Family Report previously submitted the Form HUD-50058 Family Report.

**16. If the information will be published, outline plans for tabulation and publication.**

The PIC system captures the information from Form HUD-50058 and Form HUD-50058 MTW Family Reports and creates monthly reports such as the Resident Characteristics Report which is available to the public on the HUD website. It provides demographic and income statistics about tenant families that participate in the Housing Programs.

**17. Explain any request to not display the expiration date.**

Not applicable. HUD will display the OMB control number and expiration date on the form.

**18. Explain each exception to the certification statement identified in item 19.**

There are no exceptions to the certification statement.

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

This collection of information does not employ statistical methods.