CLOSEOUT CERTIFICATION

Cooperative <i>E</i> Organization	Agreement Number Name	
funds provided award agreeme award; that pro- claims; that the	tified that, to the best of my knowledge, all activities undertaken, or to be undertaken, wit under this agreement have been carried out, or will be carried out, in accordance with the nt; that no fraud, waste or mismanagement has occurred in the administration of this per provision has been made for the payment of all unpaid costs and unsettled third-party Department of Housing and Urban Development is under no obligation to make any nents to the awardee.	
resulting from objectives. I u property for an expiration of the records will be	ed that any program income resulting from this award or any remaining real property this award, even if obtained after award close-out, shall be used to further award inderstand that prior HUD approval must be obtained to use either program income or real y other purpose other than that of the original project for a period of five years from the uis award. At this time, program income consists of \$ Accounting kept on the use of these funds and any additional program income. I understand that HU ompliance with the terms of this agreement at any time.	
paid for by fun organizations a the required Pr	e statements as marked below accurately reflect the status of real and personal property ds under this award and any inventions, patents and copyrights resulting from this nd/or subcontractor's work under this award. As applicable, I have accurately completed operty Statement (Attachment 7), the Inventions, Patents and Copyrights Statement, and all performance and financial reports, where required and as indicated below.	
□Yes □No	Was real or personal (expendable and non-expendable) property paid for, in whole or in part, with funds from this award?	
□Yes □No	IF YES TO ABOVE: I completed the Property Statement, HUD-4136.	
□Yes □No	Have inventions, patents, or copyrights resulted from this award or from any subcontractor's work under this cooperative agreement?	
□Yes □No	IF YES TO ABOVE: I completed the Inventions, Patents and Copyrights Statement and HUD Form 770.	
□Yes □No	I completed all performance and financial reports, in accordance with the terms and conditions of the award.	
Please provide comments, if applicable:		

	OMB Approval No. 2506-0197 (Exp. 03/31/2023)
Authorized Official Name	
Authorized Official Title	
Date	

NOTE: Any false statements knowingly or deliberately made are subject to civil or criminal penalties under Section 1001 of Title 18 of the U.S. Code.

Public reporting burden for this collection of information is estimated to average 0.5 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected for Community Compass Technical Assistance and Capacity Building Program Notice of Funding Availability (NOFA) and will be used for NOFA application review. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. No confidentiality is assured."