

OMB Control No. 0970-0449

LIHEAP Performance Data Form for Federal Fiscal Year (FFY) 2020

Expiration Date: 03/31/21

MODULE 1 (LIHEAP Grantee Survey)

SECTION I. GRANTEE INFORMATION

Grantee Name: _____ Date: _____ Contact Person: _____ Phone Number: _____

SECTION II. REPORTING REQUIREMENTS

The 50 States and the District of Columbia are required to complete the LIHEAP Grantee Survey Section of the LIHEAP Performance Data Form in providing estimates of sources and uses of funds, average benefits, and the maximum income cutoff in dollars for a 4-person household as of 10/1/16 for each type of LIHEAP assistance provided in FFY 2020. Timely response to questions on this report is mandatory. The information will be used to respond to Congressional inquiries, to calculate LIHEAP benefit targeting, and to provide Federal Fiscal Year data for the Department's annual LIHEAP Report to Congress that is required under Section 2610 of Public Law 967-35, as amended. The data are also used in measuring LIHEAP performance under the Government Performance and Results Act (GPRA) of 1993, as amended by the GPRA Modernization Act of 2010. As the reported data are aggregated, the information in this report is not considered to be confidential.

SECTION III. ESTIMATED SOURCES OF LIHEAP FUNDS

	ALL OF FFY 2020 10/1/2019 TO 9/30/2020 Amount Rounded to the Nearest Dollar
A. All Funds Except CARES Act and other Supplemental Funding (Items 1-9)	
1. FFY LIHEAP Block Grant Allotment (Net of Indian Tribal Set-Asides)--regular funds	\$0
2. FFY Emergency Contingency Funds (Net of Indian Tribal Set-Asides)	\$0
3. LIHEAP Block Grant Funds from Previous FFY Reallotted to FFY	\$0
4. Previous FFY Unobligated Emergency Contingency Funds, not Subject to 10% Carryover Limit	\$0
5. All Funds Carried Over From Previous FFY (except Funds in item 4 and 9 in this Section)	\$0
6. Petroleum Violation Escrow (Oil Overcharge) Funds Obligated in FFY	\$0
7. FFY Residential Energy Assistance Challenge (REACH) Program	\$0
8. FFY Leveraging Incentive Award	\$0
9. Previous FFY Leveraging Incentive Award obligated in FFY	\$0
B. Estimated Subtotal Sources of Funds--Non-CARES/Supplemental Funding	
10. Sum of Items 1-9. This should equal the sum in Section IV. Column D, Item 14.	\$0
C. All Supplemental Funds (Items 11-13)	
11. CARES Act Allotment (Net of Indian Tribal Set-Asides). This should equal the sum in Section IV. Column D, Item 25	\$0
12. [RESERVED, if applicable] Other Supplemental1 Allotment (Net of Indian Tribal Set-Asides). This should equal the sum in Section IV. Column D, Item :	\$0
13. [RESERVED, if applicable] Other Supplemental2 Allotment (Net of Indian Tribal Set-Asides). This should equal the sum in Section IV. Column D, Item :	\$0
D. Estimated Subtotal Sources of Supplemental Funds	
14. Sum of Items 11-13. This should equal the sum in Section IV. Column D, Item 48.	\$0
E. Estimated Total of Sources of All Funds	
15. Item 10 plus Item 14. This should equal the sum in Section IV. Column D, Item 49.	\$0

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D. Type of LIHEAP Assistance--CARES Act Funds (Items 15-18)	All of FFY 2020 (10/1/2019) to 9/30/2020		
	Amount Rounded to the Nearest Dollar		
	Total Funds/Awards	Average Household Benefit	Maximum Annual Dollar Income for 4-Person Household as of the effective
15. Heating Assistance Benefits--CARES Act Funds	\$0	\$0	\$0
16. Cooling Assistance Benefits--CARES Act Funds	\$0	\$0	\$0
17. Crisis Benefits by Type--CARES Act Funds			
a. Winter Crisis Benefits--CARES Act Funds	\$0	\$0	\$0
b. Summer Crisis Benefits--CARES Act Funds	\$0	\$0	\$0
c. Year-round Crisis Benefits--CARES Act Funds	\$0	\$0	\$0
d. Other Crisis Benefits--CARES Act Funds	\$0		
(1) Specify--CARES Act Funds	\$0	\$0	\$0
(2) Specify--CARES Act Funds	\$0	\$0	\$0
(3) Specify--CARES Act Funds	\$0	\$0	\$0
18. Weatherization Assistance Benefits--CARES Act Funds	\$0		\$0

All Households with 12 Consecutive Months of Bill Data (Main Fuel and Electric)--CARES Act Funds	All Households	Bill Payment-Assisted Household Main Fuel				
		Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
19. Average Annual Total LIHEAP Benefit per Household (including Heating, Cooling, Crisis, Supplemental Benefits)-- CARES Act Funds						

E. Other Permitted Uses of LIHEAP Funds--CARES Act Funds (Items 20-24)	
20. Nominal Payments--CARES Act Funds	\$0
21. Unobligated CARES Act Funds Carried Over to next FFY	\$0
22. FFY LIHEAP Block Grant Allotment Used to Identify, Develop & Demonstrate Leveraging Incentive Activities--CARES Act Funds	\$0
23. Assurance 16 Activities--CARES Act Funds	\$0
24. Administration/Planning Costs--CARES Act Funds	\$0

F. Estimated Total Uses of Funds--CARES Act Funds	
25. Sum of Items 15-18 and 20-24. This should equal the sum in Section III. Column D, Item 11.	\$0
Q3. Obligated funding for a given type of assistance in current FFY, but will serve households in the subsequent FFY--CARES Act Funds	yes/no
Q4 Average Household Benefits are estimated due to unique program operation, rather than directly calculated--CARES Act Funds	yes/no

LIHEAP Performance Data Form for Federal Fiscal Year (FFY) 2020
Module II (Required LIHEAP Performance Measures)

V. ENERGY BURDEN TARGETING

	Bill Payment-Assisted Household Main Fuel					
	All Households	Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
A. Unduplicated Number of LIHEAP Bill Payment-Assisted Households	Auto-Calculated	0	0	0	0	0
B. All Households with 12 Consecutive Months of Bill Data (Main Fuel and Electric)						
1. Unduplicated Number of Households with 12 Consecutive Months of Bill Data (Main Fuel and Electric)	Auto-Calculated	0	0	0	0	0
2. Average Annual Household Income	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
3. Average Annual Total LIHEAP Benefit per Household (including Heating, Cooling, Crisis, Supplemental Benefits)	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
4. Average Annual Main Heating Fuel Bill	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
5. Average Annual Electricity Bill	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
6. Average Annual Total Residential Energy Bill	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
7. Average Annual Burden Before Receiving LIHEAP	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
8. Average Annual Burden After Receiving LIHEAP	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
9. Average Percentage Point Change in Energy Burden	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
10. Average Percentage Reduction in Energy Burden	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
C. High Burden Households with 12 Consecutive Months of Bill Data (Main Fuel and Electric)						
1. Unduplicated Number of High Burden Households (Top 25%) with 12 Consecutive Months of Bill Data (Main Fuel and Electric)	Auto-Calculated	0	0	0	0	0
2. Average Annual Household Income for High Burden Households	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
3. Average Annual Total LIHEAP Benefit per High Burden Household (including Heating, Cooling, Crisis, Supplemental Benefits)	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
4. Average Annual Main Heating Fuel Bill for High Burden Households	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
5. Average Annual Electricity Bill for High Burden Households	Auto-Calculated	\$0	\$0	\$0	\$0	\$0
6. Average Annual Total Residential Energy Bill for High Burden Households	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
7. Average Annual Burden Before Receiving LIHEAP for High Burden Households	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
8. Average Annual Burden After Receiving LIHEAP for High Burden Households	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
9. Average Percentage Point Change in Energy Burden for High Burden Households	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
10. Average Percentage Reduction in Energy Burden for High Burden Households	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
D. Benefit Targeting Index for High Burden Households:	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated
E. Burden Reduction Targeting Index for High Burden Households:	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated	Auto-Calculated

VI. RESTORATION OF HOME ENERGY SERVICE

	Energy Source (where LIHEAP benefit was applied)					
	All Occurrences	Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
A. All Occurrences of LIHEAP Households that Had:						
1. Energy Service Restored After Disconnection	Auto-Calculated	0	0			
2. Fuel Delivered to Home that Ran Out of Fuel	Auto-Calculated			0	0	0
3. Repair/Replacement of Inoperable Home Energy Equipment	Auto-Calculated	0	0	0	0	0

VII. PREVENTION OF LOSS OF HOME ENERGY SERVICE

	Energy Source (where LIHEAP benefit was applied)					
	All Occurrences	Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
A. All Occurrences of LIHEAP Households that Had:						
1. Past Due Notice or Utility Disconnect Notice	Auto-Calculated	0	0			
2. Imminent Risk of Running out of Fuel	Auto-Calculated			0	0	0
3. Repair/Replacement of Operable Equipment to Prevent Imminent Home Energy Loss	Auto-Calculated	0	0	0	0	0

NOTES: Include any notes.

VIII. CERTIFICATION FOR REQUIRED SECTIONS I. - VII.

1A. I certify to the best of my knowledge and belief that this report is correct and complete for Administration and Congressional oversight the program and for the purposes set forth in the award letter.
 2A. Typed or Printed Name and Title of Authorized Certifying Official: _____
 3A. Signature of Authorized Certifying Official: (click to sign) _____

Date Submitted:
 Month Day Year

LIHEAP Performance Data Form for Federal Fiscal Year (FFY) 2020
LIHEAP Performance Measures
 Module III. (Optional LIHEAP Performance Measures)

OMB Control No. 0970-0449

Expiration Date: 03/31/21

V. ENERGY BURDEN TARGETING (OPTIONAL MEASURES)

A. All Households with 12 Consecutive Months of Bill Data (Main Fuel and Electric)	All Households	Bill Payment-Assisted Household Main Fuel				
		Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
1. Average Annual Electricity Usage	Auto-Calculated	0	0	0	0	0
2. Average Annual Main Heating Usage	Auto-Calculated	0	0	0	0	
B. High Burden Households with 12 Consecutive Months of Bill Data (Main Fuel and Electric)						
1. Average Annual Electricity Usage for High Burden	Auto-Calculated	0	0	0	0	0
2. Main Heating Usage for High Burden	Auto-Calculated	0	0	0	0	
C. Unduplicated Number of LIHEAP Bill Payment-Assisted Households that Use:						
1. Electricity as Supplemental Heating Fuel	Auto-Calculated		0	0	0	0
2. Wood as Supplemental Heating Fuel	Auto-Calculated	0	0	0	0	0
3. Other Supplemental Heating Fuel	Auto-Calculated	0	0	0	0	0
4. Central Air Conditioning	Auto-Calculated	0	0	0	0	0
5. Window/Wall A/C (including evaporative cooler)	Auto-Calculated	0	0	0	0	0

VI. RESTORATION OF HOME ENERGY SERVICE (OPTIONAL MEASURES)

A. Number of All LIHEAP-Assisted Households that Had:	All Households	Energy Source				
		Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
Unduplicated Count of Restorations of Home Energy Service	Auto-Calculated	0	0	0	0	0

VII. PREVENTION OF LOSS OF HOME ENERGY SERVICE (OPTIONAL MEASURES)

A. Number of All LIHEAP-Assisted Households that Had:	All Households	Energy Source				
		Electricity	Natural Gas	Fuel Oil	Propane	Other Fuels
Unduplicated Count of Preventions of Loss of Home Energy Service	Auto-Calculated	0	0	0	0	0

VIII. CERTIFICATION FOR OPTIONAL DATA

1A. I certify to the best of my knowledge and belief that this report is correct and complete for Administration and Congressional oversight the program and for the purposes set forth in the award letter.

2A. Typed or Printed Name and Title of Authorized Certifying Official:

3A. Signature of Authorized Certifying Official: (click to sign)

Date Submitted:
Month Day Year