TA Provider:	<name auto-populates="" award="" drgr="" in="" of="" recipient="" ta=""></name>
GTR (name and email):	<name and="" auto-populates="" drgr="" email="" gtr="" in="" of=""></name>
GTM/POTAC (name, email and phone):	<not applicable="" drgr="" in=""></not>

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Award #	Work Plan Type	Work Plan Category
<select #="" award="" the=""></select>	<select plan="" the="" type="" work=""> Administration TA - Aud TA - Embedded Support TA - Need Assessment TA - On Call Assistance TA One Analysis (Reporting) TA Delevening Workshops TA Developing Web Poducts TA Developing Web Andreads TA Developing Web Andreads TA Developing Web Andreads TA One Workshops TA One Workshops TA One Workshops TA Other Workshops TA Other Workshops TA Other Workshops TA Other Workshops TA Andread Support TA Support Devalcts TA Problem Solvage Clances TA Frain the Trainers Session TA Web hased learning TA Witten Products TA Witt</select>	 TA - Admin TA - Oardi TA - Data Rept & Mngmt TA - NatSDA TA - NoteSDA TA - Tochast TA - Tochast TA - Tochast TA - Web/Knowledge Mngmt TA - Web/Knowledge Mngmt TA - Written
Work Plan #	Work Plan Status	Work Plan Close Date
<enter #="" plan="" the="" work=""></enter>	<after "submitted"="" all="" change="" completing="" drgr,="" fields="" in="" status="" to=""></after>	<leave blank="" close="" plan="" ready="" to="" until="" work=""></leave>
Invoice Period:	# of Amendments (Approved by HUD)	Submitted Date
Monthly	<auto-populated drgr="" in=""></auto-populated>	<auto-populated drgr="" in=""></auto-populated>

Associated TA Requests:	
TA Request <leave blank=""></leave>	TA Request Status
leave blank>	<leave blank=""></leave>

Associated Work Plans:	
TA Providers	Work Plan #
<identify associated="" other,="" plans="" provider="" related="" ta="" the="" with="" work=""></identify>	<enter associated="" number="" other,="" plan="" plans="" related="" the="" with="" work=""></enter>

Original scope:	to organizational structure and easts avposted to be billed to the
sample Scope for Administration work plan (below); award recipient should adjust the scope based on i dministration work plan; include pre-award costs in scope, if pre-award cost letter was issued by HUD to xpected for the award>	
TA Provider will administer the Community Compass TA grant, including tasks such as:	
 Develop and submit work plans to the HUD GTR outlining the specific TA to be undertaken and 	
 Make assignments to staff and subcontractors on products approved by HUD to be developed of 	
 Review the overall progress of the cooperative agreement spending and products. This will incl Most with ULUE to provide pagindic under an arrest product status and timelines 	
 Meet with HUD to provide periodic updates on grant management, product status and timelines Deviden and provide mentally status reports to LULD 	
 Develop and provide monthly status reports to HUD. Develop and provide monthly invoices to HUD. 	
 Set up and enter project, accomplishment and draw information into the DRGR system. 	
 Develop and submit quarterly reports via the DRGR system. 	
 Conduct written evaluations of the effectiveness and accomplishments of TA, workshop, written 	and web/technology products.
Program audits or financial statement audits (portion associated with this award, if not included	
 Costs associated with ICR adjustment calculations (portion associated with this award, if not inc 	cluded in ICR)
 Pre-award costs (if pre-award approval letter was issued by Cooperative Agreement Officer) 	
Amendment and Modification Justification < within the Scope field, identify date of the amendment o the changes>	r modification, the changes made to the work plan, and the reason fo

Organization Assisted:							
Grantee Name <select></select>	Grantee Program <select></select>	Grantee State <populated></populated>	Grantee DUNS <populated></populated>	Grantee Org/Dept <populated></populated>			

Work Plan Period	of Performance	<u>:</u>			
From: <enter award="" effec<="" td=""><td>tive date></td><td></td><td></td><td>To: <award end<="" td=""><td>date></td></award></td></enter>	tive date>			To: <award end<="" td=""><td>date></td></award>	date>
Tasks:					
Task:	Start Date:	End Date:	Estimated Cost:	Estimated Hours:	Narrative:
1. Award Management	<enter award<br="">effdate></enter>	<enter award<br="">end date></enter>	<pre><estimate fully-<br="">loaded costs for award management activities charged to this award></estimate></pre>	<pre><estimate activities="" award="" charged="" for="" hours="" management="" this="" to="" total=""></estimate></pre>	<indicate activities="" are="" award="" estimated="" in="" management="" the<br="" which="">budget, based on the allowable scope></indicate>
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Total Budget with Amendments Original Budget					
Previously Approved Budget					
Milestones:					
Milestone <enter< td=""><td>milestones assoc</td><td>ciated with this aw</td><td>/ard>:</td><td>E</td><td>Expected Date <enter associated="" award="" date="" milestones="" of="" this="" with="">:</enter></td></enter<>	milestones assoc	ciated with this aw	/ard>:	E	Expected Date <enter associated="" award="" date="" milestones="" of="" this="" with="">:</enter>

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Activity Budget:					
Grant <auto-populated>:</auto-populated>	Work Plan Type <auto-populated>:</auto-populated>	Project# / Project Title <select "administration"<br="">project>:</select>	Total Budget (with Amendments) <auto-populated>:</auto-populated>	Original Budget <auto-populated>:</auto-populated>	Previously Approved Budget <auto-populated>:</auto-populated>

Proposed S		<identify d<="" th="" the="" total=""><th>irect labor costs></th><th>:</th><th></th><th></th><th></th><th></th><th></th><th></th></identify>	irect labor costs>	:						
Lead POC <check the box>:</check 	Staff Type <select from dropdown> :</select 	Effective Date <populated based on Staff Type>:</populated 	Staff Name <select based on Staff Type>:</select 	Title <populated based on Staff Name>:</populated 	Organization <populated based on Staff Name>:</populated 	Start Date <enter est. start date>:</enter 	End Date <enter est. end date>:</enter 	Hours <enter est. hours>:</enter 	Total Rate <populated given staff type>:</populated 	Total <calculated> :</calculated>
									Total <calculated>:</calculated>	\$0.00

Other/BLI Costs:			entify total value of oth ct supplies, and includ	er direct costs (e.g., airfare, ho de a line item for expected incre	tel, ground transportation, eases in direct labor rates)>
Budget Line Item:	Description:		Start Date:	End Date:	Cost:

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	Total:	\$0.00	
	\$0.00		
		Total Travel Budget (only):	

Proposed Accomplishment(s):

Outcome(s) <select and="" associated="" description="" outcome="" outcomes="" provide="" standard="" tasks="" to="">:</select>					
Task:	Expected Outcome: Start Date:				

Output(s) < select standard outputs and provide output date description and associated outputs to tasks >:			
Task:	Expected Outcome:	Start Date:	

Indicate Which of HUD's Strategic Goals the Planned Work Supports		<associated goals="" plans="" to="" work=""></associated>	
Select:	Goal:		
	Strengthen the nation's Housing Market to Bolster the Economy and Protect Consumers		
	Meet the Need for Quality Affordable Rental Homes		
	Utilize Housing as a Platform for Improving Quality of Life		
	Build Inclusive and Sustainable Communities Free from Discrimination	n	
	Transforming the Way HUD Does Business		
	Achieving Operational Excellence		

Indicate Which Goals of the Federal Strategic Plan to Prevent and End Homelessness the Planned Work Supports		<associated goals="" plans="" to="" work=""></associated>
Select:	Goal:	
	Promote Collaborative Leadership	

Strengthen Capacity and Knowledge	
Provide Affordable Housing	
Provide Permanent Supportive Housing	
Increase Economic Security	
Reduce Financial Vulnerability	
Integrate Health Care with Housing	
Advance Health and Housing Stability for Youth	
Advance Health and Housing Stability for Adults	
Transform Crisis Response Systems	

Certification:

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

Public reporting burden for this collection of information is estimated to average 1 hour. This includes the time for collecting, reviewing, and reporting the data. The information is being collected for HUD's Community Compass Technical Assistance and Capacity Building Program Notice of Funding Availability (NOFA) and will be used for 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.

Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to the Reports Management Officer, Office of Policy Development and Research, REE, Department of Housing and Urban Development, 451 7th St SW, Room 4176, Washington, DC 20410-5000. When providing comments, please refer to OMB Approval No. 2506-0197.