



## PRIVACY THRESHOLD ANALYSIS (PTA)

**This form serves as the official determination by the DHS Privacy Office to identify the privacy compliance requirements for all Departmental uses of personally identifiable information (PII).**

A Privacy Threshold Analysis (PTA) serves as the document used to identify information technology (IT) systems, information collections/forms, technologies, rulemakings, programs, information sharing arrangements, or pilot projects that involve PII and other activities that otherwise impact the privacy of individuals as determined by the Chief Privacy Officer, pursuant to Section 222 of the Homeland Security Act, and to assess whether there is a need for additional Privacy Compliance Documentation. A PTA includes a general description of the IT system, information collection, form, technology, rulemaking, program, pilot project, information sharing arrangement, or other Department activity and describes what PII is collected (and from whom) and how that information is used and managed.

Please complete the attached Privacy Threshold Analysis and submit it to your component Privacy Office. After review by your component Privacy Officer the PTA is sent to the Department's Senior Director for Privacy Compliance for action. If you do not have a component Privacy Office, please send the PTA to the DHS Privacy Office:

Senior Director, Privacy Compliance  
The Privacy Office  
U.S. Department of Homeland Security  
Washington, DC 20528  
Tel: 202-343-1717

[PIA@hq.dhs.gov](mailto:PIA@hq.dhs.gov)

Upon receipt from your component Privacy Office, the DHS Privacy Office will review this form and assess whether any privacy compliance documentation is required. If compliance documentation is required – such as Privacy Impact Assessment (PIA), System of Records Notice (SORN), Privacy Act Statement, or Computer Matching Agreement (CMA) – the DHS Privacy Office or component Privacy Office will send you a copy of the relevant compliance template to complete and return.



## Privacy Threshold Analysis (PTA)

### *Specialized Template for Information Collections (IC) and Forms*

The Forms-PTA is a specialized template for Information Collections and Forms. This specialized PTA must accompany all Information Collections submitted as part of the Paperwork Reduction Act process (any instrument for collection (form, survey, questionnaire, etc.) from ten or more members of the public). Components may use this PTA to assess internal, component-specific forms as well.

<b>Form Number:</b>	<b>089-22</b>		
<b>Form Title:</b>	<b>Tribal Homeland Security Grant Program Investment Justification</b>		
<b>Component:</b>	Federal Emergency Management Agency (FEMA)	<b>Office:</b>	Grant Programs Directorate

#### IF COVERED BY THE PAPERWORK REDUCTION ACT:

<b>Collection Title:</b>	Tribal Homeland Security Grant Program Investment Justification		
<b>OMB Control Number:</b>	1660-0113	<b>OMB Expiration Date:</b>	September 24, 2022
<b>Collection status:</b>	Revision	<b>Date of last PTA (if applicable):</b>	<b>May 31, 2020</b>

#### PROJECT OR PROGRAM MANAGER

<b>Name:</b>	<b>Cornelius K. Jackson</b>		
<b>Office:</b>	Click here to enter text.	<b>Title:</b>	Preparedness Officer
<b>Phone:</b>		<b>Email:</b>	Cornelius.Jackson@fema.dhs.gov

#### COMPONENT INFORMATION COLLECTION/FORMS CONTACT

<b>Name:</b>	Millicent Brown		
<b>Office:</b>	OCAO	<b>Title:</b>	Program Analyst



Phone: 202-646-2814 Email: Millicent.Brown@fema.dhs.gov  
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## SPECIFIC IC/Forms PTA QUESTIONS

### 1. Purpose of the Information Collection or Form

- a. Describe the purpose of the information collection or form. *Please provide a general description of the project and its purpose, including how it supports the DHS mission, in a way a non-technical person could understand (you may use information from the Supporting Statement).*  
*If this is an updated PTA, please specifically describe what changes or upgrades are triggering the update to this PTA.*

Federal Emergency Management Agency (FEMA) submits this renewal Privacy Threshold Analysis (PTA) in accordance with the three-year renewal policy. There have been no changes to FEMA's Tribal Homeland Security Grant Program (THSGP) since the last PTA update.

THSGP (formerly the State Homeland Security Program (SHSP) – Tribal) is authorized by Sections 2004 and 2005 of the Homeland Security Act of 2002, as amended by Section 101, Title I of the Implementing Recommendations of the 9/11 Commission Act of 2007, Public Law 110-53, (6 U.S.C. §605 and 606). THSGP provides supplemental funding to eligible tribes to help strengthen the Nation against risks associated with potential terrorist attacks. THSGP supports building and sustaining capabilities through planning, equipment, training, and exercise activities. The THSGP plays an important role in the implementation of Presidential Policy Directive 8 (PPD-8) by supporting the development and sustainment of core capabilities. Core capabilities are essential for the execution of each of the five mission areas outlined in the *National Preparedness Goal* (the Goal). The development and sustainment of these core capabilities are not exclusive to any single level of government or organization, but rather require the combined effort of the whole community. The THSGP supports all core capabilities in the Prevention, Protection, Mitigation, Response, and Recovery mission areas based on allowable costs.

Files and information on PPD-8 can be found at <http://www.fema.gov/ppd8>.

The purpose of the information collection by FEMA is: 1) to ensure that applicants for THSGP funds meet the eligibility requirements mandated in the Homeland Security Act 2002 (Public Law 107-296) as amended by Section 101 of 6 U.S.C. §605 and 606; and 2) to ensure the applicants, if awarded will complete investments/projects that further the intent of the THSGP of developing and sustaining DHS/FEMA's core capabilities. Applicants through this collection have to outline and provide costs for projects/investments that address 1 or more of the mission areas of the National Preparedness Goal.



b. List the DHS (or component) authorities to collect, store, and use this information. *If this information will be stored and used by a specific DHS component, list the component-specific authorities.*

FEMA’s Tribal Homeland Security Grant Program (THSGP) (formerly the State Homeland Security Program (SHSP) – Tribal) is authorized by Sections 2004 and 2005 of the Homeland Security Act of 2002, as amended by Section 101, Title I of the Implementing Recommendations of the 9/11 Commission Act of 2007, Public Law 110-53, (6 U.S.C. §605 and 606). In order to comply with the Authorizing Statutes noted above, DHS/FEMA issues a Notice of Funding Opportunity (NOFO) which outlines applicant eligibility, instructions for applying, and terms and conditions to be satisfied by the recipient.

2. Describe the IC/Form	
a. Does this form collect any Personally Identifiable Information” (PII <sup>1</sup> )?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. From which type(s) of individuals does this form collect information? (Check all that apply.)	<input checked="" type="checkbox"/> Members of the public <input checked="" type="checkbox"/> U.S. citizens or lawful permanent residents <input type="checkbox"/> Non-U.S. Persons. <input type="checkbox"/> DHS Employees <input type="checkbox"/> DHS Contractors <input type="checkbox"/> Other federal employees or contractors.
c. Who will complete and submit this form? (Check all that apply.)	<input checked="" type="checkbox"/> The record subject of the form (e.g., the individual applicant). <input checked="" type="checkbox"/> Legal Representative (preparer, attorney, etc.). <input checked="" type="checkbox"/> Business entity.

<sup>1</sup> Personally identifiable information means any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



	<p>If a business entity, is the only information collected business contact information?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Law enforcement. <input type="checkbox"/> DHS employee or contractor. <input type="checkbox"/> Other individual/entity/organization <b>that is NOT the record subject.</b> <i>Please describe.</i> Click here to enter text.</p>
<p>d. How do individuals complete the form? <i>Check all that apply.</i></p>	<p><input type="checkbox"/> Paper. <input checked="" type="checkbox"/> Electronic. (ex: fillable PDF) <input type="checkbox"/> Online web form. (available and submitted via the internet) <i>Provide link:</i></p>
<p>e. What information will DHS collect on the form? <i>List all PII data elements on the form. If the form will collect information from more than one type of individual, please break down list of data elements collected by type of individual.</i></p>	
<p>-Name (individual completing application/authorized by entity) -Position (within applying entity) -Address (business address) -Phone (business phone) -email (business email) -Name of applying entity</p>	
<p>f. Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? <i>Check all that apply. N/A</i></p>	
<p><input type="checkbox"/> Social Security number <input type="checkbox"/> Alien Number (A-Number) <input type="checkbox"/> Tax Identification Number <input type="checkbox"/> Visa Number <input type="checkbox"/> Passport Number</p>	<p><input type="checkbox"/> DHS Electronic Data Interchange Personal Identifier (EDIPI) <input type="checkbox"/> Social Media Handle/ID <input type="checkbox"/> Known Traveler Number <input type="checkbox"/> Trusted Traveler Number (Global Entry, Pre-Check, etc.)</p>



<input type="checkbox"/> Bank Account, Credit Card, or other financial account number <input type="checkbox"/> Other. <i>Please list:</i> N/A		<input type="checkbox"/> Driver's License Number <input type="checkbox"/> Biometrics	
g. List the <b>specific authority</b> to collect SSN or these other SPII elements.			
Click here to enter text. No SSN's or SPII information is required with this collection.			
h. How will this information be used? What is the purpose of the collection? Describe <b>why</b> this collection of SPII is the minimum amount of information necessary to accomplish the purpose of the program.			
Click here to enter text. No SSN's or SPII information is required with this collection.			
i. Are individuals provided notice at the time of collection by DHS ( <i>Does the records subject have notice of the collection or is form filled out by third party</i> )?		<input type="checkbox"/> Yes. Please describe how notice is provided. Click here to enter text. <input checked="" type="checkbox"/> No.	

3. How will DHS store the IC/form responses?	
a. How will DHS store the original, completed IC/forms?	<input type="checkbox"/> Paper. Please describe. Click here to enter text. <input type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. Click here to enter text. <input checked="" type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. Click here to enter text.



<p>b. If electronic, how does DHS input the responses into the IT system?</p>	<p><input type="checkbox"/> Manually (data elements manually entered). Please describe.  <a href="#">Click here to enter text.</a></p> <p><input checked="" type="checkbox"/> Automatically. Please describe.  <a href="#">Click here to enter text.</a></p>
<p>c. How would a user search the information submitted on the forms, <i>i.e.</i>, how is the information retrieved?</p>	<p><input type="checkbox"/> By a unique identifier.<sup>2</sup> <i>Please describe.</i> If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA.  <a href="#">Click here to enter text.</a></p> <p><input checked="" type="checkbox"/> By a non-personal identifier. <i>Please describe.</i>  To search and retrieve information pertaining to this collection, an application number or applicant name (tribe name) is input. The application number is associated with the Tribe, not the Tribe’s Point of Contact, which the Tribe could at any time without a change in application number.</p>
<p>d. What is the records retention schedule(s)? <i>Include the records schedule number.</i></p>	<p>Files/records are deleted 6 years and 3 months after grant close-out, and all audit and appeals are resolved and completed (PRC-13-4)</p>
<p>e. How do you ensure that records are disposed of or deleted in accordance with the retention schedule?</p>	<p>FEMA Records Management Manual 5400.2a outlines timelines and descriptions of files. Responsible employees have to follow the dictates of FEMA Manual 5400.2a to ensure compliance with the retention schedule.</p>
<p>f. Is any of this information shared outside of the original program/office? <i>If yes, describe where (other offices or DHS components or external entities) and why. What are the authorities of the receiving party?</i></p>	
<p><input type="checkbox"/> Yes, information is shared with other DHS components or offices. Please describe.  <a href="#">Click here to enter text.</a></p>	

<sup>2</sup> Generally, a unique identifier is considered any type of “personally identifiable information,” meaning any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



Yes, information is shared *external* to DHS with other federal agencies, state/local partners, international partners, or non-governmental entities. Please describe.

[Click here to enter text.](#)

No. Information on this form is not shared outside of the collecting office.



**Please include a copy of the referenced form and Privacy Act Statement (if applicable) with this PTA upon submission.**





## PRIVACY THRESHOLD REVIEW

**(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)**

Component Privacy Office Reviewer:	<b>Philomina Dorkenoo</b>
Date submitted to component Privacy Office:	<b>July 25, 2022</b>
Date submitted to DHS Privacy Office:	July 27, 2022
Have you approved a Privacy Act Statement for this form? <i>(Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.)</i>	<input type="checkbox"/> Yes. Please include it with this PTA submission. <input checked="" type="checkbox"/> No. Please describe why not. Though the THSGP will collect PII on its Investment Justification form, it will not retrieve information by a personal identifier. The program will retrieve information by tribal name or application number. This collection does not meet the definition of a system of record. Therefore, the agency is not required to provide (e)(3) Privacy Act Statement.
Component Privacy Office Recommendation: <i>Please include recommendation below, including what existing privacy compliance documentation is available or new privacy compliance documentation is needed.</i>	
<b>FEMA Privacy recommends PIA coverage continue under DHS/FEMA/PIA-013 - Grant Management Programs.</b>	
<b>SORN coverage is not required, because the information is retrieved by applicant number and applicant name (tribe name).</b>	



## PRIVACY THRESHOLD ADJUDICATION

**(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)**

DHS Privacy Office Reviewer:	<b>Joseph Thomas</b>
PCTS Workflow Number:	Click here to enter text.
Date approved by DHS Privacy Office:	August 5, 2022
PTA Expiration Date	August 5, 2025

### DESIGNATION

Privacy Sensitive IC or Form:	<b>Yes If “no” PTA adjudication is complete.</b>
Determination:	<input type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input type="checkbox"/> Privacy Act Statement required. <input checked="" type="checkbox"/> Privacy Impact Assessment (PIA) required. <input type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Specialized training required. <input type="checkbox"/> Other. Click here to enter text.
DHS IC/Forms Review:	Choose an item.
Date IC/Form Approved by PRIV:	Click here to enter a date.
IC/Form PCTS Number:	Click here to enter text.
Privacy Act Statement:	Choose an item. Click here to enter text.
PTA:	Choose an item. Click here to enter text.
PIA:	<b>System covered by existing PIA</b>



	<p>If covered by existing PIA, please list: DHS/FEMA/PIA-013 - Grant Management Programs. If a PIA update is required, please list: <a href="#">Click here to enter text.</a></p>
SORN:	<p>Choose an item. If covered by existing SORN, please list: <a href="#">Click here to enter text.</a> If a SORN update is required, please list: <a href="#">Click here to enter text.</a></p>
<p>DHS Privacy Office Comments: <i>Please describe rationale for privacy compliance determination above.</i></p>	
<p>FEMA has submitted this PTA renewal to discuss Form 089-22 Tribal Homeland Security Grant Program (THSGP) Investment Justification, which collects information to ensure that applicants meet the eligibility requirements, and if awarded the grant, ensure that the applicant will complete investments/projects that further the intent of the THSGP. <b>There have been no significant changes since the previous adjudication.</b></p> <p>PII collected on the form includes name, position, and business phone, email, and mailing address. As such, DHS PRIV concurs that the collection remains privacy-sensitive, requiring PIA coverage as it collects information from members of the public. Coverage is provided by FEMA/PIA-013 Grant Management Programs, which assess the risks associated with the use of PII as part of the grant award, management, and lifecycle process.</p> <p>SORN coverage is not required as information is not retrieved by personal identifier, but rather by application number or applicant (tribe) name.</p>	