Instructions for the Community Economic Development – Planning Grant (CED-P) Performance Progress Report (PPR)

This PPR is designed to capture essential updates, challenges, and future plans related to a CED-P project. Please complete each section as fully and accurately as possible, providing speciﬁc details in response to each question. For each item, use clear and concise language to report progress, barriers encountered, and any assistance you may require.

Begin by ﬁlling in the “Standard Cover Information”, which includes identifying details about your organization. For the cover information, try your best to keep your responses concise and within the box provided.

The second section titled “General Project Updates” requires a response for each item. This section covers high-level information on updates & accomplishments, equity, challenges, technical assistance needs, and upcoming activities. Each of these responses has an 80-word limit. Try to keep your responses brief but complete. However, if you need more space, you can upload an additional document with your full answers.

The last section, “Activity-Speciﬁc Updates” has a series of questions for several CED- Planning activities including community & stakeholder engagement, economic development visioning, assessing local assets, identifying viable business markets, supportive services partnerships, funding opportunities of differing sources, business planning, and other activities. For this section only, you may write “N/A” in the response ﬁeld for any of the activities listed that do not apply to your project during the reporting period. Each of the full-length responses has an 80-word limit. Try to keep your responses brief but complete. However, if you need more space, you can upload an additional document with your full answers. The funding responses are much shorter, and you should keep responses within the boxes provided.

These reports are essential for tracking program impact and identifying opportunities for growth. Respondents should ensure each response accurately reﬂects their activities and needs during this reporting period.

# ACF CED-PLANNING PERFORMANCE PROGRESS REPORT

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| **Part A: Standard Cover Information**  *Complete all fields* | | | |
| **Item** | **Data Elements** | **Instructions** | **Recipient Response** |
| A-01 | Grant Issuing Organization | *Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational*  *element is the sub-agency within* |  |
| A-02 | Grant Number | *Enter the grant/award number*  *contained in the award document.* |  |
| A-03a | Unique Entity Identifier (UEI) | *Enter the recipient organization’s Unique Entity Identifier (UEI) assigned by the System for Award*  *Management (SAM).* |  |
| A-03b | EIN Number | *Enter the recipient organization’s Employer Identification Number (EIN) provided by the Internal*  *Revenue Services.* |  |
| A-04 | Organization  Name | *Enter the name of recipient*  *organization* |  |
| A-05 | Organization  Address | *Enter the full address of the*  *recipient organization, including* |  |
| A-06 | Project/Grant Period | *Enter the period for which your*  *CED-Planning grant is active. Start Date: (MM/DD/YYYY)-End Date:* |  |
| A-07 | Reporting Period | *Enter the reporting period for this report. Reporting periods should only be one of the following: 10/1/XXXX-12/31/XXXX,*  *01/01/XXXX-03/31/XXXX,* |  |
| A-08 | Report Type | *Select the appropriate type of*  *report. (Quarterly or final report)* |  |
| A-09 | Upload  supporting | *Supported file formats include xls,*  *doc, pdf, jpg/jpeg, png and ppt.* |  |

PAPERWORK REDUCTION ACT (PRA) OF 1995 (Public Law 104-13)

The public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. The OMB Approval Number is 0970-0490, with an expiration date of 3/31/2026. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the PRA of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information, please contact: Jessica Hale at [Jessica.hale@acf.hhs.gov.](mailto:Jessica.hale@acf.hhs.gov)

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| A-10a | Certification/ Signature of Authorizing Official | *I certify to the best of my knowledge and belief that this report is correct and complete for*  *performance of activities for the purposes set forth in award documents.* | |
| A-10b | *Type or Printed Name and Title of*  *Authorized Certifying Official* |  |
| A-10c | *Signature of Authorized Certifying*  *Official* |  |
| A-10d | *Tephone (area code, number, and*  *extension)* |  |
| A-10e | *Email address* |  |
| A-10f | *Date Report Submitted (Month,*  *Day, Year)* |  |
| **Agency use only** | | *Grant recipients should not enter anything in this response field* |  |

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| **Part B: General Project Updates**  *Complete all fields* | | | |
| **Item** | **Activity** | **Activity Question(s)** | **Recipient Response** |
| B-01 | Updates & Accomplish- ments | *Highlight any major updates that have occurred during this reporting period.* |  |
| B-02 | Capacity | *Describe how your organization's capacity to implement a job creation project has increased (e.g., identified or secured needed funding, formed partnerships with social service providers, identified potential business development opportunities,*  *etc.).* |  |

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| B-03a | Challenges & Technical Assistance | *Describe any project implementation challenges or roadblocks you've faced this reporting period (e.g., staffing issues within your organization, challenges with project partners, etc.)* |  |
| B-03b | *Describe any grant administration challenges you faced this reporting period (e.g., system access, funding drawdown, communications challenges, etc.).* |  |
| B-03c | *Describe the kinds of support or information that would further prepare you to implement your business creation/job creation project.* |  |
| B-04 | Upcoming Activities | *Describe the key activities planned for the next reporting period.* |  |

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| **Part C: Activity-Specific Updates**  *If you did not engage in an activity in this reporting period, write N/A* | | | |
| **Item** | **Activity** | **Activity Question(s)** | **Recipient Response** |
| C-01a | Community & Stakeholder Engagement | *Describe your efforts to identify relevant stakeholders* |  |
| *within the target community(ies).* |
| C-01b | *Describe your efforts to engage stakeholders within the target community(ies).* |  |
| C-01c | *List the organizations and groups (formal or informal) that you engaged to inform your project.* |  |

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| C-01d | Community & Stakeholder Engagement | *List any organizations and groups (formal or informal) you plan to target for future engagement.* |  |
| C-01e | *Describe your efforts to obtain or expand community buy-in for planned job creation efforts.* |  |
| C-02a | Economic Development Visioning | *Describe your efforts to develop a shared community economic development vision or plan for your community.* |  |
| C-02b | *Describe your efforts engaging* |  |
| *partners and stakeholders to inform your visioning documents.* |

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| C-02c | Economic Development Visioning | *Describe how this visioning and planning will inform your job creation project.* |  |
| C-03a | Assessing Local Assets | *Describe the specific* ***existing data sources*** *you consulted to inform your job creation project (e.g. identify market gaps and needs, identify viable industries, identify current assets, identify business development opportunities).* |  |
| C-03b | *Describe your efforts to* ***collect new data*** *to inform your job creation effort (e.g. identify market gaps and needs, identify viable industries, identify current assets, identify business development opportunities).* |  |
| C-03c | *Describe what you learned from the existing and new data sources that you analyzed and reviewed.* |  |

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| C-04a | Identifying Viable Business Markets | *Describe what existing studies have been identified or collected (e.g. government funded studies, regional economic outlooks published by other organizations etc.).* |  |
| C-04b | *Describe your efforts to conduct market analyses and identify viable business development opportunities.* |  |
| C-05a | Supportive Services Partnerships | *Describe what support services you have identified as being needed for target employees.* |  |
| C-05b | *Describe the specific social service partners you've secured for your project to support employees in a job creation project.* |  |

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| C-05c | Supportive Services Partnerships | *List any partners you plan to target in the future.* |  | |
| C-06a | Funding Opportunities | *Describe your efforts to identify and secure funding to support your job creation project.* |  | |
| C-06b | *Identify any* ***federal*** *funding you have secured: name of funding source(s) and amount(s).* | Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| C-06c | *Identify any* ***state*** *funding you have secured: name of funding source(s) and amount(s).* | Source: | Amount: |
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| C-06d | Funding Opportunities | *Identify any* ***local*** *funding you have secured: name of funding source(s) and amount(s).* | Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| C-06e | *Identify any* ***private (philanthropic and corporate)*** *funding you have secured: name of funding source(s) and amount(s).* | Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| C-06f | *Identify any funding sources you intend to pursue: name of funding source(s) and amount(s).* | Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| Source: | Amount: |
| C-07 | Business Planning | *Describe your efforts to develop a business plan for an identified business or economic development opportunity.* |  | |
| C-08 | Other Activities | *Describe any other activities you accomplished this reporting period to build your capacity to implement a job creation project in your community.* |  | |

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