

# Paperwork Reduction Act Change Worksheet

Agency/Subagency: <b>U.S. Department of Housing and Urban Development</b>	OMB Control Number: <b>2501-0034</b>
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Enter only items that change	Current Record	New Record**
Agency form number(s): HUD-PRL	<b>6. Gender Code</b> The gender for the participant. 1 = Male 2 = Female 3 = Transgender Male 4 = Transgender Female 5 = Other 6 = Non-Binary 77 = Information not collected 88 = Individual refused. 99 = Individual does not know	<b>6. Sex Code</b> The sex for the participant. 1 = Male 2 = Female 77 = Information not collected 88 = Individual refused.
<b>Annual reporting and keeping hour burden</b>		
Number of respondents		
Total annual responses		
Percent of these responses collected electronically	%	%
Total annual hours		
Difference		
Explanation of difference Program change Adjustment		
<b>Annual reporting and recordkeeping cost burden</b> (in thousands of dollars)		
Total annualized Capital/Startup costs		
Total annual costs (O&M)		
Total annualized cost requested		
Difference		
Explanation of difference Program change Adjustment		

Other change: \*\*

Fair Housing and Civil Rights Assistance Service Code

The individual received services or participated in programs that promotes racially, ethnically, and economically diverse communities and integrated living patterns and avoid patterns where persons are forced to live in high poverty areas, or in areas suffering from a lack of accessible services, or a lack of integration in terms of race, color, national origin, religion, sex (including sexual orientation and gender identity), familial status, or disability status.

Signature of Senior Official or Designee:  <div style="text-align: center;"><i>Kimberly Gooding</i></div>	Date: 02/20/2025	<b>For OIRA Use</b>
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\*\* This form cannot be used to extend an expiration date.