## **Paperwork Reduction Act**

|   | Change Workshe   | et         |  |  |
|---|--|------------|--|--|
| Agency/Subagency: U.S. Department of Housing and Urban Development  |  |            | OMB Control Number: 2528-0017  |  |
|   | Enter only items that change   | Current Re | cord   | New Record**                             |
| Agency form number(s):  |  | See below  |  | Now Record                               |
| Annual reporti  | ng and keeping hour burden   |            |  |  |
| Number of   | respondents  |            |  |  |
| Total annua   | al responses   |            |  |  |
| Percent of these responses collected electronically   |  | %          |  | %  |
| Total annua   | al hours   |            |  |  |
| Difference  |  |            |  |  |
|   | n of difference<br>n change<br>ent   |            |  |  |
| Annual reporti  | ng and recordkeeping cost burden (in thousands of dollars)   |            | •  |  |
| Total annua   | alized Capital/Startup costs   |            |  |  |
| Total annua   | al costs (O&M)   |            |  |  |
| Total annua   | alized cost requested  |            |  |  |
| Difference  |  |            |  |  |
|   | n of difference<br>n change<br>ent   |            |  |  |
|   | TD is requesting this non- substantive change in order to align thought to the Federal Control of the Federal Cont |            | h E.O. 14168   | 3 Defending Women                        |
| LOCATION  | CURRENT TEXT   |            |  | ISED TEXT                                |
| 27, STILIV1  ^I_GENDER fill in question indicates whether the person in is Male or Female based on answer to the question "SEX" if the household was surveyed. SEX asks:  What is (name's/your) sex?  1. Male 2. Female |  |            | Changed the label of the fill to ^I_SEX to correspond with the question the fill references.       |  |
| .27, STILIV2  | 7, STILIV2 ^I_GENDER fill in question indicates whether the person in the househ is Male or Female based on answer to the question "SEX" in the last ye the household was surveyed.  |            | Changed the label of the fill to<br>^I_SEX to correspond with the<br>question the fill references. |  |
| . 33, Module<br>itle  | SEXUAL ORIENTATION and GENDER IDENTITY   |            |  | ORIENTATION                              |
| . 33,<br>EXBRTH   | What sex ^were_was ^you_NAME assigned at birth?  1. Male   |            | Removed q  | uestion.                                 |
|   | 2. Female  |            |  | estion already in the re asks about sex. |

\*\* This form cannot be used to extend an expiration date.

Signature of Senior Official or Designee:

Date:

For OIRA Use

|                     |  | SEX (p. 28) What is (name's/your) sex? 3. Male 4. Female   |
|---------------------|--|--|
| P. 33,<br>GENDERID1 | What is ^your_NAME current gender?  1. Male 2. Female 3. Transgender 4. Nonbinary 5. Use a different term (specify)  | Removed question   |
| P. 34,<br>GENDER1SP | Specify other term   | Removed question   |
| P. 34,<br>GENDERID2 | What is ^your_NAME current gender?  Read answer categories  Enter all that apply, separate with commas  1. Male 2. Femaile 3. Transgender 4. Nonbinary 5. Use a different term (specify) | Removed question   |
| P. 34,<br>GENDER2SP | Specify other term   | Removed question   |
| SOGICONF            | Just to confirm, ^you_NAME ^were_was assigned SEXBRTH_Fill at birth and now describe ^yourself_themselves as: GENID_Fill Is that correct?  1. Yes 2. No                                  | Removed question   |
| Page 39,<br>CHANGE  | ^GENDER fill in question indicates whether the person in the household is Male or Female based on answers to the question "SEX."   | Changed the label of the fill to<br>^SEX to correspond with the<br>question the fill references. |
| Page 40,<br>CHNG1   | ^GENDER fill in question indicates whether person in the household is Male or Female based on answers to the question "SEX."   | Changed the label of the fill to<br>^SEX to correspond with the<br>question the fill references. |
| Page 40,<br>CHWHT   | ^GENDER fill in question indicates whether the person in the household is Male or Female based on answer to the question "SEX."  | Changed the label of the fill to<br>^SEX to correspond with the<br>question the fill references. |
| Page 43,<br>INFO_1  | ^GENDER fill in question indicates whether the person in the household is Male or Female based on answer to the question "SEX."  | Changed the label of the fill to ^SEX to correspond with the question the fill references.       |

| Signature of Senior Official or Designee: | Date: | For OIRA Use |
|---|-------|--------------|
|   |       |              |
|   |       |              |
| V   |       |              |

<sup>\*\*</sup> This form cannot be used to extend an expiration date.

OMB 83-C 10/95