ACF PERFORMANCE PROGRESS REPORT
ACF-OGM-SF-PPR Cover Page

Administration for Children and Families
U.S. Department of Health and Human Services

Page	of Pages

1. Federal Agency and Organization Element to Which Report is Submitted Office of Family Assistance	2. Federal Grant or Other Identifying Number Assigned by Federal Agency	3a. DUNS Number 3b. EIN
4. Recipient Organization (Name and complete address including zip code)		5. Recipient Identifying Number or Account Number
6. Project/Grant Period Start Date: *(Month, Day, Year)* 09/30/2010 End Date: *(Month, Day, Year)*	7. Reporting Period End Date (Month, Day, Year)	8. Final Report? ☒ Yes ☐ No 9. Report Frequency ☐ annual ☒ semi-annual ☐ quarterly ☐ other (If other, describe)

10. Performance Narrative (attach performance narrative as instructed by the awarding Federal Agency)

Leave Blank and Complete the PPR Appendix B HPOG Template (provided in Word format)

11. Certification: 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 the award documents.

11a. Typed or Printed Name and Title of Authorized Certifying Official	11c. Telephone (area code and number) extension 11d. Email Address
11b. Signature of Authorized Certifying Official	11e. Date Report Submitted (Month, Day, Year) 12. Agency use only

OMB Approval Number: 0970-0406
Expiration Date: 10/31/2015

ACF PERFORMANCE PROGRESS REPORT
ACF-OGM SF-PPR
COVER PAGE INSTRUCTIONS

Administration for Children and Families
U.S. Department of Health and Human Services

Item	Data Elements	Instructions
1.	**Awarding Federal Agency and Organizational Element to Which Report is Submitted**	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 an awarding Federal agency.
2.	**Federal Grant or Other Identifying Number Assigned by the awarding Federal agency**	Enter the grant/award number contained in the award document.
3a.	**DUNS Number**	Enter the recipient organization's Data Universal Numbering System (DUNS) number or System for Award Management (SAM) extended DUNS Number.
3b.	**EIN**	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Services.
4.	**Recipient Organization**	Enter the name of recipient organization and address, including zip code.
5.	**Recipient Account Number or Account Number**	Enter the account number or any other identifying number assigned by the recipient to the award. This number is strictly for the recipient's use only and is not required by the awarding Federal agency.
6.	**Project/Grant Period**	Indicate the project/grant period established in the award document during which Federal sponsorship begins and ends. Note: Some agencies award multi-year grants for a project/grant period (e.g., 5 years) that are funded in increment known as budget periods or funding periods. These are typically annual increments. Please enter the project/grant period, not the budget period or funding period.
7.	**Reporting Period End Date**	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual reports, the following calendar quarter period end dates shall be used: 3/31; 6/30; 9/30; and 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.
8.	**Final Report**	Mark appropriate box. Check "yes" only if this is the final report for the project/grant period specified in Box 6.
9.	**Report or Frequency**	Select the appropriate term corresponding to the requirements contained in the award document. "Other" may be used when more frequent reporting is required for high-risk grantees, as specified in OMB Circular A-110.
10.	**Performance Narrative**	**Leave blank and complete Form ACF-OGM SF PPR Attachment B**

ACF PERFORMANCE PROGRESS REPORT
Appendix B - Program Indicators
ACF-OGM-SF-PPR

SF-PPR-OGM-B

Page	of Pages

1. Federal Agency and Organization Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned by Federal Agency	3a. DUNS	4. Reporting Period End Date (MM/DD/YYYY)
		3b. EIN	

Program Indicators

(1) Item	(2) Activity Description	(3) Indicator	(4) Explanation
B-01	**Major activities and accomplishments during this period**		Leave Blank and Complete B-01 on the PPR Appendix B HPOG Template (provided in Word format) Note the 3 Step process of running PRS011, attaching that to this report, and then completing the narrative responses
B-02	**Problems**		Leave Blank and Complete B-02 on the PPR Appendix B HPOG Template (provided in Word format)
B-03	**Significant findings and events**		Leave Blank and Complete B-03 on the PPR Appendix B HPOG Template (provided in Word format) Note that a signed ACF waiver must also be uploaded with the final report for the given success story.

ACF PERFORMANCE PROGRESS REPORT
Appendix B - Program Indicators
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B-04	**Dissemination activities**		Not Applicable
B-05	**Other Activities**		Leave Blank and Complete B-05 on the PPR Appendix B HPOG Template (provided in Word format)
B-06	**Activities planned for next reporting period**		Not Applicable

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ACF PERFORMANCE PROGRESS REPORT
Appendix B - Program Indicators
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INSTRUCTIONS

Schedule

Submit the original progress report to the Office of Grants Management, Division of Discretionary Grants, and a copy to the Program Office. Reports are due 30 days after the end of the second and fourth quarters of the budget period (every six months).

A FINAL PROGRAM REPORT IS DUE 90 DAYS AFTER THE PROJECT PERIOD END DATE.

Item	Data Elements	Instructions
1	**Awarding Federal agency and Organizational Element to Which Report is Submitted**	Enter the name of the awarding Fede ral agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is a sub -agency within an awarding Federal agency.
2	**Federal Grant or Other Identifying Number Assigned by the award ing Federal agency**	Enter the grant/award number contained in the award document.
3a	**DUNS Number**	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
3b	**EIN**	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.
4	**Reporting Period End Date**	Enter the ending date of the reporting period. For quarterly, semi -annual, and annual reports, the following calendar quar ter reporting period end dates shall be used: 3/31; 6/30; 9/30 and or 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.
	Program Indicators	
B-01(4)	**Major activities and accomplishments during this period**	Recommend use of project task charts from approved grant application and/or project work plan with this section. Describe any draft/final products in this section. Use additional pages if needed.
B-02(4)	**Problems**	Describe any deviations or departures from the original project plan including actual/anticipated slippage in task completion dates, and special problems encountered or expected. Use this report section to adv ise Project Officer and Grants Management Specialist of assistance needs. Use additional pages if needed.
B-03(4)	**Significant findings and events**	(To be noted by project officer, or reported to regions, States, other agencies, Program Director/Commissione r, Assistant Secretary, Secretary, etc.) Use additional pages if needed.
B-04(4)	**Dissemination activities**	Briefly describe project related inquiries and information dissemination activities carried out over the reporting period. Itemize and include a cop y of any newspaper, newsletter, magazine articles or other published materials considered relevant to project activities, or used for project information or public relations purposes. Use additional pages if needed.
B-05(4)	**Other Activities**	Briefly describe. Use additional pages if needed.
B-06(4)	**Activities planned for next reporting period**	Briefly describe. Use additional pages if needed.

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

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An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.