

The HCRI Quarterly Report is a required summary of how Housing Cost Reduction Initiative (HCRI) funds were used during the reporting quarter. It documents the number and characteristics of households served, the amount and type of assistance provided, and the status of both contract funds and program income. This report ensures transparency, supports compliance with HCRI contract requirements, and helps the program track statewide progress in reducing housing cost burdens. Grantees should use this document as a reference when completing each section of the quarterly report.

HCRI Quarterly Report Instructions

This report is due to the HCRI Program Manager **no later than 30 days after the end of each calendar quarter**. A separate copy should be kept by the grantee.

Grantee Name: Grantee agency's legal business name

Contract #: Current contract number for which grantee is reporting

Report Prepared by: Name of grantee staff who prepared the report

Report Reviewed by: Name of grantee staff who reviewed the report prior to submittal

Select Reporting Quarter: Check the box that corresponds to the quarter for which grantee is reporting.

Total number of households assisted with HCRI funds this quarter: Fill in the total number of **unique** households assisted with HCRI funding this quarter. Include households assisted with both current contract dollars and program income.

HCRI Assistance Provided This Quarter

- **With Contract Funds:** Report actual disbursements of HCRI contract dollars for the reporting quarter, itemized by activity type.
- **With Program Income:** Report actual disbursements of HCRI program income for the reporting quarter, itemized by activity type. If no HCRI program income was disbursed, fill in the column with zeros. (Do not leave blank fields).

I. HCRI Contract Funds

- **Contract Funds Awarded:** Enter the amounts awarded for Housing Assistance, Administration, and Capacity Building as listed in Attachment B, Budget of the HCRI contract. These amounts remain the same for all quarters of the performance period.
- **Expenditures to Date:** Enter the amount of HCRI contract dollars spent to date for Housing Assistance, Administration, and Capacity Building for this performance period.
- **Remaining Contract Funds:** Enter the remaining balance of HCRI contract dollars to be spent for Housing Assistance, Administration, and Capacity Building for this performance period.

Remaining Contract Funds = Contract Funds Awarded – Expenditures to Date

II. Beneficiaries Data

This set of tables is for reporting all households served with **contract funds only** and those served with **both contract funds and program income**.

Table A – Households by Income

- **Number of Units Assisted:** Enter the number of households assisted during the reporting quarter by activity type and income level.
- **Dollar Amount of Assistance:** Enter the total amount of HCRI assistance disbursed during the reporting quarter by activity type and income level.
- **Counties Represented:** List the counties represented by the households reported in the table by income level. If more than one household was served in any county, place a numeral after the county name (e.g. Dane-2).

Table B – Households by Race

- In each field, enter the number of households assisted during the reporting quarter by race.
Total households in Table B must match the total in Table A.

Table C – Ethnicity and Special Populations

- In each field, enter the number of households assisted for each special population.
Totals in Table C do not need to match totals in Table A.

III. HCRI Program Income Funds

All HCRI grantees must complete this table.

- **Beginning Balance:** Enter the amount of HCRI program income on hand at the beginning of the reporting quarter.
- **Received this Quarter:** Enter the amount of HCRI program income received by the grantee during this reporting quarter.
- **Expended this Quarter:** Enter the amount of HCRI program income expended by the grantee during this reporting quarter.
- **Balance on Hand:** Enter the amount of HCRI program income on hand at the end of the reporting quarter.

$$\text{Balance on Hand} = \text{Beginning Balance} + \text{Received this Quarter} - \text{Expended this Quarter}$$

IV. Beneficiaries Data (Program Income Only)

This set of tables is for reporting all households served **exclusively** with HCRI program income. Households reported here should not appear in Section II.

Table A – Households by Income

- **Number of Units Assisted:** Enter the number of households assisted during the reporting quarter by activity type and income level.
- **Dollar Amount of Assistance:** Enter the total amount of HCRI assistance disbursed during the reporting quarter by activity type and income level.
- **Counties Represented:** List the counties represented by the households reported in the table by income level. If more than one household was served in any county, place a numeral after the county name (e.g. Dane-2).

HOUSING COST REDUCTION INITIATIVE (HCRI) – QUARTERLY REPORT INSTRUCTIONS

Table B – Households by Race

- In each field, enter the number of households assisted during the reporting quarter by race.
Total households in Table B must match the total in Table A.

Table C – Ethnicity and Special Populations

- In each field, enter the number of households assisted for each special population.
Totals in Table C do not need to match totals in Table A.

V. Comments

- This optional section is for grantees to share any information or feedback about program accomplishments, challenges, barriers to service delivery, program suggestions, etc.

Example Report:

The following pages contain an example of a completed report. In the example:

- 6 households with HCRI funds assisted during the reporting quarter
 - 3 with contract funds only
 - 2 with program income only
 - 1 with both contract funds and program income

HOUSING COST REDUCTION INITIATIVE (HCRI) PROGRAM – QUARTERLY REPORT

GRANTEE NAME: Home Start, Inc.
Contract #: 25-25
Report Prepared by: Joy Bosco
Report Reviewed by: Michelle Wegner

Select Reporting Quarter

For Period Ending (check one):	Report due to DEHCR by:
<input type="checkbox"/> September 30, 2025	October 31, 2025
<input checked="" type="checkbox"/> December 31, 2025	January 31, 2026
<input type="checkbox"/> March 31, 2026	April 30, 2026
<input type="checkbox"/> June 30, 2026	July 31, 2026
<input type="checkbox"/> September 30, 2026	October 31, 2026
<input type="checkbox"/> December 31, 2026	January 31, 2027
<input type="checkbox"/> March 31, 2027	April 30, 2027
<input type="checkbox"/> June 30, 2027	July 31, 2027
<input type="checkbox"/> September 30, 2027	October 31, 2027

Total number of households assisted with HCRI funds this quarter: 6
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HCRI Assistance Provided This Quarter:

	With Contract Funds (\$\$)	With Program Income (\$\$)
Down Payment/Closing Costs	\$17,500	\$12,500
Mortgage Principal/Interest		
Property Insurance		
Property Taxes		
Utility Fees		
Administration	\$1250	\$700
Capacity Building	\$1000	N/A
TOTAL:	\$19,750	\$13,200

HOUSING COST REDUCTION INITIATIVE (HCRI) PROGRAM – QUARTERLY REPORT

I. HCRI CONTRACT FUNDS

Budget Category	Contract Funds Awarded	Expenditures to Date	Remaining Contract Funds
Housing Assistance	\$82,450	\$27,500	\$54,950
Administration	\$14,550	\$2,000	\$12,550
Capacity Building	\$3,000	\$1,000	\$2,000
TOTAL:	\$100,000	\$30,500	\$69,500

II. BENEFICIARIES DATA (Households served with Contract Funds Only or a combination of Contract Funds and Program Income)

TABLE A – HOUSEHOLDS BY INCOME

	Number of Units Assisted		Dollar Amount of Assistance		Counties Represented
	<i>Homebuyer</i>	<i>Foreclosure</i>	<i>Homebuyer</i>	<i>Foreclosure</i>	<i>(List all counties)</i>
Households 0-30% CMI					
Households 31-50% CMI	1		\$5,000		Adams
Households 51-80% CMI	3		\$15,000		Dane, Rock-2
TOTAL:	4		\$20,000		

TABLE B – HOUSEHOLDS BY RACE

<i>White</i>	<i>Asian</i>	<i>Black/ African American</i>	<i>American Indian/ Alaskan Native</i>	<i>Native Hawaiian/ Other Pacific Islander</i>	<i>Multi-Racial</i>
2		1			1

TABLE C – ETHNICITY AND SPECIAL POPULATIONS

<i>Hispanic Households</i>	<i>Female Head of Household</i>	<i>Households with Persons with Disabilities</i>	<i>Elderly (62+)</i>
2	1	0	0
<i>Households with Children ≤18</i>	<i>Single Parent Households</i>	<i>Households with 4 or more Children ≤ 18 years old</i>	
3	1	0	

HOUSING COST REDUCTION INITIATIVE (HCRI) PROGRAM – QUARTERLY REPORT

III. HCRI PROGRAM INCOME FUNDS

Beginning Balance \$ 21,424.69	Received this Quarter \$ 5000.00	Expended this Quarter \$ 12,500.00	Balance on Hand \$ 13,924.69
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IV. BENEFICIARIES DATA (Households served with Program Income Only, no Contract Funds)

TABLE A – HOUSEHOLDS BY INCOME

	Number of Units Assisted		Dollar Amount of Assistance		Counties Represented
	<i>Homebuyer</i>	<i>Foreclosure</i>	<i>Homebuyer</i>	<i>Foreclosure</i>	<i>(list all counties)</i>
Households 0-30% CMI					
Households 31-50% CMI					
Households 51-80% CMI	2		\$10,000		Kenosha, Racine
TOTAL:	2		\$10,000		

TABLE B – HOUSEHOLDS BY RACE

<i>White</i>	<i>Asian</i>	<i>Black/ African American</i>	<i>American Indian/ Alaskan Native</i>	<i>Native Hawaiian/ Other Pacific Islander</i>	<i>Multi-racial</i>
1		1			

TABLE C – ETHNICITY AND SPECIAL POPULATIONS

<i>Hispanic Households</i>	<i>Female Head of Household</i>	<i>Households with Persons with Disabilities</i>	<i>Elderly (62+)</i>
0	1	1	0
<i>Households with Children ≤18</i>	<i>Single Parent Households</i>	<i>Households with 4 or more Children ≤ 18 years old</i>	
1	1	0	

V. COMMENTS (Optional):

Please share any information you would like DEHCR/HCRI staff to know about your agency's work this quarter or during this funding cycle. This may include any challenges, successes, obstacles, new partnerships, program highlights, or anything not captured elsewhere in this report.