

Overview

OMB Approved ED-916

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Dear EDA grantee,

This questionnaire is intended for **semiannual collection** of information on the program outputs (activities) sponsored under an EDA grant (or a cooperative agreement). Please report on all activities **cumulatively since the start of performance under the current grant**, unless stated otherwise.

If you are a recipient of the <u>Capital Challenge</u> award, you will be prompted to respond to your program-specific questions. For all other programs, questions are organized into the following categories:

- 1. Facilities and equipment*
- 2. Events, networking, and referrals
- 3. Research and development and commercialization support
- 4. Financing support activities
- 5. Mentoring, coaching and training
- 6. Planning and institutional development activities (includes a subsection on CEDS)

NOT all categories of questions will apply to the activities undertaken as part of your project, so you will be able to bypass any category that is not applicable to your project or skip or enter "N/A" in the case of inapplicable questions.*

For the purposes of this data collection, unless specified, the word "client" can also mean "beneficiary", "stakeholder", "entrepreneur", "firm", or "borrower" (e.g., for the RLF program). For more information on methodology for this questionnaire, please visit: https://www.eda.gov/performance/ or e-mail programevaluation@eda.gov.

*Expansion/leasing of facilities or purchase of equipment for an economic development project.

Agency Disclosure Notice: This information collection is authorized by OMB control #0610-0098. Public reporting burden for this collection of information is estimated to average 2.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Commerce, (Economic Development Administration, 1401 Constitution Ave NW, Washington, DC 20230.). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.



General Information

* Please enter your EDA grant number:
* The target beneficiary(ies)/client(s) of this grant is:
Your organization (to undertake and promote effective economic development programs)
Revolving Loan Fund borrowers
Startups
Small and medium-sized enterprises (SMEs other than startups)
Firms (excluding startups and SMEs)
Economic Development Districts (designated by EDA)
Regional jurisdictions (including American Indian reservations-Federal and -State recognized, Alaska Native Regional Corporations , trust lands, and other Native lands)
N/A (Research)
Other (please specify)
* Did your organization receive an <u>EDA Capital Challenge</u> grant?
Yes
○ No



Capital Challenge Questions

Sele	ect activities supported through the EDA Capital Challenge:
	Planning of an early-stage seed fund
	Formation of an early-stage seed fund
	Launch of an early-stage seed fund
	Scale or expansion of the seed fund
	Creation or expansion of an angel network or similar efforts to support individual investors

Capital Challenge

	owing questions only enter a number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or
	is not available, please enter or check "N/A". Unless stated otherwise, please respond <u>cumulatively</u> since the start of performance under the ant. All information reported should pertain to the project activities sponsored under an EDA grant. Only the questions with asterisks are
mandatory.	
* Wha	is the total target seed fund size?
	N/A
	Total target seed fund size (USD):
* Wha	is the total amount raised for your current seed fund?
	Not yet known (but expected)
	N/A
	Total amount (USD):
* How	many fund contributors (either limited partners, donors, grantors, etc.) have committed to the seed fund?
	N/A
	Number of fund contributors:
* How	many prospective investments were assessed?
	N/A
	Number of prospective investments assessed:
	is the total amount of capital deployed to investment companies?
	Not yet known (but expected)
	N/A
	Amount (USD):

	many portfolio companies have you invested in during the span of the Capital Challenge project period?
() 1	N/A
() N	Number of companies:
L	
What	is the average investment size the fund makes in portfolio companies?
	N/A
O 4	Average investment (USD):
L	
\A/bot	is the time horizon of the fund?
	Evergreen/open-ended
	N/A
О Т	Time horizon (specify):
Г	
Is you	ur fund operating in a designated Opportunity Zone?
() Y	/es
() N	No .
○ N	N/A
Is you	ur fund a federally registered Opportunity Fund?
() Y	/es
() N	No
○ r	N/A

Capital Challenge Questions : Angel Network

information is not available, please enter	number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or er or check "N/A". Unless stated otherwise, please respond <u>cumulatively</u> since the start of performance under the ed should pertain to the project activities sponsored under an EDA grant. Only the questions with asterisks are
* How many 1-on-1 meeting	s has your organization had with potential investors?
○ N/A	
Number of meetings:	
	ts has your organization hosted to promote and educate potential investors?
○ N/A	
Number of outreach ever	nts:
For each event type below, ple	ease provide the number of events held:
If not applicable, please enter	'1" in the N/A field.
Conference	
Networking Event/Meetups	
Workshops/Bootcamps	
Other	
N/A	
* Please enter the total number of participants:	per of unique participants for these events:
Number of participants.	

Facilities & Equipment

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* Did the EDA grant support expansion or leasing of facilities and/or leasing or acquisition of equipment ? (Yes/No)
New facilities and equipment (including software) reflect physical expanding capabilities of EDA grantees. The questions in this section are <u>only</u> about the facilities and equipment existing or obtained in support of the scope of work under the EDA grant/cooperative agreement and do not include other tangential purchases or acquisitions.
All information reported should pertain to the project activities sponsored under an EDA grant/cooperative agreement.

Facilities and Equipment

For the following questions only enter a number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or information is not available, please enter or check "N/A". Unless stated otherwise, please respond <u>cumulatively</u> since the start of performance under the current grant. <u>All information reported should pertain to the project activities sponsored under an EDA grant</u> . Only the questions with asterisks are mandatory.
How much space (sq. ft.) was available to your organization prior to the EDA grant ? <i>If you had already responded to this question before, please leave blank; if the question isn't applicable, please enter "N/A".</i>
* How much new space (sq. ft.) was developed or leased as a result of the EDA grant? N/A
New space (sq. ft.):
* If applicable, please specify the purpose of the facilities: Incubator
Accelerator Maker space Coworking space
Scientific laboratory N/A
Other (please specify)
* What was the total value of new equipment (that includes software) that was purchased or leased as a result of the EDA grant? N/A
Total value (USD)
Please specify the type of equipment purchased/leased:



Events, Networking and Referrals
* Did this grant support events, networking, and/or referral activities?
Did this grant support events, networking, and/or referral activities:
(Yes/No)
The questions in this section refer to activities such as showcases, exhibitions, networking or outreach events conducted under an EDA grant/cooperative agreement. Such events can help generate connections among stakeholders and facilitate the flow of information, ideas and resources within a region.
All information reported should pertain to the project activities sponsored under an EDA grant/cooperative agreement.

Events, Networking and Referrals

For the following questions only enter a number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or information is not available, please enter or check "N/A". Unless stated otherwise, please respond <u>cumulatively</u> since the start of performance under the current grant. <u>All information reported should pertain to the project activities sponsored under an EDA grant.</u> Only the questions with asterisks are mandatory.

EDA grant. Only the question	is with asterisks are manuatory.	
* What type of events h	ave you held as part of the scope of work under the EDA grant:	
Conference		
Showcase or exhibi	t	
Networking		
N/A		
Other (please speci	fy)	
If applicable, please provide	de more details on the events held:	
How many of these events did you hold?		
How many unique		
participants attended these events?		
How many participants		
attended these events (in total)?		
L		

	cus of the events: (Check all that apply)
	Business development
	Pre-disaster economic planning
	Post-disaster economic recovery
	Regional economic diversification
	Emerging industries
	Global value chains
	Workforce development
	Showcasing of research and/or inventions of your clients
	Data and/or tools for economic development
	N/A
	Other (please specify);
* Since	ce the start of the EDA grant, have you referred your clients to: (Please check all that apply) Technical expert Local business association
	Local economic development organization (including EDDs) Investor State or local government Another federal agency N/A Other (please specify)
	Investor State or local government Another federal agency N/A

If yes, please provide mo	ore details on the referrals made:		_
How many referrals were		_	
made?			
How many clients were			
referred?			
Of the referrals , how many were to another federal			
agency program?			
		_	
How many clients were referred to another federal			
agency program?			
agonoy program.			



R&D and Commercialization Support
* Did this grant support research and development (R&D) and/or commercialization activities? (Yes/No)
Key activities in this category include new research initiatives, connecting clients or beneficiaries to university partners, or assistance with technology transfer and commercialization of research (e.g., assistance with licensing, patenting, or other regulatory/government approvals) sponsored under EDA's grant (or a cooperative agreement).
All information reported should pertain to the project activities sponsored under an EDA grant/cooperative agreement.

R&D and Commercialization Support

For the following questions only enter a number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or information is not available, please enter or check "N/A". Unless stated otherwise, please respond cumulatively since the start of performance under the current grant. All information reported should pertain to the project activities sponsored under an **EDA grant**. Only the questions with asterisks are mandatory. * How many clients did you assist with technology commercialization or licensing? Number of clients or beneficiaries assisted: Which tools did you use to help guide your clients' work? **Technology Readiness Levels Tool** N/A Other (please specify) * How many clients did you assist with patenting activities? N/A Number of clients or beneficiaries assisted: If applicable, how many patent applications did you help your clients file? * How many clients did you assist with collaborative agreements? (Collaborative agreements include new, fully executed R&D agreements between at least two organizations where personnel, services, facilities, equipment, intellectual property, or other resources were provided with or without reimbursement toward the conduct of specified research or development efforts.) Number of collaborative agreements:

○ N/A
Number of clients
* Did your organization or your clients engage in the following research and development activities?
Proof-Of-Concept
Prototyping
Technology Scale-up
New Product Development
□ N/A
Other (please specify)
* For Trade Adjustment Assistance for Firms (TAAF) program grantees: how many firms served had projects in their busin recovery plans that were for the purpose of conducting research and development activities (e.g., new product development)
○ N/A
Number of clients/firms with R&D business recovery plans:
* For TAAF program grantees , how many firms had projects in their business recovery plans that included technology transf
and commercialization support activities?
N/A
Number of clients with technology transfer and commercialization activities in their business recovery plans:
Number of clients with technology transfer and commercialization activities in their business recovery plans:
Number of clients with technology transfer and commercialization activities in their business recovery plans:
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Number of clients with technology transfer and commercialization activities in their business recovery plans:
Number of clients with technology transfer and commercialization activities in their business recovery plans:



Financing Support
* Did this grant support financing activities? (Yes/No)
The questions in this section reflect EDA grant-sponsored activities that grantees undertake to secure new funding in support of their or of their clients' work - from assistance on grant applications to guidance on angel, seed or venture capital competitions.
All information reported should pertain to the project activities sponsored under an EDA grant/cooperative agreement.

Financing Support

For the following questions **only enter a number** (e.g., do not enter "USD", "\$", or "sq. ft."). If a question is applicable, but there was no output, enter 0; if not applicable or information is not available, please enter "N/A". Unless stated otherwise, **please respond <u>cumulatively</u> since the start of performance under the current grant. All information reported should pertain to the project activities sponsored under an <u>EDA grant.</u> Only the questions with asterisks are mandatory.**

Please note that the information on the amount of funding secured as a result of the activities reported belowwill be asked in the annual outcomes questionnaire at the end of the performance year.		
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* How many clients did yo	u assist with securing:	
If not applicable, please enter "1" in the "N/A" field.		
Seed funding		
Angel funding		
Venture Capital funding		
N/A		
* How many clients did	you assist with a grant and/or loan application(s)?	
Number of clients (or beneficiaries or borrowers) assisted:	
* How many clients did	you assist with obtaining other types of financial assistance (e.g., contract, etc.)?	
N/A	you assist with obtaining other types of infancial assistance (e.g., contract, etc.)?	
Number of clients (or beneficiaries or borrowers) assisted:	
* How many grant, loan under an EDA grant?	, or other types of financial assistance did your organization apply for in support of the scope of work	
N/A		
Number of applicati	ons:	
If applicable, please spec	ify the type/source(s) of funding:	
If applicable, please spec	ify the type/source(s) of funding:	

	Trade Adjustment Assistance for Firms (TAAF) program grantees, how many firms served had projects in their business
Tecc	overy plans that included financing activities? N/A
\circ	Number of clients/firms with financing activities in business recovery plans:



Mentoring, Coaching and Training

mentoring, coacrining and training
* Did this grant support mentoring, coaching, and/or training activities?
(Yes/No)
These questions reflect EDA grant/cooperative agreement-sponsored activities that provide grantees and/or their clients with support for human capital, workforce, and business development. Key activities in this category include training, skills, or business assistance such as accelerator programs, market research, or assistance with marketing, sales, product development, exporting, or other operational assistance.
All information reported should pertain to the project activities sponsored under an EDA grant/cooperative agreement.

Mentoring, Coaching and Training

Other (please specify)

For the following questions only enter a number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or information is not available, please enter or check "N/A". Unless stated otherwise, please respond cumulatively since the start of performance under the current grant. All information reported should pertain to the project activities sponsored under an **EDA grant.** Only the questions with asterisks are mandatory. * How many training or skill assistance sessions (including workshops and seminars) did your organization hold? Number of sessions held: * Focus of the training or skill assistance sessions: (Check all that apply) Data analytics Leadership/Management Project management Marketing/Sales Finance Product development Business development N/A Other (please specify); if industry-specific, please provide a NAICS code * What was the role (if any) of the private sector stakeholders in determining the focus of the training sessions reported above? Focus and design of training developed in partnership with firms Demand for skills expressed by the firms in the region (documented) Training sessions co-sponsored by private firms (including in-kind contributions) Binding agreement to match clients with jobs in those firms after training completion N/A

* How many clients (total) participated in the sessions reported above? (If not applicable, please enter "1" next to "N/A")		
Number of firms		
Number of clients (stakeholders)		
N/A		
* How many bootcamps or a	accelerator programs did your organization hold? (If not applicable, please enter "1" next to "N/A")	
Number of bootcamps		
Number of accelerator programs		
N/A		
How many beneficiarie	es participated in the sessions reported above?	
Number of beneficia		

^ How many mentoring o	or coaching sessions were held?	
Number of sessions		
* D. I.		
Product developme	provide any of the following types of business assistance to clients/beneficiaries? (Check all that apply)	
Value chain analysis		
E-commerce entry/e	expansion	
Marketing, sales, or	market research assistance	
Exports assistance	or advice	
N/A		
Other (please speci	fy)	
1	ders received the service(s) reported above?	
Number of firms		
Number of stakeholders (other than firms)		

	Trade Adjustment Assistance for Firms (TAAF) grantees, how many firms had projects in their business recovery plans	Γ
tnat	were for the purpose of mentoring, coaching, and/or training activities?	
\bigcirc	N/A	
	Number of firms:	



Planning and Institutional Development

* Did this grant support planning and institutional development activities?
(Yes/No)
The activities in this section are often led by organizations that might not directly serve clients but seek to improve
institutional capabilities or pursue planning and research activities that will help grow regional economies as part of the scope of
work under the EDA grant/cooperative agreement.
work under the LDA grain-cooperative agreement.
Please note that this section begins with a question that will let you proceed directly to the subsection on the development,
update, and implementation of a Comprehensive Economic Development Strategy (CEDS).
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All information reported should pertain to the project activities sponsored under an EDA grant/cooperative agreement.



Planning and Institutional Development

Comprehensive Econom	nic Development Strategy (CEDS) as a result of support from this grant?	
Development		
Update		
Implementation		
Did not work on CEDS		
Worked on CEDS and o	other institutional development activities	

Planning and Institutional Development

For the following questions only enter a number (e.g., do not enter "USD" or "\$"). If a question is applicable, but there was no output, enter 0; if not applicable or information is not available, please enter or check "N/A". Unless stated otherwise, please respond <u>cumulatively</u> since the start of performance under the current grant. Only the questions with asterisks are mandatory.

* Did	your organization conduct any of the following activities? Please check all that apply.
	Research
	Feasibility study
	Disaster recovery, resilience or mitigation plan
	Economic impact analysis (including IMPLAN ©, REMI ©, or regression analyses)
	Non-CEDS economic development plan
	Development of a report/tool
	Workforce development study
	Cluster development study
	Market study
	Productivity improvement study
	N/A
	Other (please specify)
How ma	any of the activities reported above were completed?
Ном	many clients did you assist with the activity (ies) reported above?
	N/A
	Number of clients/beneficiaries/borrowers:
* Did	you host outreach events to increase visibility of the findings stemming from the activities reported above?
	(Yes/No/N/A)

N/A			
Number of participa	its:		
	_		
Were vou or vour clien	ts provided with outside expertise or	professional services. such as	consulting, relevant to the sc
of work under this grar		,	3 ,
(Yes/No/N/A)		



Comprehensive Economic Development Strategy (CEDS)
* My organization worked on <u>CEDS</u> -related activities since the start of the grant (or over the past six months): (Yes/No)

Planning and Institutional Development (CEDS)

	six months, how many times has the CEDS Strategy Committee met?
	ticipating jurisdictions (e.g., the Economic Development District members and/or sub-jurisdictions) engaged in the update, and/or implementation of a CEDS?
	ast six months, has the CEDS been actively used by a participating jurisdiction (or sub-jurisdiction) to inform a ound economic development?
•	(Yes/No/N/A)
	proactively attempted to align or integrate the CEDS with another federally-funded planning document (e.g., HUD
Consolidate	proactively attempted to align or integrate the CEDS with another federally-funded planning document (e.g., HUD ed Plan, FEMA Hazard Mitigation Plan)? (Yes/No/N/A) please enter the name of the other planning document:
Consolidate	ed Plan, FEMA Hazard Mitigation Plan)? (Yes/No/N/A)
Consolidate If yes,	ed Plan, FEMA Hazard Mitigation Plan)? (Yes/No/N/A)

Narrative Section

	information on the reported outputs available at the county, census tract, or tribal area level? If possible, please provide the sus tract numbers, FIPS codes, or Native American reservations/ trust lands/area names.
	No
	N/A
\bigcirc	Yes, list geographic information:
	Did you use any of the tools listed below to plan or assess the progress of project?
	StatsAmerica Regional Innovation Index
	Stats America: CEDS Resource Library
	Stats America: the Regionizer
	StatsAmerica: Measuring Distress
	StatsAmerica: Opportunity Zones
	StatsAmerica: Cluster Mapping
	N/A
	Other (please specify)

DA grant, etc.):				
pulations?	ort, how have the sp			
pulations?				