The list of Data Elements below applies to Version 4.0. CMS must provide input for all data elements listed. If information for Required data elements is not available, default values will be used. CMS must provide the latest version to agencies when available.

Data Elements Common Titles	Data Descriptions	Value Required Y = Yes N = No
Agency EIN	Agency federal employee identification number or Tax ID used by IRS	Y
Reporting Month	Identifies the month data is reported.	Y
Agency's Dunn's Number	Agency Dunn & Bradstreet identification number	N
Agency Physical Address Line 1	Agency's current physical location address line #1	Y
Agency Physical Address Line 2	Agency's current physical location address line #2 if applicable	N
Agency Physical Address Line 3	Agency's current physical location address line #3 if applicable	N
Agency Physical Address Line 4	Agency's current physical location address line #4 if applicable	N
Agency Physical Address City	Agency's physical location address city	Y
Agency Physical Address State	Agency's physical location address state	Y
Agency Physical Address Zip Code	Agency's physical location address ZIP code	Y
Agency Mailing Address Line 1	Agency's current mailing location address line #1	N
Agency Mailing Address Line 2	Agency's current mailing location address line #2 if applicable	N

Agency Mailing Address Line 3	Agency's current mailing location address line #3 if applicable	N
Agency Mailing Address Line 4	Agency's current mailing location address line #4 if applicable	N
Agency Mailing Address City	Agency's mailing location address city	N
Agency Mailing Address State	Agency's mailing location address state	N
Agency Mailing Address Zip Code	Agency's mailing location address ZIP code	N
Agency Web Site	Agency's web site URL (address).	N
Agency's Office Phone Number	Agency's phone number For public information and inquiries.	Y
Agency Toll Free Phone Number	Agency's toll free number For public information and inquiries.	N
Agency's FAX number	Agency's fax number For public information and inquiries.	N
Agency's Office Email Address	Agency's office Email For public information and inquiries.	Y
Agency Faith Base	Indicator that identifies the agency as a faith based organization	Y
Agency Colonias	Indicator of services provided to the Colonias population	Y
Agency Migrant Farm Workers	Indicator that the agency serves migrant farm workers	Y

Agency Counseling Budget	Identifies Agency's total Housing Counseling Budget for the support and operations of the agency.	Y
Agency Languages	One or more languages that the Agency counselors can speak.	Y
Agency Counseling Service Types	One or more counseling service types that the counselors at this Agency are certified to provide.	Y
Contact Type	System ID that identifies the agency personnel position such as: CEO, Office Director, Manager, Counselor, etc.	Y
Contact First Name	Agency personnel's first name	Y
Contact Last Name	Agency personnel's last name	Y
Contact Middle Name	Agency personnel's middle name. Middle initial is accepted	N
Contact Title	System ID for Agency contact business title.	Y
Contact Address1	Agency office's mailing street address line 1	Y
Contact Address2	Agency office's mailing street address line 2	N
Contact City	Agency office's mailing address city	Y

Contact State	Agency office's mailing address state	Y
Contact Zip Code	Agency office's mailing address zip code	Y
Contact Phone Number	Agency's Personnel Phone Number	Y
Contact Phone Extension	Agency Personnel Phone Extension if applicable	N
Contact Mobile Number	Agency's Personnel Mobile Phone Number if applicable	N
Contact FAX number	Agency's Personnel FAX Number if applicable	N
Contact Email	Agency's Personnel Email address. For contact from HUD	Y
CMS Counselor ID	Counselor ID associated with the agency assigned by the CMS or agency to identify each counselor.	Y
Counselor First Name	Agency counselor first name	Y
Counselor Middle Name	Agency counselor middle name	N
Counselor Last Name	Agency counselor last name	Y

Counselor Employment Start Date	The date the counselor started working for the agency	Y
Counselor Employment End Date	The last date the counselor worked for the agency if counselor no longer employed	N
Counselor HUD ID	Placeholder for future release where counselors register themselves and are issued a HUD id that would uniquely identify them across all agencies for which they work.	N
Counselor Billing Rate	Rate counselor charges for services	Y
Counselor Billing Method	Description of counselor billing mode – i.e. “hourly” or “fixed”.	N
Counselor SSN	Full SSN for counselor. Useful in uniquely identifying a counselor across all agencies.	Y
Counselor Phone	Counselor Phone number	N
Counselor Email Address	Counselor email address	N
Counselor Languages	One or more languages counselor can speak.	N
Counselor Service Types	One or more service types counselor is certified to provide.	N
Counselor Training Title	The title of the training course attended by the counselor	Y

Counselor Training Date	The date of the training course attended by the counselor	Y
Counselor Training Duration	Length of training session.	N
Counselor Training Certificate	Indicates whether the counselor received a certificate from the training course attended	Y
Counselor Training Organization	The organization that provided the training course the counselor attended.	Y
Counselor Training Organization Other	The organization that provided the training course the counselor attended when it is not one of the predefined organizations.	N
Counselor Training Sponsor	The organization that sponsored the training course the counselor attended.	Y
Counselor Training Sponsor Other	The name of the organization that sponsored the training course if it is now a known organization.	N
Group Session ID	A unique id for an instance of a group session conducted by a counseling agency	Y
Group Session Title	The title of the group session conducted by a counseling agency	Y
Group Session Date	The day the group session was conducted or the first day of the group session if session spanned multiple days.	Y
Group Session Duration	The number of hours the group session took. If the group session spans multiple days, then the aggregate number of hours through all the days of the session.	Y

Group Session Counselor ID	The CMS counselor ID of the counselor that taught or led the group session.	Y
Group Session Type	The topic covered in the group session. This provides the data for calculating HUD 9902 group session numbers. Specified as a reference ID.	Y
Group Session Attribute HUD Grant	Indicates the HUD Housing Counseling Grant that was used to fund the course. Specified as a reference ID.	Y
Group Session Attendees	List of Attendees who attended Group Session. Pertinent demographics collected for each such Attendee.	Y
Group Session Attendee ID	Unique identifier within this Agency for a group session attendee. Must match global Attendee ID for this Agency.	Y
Group Session Attendee Fee Amount	Amount Attendee paid to attend group session.	Y
Group Session Attendee Referred By	Indicates the source of reference the attendee learned about program	Y
Group Session Attendee First Time Home Buyer	Indicator of whether this Attendee is a first time home buyer before receiving education.	Y
Group Session Attendee Address 1	Attendees first line of residence street address at time of group session.	Y
Group Session Attendee Address 2	Attendee's second line of residence street address at time of group session.	Y
Group Session City	Attendee's city of residence at time of group session.	Y

Group Session Attendee State	Attendee's state of residence at time of group session.	Y
Group Session Attendee Zip Code	Attendee's zip code of residence at time of group session.	Y
Group Session Attendee Income Level	Attendee's Income Level at time of group session.	Y
Attendee ID	Unique id identifying this Attendee within Agency.	Y
Attendee First Name	Attendee of agency group session(s) First name	Y
Attendee Last Name	Attendee of agency group session(s) last name	Y
Attendee Middle Name	Attendee of agency group session(s) middle name or initial	N
Attendee Address1	Attendee of agency group session(s) most current street address line #1	Y
Attendee Address2	Attendee of agency group session(s) most current street address line #2	N
Attendee City	Attendee of agency group session(s) most recent city	Y
Attendee State	Attendee of agency group session(s) most recent state	Y

Attendee Zip Code	Attendee of agency group session(s) most recent zip code	Y
Attendee Race ID	Indicates the Attendee's race as indicated on 9902 Section #3. Specified as a reference ID.	Y
Attendee Ethnicity ID	Indicates the Attendee's ethnicity as indicated on 9902 Section #4. Specified as a reference ID.	Y
Attendee Income Level	Indicates the Attendee's most current income level as indicated on 9902 Section #5. Specified as a reference ID.	Y
Client ID Number	Unique identifier the CMS assigns to each client	Y
Client Case Number	Agency's file number or case number assigned to each client for counseling services. Combination of Case Number and ID Number uniquely identify a client.	Y
Client SSN1	Client's complete social security number	N
Client SSN2	Client's last 4 digits of their social security number	N
Client First Name	Client's first name	Y
Client Last Name	Client's last name	Y
Client Middle Name	Client's middle name or initial	N

Client Street Address1	Client’s physical street address line #1 of residence	**Y**
Client Street Address2	Client’s physical street address line #2 of residence	**N**
Client City	Client’s physical address city of residence	**Y**
Client State	Client’s physical address state of residence. Specified as a reference ID representing state name.	**Y**
Client Zip	Client’s physical address zip code of residence	**Y**
Client New Street Address1	Client’s desired new residence street address line #1	**Y**
Client New Street Address2	Client’s desired new residence street address line #2	**N**
Client New City	Client’s desired new residence address city	**Y**
Client New State	Client’s desired new residence address state. Specified as a reference ID representing state name.	**Y**
Client New Zip	Client’s desired new residence address zip code	**Y**
Client Phone Number	Client’s home phone number	**Y**

Client Mobile Phone Number	Client's cell phone number if applicable	**N**
Client Fax	Client's FAX phone number if applicable	**N**
Client Email	Client's Email address if applicable	**N**
Client Family Size	The number of individuals that live in the client's residence	**Y**
Client Gender	Client's gender	**Y**
Client Marital Status	Client's marital status. Specified as reference ID representing various choices including: Marry, Single, Divorce, etc	**Y**
Client Race ID	Client's race as defined in 9902 form. The CMS assigns a reference ID associated with the appropriate descriptions.	**Y**
Client Ethnicity ID	Client's ethnicity as defined in 9902 form. The CMS assigns a reference ID associated with the appropriate descriptions.	**Y**
Client Head of Household Type	Indicates who is the head of household, i.e. Single Adult, Married with dependents, Two or more unrelated Adults, etc. Specified as a reference ID representing the various choices.	**Y**
Client Household Gross Monthly Income	Household's gross monthly income from all household members	**Y**
Client Birth Date	Client's day of birth	**N**

Client Counselor ID	Identifies the counselor ID assigned to conduct counseling. Must correlate to an actual counselor in current submission.	Y
Client Highest Education	Client's description indicating the highest level of completed education.	Y
Client Farm Worker	Indicates if client is a farm worker.	Y
Client Colonias Resident	Indicates if client is a colonias resident	Y
Client HUD Assistance	The type of HUD assistance received by the client to for their housing problem. Specified as reference ID matching correct description.	Y
Client Disabled	Indicates if the client has a disability	Y
Client Dependents Number	Indicates the number of individuals in the household that rely on support	Y
Client Intake Date	Date when client initiated agency counseling services	Y
Client Counsel Session Date Start	The day when the client conducted counseling for a specific counseling service	Y
Client Counsel Session Date End	The day when the client counseling session ended for a specific counseling service. If counseling ongoing, omit.	N
Client Language Spoken	The language the client is fluent	Y

Client Session Duration	The session is the counseling meeting conducted each time the client meets with assigned counselor. Session duration time will be recorded in minutes.	Y
Client Counseling Type	The type of counseling as listed in agency profile. Specified as a reference ID matching descriptions.	Y
Client Counseling Termination	Reason the counseling service is terminated. The termination is based upon the outcome listed in section #7 of the 9902 report.	Y
Client Counseling Fee	The cost the client paid out of pocket for counseling services	Y
Client Attribute HUD Grant	Indicate if the client's counseling session was funded by HUD Grant. If so, specify type of grant through a reference ID.	Y
Client Grant Amount Used	Indicates how much HUD was billed for this particular client counseling. This enables HUD to track how their money is used.	N
Client HECM Certificate	Indicate if the client received a HECM certificate	Y
Client HECM Certificate Issue Date	If applicable, the date the HECM certificate was issue and started the time when the certificate is usable.	N
Client HECM Certificate expiration Date	The date the HECM certificate expires	N
Client HECM Certificate ID	The HECM certificate ID that was issued	N
Client Predatory Lending	Indicator of whether or not the client is a victim of predatory lending practices	Y

Client Mortgage Type	Indicates the client's existing mortgage type before counseling.	Y
Client Mortgage Type After	Indicates the client's renegotiated mortgage type as a result from counseling	Y
Client Finance Type Before	Indicates the type of financing the client had prior to counseling	Y
Client Finance Type After	Indicates the type of financing the client receive after counseling	Y
Client First Time Home Buyer	Indicator whether the client is a first time home buyer at the time of counseling.	Y
Client Discrimination Victim	Indicator whether the client is a victim of discrimination in housing	Y
Client Mortgage Closing Cost	Client's Closing cost on the new mortgage from counseling.	N
Client Mortgage Interest Rate	Client's interest rate on the new mortgage from counseling.	N
Client_Intake_Loan_Type	Indicates type of intake loan client has.	Y
Client Intake Loan Is a Hybrid ARM Loan	If Client Intake Loan is ARM, then this is required. Indicate here that it is a Hybrid ARM Loan. Boolean field.	N
Client Intake Loan Is an Option ARM Loan	If Client Intake Loan is ARM, t hen this is required. Indicate here that it is an Option ARM loan. Boolean field.	N

Client_Intake_Loan_Is_Interest_Only	Indicates if client intake loan is an interest-only loan. Boolean field.	N
Client Intake Loan is FHA Or VA Insured Loan	Indicates if client intake loan is FHA or VA insured. Boolean field.	N
Client Intake Loan is a Privately Held Loan	Indicates if client intake loan is privately held. Boolean field.	N
Client Intake Loan is Has Interest Rate Reset	Indicates if client intake loan has interest rate reset. Boolean field.	N
Client Loan Being Reported	Indicates which loan the client is reporting. There are two possible values: First or Second.	Y
Client Second Loan Exists	Indicates if the client has a second loan. Boolean value. Required if Client Loan Being Reported is First.	N
Client Referred By	Indicates the source of referral the client learned about the counseling program.	Y
Client Sales Contract Signed	Indicating the date the sales contract was signed.	N
Client Credit Score	The client's FICO score from a major acceptable credit reporting agency	N
Client Credit Score Source	If a credit score is provided, this field needs to be provided as well. It indicates the source of the credit score. List of acceptable values specified in a reference table.	N
Client Missing Credit Score Reason	If no credit score is provided, then specify the reason why. List of acceptable values specified in a reference table.	N

Client Job Duration	Length of time employed in months	**Y**
Client household Debt	Monthly household liabilities	**Y**
Client Mortgage Delinquency	Mortgage payments missed in months	**N**
Client Spouse First Name	Client's spouse first name	**N**
Client Spouse Last Name	Client spouse last name	**N**
Client Spouse Middle Name	Client's spouse middle name or initial	**N**
Client Spouse SSN	Client's spouse complete social security number	**N**
Client Income Level	Indicates the client's Household income level as defined in 9902 Section #5. Specified as a reference ID.	**Y**
Client Purpose of Visit	Indicates the purpose of client counseling session. Specified as a reference id. Values include Occupied, Seeking Help Housing, Home Maintenance Finance Mgmt, Prevent Mortgage Delinquency, Prepurchase Counsel.	**Y**
Client Outcome of Visit	The outcome of the client counseling session. Allowable values depend on Purpose of Visit. Specified as a reference ID.	**Y**