

<p>6.0</p>	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ol style="list-style-type: none"> 1. Eligibility, Selection and Admission Policies, including Deconcentration and Waiting List Procedures- No changes. 2. Financial Resources are listed in the following table – See attachment a. 3. Rent Determinations - No changes. 4. Operation and Management. – See attachment j – Revised Organizational Chart (Addt'l staffing). Pest Control Management remains without change, with pest management provided by a licensed contractor for the prevention or eradication of pest infestation, including cockroaches. 5. Grievance Procedures – No changes. 6. Designated Housing for Elderly and Disabled Families - No changes. 7. Community Service and Self-Sufficiency - No changes. 8. Safety and Crime Prevention - No changes. 9. Pets - No changes. 10. Civil Rights Certification - No changes. 11. Audit – The GMAHA annual independent public audit was conducted for FYE 3-31-2009. There were no findings. 12. Asset Management - No changes. 13. Violence Against Women Act (VAWA) - No changes. – See VAWA Statement on attachment i. 14. Carbon Monoxide - No changes. – See CM Statement in attachment i. <p>RAB Comments provided - See attachment i. Challenged Elements – None See attachment i.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>The Greater Metropolitan Area Housing Authority Annual Plan is available for public review and comment at the Housing Authority's Administrative Office located at 325 2nd Street, Silvis, IL 61282 during hours of operation on Monday –Friday 8:30 AM – 5:00 PM.</p>
<p>7.0</p>	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p><u>Hope VI, Mixed Finance, Modernization or Development:</u> GMAHA does not currently have any pending proposals for Hope VI or Mixed Finance funding. Should Mixed Finance or other Development be deemed appropriate, the GMAHA may seek funding.</p> <p>The GMAHA will continue to explore mixed-income and mixed-finance opportunities in its efforts to provided new affordable housing opportunities. The GMAHA has an approved Replacement Housing Plan and is seeking properties throughout its jurisdiction for purchase to provide availability for low-income residents.</p> <p><u>Demolition and/or Disposition:</u> GMAHA does not have any current plans for demolition or disposition of property.</p> <p><u>Conversion of Public Housing:</u> No conversions of PH properties are being considered at this time.</p> <p><u>Homeownership Programs:</u> No Public Housing Homeownership is planned at this time. The GMHA may consider homeownership programs through the Section 8 HCV Program and Section 8 Family Self-Sufficiency Program.</p> <p><u>Project Based Vouchers:</u> GMAHA has collaborated with developers on a tax credit proposal in East Moline called Hometown Harbor, a senior/disabled housing complex. The development has been approved by IHDA. We will provide 17 Project-Based Vouchers for the property. Project based vouchers may be considered to be utilized in mixed income projects or in other projects under other approved awards through IHDA and private developers. The GMAHA will follow regulations to ensure compliance.</p>
<p>8.0</p>	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>

8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>See Attachment b CFP Annual Statement Grant No. 501-10 Attachment d CFP Performance & Evaluation Reports 501-07 & 501-7 RH Attachment e CFP Performance & Evaluation Reports 501-08 & 501-8 RH Attachment f CFP Performance & Evaluation Report 501-09 ARRA Funding Attachment g CFP Performance & Evaluation Reports 501-09 & 501-09RH</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See Attachment c Capital Fund Program Five-Year Action Plan 50075.2 Five Year Action Plan</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input checked="" type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p> <p>In May 2005 the Greater Metropolitan Area Housing Authority of Rock Island County was one of the recipients of IHDA Capital Fund Revenue Bonds, Series 2005A. The proceeds were used for the substantial rehabilitation of William Young Homes I & II located in Milan, IL. William Young Homes I & II is an elderly/disabled site originally consisting of 100 units which included 16 efficiency units that were converted to 12 one bedroom units at substantial rehab. Other updates included new windows and doors, electrical, plumbing, and HVAC updates including the addition of central air conditioning. Complete bathroom and kitchen renovation including new oak cabinets, tubs with showers and fixtures. Solid wood interior doors, new flooring and accessibility updates throughout the property. Site improvements included new drives, parking and landscaping. The project was completed in August 2007. Annual debt service is paid through the Capital Funds for a twenty year period.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>The Authority has examined the housing needs of Families on the waiting list and housing needs of families in our jurisdiction by family type (based on the US Census Data 2000).</p> <p>Waiting list data at present is as follows:</p> <p>Public Housing – 42 families with an annual turnover of 121 families 93% of total families are <30% AMI 7% of families are >30% but <50% AMI 36% of applicants are families with children, 27% elderly families and 1% families with disabilities Ethnic breakdown is 65% white, 35% black.</p> <p>Section 8 – 433 families with an annual turnover of 39 families 98% of total families >30% AMI 1% are >30% but <50% AMI 1% are >50% but < 80% AMI 98% of applicants are families with children, 11 % are elderly families and 1% families with disabilities Ethnic breakdown is 29% white, 55% black, 1% native American and 1% asian</p> <p>The Public Housing Waiting list is open. The Section 8 Waiting list is closed.</p> <p>See attachment h – Analysis of Housing Needs addressing affordability, supply, quality, accessibility, unit size and location.</p>

<p>9.1</p>	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The Authority’s strategy to address the housing needs include:</p> <ol style="list-style-type: none"> 1. Employ effective maintenance and management policies to minimize the number of public housing unit off-line. 2. Reduce time to renovate public housing units. 3. Seek replacement of public housing units lost to the inventory through mixed finance development 4. Seek replacement of public housing units lost to the inventory through Section 8 replacement housing resources. 5. Maintain or increase Section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction. 6. Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size needed. 7. Maintain or increase Section 8 lease-up rates by marketing the program to owners, particularly outside of areas of minority and poverty concentration. <p>Our strategy to increase the number of affordable housing units is by:</p> <ol style="list-style-type: none"> 1. Applying for additional Section 8 units should they become available 2. Leverage affordable housing resources in the community through the creation of mixed-finance housing 3. Pursue housing resources other than public housing or Section 8 tenant-based assistance.
<p>10.0</p>	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p><u>Goal One: effective and efficient housing management :</u> The Authority has implemented Asset Management in all capacities and has thoroughly trained staff members in the various aspects of asset management. The Authority remains financially sound, with all Asset Management Properties (AMPs) creating revenue and maintaining strong reserves. Service to clients has not diminished throughout the reorganization process.</p> <p><u>Goal Two: Safe and secure environment in public housing communities:</u> On-site security has been established at two AMPs, with ongoing liaison between parties to keep a good line of communication between, PHA staff, police officers and residents on security/crime issues.</p> <p><u>Goal Three: Expand the range and quality of housing choice available to participants in the tenant-based program:</u> The Authority has accomplished this goal by marketing the program through direct contact with prospective landlords and with the creation of new landlord briefing and information documents that explain the benefits of the program. The briefing process for new clients has been updated and contains more information on housing availability.</p> <p><u>Goal Four: Effective and efficient maintenance service delivery:</u> Customer service continues to be a high priority, with prompt and courteous service provided to clients. Customer issues and complaints are minimal and each case is handled with thorough review and remedy to the situation. Resident surveys (RASS) have shown high ratings with no categories within the survey requiring follow up correction action.</p> <p><u>Goal Five: Maintain full compliance with Equal Opportunity regulations:</u> The agency strives toward diversity within all developments. Housing data is regularly reviewed and analyzed to ensure that equal opportunity and fair housing regulations are fully met. Fair housing training is required by all administrative staff members and remains a priority training item.</p>

<p>10.0</p>	<p><u>Goal Six: Improve access to economic self-sufficiency services:</u> The agency maintains a strong relationship with local service partners (Illinois Extension Service, Project Now, IL-IA Independent Living Center, Townships, etc.) to provide economic resources to our housing clients. Through this collaboration, the agency has been able to assist clients on a variety of issues, i.e, homemaking skills, budgeting, energy assistance, job seeking, transportation options, etc.)</p> <p>(b) Significant Amendment and Substantial Deviation/Modifications. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”.</p> <p>Category 1: Substantial deviations from the 5-year plan</p> <p>Substantial deviations from the 5-year plan occur when the Board of Commissioners decides to revise the mission statement, goals or objectives of the plan.</p> <p>Category 2: Significant amendments or modifications to the annual plan</p> <p>Significant amendments or modifications to the annual plan are defined as discretionary changes in the plans or policies of the housing authority that fundamentally changes the plans of the agency and which require formal approval of the Board of Commissioners.</p>
<p>11.0</p>	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)</p>

CHALLENGED ELEMENTS OF THE PHA PLAN

There were no challenged elements of the PHA 2010 Annual Plan or 5-Year Plan

CARBON MONOXIDE ALARM DETECTOR ACT (No changes)

Greater Metropolitan Area Housing Authority of Rock Island County is in compliance with the Carbon Monoxide Detector Act.

Prior to the January 1, 2007 due date, a portion of the public housing stock previously had carbon monoxide detectors installed at the apartments. The remaining units were equipped with carbon monoxide detectors as instructed in the Act.

Carbon monoxide detectors are maintained and tested by housing authority maintenance staff. Residents are instructed on the procedures of testing their equipment and are to report non –operating equipment through the work order system.

Section 8 landlords and participants were provided advance notice on the subject to ensure compliance prior to the due date. Proper compliance with the Act is verified at the units and carbon monoxide detectors are tested during the annual HQS inspection process.

VAWA – THE VIOLENCE AGAINST WOMEN ACT (No changes)

A goal of the Greater Metropolitan Area Housing Authority of Rock Island County is to fully comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offenses covered by VAWA to the degree we can.

The Greater Metropolitan Area Housing Authority of Rock Island County provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking.

The Greater Metropolitan Area Housing Authority of Rock Island County provides or offers the following activities, services, or programs that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

**RESIDENT ADVISORY BOARD 2010 ANNUAL PLAN & 5 YEAR PLAN
QUESTIONS & COMMENTS**

The Resident Advisory Board is composed of residents from each AMP development at the Agency. Participating in the resident advisory board meetings this year were:

AMP 1-

Laura Theis
Marge Theis
Lauren Shewmaker-Spencer
Mario Munoz
Viola Dietsch

AMP 5-

Mary Reeves
Mary Ann Whipple
Edith Hemphell
Harold Hemphell
Nadine Delacroiz
Tommye Gilbert
Sharon Johnson
Pat Patterson
Pat Bettis
Delia Eagan
Dixe Kanke
Beulah Rudseshl
Beverly Harland
Kay Jay
Patty Boyd
Rose Olsen
Leona Flores
Bernice Gray
Sandi James

Melinda Hanson
Dennis Schmitt

AMP 7-

Penny Brightman
Dorothy Yarbough
George Crowe
Lee Clester

Carmen Marshall
Lucille Cox
Joyce Vallejo
Rosie Yates

AMP 12-

Rita Schatteman
Alice Johnson
Virginia Sangster
Sandra Davis
Stan Humble
Patricia Ketchum
Peggy Brose
Janice Hall
Karen Wexell
John Anderson
Joan Williamson
Virginia Chavez
Maggie O'Rourke
Louise Hood

Questions and Comments from the RAB group are listed by development:

AMP 1 – Oak Grove, East Moline, IL

Are the yellow parking stripes going to be marked again? *Yes, the maintenance staff will mark the striping in the summer months again.*

Where can we store excess/seasonal items? *Our apartments are small. We realize there is limited storage in apartments. During renovations we had added some additional shelves in the closet areas. We do take note of this issue and will consider storage options in our renovation plans.*

Will apartment renovations be done in the winter? *Yes, the contractor at the Oak Grove area will be working year round until the contract work is completed.*

I lived here at Oak Grove in the 1940's. It was a nice place then and I am here now and it is still a nice place. *Thank you. It is good to know that we are able to assist you in your housing needs...then and now.*

AMP 5 – William Young Homes, Milan, IL

I am concerned about snow removal. The contractor does not do a very good job. *Snow removal is contracted on a year to year basis. The contractors remove snow on the*

streets and fire lanes. Our maintenance staff coordinates their snow removal work with the contractor.

Will I be able to plant any flowers in front of my apartment? In ground plantings are not permitted. However, flower pots/container may be placed on the ground in the mulched areas or flower pots can be hung from shepherd's hooks in the same areas.

I have a sidewalk that is unsafe. When will it be fixed? Sidewalk repairs and replacements are scheduled periodically when determined necessary.

Why do we only have one maintenance person here? Mike needs more help. The site has been recently renovated, with a limited number of work orders and apartment preparations that require very little time. Lawn care, snow removal, HVAC work and many other items are contracted out. Additional temporary help or maintenance from other locations help at the site when needed.

Will we have someone in the office more than 2-1/2 days a week? Yes, that will happen in the near future. Your Property Manager takes care of sites spends her time between the two locations. It is our intention to hire one part-time clerical worker to work at the sites too.

Are we going to have the dead bushes that were taken out replaced? Yes. All of the dead bushes were removed and new plantings will be replacing them in some areas, most likely in the Spring. In some areas the roof overhangs prevented the bushes from getting adequate water. We will also scheduled to have gutters replaced in the upcoming year and a new system "rain handler" gutter system may be used at the area. It will help the plantings too.

You mentioned that the satellite dish guidelines for the property were recently revised. We have a lot of solicitors comes to our door to sell us dishes. What can we do? All installers should talk to the Property Manager prior to visiting apartments. We do not endorse any individual company to sell the dish service. We will discuss the situation about solicitors and see if we can discourage there visits.

AMP 7 – Streed Tower, East Moline, IL

We don't have enough washers & dryers in the building. Can we have more and get a larger one to wash bedding? We try to have as much laundry equipment available to meet your needs, space permitting. We will look into the situation to see if more space is available for additional equipment.

We need more grocery carts by the side entrance door. We will check into obtaining some additional carts.

AMP 12 – Warren Tower and Warren Heights, Silvis, IL

You mentioned an elevator upgrade in future years. I would like to suggest that residents that are able to do so take the stairs more frequently when they go down, and that will be less wear on the equipment. Thank you. That is a nice idea for residents that can do so.

9.0 Housing Needs of Families in Jurisdiction by Family Type

Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income <=30% AMI	2,700	5	5	5	3	2	4
Income> 30% but<=50% AMI	1,970	5	4	5	2	2	4
Income> 50% but<=80% AMI	2,880	4	3	5	2	2	4
Elderly	2,000	5	4	5	3	1	4
Families with Disabilities	390	4	5	3	3	3	4
Ethnicity - White	3,510	5	5	4	3	2	3
Ethnicity - Black	2,500	5	5	4	3	2	3
Ethnicity - Hispanic	600	5	5	4	3	2	3

Part I: Summary

PIA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	43,191.96	43,191.96		
3	1408 Management Improvements	8,000.00	8,000.00		
4	1410 Administration (may not exceed 10% of line 21)	94,224.00	94,224.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000.00	30,000.00		
8	1440 Site Acquisition	20,000.00	20,000.00		
9	1450 Site Improvement	48,500.00	48,500.00		
10	1460 Dwelling Structures	340,000.00	340,000.00		
11	1465.1 Dwelling Equipment—Nonexpendable	65,000.00	65,000.00		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	2,500.00	2,500.00		
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PIAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009
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Type of Grant

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	290,825.04	290,825.04		
19	1502 Contingency (may not exceed 8% of line 20)	0	0		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	942,241.00	942,241.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	63,000.00	63,000.00		
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	15,000.00	15,000.00		

Signature of Executive Director <i>Deborah Fuller</i>	Date <i>2/23/10</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHH funds shall be included here.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-09 CFPP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP I Oak Grove	Asbestos Abatement	1460	1 bldg	10,000	10,000	0	0	
	Lead Based Paint Abatement	1460	1 bldg	5,000	5,000	0	0	
	504 compliance updates	1460	1 apt	30,000	30,000	0	0	
	Replace kitchen cabinets	1460	1 bldg	20,000	20,000	0	0	
	Bathroom upgrades	1460	1 bldg	30,000	30,000	0	0	
	Electrical upgrades	1460	1 bldg	40,000	40,000	0	0	
	Plumbing upgrades	1460	1 bldg	20,000	20,000	0	0	
	HVAC upgrades	1460	1 bldg	20,000	20,000	0	0	
	Interior Doors	1460	1 bldg	15,000	15,000	0	0	
	Flooring	1460	1 bldg	10,000	10,000	0	0	
	Security upgrades	1460		15,000	15,000	0	0	
	Landscaping	1450		10,000	10,000	0	0	
	Sidewalk replacement	1450	10%	8,500	8,500	0	0	
	Ranges & Refreigerators	1465	20%	10,000	10,000	0	0	
	Central Air Units	1465	1 bldg	20,000	20,000	0	0	
	Site Acquisition	1440		20,000	20,000	0	0	
	Relocation	1495		2,500	2,500	0	0	
	Operations	1406		10,000	10,000	0	0	
	Staff Training	1408		2,000	2,000	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 5 Wm Young Homes	Operations	1406		7,500	7,500	0	0	
	Staff Training	1408		2,000	2,000	0	0	
AMP 7 Streed Tower	Community Room Updates	1460		42,000	42,000	0	0	
	Update Hallway lighting	1460		20,000	20,000	0	0	
	Security Upgrades	1460		15,000	15,000	0	0	
	504 Compliance updates	1460		13,000	13,000	0	0	
	Landscaping	1450		5,000	5,000	0	0	
	Ranges & Refrigerators	1465	15%	10,000	10,000	0	0	
	Air conditioners	1465	20%	5,000	5,000	0	0	
	Operations	1406		10,000	10,000	0	0	
	Staff Training	1408		2,000	2,000	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Amp 12 Warren Tower/Heights	504 Compliance updates	1460		20,000	20,000	0	0	
	Security updates	1460		15,000	15,000	0	0	
	Tree Removal	1450		5,000	5,000	0	0	
	Misc site repairs	1450		10,000	10,000	0	0	
	Landscaping	1450		10,000	10,000	0	0	
	Ranges & Refrigerators	1465	10%	10,000	10,000	0	0	
	Air Conditioning units	1465	20%	10,000	10,000	0	0	
	Operations	1406		15,691.96	15,691.96	0	0	
	Staff Training	1408		2,000	2,000	0	0	
Admin Costs	Salaries & Benefits/Mgmt Fee	1410		87,324	87,324	0	0	
	Physical Needs Assesment	1410		6,900	6,900	0	0	
Fees & Costs	Fees & Costs	1430		30,000	30,000	0	0	
Debt Service	Bond Debt Obligation	9001		290,825.04	290,825.04	0	0	
Contingency	Contingency	1502		0	0			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: <i>Metropolitan Area Housing Authority</i>				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1	09/14/2011				
AMP 5	09/14/2011				
AMP 7	09/14/2011				
AMP 12	09/14/2011				

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary

PIHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R010501-09 Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	64,825.00	64,825.00		

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PIHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R010501-09 Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009
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Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 09-30-09
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	64,825.00	64,825.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director <i>Quane M. Julew</i> Date <i>2/23/10</i>	Signature of Public Housing Director Date
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RIF funds shall be included here.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Greater Metropolitan Area Housing Authority				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1	10-29-13				
AMP 5	10-29-13				
AMP 7	10-29-13				
AMP 12	10-29-13				

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary	
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06S010501-09 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2009 FFY of Grant Approval: 2009	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	127,886.00	127,886.00	127,886.00	9,802.65
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,140,977.00	1,140,977.00	1,140,977.00	98,026.48
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00	10,000.00	10,000.00	0.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary	
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06S010501-09 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant:2009 FFY of Grant Approval: 2009	

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 09-30-09
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,278,863.00	1,278,863.00	107,829.13	107,829.13
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director <i>Deborah Fuller</i>	Date <i>2/23/10</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06S010501-09 CFPP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 Oak Grove	Asbestos Abatement	1460		20,000	0.00	0	0	omitted
	Lead Based Paint Abatement	1460		10,000	10,000	10,000	10,000	
	504 Compliance updates	1460		50,000	70,000	70,000	70,000	
	Replace Kitchen cabinets	1460		100,000	100,000	100,000	18,026.48	
	Bathroom upgrades	1460		40,000	40,000	40,000	0	
	Electrical upgrades	1460		200,000	200,000	200,000	0	
	Plumbing upgrades	1460		200,000	200,000	200,000	0	
	HVAC upgrades	1460		200,000	200,000	200,000	0	
	Interior Doors	1460		15,000	15,000	15,000	0	
	Flooring	1460		55,977	55,977	55,977	0	
	A/C units	1465		10,000	10,000	10,000	0	
AMP 7 Streed	Elevator Upgrades	1460		250,000	250,000	250,000	0	
ADMIN COSTS	Admin MGMT Fee	1410		127,886	127,886	127,886	9,802.65	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1	03-17-10				
AMP 7	03-17-10				

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary

PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	37,500.00	37,500.00	0.00	0.00
3	1408 Management Improvements	8,000.00	8,000.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	93,690.00	93,690.00	93,690.00	93,690.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000.00	30,000.00	10,000.00	910.00
8	1440 Site Acquisition				
9	1450 Site Improvement	78,500.00	78,500.00	4,550.00	4,550.00
10	1460 Dwelling Structures	345,000.00	345,000.00	54,953.66	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	50,000.00	50,000.00	11,400.00	11,400.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	2,500.00	2,500.00	429.50	429.50
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RIF funds shall be included here.

Part I: Summary	
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-08 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant:2008 FFY of Grant Approval:	

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 09-30-09
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	290,812.54	290,812.54	290,812.54	214,087.52
19	1502 Contingency (may not exceed 8% of line 20)	902.46	902.46	0.00	0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	936,905.00	936,905.00	466,992.66	326,254.18
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	20,000.00			
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	15,000.00			

Signature of Executive Director <i>Sharon Fuller</i>	Date	Signature of Public Housing Director	Date
	<i>2/23/10</i>		

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHP funds shall be included here.

Part II: Supporting Pages

PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Federal FFY of Grant: 2008
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Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 Oak Grove	Asbestos Abatement	1460		5,000	5,000	2,323.19	0	in progress
	Lead Based Paint Abatement	1460		0	0	0	0	omitted
	Replace Kitchen Cabinets	1460		20,000	20,000	20,000	0	in progress
	Bathroom upgrades	1460		50,000	50,000	32,600.27	0	in progress
	Replace windows in Admin Bldg	1460		30,000	0	0	0	fungability
	Security upgradea	1460		15,000	15,000	0	0	
	Landscaping	1450		5,000	5,000	0	0	
	Sidewalk replacement	1450		8,500	8,500	4,550	4,550	in progress
	Upgrade Lift station	1450		30,000	30,000	0	0	
	Ranges & Refreigerators	1465		10,000	10,000	0	0	
	Relocation	1495		2,500	2,500	429.50	429.50	in progress
	Operations	1406		10,000	10,000	0	0	
	Staff Training	1408		2,000	2,000	0	0	
	Air Conditioner units	1465		5,000	5,000	0	0	
AMP 5 Wm Young	Operations	1406		7,500	7,500	0	0	
	Staff Training	1408		2,000	2,000	0	0	
AMP 7 Streed	Replace 1 st Floor flooring	1460		10,000	10,000	0	0	
	Elevator renovation	1460		200,000	200,000	0	0	
	Security upgrades	1460		15,000	15,000	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 7 Streed CONT	Landscaping	1450		5,000	5,000	0	0	
	Ranges & Refrigerators	1465		10,000	10,000	0	0	
	Air conditioner units	1465		5,000	5,000	2,850	2,850	in progress
	Operations	1406		10,000	10,000	0	0	
	Staff Training	1408		2,000	2,000	0	0	
AMP 12 Warren	Kitchen updates @ Heights	1460		10,000	10,000	0	0	
	Bath updates @ Heights	1460		15,000	15,000	0	0	
	Security upgrades	1460		15,000	15,000			
	Additional parking at Tower	1450		20,000	20,000	0	0	
	Landscaping	1450		10,000	10,000	0	0	
	Ranges & Refrigerators	1465		10,000	10,000	0	0	
	Air Conditioner units	1465		10,000	10,000	8,550	8,550	in progress
	Operations	1406		10,000	10,000	0	0	
	Staff Training	1408		2,000	2,000	1,187.16	1,187.16	in progress
Admin Costs	Salaries & Benefits/MGMT Fee	1410		93,690	93,690	93,690	93,690	completed
Fees & Costs	Fees & Costs	1430		30,000	30,000	10,000	910	in progress
Debt Servidew	Debt Service	9000		290,812.54	290,812.54	290,812.54	214,087.52	
Contingency	Contingency	1502		902.46	902.46	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary

PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R010501-08 Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	73,413.00	73,413.00	0.00	0.00

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RIF funds shall be included here.

Part I: Summary	
PHIA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R010501-08 Date of CFFP:
FFY of Grant: 2008 FFY of Grant Approval: 2008	

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 09-30-09
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHIA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	73,413.00	73,413.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director <i>James M. Fuller</i>	Date <i>2/23/10</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHH funds shall be included here.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1	10-29-13				
AMP 5	10-29-13				
AMP 7	10-29-13				
AMP 12	10-29-13				

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary

PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007
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Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	20,000.00	0.00	0.00	0.00
3	1408 Management Improvements	5,000.00	3,000.00	3,000.00	3,000.00
4	1410 Administration (may not exceed 10% of line 21)	89,487.00	89,487.00	89,487.00	89,487.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25,000.00	38,750.00	38,750.00	20,500.00
8	1440 Site Acquisition				
9	1450 Site Improvement	120,000.00	12,341.60	12,341.60	12,341.60
10	1460 Dwelling Structures	315,000.00	458,917.36	458,917.36	329,957.50
11	1465.1 Dwelling Equipment—Nonexpendable	15,000.00	0.00		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	10,000.00	1,925.00	1,925.00	1,925.00
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PIA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2007 FFY of Grant Approval: 2007
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Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 09-30-09
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	290,450.04	290,450.04	290,450.04	290,450.04
19	1502 Contingency (may not exceed 8% of line 20)	4,933.96	0.00		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	894,871.00	894,871.00	894,871.00	747,661.14
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	20,000.00			
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	15,000.00			

Signature of Executive Director <i>Sharon M. Fuller</i>	Date <i>2/23/10</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 Oak Grove	Asbestos Abatement	1460		10,000	35,056.36	35,056.36	13,282.50	in progress
	Lead Based Paint Abatement	1460		5,000	0.00	0	0	omitted
	Masonry Restoration	1460		65,000	116,000	116,000	116,000	completed
	Roofing Repairs	1460		20,000	20,000	20,000	20,000	completed
	Canopy Replacement	1460		102,000	101,052	101,052	101,052	completed
	Electrical upgrades	1460		42,000	23,623	23,623	23,623	completed
	Bathroom modernization	1460		36,000	36,000	36,000	36,000	completed
	Kitchen upgrades	1460		20,000	20,000	20,000	20,000	completed
	Landscaping	1450		40,000	0	0	0	omitted
	Sidewalk replacement	1450		50,000	12,341.60	12,341.60	12,341.60	completed
	Porch replacement	1450		10,000	0	0	0	omitted
	Tree Removal	1450		10,000	0	0	0	omitted
	Ranges & Refrigerators	1465		15,000	0	0	0	omitted
	Relocation	1495		10,000	1,925	1,925	1,925	completed
Operations	1406		5,000	0	0	0	omitted	
Staff Training	1408		1,250	0	0	0	omitted	
		1495		5,000				
AMP 5 Wm Young	Operations	1406		5,000	0	0	0	omitted
	Staff Training	1408		1,250	0	0	0	omitted

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-07 CFPP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 7 Streed	Building Entry Door Replacement	1460		10,000	0	0	0	fungibility
	Misc sidewalk/patio repairs	1450		5,000	0	0	0	omitted
	Elevator Renovation	1460		0	107,186	107,186	0	fungibility
	Operations	1406		5,000	0	0	0	omitted
	Staff Training	1408		1,250	0	0	0	omitted
AMP 12 Warren	Misc Site Repairs	1450		5,000	0	0	0	omitted
	Operations	1406		5,000	0	0	0	omitted
	Staff Training	1408		1,250	3,000	3,000	3,000	completed
Admin costs	Salaries/Benefits/MGMT Fees	1410		89,487	89,487	89,487	89,487	completed
Fees & Costs	Fees & Costs	1430		25,000	38,750	38,750	20,500	in progress
Debt Service	Debt Service	9000		290,450.04	290,450.04	290,450.04	290,450.04	completed
Contingency	Contingency	1502		4,933.96	0	0	0	omitted

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part I: Summary	
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R010501-07 Date of CFFP:
FFY of Grant: 2007 FFY of Grant Approval: 2007	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09-30-09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	69,805.00	69,805.00	0.00	0.00

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R010501-07 Date of CFFP:	FFY of Grant:2007 FFY of Grant Approval: 2007			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09-30-09 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00			
19	1502 Contingency (may not exceed 8% of line 20)	0			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	69,805.00	69,805.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director <i>Deane M. Fuller</i>		Date 2/23/10		Signature of Public Housing Director Date	

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County				Federal FFY of Grant: 2007	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1	10-29-13				
AMP 5	10-29-13				
AMP 7	10-29-13				
AMP 12	10-29-13				

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary						
PHA Name/Number Greater Metropolitan Area Housing Authority of Rock Island County/ 010		Locality (City/County & State) Silvis/Rock Island/Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	Amp 1 Oak Grove 260,000 Amp 5 Wm Young 0 Amp 7 Streed 19,000 Amp 12 Warren 226,000	Amp 1 Oak Grove 35,000 Amp 5 Wm Young 25,000 Amp 7 Streed 85,000 Amp 12 Warren 400,000	Amp 1 Oak Grove 220,000 Amp 5 Wm Young 5,000 Amp 7 Streed 35,000 Amp 12 Warren 270,000	Amp 1 Oak Grove 30,000 Amp 5 Wm Young 5,000 Amp 7 Streed 290,000 Amp 12 Warren 228,000
C.	Management Improvements		10,000	1,000	1,000	1,000
D.	PHA-Wide Non-dwelling Structures and Equipment		0	0	0	0
E.	Administration		94,224	94,224	94,224	94,224
F.	Other		22,367	6,117	9,242	2,742
G.	Operations		12,000	5,000	20,000	2,000
H.	Demolition		0	0	0	0
I.	Development		10,000	0	0	0
J.	Capital Fund Financing – Debt Service		288,650	290,900	287,775	289,275
K.	Total CFP Funds		942,241	942,241	942,241	942,241
L.	Total Non-CFP Funds					
M.	Grand Total					

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year ____2011_____ FFY ____2011____		Work Statement for Year: ____2012_____ FFY ____2012____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	AMP's 1, 5, 7 & 12		AMP's 1, 5, 7 & 12	
Annual	Staff Training	5,000.00	Staff Training	1,000.00
Statement	Computer upgrades	5,000.00	Computer upgrades	
	Operations	12,000.00	Operations	5,000.00
	Architect & consultant fees & costs	17,367.00	Architect & consultant fees & costs	5,117.00
	Management Fees	94,224.00	Management Fees	94,224.00
	Site Acquisition	10,000.00	Site Acquisition	
	Relocation	5,000.00	Relocation	1,000.00
	Debt Service repayment AMP 5	288,650.00	Debt Service repayment AMP 5	290,900.00
	Subtotal of Estimated Cost	\$437,241.00	Subtotal of Estimated Cost	\$397,241.00

Part I: Summary	
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County	Grant Type and Number Capital Fund Program Grant No: IL06P010501-10 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant:2010 FFY of Grant Approval:	

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	290,300.00			
19	1502 Contingency (may not exceed 8% of line 20)	0			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	942,241.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	63,000.00			
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	15,000.00			

Signature of Executive Director <i>Deane D. Fuller</i>	Date <i>2/23/10</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP I Oak Grove	Asbestos Abatement	1460	1 bldg	10,000				
	Lead Based Paint Abatement	1460	1 bldg	5,000				
	504 compliance updates	1460	1 apt	30,000				
	Replace kitchen cabinets	1460	1 bldg	20,000				
	Bathroom upgrades	1460	1 bldg	30,000				
	Electrical upgrades	1460	1 bldg	40,000				
	Plumbing upgrades	1460	1 bldg	50,000				
	HVAC upgrades	1460	1 bldg	50,000				
	Interior Doors	1460	1 bldg	15,000				
	Flooring	1460	1 bldg	10,000				
	Security upgrades	1460		25,000				
	Landscaping	1450		10,000				
	Sidewalk replacement	1450	10%	8,500				
	Ranges & Refreigerators	1465	20%	10,000				
	Central Air Units	1465	1 bldg	20,000				
	Site Acquisition	1440		20,000				
	Relocation	1495		5,000				
	Operations	1406		10,000				
	Staff Training	1408		2,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County			Grant Type and Number Capital Fund Program Grant No: IL06P010501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 5 Wm Young Homes	Operations	1406		1,000				
	Staff Training	1408		2,000				
AMP 7 Streed	Update 1 st Floor bathrooms	1460		15,000				
	Security upgrades	1460		20,000				
	Misc sidewalk replacement	1450		5,000				
	Ranges & Refrigerators	1465		5,000				
	Air Conditioners	1465		5,000				
	Operations	1406		10,000				
	Staff Training	1408		2,000				
AMP 12 Warren	Ranges & Refrigerators	1465		10,000				
	Security upgrades	1465		25,000				
	Operations	1406		25,000				
	Staff Training	1408		2,000				
Admin costs	MGMT Fees	1410		94,224				
Fees & Costs	Fees & Costs	1430		60,217				
Debt Service	Debt Service	9000		290,300				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Greater Metropolitan Area Housing Authority of Rock Island County				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 1					
AMP 5					
AMP 7					
AMP 12					

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Attachment a

Statement of Financial Resources		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2009)		
PH Operating Fund	\$1,637,832	PH Operations
PH Capital Fund	\$942,241	Modernization
Section 8 HCV	\$1,546,155	Rental Assistance
ARRA	\$1,278,863	Modernization
2. Prior Year Federal Grants (unobligated)		
Capital Fund 501-08	\$469,912	PH Capital Improvements
3. PH Dwelling Rental Income		
	\$1,027,430	PH Operations
4. Other Income		
Interest (3610)	\$130,000	PH Operations
Other (3690) tenant charges, vending	\$61,000	PH Operations
Total Resources		\$5,814,570

**GREATER METROPOLITAN AREA HOUSING AUTHORITY OF ROCK ISLAND COUNTY
ORGANIZATIONAL CHART**

