



***Kansas City, Kansas
Housing Authority***

FIVE YEAR/ANNUAL PLAN – FY 2010

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Kansas City, Kansas Housing Authority</u> PHA Code: <u>KS001</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2010</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>2045</u> Number of HCV units: <u>1469</u>												
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
PH	HCV												
PHA 1:													
PHA 2:													
PHA 3:													
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <i>Help families and individuals with low and moderate incomes achieve greater stability and self-reliance by providing safe, affordable, quality housing; partnering with community services and agencies and promoting economic opportunity in a suitable living environment, free from discrimination.</i>												

5.2	<p>Goals and Objectives. Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <i>The PHA’s goals and objectives are the following: 1) Expand the stock of public housing unit. To meet this goal, the PHA will continue to work to reduce public housing vacancies, leverage private or other public funds to create additional housing opportunities and acquire or build units or developments. 2) Improve the quality of the PHA housing stock. The PHA will continue to improve public housing management (PHAS score) and voucher management (SEMAP) scores with overall customer satisfaction as the primary goal. Renovate and modernize public housing units and the demolition of obsolete units when necessary. Replacement public housing units are of great interest to the PHA, or obtaining replacement vouchers for those units. 3) Education of housing choices is provided by voucher mobility counseling, outreach efforts to potential voucher landlords, and the implementation of the voucher homeownership program. 4) Resident quality of life measures such as promoting mixed income levels by encouraging higher income households into lower income development and providing opportunities for lower income families to obtain housing in higher income developments. 5) Family self-sufficiency is of paramount interest to the PHA, by increasing the number of employed person(s) in households and/or creating environments that increases independence for the elderly and disabled families. The PHA wishes to expand partnership with social service agencies to increase availability of employment and training opportunities for ph residents. The PHA is also working to expand current relationships with agencies that serve the disabled and elderly. 6) The PHA is always striving to ensure equal opportunities and undertaking affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability. The PHA takes measures to ensure accessible housing for persons with disabilities, regardless of unit size required.</i></p> <p><i>**see Attachment 10.0, Statement of Progress**</i></p>
6.0	<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: <i>There has been <u>no</u> revisions.</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. <i>Plan copy locations are as follows: 1) KCKHA main office 2) KCKHA site-management offices 3) KCK public libraries 4) KCK/Unified Government City Hall 4) KCKHA web-site 5) KCKHA resident associations</i></p> <p><i>PHA Plan Elements—there are no changes in the plan except for the following:</i></p> <p><i>6.2 Financial Resources (see Attachment 6.2),</i></p> <p><i>6.3 Designation for Elderly and Disabled Families—The PHA has successfully designated Plaza and Glanville Towers as Elderly sites,</i></p> <p><i>6.12 Asset Management— The Kansas City, Kansas Housing Authority completed its first compliance year under asset management with its March 31, 2009 fiscal year. Under asset management, the agency will involve all personnel throughout the agency, including those directly assigned to any one of the twenty (20) asset management projects (AMPs) that have been designated, in order to more effectively monitor current activities, but also plan for future activities related to operational, modernization and capital investment functions.</i></p> <p><i>6.13 Violence Against Women Act (VAWA)—The PHA has added VAWA to the ACOP(Reso#2876) & Admin. Plan(Reso#2877) on 3/15/2007 (see Attachment 6.13)</i></p>

7.0	<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 style="text-align: center;">N/A</p>
8.0	<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. (See Attachment 8.1)</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. (See Attachment 8.2)</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input 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. N/A</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. (See Attachment 9.0 housing needs) (See Attachment 9.0 needs waiting list)</p>

9.1	<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><i>The PHA is committed to reducing vacancies by utilizing resident intervention by staff regarding Non Payment of Rent and social evictions. Continuing to work directly with agencies serving our residents and addressing their needs also reduces community homelessness.</i></p> <p><i>Ongoing public education regarding their eligibility for public housing assistance is critical, especially in these times of economic downturn.</i></p> <p><i>Improving housing stock through Modernization, improving existing customer satisfaction, and leveraging private or other public funds to create additional housing opportunities for our residents.</i></p> <p><i>Educating residents and the public on housing choices by counseling voucher mobility.</i></p> <p><i>Enrich resident quality of life by working with agencies and programs that promote education and training opportunities that lead to family self-sufficiency.</i></p> <p><i>The PHA also added a preference for Veteran's and those currently serving in the military this year.</i></p>
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Additional Information. Describe the following, as well as any additional information HUD has requested.

- (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. **(See Attachment 10.0)**
- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

Executive Summary of the 5-year and Annual PHA Plan

This plan calls for the PHA to continue improving the quality of its housing stock by investing its CAP fund allocation to make units competitive with housing in the private sector. The PHA proposes to use future CAP funds to continue improvements in lighting and security, install central air units, upgrade interiors and refurbish roofs and exterior facades.

- 10.0 *The PHA will continue to implement policies that help program participants complete their High School education or equivalency, pursue a post secondary education, acquire training and/or find employment in an effort to increase their incomes and achieve economic independence. The PHA will continue its partnership with the Family Conservancy to increase employability among public housing families and promote self-sufficiency. To that end and to improve academic achievement among students, the PHA will maintain its partnership with the Kansas City, Kansas Public Schools, KU Apex GearUp, KCK Community College, Headstart, and Youthbuild.*

The Authority will explore options under the Section 8 program to expand housing options for frail elderly persons needing limited supportive services to preserve an independent living style. To this end, the Authority will consider new housing developments. The Authority is also exploring a possible future development of housing for families with mental disabilities.

For the purposes of this plan the Authority defines "substantial deviation" from the plan as a change that meets the following criteria: A change requiring an unplanned expenditure of \$500,000 or more.

- 11.0 **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.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) **(See Attachment 11(a))**
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only) **(See Attachment 11(b))**
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only) **(See Attachment 1(c))**
- (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only) **(See Attachment 11(d))**
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only) **(See Attachment 11(e))**
- (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. **(See Attachment 11(f))**
- (g) Challenged Elements *N/A*
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) **(See Attachment 8.1)**
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only) **(See Attachment 8.2)**

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 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. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: **(i)** A description of the need for measures to ensure the safety of public housing residents; **(ii)** A description of any crime prevention activities conducted or to be conducted by the PHA; and **(iii)** A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: **1)** Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; **2)** Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and **3)** Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** **1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: **(1)** A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and **(2)** A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent that **approved and/or pending** demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: **1)** A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

9.1 Strategy for Addressing Housing Needs. Provide a 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: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Attachment 6.2

Financial Resources

The Kansas City, Kansas Housing Authority completed its first compliance year under asset management with its March 31, 2009 fiscal year. Under asset management, the agency will involve all personnel throughout the agency, including those directly assigned to any one of the twenty (20) asset management projects (AMPs) that have been designated, in order to more effectively monitor current activities, but also plan for future activities related to operational, modernization and capital investment functions.

Attachment 6.13

F. PROHIBITION AGAINST TERMINATING TENANCY OF VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING

The Violence against Women Reauthorization Act of 2005 (VAWA), provides that “criminal

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activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of the tenancy or occupancy rights, if the tenant or immediate family member of the tenant’s family is the victim or threatened victim of that abuse.” VAWA further provides that incidents of actual or threatened domestic violence, dating violence, or stalking may not be construed either as serious or repeated violations of the lease by the victim of such violence or as good cause for terminating the tenancy or occupancy rights of the victim of such violence.

VAWA does not limit the PHA’s authority to terminate the tenancy of any tenant if the PHA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property.

Victim Documentation

PHA Policy:

When a tenant family is facing lease termination because of the actions of a tenant, household member, guest or other person under the tenant’s control and a tenant or immediate family member or the tenant’s family claims that she or he is the victim of such actions and that the actions are related to domestic violence, dating violence, or stalking, the PHA will require the individual to submit documentation affirming that claim.

The documentation must include two elements:

A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking.

One of the following:

A police or court record documenting the actual or threatened abuse.

A statement signed by an employee, agent, or volunteer or a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The required certification and supporting documentation must be submitted to the PHA within 14 business days after the PHA request is received by the victim. Upon written request from the tenant, the PHA will extend the 14-day deadline for an additional 10 business days as long as the extension request is submitted within the initial 14 business-

day period. If the individual does not provide the required certification and supporting documentation within 14 business days or 13-6

the approved extension period, the PHA will proceed with termination of the family's lease.

If the PHA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant's tenancy is not terminated the PHA will bypass the standard process with the immediate termination of the family's lease.

Terminating or Evicting a Perpetrator of Domestic Violence

Although VAWA provides protection from termination for victims of domestic violence, it does not provide protection for perpetrators. In fact, VAWA gives the PHA the explicit authority to bifurcate a lease, or to remove a household member from a lease, "in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant." This authority supersedes any local, state, or other federal law to contrary. However, if the PHA chooses to exercise this authority, it must follow any procedures prescribed by HUD or by applicable local, state, or federal law for eviction, lease termination, or termination of assistance.

PHA Policy:

When the actions of a tenant or other family member results in a determination by the PHA to terminate the family's lease and another family member claims that the actions involve criminal acts of physical violence against family members or others, the PHA will request that the victim submit the above required certification and supporting documentation in accordance with the stated time frame. If the certification and supporting documentation are submitted within the required time frame or any approved extension period, the PHA will bifurcate the lease and evict or terminate the occupancy rights of the perpetrator. If the victim does not provide the certification and supporting documentation, as required, the PHA will proceed with termination of the family's lease. If the PHA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant's tenancy is not terminated, the PHA will bypass the standard process and proceed with the immediate termination of the family.

Part I: Summary	
PHA Name: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150110 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2010 FFY of Grant Approval: 2010	

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
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	662587			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	331293			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	150000			
8	1440 Site Acquisition				
9	1450 Site Improvement	608058			
10	1460 Dwelling Structures	1495000			
11	1465.1 Dwelling Equipment—Nonexpendable	30000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	36000			
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

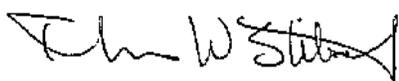
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Kansas City Kansas Housing Authority		Grant Type and Number Capital Fund Program Grant No: KS 16P00150110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval: 2010	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<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					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	3312938				
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			Date	Signature of Public Housing Director		
						
				Date		

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: Kansas City Kansas Housing Authority		Grant Type and Number Capital Fund Program Grant No: KS 16P00150110 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	
K1-2 St. Margaret's Park	Road Improvements	1450		173058				
K1-4 Wyandotte Tower	Trash Room Elevator	1460	1	80000				
	Mechanical Improvements	1460		40000				
K1-7 Scattered sites	Exterior Repair / Painting / Gutters	1460		95000				
K1-11 Grandview Park	Playground Improvements	1450	1	55000				
K1-12 Chalet Manor	Playground Improvements	1450	1	55000				
	Road Improvements	1450		45000				
	Retaining Wall Installation	1450		70000				
K1-17 Glanville Tower	Interior Repair (Phase 3)	1460	36	950000				
	Relocation	1495.1	36	36000				
	Appliances	1465.1	36	30000				
K1-20 Westgate Tower	Mechanical Improvements	1460		40000				
	Fire Sprinkler Improvement	1460		200000				
K1-22 Westgate Villa	Fire Alarm and Emergency Notification System Improvement	1460	5	50000				
K1-23 Scattered Sites	Exterior Repair and Painting	1460	17	40000				
K1-ALL	Site Improvements	1450		210000				
K1-ALL	Architect / Engineer Fees	1430		150000				
K1-ALL	Operations	1406		662587				
K1-All	Administration	1410		331293				

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: Kansas City Kansas Housing Authority					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	
K1-2	09/30/12		09/30/14		
K1-4	09/30/12		09/30/14		
K1-7	09/30/12		09/30/14		
K1-11	09/30/12		09/30/14		
K1-12	09/30/12		09/30/14		
K1-17	09/30/12		09/30/14		
K1-20	09/30/12		09/30/14		
K1-22	09/30/12		09/30/14		
K1-23	09/30/12		09/30/14		
K1-ALL	09/30/12		09/30/14		

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16S00150109 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)	218750			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	175000		150774.13	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	4085000		1294907.36	
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				

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16S00150109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009			
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				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	4478750		1445681.49	
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			Date	Signature of Public Housing Director	

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: Kansas City Kansas Housing Authority		Grant Type and Number Capital Fund Program Grant No: KS 16S00150109 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	
K1-1 Juniper Gardens	Roof Replacement	1460	66	975000		400469		
	Exterior Repair and Painting	1460	66	350000				
K1-3 Cyrus K. Holiday	Exterior Repair and Painting	1460	26	380000		372713		
K1-4 Wyandotte Tower	Roof Replacement	1460	1	275000				
	Lowrise Roof Replacement	1460	8	228000				
	Fire Alarm / Emergency Notification Improvement	1460		250000				
K1-6E Douglas Heights	Exteriuro Repair and Painting	1460	1	195000		90989.60		
	Exterior Door Replacement and Improvement	1460		33000		17343.26		
K1-12 Chalet Manor	Exterior Repair and Painting	1460	17	310000				
K1-13 Welborn Villa	HVAC Improvements	1460	74	375000		248691		
K1-14 Bethany Tower	Cooling Tower and Pump Replacement	1460	1	70000		51448.50		
K1-15 Scattered sites	HVAC Improvements	1460	20	120000				
K117 Glanville Tower	Exterior Door Replacement and Improvement	1460		24000				
K1-20 Westgate Tower	Cooling Tower and Pump Replacement	1460	1	60000		39126.50		
K1-24 Plaza Tower	Cooling Tower and Pump Replacement	1460	1	60000		39126.50		
	Chiller Replacement	1460	1	35000		35000		
	Exterior Door Replacement and Imporvement	1460		0				
	Fire Alarm / Emergency Notification Improvement	1460		245000				

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kansas City Kansas 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	
K1-1	3/17/10		3/17/12		
K1-3	3/17/10		3/17/12		
K1-4	3/17/10		3/17/12		
K1-6	3/17/10		3/17/12		
K1-12	3/17/10		3/17/12		
K1-13	3/17/10		3/17/12		
K1-14	3/17/10		3/17/12		
K1-15	3/17/10		3/17/12		
K1-17	3/17/10		3/17/12		
K1-20	3/17/10		3/17/12		
K1-24	3/17/10		3/17/12		
K1-ALL	3/17/10		3/17/12		

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.

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P001509 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	660058			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	330029			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	125000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	2137851		29425.05	
11	1465.1 Dwelling Equipment—Nonexpendable	30000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	30000			
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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009			
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				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	3312938		29425.05	
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		Date		Signature of Public Housing Director	
				Date	

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: Kansas City Kansas Housing Authority		Grant Type and Number Capital Fund Program Grant No: KS 16P00150109 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	
K1-2 St. Margaret's Park	Bath Shower Conversion	1460	100	200000				
K1-3 Cyrus K. Holiday	Bath Shower Conversion	1460	60	120000				
K1-4 Wyandotte Tower	Roof Replacement	1460	1	258206				
	Boiler Replacement	1460	2	105000				
K1-5 Belrose Manor	Bath Shower Conversion	1460	90	180000				
K1-6 Douglas Heights Family	Exterior Repair and Painting	1460	27	270000				
K1-14 Bethany Tower	Emergency Equipment Improvement	1460		24645		1045.05		
K1-17 Glanville Tower	Interior Repair (Phase 2)	1460	36	950000				
	Relocation	1495.1	36	30000				
	Appliances	1465.1	36	30000				
K1-24 Plaza Tower	Chiller Replacement	1460	1	30000		28380		
K1-ALL	Architect / Engineering Fees	1430		125000				
K1-ALL	Operations	1406		660058				
K1-ALL	Administration	1410		330029				

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: Kansas City Kansas 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	
K1-2	9/15/11		9/15/13		
K1-3	9/15/11		9/15/13		
K1-4	9/15/11		9/15/13		
K1-5	9/15/11		9/15/13		
K1-6	9/15/11		9/15/13		
K1-14	9/15/11		9/15/13		
K1-17	9/15/11		9/15/13		
K1-24	9/15/11		9/15/13		
K1-ALL	9/15/11		9/15/13		

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150108 Replacement Housing Factor Grant No: 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
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	329644		329644	329644
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	329644		329644	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	52660		23955.12	5135.95
8	1440 Site Acquisition				
9	1450 Site Improvement	76150			
10	1460 Dwelling Structures	2243115		305257.76	218006.36
11	1465.1 Dwelling Equipment—Nonexpendable	54340		24340	24340
12	1470 Non-dwelling Structures	184740			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	30000			
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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2008 FFY of Grant Approval: 2008			
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				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	3300293		1012840.88	577126.31
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			Signature of Public Housing Director		
Date			Date		

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: Kansas City Kansas Housing Authority			Grant Type and Number Capital Fund Program Grant No: KS 16P00150108 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	
K1-3 Cyrus K. Holiday	Roof Replacemnet	1460		214			84532.66	Underway
K1-4 Wyandotte Tower	Heat Pump Replacement	1465	33	24340		24340	24340	Completed
	Fire Alram and Emergency Notification System Replacemnet (Low-rise)	1460	8	30				
	Main Office Roof Replacemet	1460	1	2430				
K1-5 Belrose Manor	Central air Conditioning	1460	90	453855				
K1-6 Douglas Heights	Site Improvements	1450		50000				Bidding
	High Rise Roof Replacement	1460	1	210000				Plan review
	Family Roof Replacement	1460	27	108421				
K1-9 Scattered Sites	Exterior Repair and Painting	1460	15	39862		39861.25	45809.69	Completed
	Roof Replacement	1460	15	0				
K1-17 Glanville Tower	Interior Modernization and Repair (Phase 1)	1460	36	900000				
	Relocation	1495.1	36	30000				
	Appliances	1465.1	36	30000				
	Domestic Hot Water Improvement	1460		0				
K1-21 Scattered Sites	Roof Replacement / Exterior Repair / Painting	1460	4	68303		68303.25	86638.75	Completed
K1-24 Plaza Tower	Site Improvements	1450		26150				
K1-18 Rosedale Tower and K1-24 Plaza Tower	Retube Boilers	1460		40000				
K1-6, K1-17, and K1- 24 Towers	Exterior Door Replacement	1460	20	180000		197093.26	1025.26	Underway
K1-4, K1-6, K1-14, K1-17, K1-18, K1-20	HVAV Water Treatment	1460	6	50000				

and K1-24 Towers								
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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 II: Supporting Pages								
PHA Name: Kansas City Kansas Housing Authority			Grant Type and Number Capital Fund Program Grant No: KS 16P00150108 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	
K1-ALL	Highrises Antenna Improvement	1460	7	40000				
K1-ALL	Architecture / Engineering	1430		52660		23955012	5135.95	Underway
K1-ALL	Administration	1410		329644		329644		
K1-ALL	Management Improvements							
	Rehab Crew	1408		0				
	Janitor	1408		0				
	Security Coordinator / Advisor	1408		0				
K1-ALL	Truck / Car	1475		0				
K1-ALL	Maintenance Facility	1470		184740				
K1-ALL	Replacement Housing, K1-1 REplacment, and K1-1 Improvements	1460		150000				

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
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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kansas City Kansas Housing Authority					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	
K1-3	6/12/10	5/21/09	6/12/12		
K1-4	6/12/10		6/12/12		
K1-5	6/12/10		6/12/12		
K1-6	6/12/10		6/12/12		
K1-9	6/12/10	7/16/09	6/12/12		
K1-17	6/12/10		6/12/12		
K1-21	6/12/10	7/16/09	6/12/12		
K1-24	6/12/10		6/12/12		
K1-18 and K1-24	6/12/10		6/12/12		
K1-6, K1-17, K1-24	6/12/10	5/21/09	6/12/12		
Highrises	6/12/10		6/12/12		
K1-ALL	6/12/10		6/12/12		

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.

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150107 Replacement Housing Factor Grant No: 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	329643		329643	277662
2	1406 Operations (may not exceed 20% of line 21) ³	128000		128000	128000
3	1408 Management Improvements	329643		329643	311877
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	196992		196992	87936.53
8	1440 Site Acquisition				
9	1450 Site Improvement	216497		155994.95	58962.29
10	1460 Dwelling Structures	1898511		1710625.13	1610291.55
11	1465.1 Dwelling Equipment—Nonexpendable	163152		163152	163152
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	34000			
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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150107 Replacement Housing Factor Grant No: 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				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	3296438		3014050.08	2637880.92
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		Date		Signature of Public Housing Director	
				Date	

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: Kansas City Kansas Housing Authority			Grant Type and Number Capital Fund Program Grant No: KS 16P00150107 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	
K1-2 St. Margaret's Park	Roof Replacement	1460	50	280000		286022.77	286022.77	Completed
K1-3 Cyrus K. Holiday	Exterior Lighting / Roof Replacement	1460		149786		125586.20	28553.54	Underway
K1-4 Wyandotte Tower	Fire Alarm and Emergency Notification System Improvement (Low-rise)	1460		44970		44970		Underway
	Main Office Roof Replacement	1460	1	135570		135569.99	120059.50	Underway
K1-5 Belrose Manor	Exterior Modification / Repair / Painting	1460		0				
K1-6 Douglas Heights	Family Roof / Gutter Replacement	1460	27	26579		770.05	370.05	Bidding
	Interior Repair	1460		787462		787462	787462	Completed
	Site Improvements	1450		0				
	High Rise Roof Replacement	1460		0				
K1-9 Scattered Site	Roof Replacement	1460		96037		96037	71453.06	Underway
K1-11 Grandview Park	Central Air Conditioning	1460	20	169571		162915.85	162915.85	Completed
	Exterior Lighting Improvements	1450		0				
K1-17 Glanville Towe	Domestic Hot Water Improvements	1460	2	47058		47058.07	47058.07	Completed
	Roof Replacement	1460	1	149819		149819.40	134949.80	Underway
K1-18 Rosedale Tower	Chiller Replacement	1465	1	163152		163152	163152	Completed
K1-12 Chalet Manor, K1-21 and K1-23 Scattered Sites	Wood Decking, Stairs and Concrete Landing Replacement	1460		161445				Bidding
K1-13 Welborn Villa, K1-18 Rosedale Tower, and K1-24 Plaza Tower	Site Improvements	1450		66711		30408.75	30408.75	Underway
K1-18 Rosedale Tower and K1-24 Plaza Tower	Retube Boilers	1460		0				

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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
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Part II: Supporting Pages								
PHA Name: Kansas City Kansas Housing Authority			Grant Type and Number Capital Fund Program Grant No: KS 16P00150107 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	
K1-ALL	Architecture / Engineering	1430		196992		196992	87936.53	Underway
K1-ALL	Administration	1410		329643		329643	311877	Underway
K1-ALL	Management Improvements							
	Rehab Crew	1408		108000		108000	108000	Completed
	Janitor	1408		20000		20000	20000	Completed
	Security Coordinator / Advisor	1408		0				
K1-ALL	Truck	1475		34000				
K1-ALL	Maintenance Facility	1470		0				
K1-ALL	Replacement Housing, K1-1 REplacement and K1-1 Improvements	1460		0				

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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
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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kansas City Kansas Housing Authority					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	
K1-2	9/30/09	10/10/08	9/30/11		
K1-3	9/30/09	5/21/09	9/30/11		
K1-4	9/30/09	8/20/09	9/30/11		
K1-6	9/30/09	8/20/09	9/30/11		
K1-9	9/30/09	4/16/09	9/30/11		
K1-11	9/30/09	11/20/08	9/30/11		
K1-17	9/30/09	4/16/09	9/30/11		
K1-18	9/30/09	8/20/09	9/30/11		
K1-12, K1-21, K1-23	9/30/09		9/30/11		
K1-13, K1-18, K1-24	9/30/09	8/20/09	9/30/11		
K1-ALL	9/30/09	4/17/08	9/30/11		

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					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	

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150106 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2006 FFY of Grant Approval: 2006

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	321091		321091	321091
3	1408 Management Improvements	128000		128000	128000
4	1410 Administration (may not exceed 10% of line 21)	321091		321091	321091
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	103008		90511.16	51395.43
8	1440 Site Acquisition				
9	1450 Site Improvement	538239		459243.88	447873.88
10	1460 Dwelling Structures	1185155		554089.03	554089.03
11	1465.1 Dwelling Equipment—Nonexpendable	32833		33586.11	19670.11
12	1470 Non-dwelling Structures	484500			
13	1475 Non-dwelling Equipment	74000		66711.50	66711.50
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	23000		9334.50	4383
17	1499 Development Activities ⁴				

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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.

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: Kansas City Kansas Housing Authority	Grant Type and Number Capital Fund Program Grant No: KS 16P00150106 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2006 FFY of Grant Approval: 2006			
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				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	3210917		1983658.18	1916936.54
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			Date		
Signature of Public Housing Director			Date		

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: Kansas City Kansas Housing Authority			Grant Type and Number Capital Fund Program Grant No: KS 16P00150106 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
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	
K1-2 St. Margaret's Park	Exterior Lighting Improvments	1450		35000		34450.05	34450.05	Completed
K1-3 Cyrus k. Holiday	Exterior Lighting Improvments	1450		0				
	Central Air Conditioning	1460		21781				
	Exterior Repair and Painting	1460		91130				
K1-4 Wyandotte Tower	Trash Compactor Replacement	1465		9833		10586.11	10586.11	Completed
K1-5 Belrose Manor	Exterior Modifications / Repairs /Painting	1460		271705		238800.11	238800.11	Completed
	Exterior Lighting Improvements	1450		76190		31070.05	31070.05	Completed
K1-6E Douglas Heights	Interior REpair (Phase 3)	1460		137887		59723.42	59723.42	Completed
	Relocation	1495.1		23000		9334.50	4383	Completed
	Appliances	1465.1		23000		23000	9084	Completed
	Site Improvements	1450		0				
	Exterior Lighting Improvements	1450		33810		34000.06	22630.06	Underway
K1-7 Scattered Sites	Central Air Conditioning	1460		6535		1080.98	1080.98	Underway
K1-9 Scattered Sites	Central air Conditioning	1460		12154		2094.48	2094.48	Underway
K1-10 Scattered Sites	Parking Lot Improvements	1450	21	180000		180133.94	180133.94	Completed
K1-11 Garndview Park	Exterior Lighting Improvements	1450		23239		13940.06	13940.06	Completed
K1-13, K1-18, & K1- 24	Site Improvements	1450		0				
K1-18 and K1-24	Retube Boilers	1460		0				
K1-20 Westgate Tower	Site Improvements	1450		25000				

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: Kansas City Kansas Housing Authority			Grant Type and Number Capital Fund Program Grant No: KS 16900150106 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
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	
K1-23 Scattered Sites	Garage Doors	1460		16000		7772	7772	Completed
	Driveway Improvements	1450		165000		165649.72	165649.72	Completed
K1-24 Plaza Tower	Roof Replacement	1460	1	255000		244618.04	244618.04	Completed
K1-4, K1-6, K1-14, K1-17, K1-18, K1-20, & K1-24	Sewer Cleaning Main Stacks	1460		70000				
K1-ALL	Architecture / Engineering	1430		103008		90511.16	51395.43	Underway
K1-ALL	Administration	1410		321091		321091	321091	Completed
K1-ALL	Management Improvements							
	Rehab Crew	1408		80000		80000	102000	Completed
	Janitor	1408		20000		20000		
	Security Coordinator / Advisor	1408		28000		28000	26000	Completed
K1-ALL	Truck/Car	1475		74000		66711.50	66711.50	Underway
K1-ALL	Maintenance Facility	1470		4845000				
K1-ALL	Replacement Housing, K1-1 Replacement, and K1-1 Improvements	1460		302962				

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					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	
K1-2	07/18/08	06/19/08	07/18/10		
K1-3	07/18/08	06/17/07	07/18/10		
K1-4	07/18/08	04/17/08	07/18/10	04/30/09	
K1-5	07/18/08	06/19/08	07/18/10	07/16/09	
K1-6	07/18/08	03/20/08	07/18/10		
K1-7	07/18/08	06/16/07	07/18/10		
K1-9	07/18/08	06/16/07	07/18/10		
K1-10	07/18/08	10/18/07	07/18/10	08/15/08	
K1-11	07/18/08	06/19/08	07/18/10		
K1-20	07/18/08		07/18/10		
K1-23	07/18/08	06/19/08	07/18/10	01/16/09	
K1-24	07/18/08	07/17/08	07/18/10		
K1-ALL	07/18/08	07/17/08	07/18/10		

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.

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						
Kansas City Kansas Housing Authority		Kansas City, Wyandotte County, Kansas			<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	2169058	2169058	2169058	2169058
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		331293	331293	331293	331293
F.	Other		150000	150000	150000	150000
G.	Operations		662587	662587	662587	662587
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		3312938	3312938	3312938	3312938
L.	Total Non-CFP Funds					
M.	Grand Total					

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 (Continuation)						
Kansas City Kansas Housing Authority		Kansas City, Wyandotte County, Kansas			<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_
		Annual Statement				
	K1-1 Juniper Gardens		145000		250000	250000
	K1-6 Douglas Heights		144058			
	K1-10 Scattered Sites			300000		
	K1-13 Welborn Villa		150000			
	K1-14 Bethany Tower				120000	
	K1-17 Glanville Tower		50000		119058	180000
	K1-18 Rosedale Tower			210000	40000	
	K1-20 Westgate Tower		1440000	14452000	1440000	1679058
	K1-22 Westgate Villa		75000			
	K1-24 Plaza Tower			12000		40000
	K1-4,6,14,17,18,20,24 Towers		165000			
	K1-ALL(improvements)			195058	200000	20000
	K1-ALL		1143880	1143880	1143880	1143880

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Statement of Progress of the Agency Five-year Plan

The Housing Authority implemented its 2005-2009 5-year Plan in the following ways:

1. KCKHA completed staff LIHTC and NMTC financing training for conversion to project-based management and lease up.
2. KCKHA planned for the development of an elderly community to be financed through 4% tax credits and tax-exempt bonds. One such community was completed in September of 2006. Pre-development began on a second facility but was put on hold due to the financial market collapse in 2008.
3. KCKHA completed the HOPE VI Demolition Project at Juniper Gardens. Redevelopment at the site is in the planning process with a KCKHA Board Committee. The tax credit funding is stalled due to the financial market collapse in 2008.
4. KCKHA has modified the Capital Plan to positively impact occupancy in the public housing program.
5. KCKHA has more fully leased up the Section 8 Program and gained 380 more vouchers that are currently in use than in 2005.
6. KCKHA is examining opportunities to purchase or develop additional public housing units with its Juniper Gardens replacement factor funds.

Tenant-Based Assistance Waiting Lists - Section 8 Program

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 Tenant- Based Assistance		
<input checked="" type="checkbox"/>	Public Housing		
<input type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public housing site-Based or Sub-Jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of Families	% of Total Families	Annual Turnover
Waiting List Total	2163		233
Extremely low income <=30% AMI	1494	69%	
Very low income (<30% but <=50% AMI)	669	31%	
Low Income (>50% but <80% AMI)			
Families with children	1160	54%	
Elderly Families	117	5%	
Families with Disabilities	471	22%	
Race/Ethnicity (1WnH)	553	26%	
Race/Ethnicity (2 BnH)	1487	69%	
Race/Ethnicity (3 Hisp)	123	6%	
<p>Is the waiting list closed (select on) ? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes:</p> <p style="padding-left: 40px;">How long has it been closed (# of months) ?</p> <p style="padding-left: 40px;">Does the PHA expect to reopen the list in the PHA Plan year ? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p style="padding-left: 40px;">Does the PHA permit specific categories of families onto the waiting list, even if generally closed ? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			

B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/>	Section 8 Tenant- Based Assistance		
<input type="checkbox"/>	Public Housing		
<input type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public housing site-Based or Sub-Jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of Families	% of Total Families	Annual Turnover
Waiting List Total	202		894
Extremely low income <=30% AMI	165	82%	
Very low income (<30% but <=50% AMI)	29	14%	
Low Income (>50% but <80% AMI)	8	4%	
Families with children	107	53%	
Elderly Families	7	3%	
Families with Disabilities	26	13%	
Race/Ethnicity (1WnH)	48	24%	
Race/Ethnicity (2 BnH)	142	70%	
Race/Ethnicity (3 Hisp)	12	6%	
Characteristics by BR Size (public housing only)			
1BR	95	47%	407
2BR	77	38%	269
3BR	11	5%	195
4BR	13	6%	22
5BR	3	1%	1
5+BR	3	1%	0
<p>Is the waiting list closed (select on) ? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes:</p> <p style="padding-left: 20px;">How long has it been closed (# of months) ?</p> <p style="padding-left: 20px;">Does the PHA expect to reopen the list in the PHA Plan year ? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p style="padding-left: 20px;">Does the PHA permit specific categories of families onto the waiting list, even if generally closed ? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			

Attachment 11 (f)

Resident Membership of the Governing Board and Resident Advisory Boards KCKHA Board of Commissioners Resident Commissioner

Resident Board Member: Theresa Duke - (Elected by the members of the United Residents Council (developments for the elderly and disabled) and the United Presidents Council (family developments). The Mayor/CEO of the Unified Government of WyCo/KCK appoints this position for a four-year term. Current term expired October 2011.

United Presidents Council of KCK

Officers:

Pamela McKnight, President
Yolanda Brockman, Secretary
Vacant, Parliamentarian

Jean Hall, Vice President
Candace Brown, Treasurer

Membership:

Theresa Leach
Charlotte Oakman
Pamela McKnight
Lavon Benson
Kim Williams

Lisa Collins
Amy Davis
Angie Hill
Shirley Barnes
Yolanda Pace
Yvonne Standley
Christal Hayes

Nicole Berry
Tiffany Blair
Shaunte Muse
Tanyika Freelon
Jessie Johnson
Doris Jackson

United Residents Council

Officers:

Evie Alexander, President
Marie Boyd, Secretary

Daniel Sanders, Vice President
Sue Adair, Treasurer

Membership:

Emma Jefferson
Essie Lee Gibbs
Eva Walker
Marie Boyd
Johnnie Mae Miller
Thomas McClannahan
Alvin Hurn
Vivian Frazier
Anna Dodds
Lilly Boston
Roy Eastham
Mary Sprague
Billie Jean Lee
Jeannie Dunn
Sandy Boyer

Brenda Moseley
Kenneth Hill
Daniel Sanders
Haleena Caldwell
Justin Williams
Debra Cassidy
Evie Alexander
Hazel Talbert
Anita Jordon
Kay Malone
Edie Jones
Brenda Sandoval
Sharon Jacobs
Michele Shine
Connie Messick

Jeffery Burke
Washington Kendric
Icy Davis
Ethel Jordon
Juanita Collins
Jerome Watson
Tim Galbraith
Betty Champagne
Mildred Perrin
Bonnie Cantwell
Lloyd Pike

COMMENTS TO THE CAPITAL FUNDS PLANNING SESSIONS 2010

Comments from the Physical Needs Residents Mtg 10/7/09

Residents stated the following:

- Grandview Park needs a playground
- Chalet Manor needs rocks/gravel removed from playground and replace with something softer
- Grandview Park needs trash bin holders like at St. Margaret's
- Chalet Manor needs trash bin holders also
- Chalet Manor would like storm doors
- New screens are needed on windows at Chalet Manor
- Chalet Manor needs some sort of barriers to cars coming down the steep hill
- Grandview Park needs more lighting in the parking lot
- Belrose Manor needs Central A/C
- Cyrus K. Holliday would like garbage disposals
- Cyrus K. Holliday would like new carpet
- Cyrus K. Holliday would like an additional swing in the playground
- K1-23 Scattered Sites would like garbage disposals
- K1-6 Family Site, Community Center needs a new picture window, it has bullet holes per Head Start
- Grandview Park Community Center needs lighting
- K1-23 Scattered Sites really need a playground
- K1-23 Scattered Sites would like to request dishwashers
- K1-23 Scattered Sites would like garage door openers or can residents install them on their own?

Comments from the Management Needs Residents Mtg 10/14/09

Residents stated the following:

- Grandview Park would like playground equipment

Comments from the Advance Mtg 10/28/09

Residents stated the following:

- Chalet needs another type of playground flooring, not rocks/gravel. Maybe the rubberized mat? (Only if the kids can't tear it up)
- Grandview Park still needs trash bins
- Chalet Manor needs interior painting and new tile flooring
- Grandview Park fencing

Comments from Public Hearing 11/10/09

Residents stated the following:

- Need for Central A/C at Belrose Manor
- New Playground Equipment at Belrose Manor
- Playground on S. 35th St. at Cyrus K. Holliday
- Need for porch lights at 3rd St.
- Need for showers at Juniper Gardens
- Doors and Garbage Disposals at Juniper Gardens
- Trash Bins are needed at Grandview Park
- Need for fencing at Grandview Park near the wooded area
- K1-23 Scattered Sites Exterior Repair & Painting



Community Development

Wilba J. Miller, Interim Director

701 North 7th Street, Room 823
Kansas City, Kansas 66101

Phone: (913) 573-5100
Fax: (913) 573-5115

January 5, 2010

Ms. Francis M. Cleary
Deputy Director, Office of Public Housing
Department of Housing & Urban Development
Room 200, Gateway Tower II
400 State Avenue
Kansas City, KS 66101

ATTENTION: MR. PAUL BILSKI

RE: Kansas City, Kansas Public Housing Authority – 5 Year Capital Fund Program (2010)

Dear Ms. Cleary,

Please be advised that the Unified Government of Wyandotte County/Kansas City, Kansas has assumed the responsibility for carrying out HUD's environmental review requirements on behalf of the Housing Authority as required under the statutory guidelines as the responsible entity.

In accordance with 24 CFR Part 58, it has been determined that the proposed activities included in the Housing Authority's *5-Year Capital Fund Program (2010)* are Categorically Excluded and Not Subject to 58.5 authorities per 24 CFR 58.35 (b)(2)(3).

Please feel free to contact my office with any questions that you may have related to this determination.

Respectfully,

Wilba J. Miller
Interim Director

cc Marlon Goff
John Walden

Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan

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

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Wilba J. Miller the Interim Community Development Director certify that the Five Year and
Annual PHA Plan of the Kansas City, Kansas Housing Authority is consistent with the Consolidated Plan of
United Government of Wyandotte County/KCK prepared pursuant to 24 CFR Part 91.

 1/5/2010
Signed / Dated by Appropriate State or Local Official

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011
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**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 4-2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

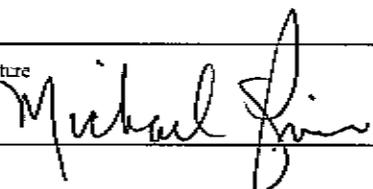
Kansas City, Kansas Housing Authority
PHA Name

KS001
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2010 - 2014

Annual PHA Plan for Fiscal Years 20 - 20

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Michael J. Price	Title Chairman of the Board of Commissioners
Signature 	Date 1/5/10

Civil Rights Certification

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

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

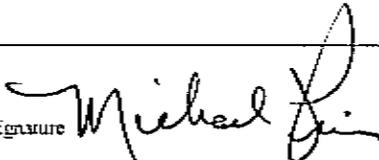
Kansas City, Kansas Housing Authority

KS001

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Michael J. Price	Title Chairman of the Board of Commissioners
Signature 	Date 01/05/2010

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Kansas City, Kansas Housing Authority

Program/Activity Receiving Federal Grant Funding

2010 5 Year/Annual Plan-Capital Fund Plan

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees --

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Thomas W. Stibal

Title

Executive Director

Signature

X

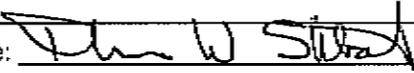
Date

1/5/10

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

Approved by OMB
0348-0046

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: Kansas 3rd	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: US Department of Housing and Urban Development	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): N/A	
11. Information requested through this form is authorized by the 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the far above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>Thomas W. Stibal</u> Title: <u>Executive Director</u> Telephone No.: <u>(913) 281-3300</u> Date: <u>1/5/10</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including 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 the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

**Certification of Payments
to Influence Federal Transactions**

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

Kansas City, Kansas Housing Authority

Program/Activity Receiving Federal Grant Funding

2010-PHA 5-Year/Annual Plan-Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

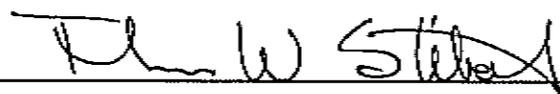
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-L.L.L., Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Thomas W. Stibal	Title Executive Director
Signature 	Date (mm/dd/yyyy) 1/5/10