

- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment
Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements:
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
 - Increase the number and percentage of employed persons in assisted families:
 - Provide or attract supportive services to improve assistance recipients' employability:
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 - Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - Other: (list below)

Other PHA Goals and Objectives: (list below)

PHA Goal: Promote energy efficiency practices and products when performing rehabilitation, repair and replacement in public housing developments.

Objective: Incorporate, when applicable, Energy Star Program qualified products and practices.

VAWA Goals and Objectives:

PHA Goal: VAWA activities, services or programs provided or offered by an agency, either directly or in partnership with other service providers, to child and adult victims of domestic violence, dating violence, sexual assault or stalking.

Objective: In elderly care abusive situations, the YHA will call the Adult Protective Services through the Department of Human Services. In women or men abusive or domestic violence situations, the YHA will have the resident contact the local police department to file a report or to get an order of protection, if needed. The YHA then refers the residents to CEASE, an agency offering support for victims of domestic violence and sexual assault. CEASE provides shelter, a crisis hot line, counseling, information and referral, legal and systems advocacy and support groups. CEASE refers their clients to the YHA for housing.

PHA Goal: VAWA activities, services or programs provided or offered by a public housing agency that helps child and adult victims of domestic violence, dating violence, sexual assault or stalking to obtain or maintain housing.

Objective: Being a small housing authority with a limited staff, the YHA makes diligent efforts to counsel tenants relative to their problems and refers them to the appropriate agencies listed above to obtain any necessary counseling. Additionally, the Authority's VAWA Policy permits victims of violence to maintain their current housing while evicting a household member who has engaged in the criminal act of physical violence.

PHA Goal: VAWA 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.

Objective: The YHA's policies are set to promote stability and a secure safe environment for their families. The definition of family is: Two or more persons related by blood, marriage, legal adoption or affinity who live together in a stable family relationship. A family with or without children who live regularly together in a stable family relationship in the same dwelling unit. Such a family is defined as a group of people related by blood, marriage or operation of law. This allows the YHA to control who legally stays in the apartments. Boyfriends or girlfriends are not allowed to move in and out of apartments, which could lead to violence or domestic violence situations. Domestic violence victims often follow a pattern of allowing the same violent person to come and go in the household. When the YHA becomes aware of a violent situation or a potential violent situation, the YHA enforces their Trespass Policy. This allows the YHA to ban anyone from the York Housing Authority property who have made threats of violence or have committed violent crimes. The YHA conducts police checks on all adult applicants which includes any adults applying to be added to a tenant

	<p>household. They are not added to the lease until their application has been processed and police reports checked.</p> <p>STATEMENT OF PROGRESS IN MEETING GOALS AND OBJECTIVES</p> <p>Objective – Reduce public housing vacancies: The YHA is currently working on reducing the turnover time for vacated public housing units to lower the vacancy rate of the units as well as improve the YHA's Management Indicator.</p> <p>Objective – Renovate or modernize public housing units: The YHA has continually upgraded its public housing units through the Comprehensive Grant Program as well as the Capital Funds Program. All modernization activities are addressed in accordance with need as well as residents' requests in all developments.</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:</p> <p>Eligibility, Selection and Admissions Policies: The YHA is currently revising the ACOP and Section 8 Administrative Plan and will be presenting to the YHA Board of Commissioners for approval after the thirty (30) day resident comment period.</p> <p>Financial Resources: The YHA Financial Statement including PHA Operating and Capital Funds, Section 8 Funds, Rental Income, Investments etc. change on an annual basis. The YHA maintains this information on file and makes it available for HUD and public review at the YHA Administration Office.</p> <p>Operation and Management: The YHA adopted an ARRA Procurement Policy for implementing the stimulus funds as recommended by HUD. This policy also includes a clause relative to the "Buy American" requirement. Additionally, the YHA is currently reviewing and revising, as necessary, all policies relating to public housing and Section 8 administration, management, maintenance, leasing and occupancy. The revised policies will be presented to the YHA Board of Commissioners for approval after any required thirty (30) day resident comment period.</p> <p>Fiscal Year Audit: The YHA's most recent Audit is on file at the YHA Administration Office and is available for HUD and public review.</p> <p>Violence Against Women Act (VAWA): The YHA has completed the required VAWA Policy which is attached along with a description on how the YHA serves the needs of child and adult victims of domestic violence, dating violence, sexual assault or stalking.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>York Housing Authority Administration Office, 221 California Street, York, South Carolina 29745</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>Demolition and/or Disposition: The YHA is currently preparing an application to HUD's SAC for the demolition of 4 units of public housing in Development SC046-005. The YHA anticipates receiving a response from HUD by June 2010.</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.</p> <p>See attached Forms HUD 50075.1 for FFY 2010 and all open CFP Grants.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See attached Form HUD 50075.2 for Five-Year CFP.</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><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.</p> <p>Not Applicable</p>

9.0

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.

The YHA has consulted with the York County's Consolidated Plan for Housing and Community Development in an effort to identify specific housing needs. Housing needs data for the YHA and this Agency Plan has also been developed from the 2000 Census and the YHA current public housing and Section 8 waiting lists. See tables below:

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall*	Afford-ability	Supply	Quality	Access-ibility	Size	Location
Income <= 30% of AMI	308	3	3	2	1	NA	NA
Income >30% but <=50% of AMI	226	2	2	2	1	NA	NA
Income >50% but <80% of AMI	303	1	2	2	1	NA	NA
Elderly	211	1	2	2	1	NA	NA
Families with Disabilities	NA	NA	NA	2	1	NA	NA
Race/Ethnicity/White	456	NA	NA	2	1	NA	NA
Race/Ethnicity/Black	486	NA	NA	2	1	NA	NA
Race/Ethnicity/Hispanic	48	NA	NA	2	1	NA	NA
Race/Ethnicity/Asian	4	NA	NA	2	1	NA	NA

*Source: CHAS Data, City of York, South Carolina Jurisdiction Area, 2000 Census

Housing Needs of Families on the PHA's Current Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input checked="" type="checkbox"/> Combined Section 8 and Public Housing S8 (230) PH (121)			
<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 (PH)
Waiting list total:	456		
Extremely low income <=30% AMI	399	87%	
Very low income(>30% but <=50% AMI)	53	12%	
Low income(>50% but <80% AMI)	4	1%	
Families with children	291	64%	
Elderly families	15	3%	
Families with Disabilities	81	18%	
Race/ethnicity White	204	44%	
Race/ethnicity Black	249	54%	
Race/ethnicity Hispanic	2	1%	
Race/ethnicity Asian	1	1%	
Characteristics by Bedroom Size (Public Housing Only)			
1 BR	49	50%	13%
2 BR	33	34%	47%
3 BR	16	16%	27%
4 BR	0	0%	
5 BR	0	0%	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? NA			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

*Source: York Housing Authority Public Housing and Section 8 Waiting Lists

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>The YHA will continue its efforts to meet the specific needs of residents within the jurisdiction of the YHA as identified above. Although the YHA will meet the needs of all of our residents, special emphasis will be directed towards the highest percentage needs such as the provision of smaller size bedroom units (1 & 2 bedroom sizes) for families with children, elderly and individuals with disabilities. In addition, the YHA will continue to employ effective management and maintenance policies to minimize vacancies and turnover time.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>As discussed in Section 5.2 of this form, the York Housing Authority continues its ongoing efforts to meet the Mission and Goals identified in our most recent 5-Year Agency Plan. The YHA is diligent in providing safe, decent and affordable housing; creating opportunities for our resident's self-sufficiency and economic independence; and assure fiscal integrity in all public housing programs. Our staff is continually striving to improve our management and service delivery efforts, as well as maintain the physical appearance and function of our dwelling units, grounds and facilities.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>YHA's definition of "Significant Amendment or Substantial Deviation":</p> <p>Substantial Deviation from the 5-year Plan is defined as changes in the goals and objectives of the York Housing Authority.</p> <p>Significant Amendment or Modification to the Annual Plan will be defined as follows:</p> <ol style="list-style-type: none"> Changes to rent or admission policies or organization of the waiting list. Addition of non-emergency work items (not included in the Capital Fund Annual Statement or Five-Year Action Plan) Any changes or demolition, designation, home-ownership programs, or conversion activities. <p>An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements.</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ol style="list-style-type: none"> Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) ATTACHED Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) ATTACHED Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) ATTACHED Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) ATTACHED Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) NA 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. ATTACHED Challenged Elements NONE Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) ATTACHED Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) ATTACHED

Part I: Summary		FFY of Grant:		
PHA Name:	Grant Type and Number	2010		
York Housing Authority	Capital Fund Program Grant No: SC16P04650110 Replacement Housing Factor Grant No:	FFY of Grant Approval: 2010		
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:				
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost	Revised ²	Total Actual Cost ¹
		Original	Obligated	Expended
1	Total non-CFP Funds	0		
2	1406 Operations (may not exceed 20% of line 21) ³	55,000		
3	1408 Management Improvements	17,000		
4	1410 Administration (may not exceed 10% of line 21)	0		
5	1411 Audit	0		
6	1415 Liquidated Damages	0		
7	1430 Fees and Costs	10,000		
8	1440 Site Acquisition	0		
9	1450 Site Improvement	99,000		
10	1460 Dwelling Structures	122,500		
11	1465.1 Dwelling Equipment—Nonexpendable	8,000		
12	1470 Non-dwelling Structures	0		
13	1475 Non-dwelling Equipment	0		
14	1485 Demolition	0		
15	1492 Moving to Work Demonstration	0		
16	1495.1 Relocation Costs	0		
17	1499 Development Activities ⁴	0		

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

Part I: Summary		Grant Type and Number		Federal FY of Grant:	
PHA Name: York Housing Authority		Capital Fund Program Grant No: SC16P04650110 Replacement Housing Factor Grant No:		2010 FFY OF Grant Approval: 2010	
Type of Grant		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0			
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	0			
19	1502 Contingency (may not exceed 8% of line 20)	0			
20	Amount of Annual Grant: (sum of lines 2 - 19)	311,500			
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Activities	0			
23	Amount of line 20 Related to Security - Soft Costs	0			
24	Amount of Line 20 Related to Security - Hard Costs	0			
25	Amount of line 20 Related to Energy Conservation Measures	0			
Signature of Executive Director		Signature of Public Housing Director		Date	
<i>Carla Caberneta</i>				7/12/10	

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 I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name: York Housing Authority		Capital Fund Program Grant No: SC16P04650109		2009	
Date of CFFP: _____		Replacement Housing Factor Grant No: _____		2009	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/10		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		Revised Annual Statement (revision no:) Total Actual Cost ¹	
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) ³	85,000	50,000	10,000	10,000
3	1408 Management Improvements	18,000	13,000	0	0
4	1410 Administration (may not exceed 10% of line 21)	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	15,000	15,000	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	20,000	20,000	0	0
10	1460 Dwelling Structures	167,800	93,362	37,650	37,650
11	1465.1 Dwelling Equipment—Nonexpendable	8,000	8,000	5,217	5,217
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	0	0	0	0

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		Grant Type and Number Capital Fund Program Grant No: SC16P04650109 Replacement Housing Factor Grant No:		Federal FY of Grant: 2009 FFY OF Grant Approval: 2009	
PHA Name: York Housing Authority		<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: 03/31/10		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant: (sum of lines 2 – 19)	313,800	199,362	52,867	52,867
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security – Soft Costs	0	0	0	0
24	Amount of Line 20 Related to Security – Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0
Signature of Executive Director <i>Eileen G Burnett</i>		Signature of Public Housing Director		Date 4/10/10	

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 II Supporting Pages											
PHA Name: York Housing Authority		Grant Type and Number Capital Fund Program Grant No: SC16P04650109			CFFP (Yes/No): No					Federal FFY of Grant: 2009	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work			
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²				
SC046-002	Replace Main Water Valves	1450	4	6,000	6,000	0	0	09/10			
	Repair Sewer Lines	1460	Dev-wide	6,000	0	0	0	Deleted			
SC046-006	Remodel 112 York Park	1460	1	20,000	20,000	0	0	09/10			
	Scatter Site										
PHA-WIDE	Operating Expense	1406	PHA-wide	85,000	50,000	10,000	10,000	In Progress			
	Operations										
PHA-WIDE	Security Cameras and Support	1408	5	8,000	8,000	0	0	06/10			
	Management	1408	PHA-wide	5,000	5,000	0	0	06/10			
	Improvements	1408	PHA-wide	5,000	0	0	0	Deleted			
	Energy Audit										
PHA-WIDE	A/E Fees	1430	PHA-wide	10,000	10,000	0	0	06/10			
	Fees and Costs	1430	PHA-wide	5,000	5,000	0	0	06/10			
	Management Fees										
PHA-WIDE	Landscaping and Fencing	1450	PHA-wide	14,000	14,000	0	0	09/10			
	Site Improvements										
	Roofing	1460	PHA-wide	20,000	15,000	0	0	09/10			
PHA-WIDE	Remodel Bathrooms	1460	PHA-wide	11,500	11,500	5,400	5,400	In Progress			
	Dwelling	1460	PHA-wide	17,000	17,000	6,000	6,000	In Progress			
	Structures	1460	PHA-wide	4,500	4,500	0	0	09/10			
	Floor Tile and Trim										
	Ceilings	1460	PHA-wide	50,000	0	0	0	Deleted			
	Repair Structural Damage	1460	PHA-wide	15,000	15,000	12,940	12,940	In Progress			
	Electrical Upgrades	1460	PHA-wide	13,800	5,362	0	0	09/10			
	Replace Door and Window Screens	1460	PHA-wide	5,000	5,000	13,310	13,310	In Progress			
	Cycle Painting and Remodeling	1460	PHA-wide	5,000	0	0	0	Deleted			
	Ramps	1460	PHA-wide	5,000	0	0	0	Deleted			

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: York Housing Authority	Grant Type and Number Capital Fund Program Grant No: SC16S04650109 Date of CFFP: _____	Replacement Housing Factor Grant No: SC16S04650109	FFY of Grant: ARRA FFY of Grant Approval: 2009
-------------------------------------	--	---	---

Line	Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/10	Revised Annual Statement (revision no:) <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost ¹	
		Total Estimated Cost	Original	Revised ²	Obligated
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) ³	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration (may not exceed 10% of line 21)	6,000	6,000	6,000	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	15,000	15,000	15,000	18,840
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	229,651	229,651	229,651	219,900
11	1465.1 Dwelling Structures—Nonexpendable	0	0	0	0
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	0	0	0	0

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		Grant Type and Number Capital Fund Program Grant No: SC16S04650109 Replacement Housing Factor Grant No:		Federal FY of Grant: ARRA FFY OF Grant Approval: 2009	
PHA Name: York Housing Authority		<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: 03/31/10 <input type="checkbox"/> Final Performance and Evaluation Report			
Type of Grant		Summary by Development Account		Total Actual Cost¹	
Line		Original	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant: (sum of lines 2 - 19)	250,651	250,651	250,651	237,840
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of Line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0
Signature of Executive Director <i>Eileen A. Benta</i>		Signature of Public Housing Director		Date 4/10/10	

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

Part I: Summary		FFY of Grant: 2008 FFY of Grant Approval: 2008			
PHA Name: York Housing Authority	Grant Type and Number Capital Fund Program Grant No: SC16P04650108 Date of CFFP: _____	Replacement Housing Factor Grant No: _____			
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/10		<input type="checkbox"/> Revised Annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost			
		Original	Revised ²		
		Obligated	Expended		
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) ³	85,000	35,000	35,000	35,000
3	1408 Management Improvements	23,500	24,236	24,236	24,236
4	1410 Administration (may not exceed 10% of line 21)	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	10,000	3,460	3,460	3,460
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	4,000	13,679	13,679	13,679
10	1460 Dwelling Structures	67,518	113,012	113,012	113,012
11	1465.1 Dwelling Equipment—Nonexpendable	8,000	8,631	8,631	8,631
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴	0	0	0	0

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		Grant Type and Number Capital Fund Program Grant No: SC16P04650108 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008 FFY OF Grant Approval: 2008	
PHA Name: York Housing Authority		<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: 03/31/10 <input type="checkbox"/> Final Performance and Evaluation Report			
Type of Grant		Summary by Development Account		Total Estimated Cost	
Line		Original	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant: (sum of lines 2 - 19)	198,018	198,018	198,018	198,018
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of Line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0
Signature of Executive Director <i>Shelia A Bennett</i>		Signature of Public Housing Director		Date 4/10/10	

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 YHALL be included here

Part II Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: York Housing Authority		Grant Type and Number Capital Fund Program Grant No: SC16P04650108 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
SC046-002 Pecan Grove II	Building Repairs Roofing	1460 1460	Dev-wide Dev-wide	15,000 10,000	0 6,282	0 6,282	0 6,282	Deleted Complete
SC046-005 Cannon Court	Building Repairs	1460	Dev-wide	15,000	0	0	0	Deleted
SC046-006 Scatter Site	Remodel 112 York Park	1460	1	7,000	0	0	0	Deleted
PHA-WIDE Operations	Operating Expense	1406	PHA-wide	85,000	35,000	35,000	35,000	Complete
PHA-WIDE Management Improvements	Security Cameras and Support Software Upgrades Mailboxes	1408 1408 1408	5 PHA-wide PHA-wide	8,000 8,000 7,500	12,118 12,118 0	12,118 12,118 0	12,118 12,118 0	Complete Complete Deleted
PHA-WIDE Fees and Costs	A/E Fees	1430	PHA-wide	10,000	3,460	3,460	3,460	Complete
PHA-WIDE Site Improvements	Landscaping and Drainage	1450	PHA-wide	4,000	13,679	13,679	13,679	Complete
PHA-WIDE Dwelling Structures	Remodel Bathrooms Floor Tile/Remodeling Smoke Detectors	1460 1460 1460	PHA-wide PHA-wide PHA-wide	8,000 5,000 7,518	23,129 53,565 30,036	23,129 53,565 30,036	23,129 53,565 30,036	Complete Complete Complete

Part I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name: York Housing Authority		Capital Fund Program Grant No: SC16P04650107 Replacement Housing Factor Grant No:)		2007	
Date of CFFP: _____		Reserve for Disasters/ Emergencies <input type="checkbox"/>		FFY of Grant Approval: 2007	
		Final Performance and Evaluation Report <input type="checkbox"/>			
		Total Estimated Cost		Total Actual Cost ¹	
Line		Summary by Development Account		Obligated	Expended
		Original	Revised ²		
1	Total non-CFP Funds	0		0	0
2	1406 Operations (may not exceed 20% of line 21) ³	50,000		50,000	50,000
3	1408 Management Improvements	18,960		18,960	18,960
4	1410 Administration (may not exceed 10% of line 21)	0		0	0
5	1411 Audit	0		0	0
6	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition	0		0	0
9	1450 Site Improvement	11,156		11,156	11,156
10	1460 Dwelling Structures	64,686		64,686	64,686
11	1465.1 Dwelling Equipment—Nonexpendable	9,253		9,253	9,253
12	1470 Non-dwelling Structures	0		0	0
13	1475 Non-dwelling Equipment	24,736		24,736	24,736
14	1485 Demolition	0		0	0
15	1492 Moving to Work Demonstration	0		0	0
16	1495.1 Relocation Costs	0		0	0
17	1499 Development Activities ⁴	0		0	0

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		Grant Type and Number Capital Fund Program Grant No: SC16P04650107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007 FFY OF Grant Approval: 2007	
PHA Name: York Housing Authority		<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: 03/31/10 <input type="checkbox"/> Final Performance and Evaluation Report			
Type of Grant		Summary by Development Account		Total Actual Cost¹	
Line	Description	Original	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant: (sum of lines 2 - 19)	178,791	178,791	178,791	178,791
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of Line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0
Signature of Executive Director <i>Sarah G. Berra</i>		Signature of Public Housing Director		Date 4/10/10	

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 II Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: York Housing Authority		Grant Type and Number Capital Fund Program Grant No: SC16P04650107 CFFP (Yes/No): No						
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
SC046-002 Pecan Grove II	Fencing	1450	Dev-wide	0		0	0	Deleted
PHA-WIDE Operations	Operating Expense	1406	PHA-wide	50,000		50,000	50,000	Complete
PHA-WIDE Management Improvements	Security Cameras and Support Software Upgrades	1408 1408	5 PHA-wide	9,480 9,480		9,480 9,480	9,480 9,480	Complete Complete
PHA-WIDE Site Improvements	Landscaping Exterior Building Repair	1450 1450	PHA-wide PHA-wide	11,156 0		11,156 0	11,156 0	Complete Deleted
PHA-WIDE Dwelling Structures	Electrical Ceilings Bathroom Renovations Roofing Windows Flooring Remodel Northbrook	1460 1460 1460 1460 1460 1460 1460	PHA-wide PHA-wide PHA-wide PHA-wide PHA-wide PHA-wide PHA-wide	1,500 3,000 8,000 6,000 8,000 2,000 36,186		1,500 3,000 8,000 6,000 8,000 2,000 36,186	1,500 3,000 8,000 6,000 8,000 2,000 36,186	Complete Complete Complete Complete Complete Complete Complete
PHA-WIDE Dwelling Equipment	Refrigerators & Ranges	1465	PHA-wide	9,253		9,253	9,253	Complete

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 2010	Work Statement for Year: 2 FFY 2011			Work Statement for Year 3 FFY 2012		
	Development Number/Name General Description of Major Wk Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Wk Categories	Quantity	Estimated Cost
	SC46-1/Pecan Grove I			SC46-1/Pecan Grove I		
	Gutters & Siding	DEV-WIDE	10,000	Building repairs	DEV-WIDE	25,000
				Gutters and siding		20,000
	SC46-2/Pecan Grove II	DEV-WIDE		Building Exteriors	Dev-wide	6,000
	Building Exteriors	Dev-wide	6,000			
	Gutters & Siding	Dev-wide	20,000	SC046-5/Cannon Court		
	Fencing	Dev-wide	30,000	Replace main Water Valve	DEV-WIDE	10,000
				Gutters and Siding		15,000
				Sidewalks		130,000
				New Shop		40,000
	SC046-5/Cannon Court			SC045-6/Scattered Sites		
	Replace Main Water Valves	DEV-WIDE	10,000	A/C and Heating Units	Dev-wide	20,000
	SC046-6/Scattered Sites			PH Wide		
	A/C & Heating Units		20,000	Landscaping	Dev-wide	8,000
				Bath and tile	Dev-wide	8,000
	PH Wide			Ceilings	Dev-wide	4,500
	Vents	DEV-WIDE	8,000	Floor Tile and trim	Dev-wide	10,500
	Roofing	DEV-WIDE	20,000	Window & Screens	Dev-wide	9,000
	Landscaping	Dev-wide	8,000	Roofing	Dev-wide	50,000
	Bath & Tile and Trim	Dev-wide	8,000	Cycle Painting & Remodel	Dev-wide	10,000
	Ceilings	Dev-wide	4,500	Update of Elec Code	Dev-wide	15,000

Resident Advisory Board Comments

The Resident Advisory board met on February 10, 2010 to discuss the Annual Plan.

No Comments were made

**PHA Certifications of Compliance
with PHA Plans and Related
Regulations**

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

**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 Annual PHA Plan for the PHA fiscal year beginning 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.

York Housing Authority

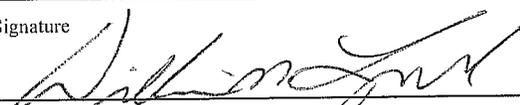
SC 046

PHA Name

PHA Number/HA Code

X _____ 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 William Langford	Title Chairman
Signature 	Date 4/14/10

Disclosure of Lobbying Activities

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse side for Instructions.)

Public Reporting Burden for this collection of information is estimated to average 30 minutes 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. Please do not return your completed form to the Office of Management and Budget; send it to the address provided by the sponsoring agency.

1. Type of Federal Action (enter appropriate letter) <input checked="" type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action (enter appropriate letter) <input checked="" type="checkbox"/> a. bid/offer/application b. initial award c. post-award	3. Report Type (enter appropriate letter) <input checked="" type="checkbox"/> a. initial filing b. material change For Material Change Only year _____ quarter _____ date of last report _____
---	--	---

4. Name and Address of Reporting Entity <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known York Housing Authority P.O. Box 687 York, SC 29745 Congressional District, if known 5	5. If Reporting Entity in No. 4 is Subawardee, enter Name and Address of Prime Congressional District, if known
--	---

6. Federal Department/Agency Department of HUD Federal Action Number, if known	7. Federal Program Name/Description Annual Plan CFDA Number, if applicable
---	---

	9. Award Amount, if known \$
--	--

10a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI) Negative Report	b. Individuals Performing Services (including address if different from No. 10a.) (last name, first name, MI)
--	---

11. Information requested through this form is authorized by Sec.319, Pub. L. 101-121, 103 Stat. 750, as amended by sec. 10; Pub. L. 104-65, Stat. 700 (31 U.S.C. 1352). This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semiannually and 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 <i>Edwina A Burnett</i> Print Name Edwina A. Burnett Title Executive Director Telephone No. 803-684-7359 Date April 13, 2010
---	---

Certification of Payments to Influence Federal Transactions

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

Applicant Name

York Housing Authority

Program/Activity Receiving Federal Grant Funding

Annual Plan

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-LLL, 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

Title

Edwina A. Burnett, Executive Director

Signature

Date

x Edwina A. Burnett

April 13, 2010

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name
York Housing Authority

Program/Activity Receiving Federal Grant Funding

Annual 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.)

Pecan Grove I and II, Cannon Court, Scattered Site

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 Edwina A Burnett	Title Executive Director
Signature <i>Edwina A Burnett</i>	Date 4/13/2010

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 any 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 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.