

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>Housing and Community Redevelopment Authority of Marlboro County</u> PHA Code: <u>SC059</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2010</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>55</u> Number of HCV units: <u>236</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.)																										
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
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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: Mission Statement: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.																										
5.2	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. Goals and Objectives: The Housing and Community Redevelopment Authority of Marlboro County has developed our Five-Year Goals for the period 2010-2014 as described in this plan. Also, we will pursue meeting the following goals in this Five-Year/Annual Plan as listed: <ul style="list-style-type: none"> • Concentrate on efforts to improve specific management functions with the transition to Asset Management. • Continue to renovate or modernize public housing units • Continue to provide staff training to improve the quality of Assisted Housing. • Continue to conduct outreach efforts to potential voucher landlords. • Explore opportunities for voucher homeownership • Continue to provide on-site public laundry facility • Create opportunities for residents' self-sufficiency and economic independence. • Maintain problem-solving partnerships with PHA, residents, community, and government leadership. 																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Revision to the ACOP; Revision to the HCV Administrative Plan (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. Agency Annual Plan is available at our Central Office Cost Center and our Clio East Administration Office.																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. The Homeownership Programs and Project-based Vouchers are not applicable.																										
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. For 8.2 and 8.3 below, See Attachments SC059k01; SC059l01; SC059m01; and SC059n01																										
8.1	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 8.0																										

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 8.0</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.</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. Housing Needs: See Attachment SC059a01</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. Strategy: The Housing and Community Redevelopment Authority of Marlboro County is part of the entire housing effort for the community. While we alone cannot meet every need, we will address some of the identified needs by using appropriate resources to maintain/upgrade/replace our existing stock. We will continue to provide housing assistance to meet the housing needs throughout our jurisdiction through rental of public housing and housing choice vouchers. When appropriate and feasible, we will apply for additional grants and loans from federal, state, and local sources, including private sources to help add to the affordable housing available in our community. We intend to continue to work with our local partners to try to meet these identified needs</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. Progress: See Attachment SC059b01</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”. Substantial Deviation from the 5-Year and/or the Annual Plan is defined as: A goal or concept that is not described in the 5-Year Plan and/or Annual Plan.</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> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights). See Attachment SC059c01</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only). See Attachment SC059d01</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only). See Attachment SC059e01</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only). See Attachment SC059f01</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only). See Attachment SC059f01</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. See Attachment SC059g01</p> <p>(g) Challenged Elements. See Attachment SC059h01</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only). See 8.0</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only). See 8.0</p> <p>(j) VAWA – See Attachment SC059i01</p> <p>(k) Form HUD050077-CR, Civil Rights Certification – See Attachment SC059j01</p>

Attachment SC059a01, Housing Needs 2010;
Housing & Community Redevelopment Authority of Marlboro County

9.0 Housing Needs:

Based on a review of the State of South Carolina Five Year Consolidated Plan (2006-2010), US Census Data and the Housing & Community Redevelopment Authority of Marlboro County , Public Housing and Housing Choice Voucher Waiting Lists, the housing needs of the low income, very low income and extremely low income households, to include elderly families and families with disabilities, and household of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting list are identified by the charts below.

Waiting Lists: The chart below represents those on the waiting list of the Housing & Community Redevelopment Authority of Marlboro County for both Public Housing units and Section 8 Voucher Units.

HGRAMC - MARLBORO COUNTY

Authority #03 Marlboro Individual Project Sites	Total # of Units Per Site	Bedroom Distribution:					
		0	1	2	3	4	5
Clio East	55	0	13	26	16	0	0
Public Housing Totals:	55	0	13	26	16	0	0

Waiting List Totals for Public Housing	13	0	4	5	4	0	0
Waiting List Totals for Section 8	181	0	43	81	45	11	1
Total On Both Waiting Lists "Combined"	194	0	47	86	49	11	1

The chart below outlines the percentages of extremely low to low income applicants on the waiting list of the Housing & Community Redevelopment Authority of Marlboro County.

	Number	% of Total
Total on Waiting List	194	
Extremely Low Income (= <30%)	98	50.52%
Very Low (>31% but <50%)	91	46.91%
Low Income (>51% but <80%)	4	2.06%
African-Americans	172	88.66%
White Caucasian	19	9.79%
Other	3	1.55%
Families with Disabled Persons	43	22.16%
Families with Elderly	3	1.55%

The number of applicants on the waiting list has increased from 26 on the Housing Authority's 2005 to 2009 Agency Plan to 194 on the 2010 to 2014 Agency Plan. This represents a dramatic increase during the preceding five year period. During this five year period the needs of families with disabilities also increased from 8 to 43 and the need for elderly families has decreased by .33%.

A review of the charts above reveal that a strong housing need continues to exist for very low and extremely low income households within the Housing Authority's jurisdiction. 97.43% of the households on the waiting list fit into these categories and due to the economic downturn within the jurisdiction, these categories of households are expected to remain stable. Over the past year the occupancy rate at all of the Housing Authority's Public Housing Developments has remained below 2%, and with exception given for funding shortages, the lease up rate for the Housing Choice Voucher Program has consistently been above 98%.

Afro-Americans continue to be the largest minority in the Housing Authority jurisdiction and represent an overwhelming majority of the waiting list (88.66%). Whites and other minorities make up only 11.34% of applicants on the waiting list. Based on census data, this disparity is mostly explained by the demographics of the town and county. Afro-Americans represent 57.11% of the town's population and 33.6 percent of the county's population. This data also shows that the median income for the town was \$22,015.00 with the per capita income being 54% percent less at \$10,177.00. About 28.5% of families and 31.6% of the population were below the poverty line with Afro-Americans representing a strong majority of this population. Based on these statistics the need and availability of affordable housing will remain strong during this five year planning cycle.

Additionally, due to the economic downturn and high unemployment rate, coupled with reduced funding of the public housing, housing choice voucher and the various programs that support affordable housing development, the affordability of housing to address the needs of the low income to extremely low income household will continue to be a major challenge.

Attachment SC059b01

Housing & Community Redevelopment Authority of Marlboro County
Progress 10.0(a)

During the 5-Year period, October 1, 2005 through September 30, 2009, we met our goals as outlined in our plan.

- Leverage private or other public funds to create additional housing opportunities
 - We have utilized TBRA funds to create additional housing opportunities.
- Continue to administer newly acquired funding (TBRA)
 - We administered the TBRA program during this period.
- Concentrate on efforts to improve specific management functions
 - We have restructured the over-all agency; set up a COCC which includes a full-time IT person; revised policies and procedures; restructuring the on-site staff, retraining. We have also increased the number of inspections to ensure quality of housing units assisted.
- Renovate or modernize public housing units
 - We received approximately \$448,473 of Capital Funds along with approximately \$127,016 of ARRA Funds that were used to renovate/modernize our public housing units.
- Continue to provide staff training to improve the quality of Assisted Housing.
 - We have provided extensive on-going training to our staff through workshops, tech schools and adult education, on-site training, and other educational facilities.
- Continue to conduct outreach efforts to potential voucher landlords.
 - We provide counseling and have a video presentation as part of our briefing packet as well as on-going information to current clients. We also encourage landlord participation through outreach efforts, making them aware of the program advantages through workshop and mail outs. We continue to conduct outreach efforts.
- Explore opportunities for voucher homeownership
 - We have explored possible opportunities for our clients with our homeownership program but have not had a successful home purchase.
- Provide on-site public laundry facility
 - We have constructed and continue to provide an on-site laundry facility to our residents which provide easy access to a necessity.
- Assist local government in funding availability to improve infrastructure
 - We have offered our assistance to the local government to help with applying for grant funds to improve the lift station.
- Upgrade community landscaping.
 - We have upgraded the community landscaping through both capital funds and operating funds.
- Create opportunities for residents' self-sufficiency and economic independence.
 - We have created opportunities for resident's self-sufficiency and economic independence through workshops, leadership training and exposure to educational, cultural and social activities.
- Maintain problem-solving partnerships with PHA, residents, community, and government leadership.
 - We continue to partner with other Housing Authorities (workshops, training, sharing of information), community (non-profits), and government leaderships.

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 10/2010 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.

Housing & Community Redevelopment
 Authority of Marlboro County

 PHA Name

SC059

 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2010 - 2014

Annual PHA Plan for Fiscal Years 2010 - 2014

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 B. H. Guinn	Title Chairman
Signature G-09-10	Date B. H. Guinn

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Housing & Community Redevelopment Authority of Marlboro County

Program/Activity Receiving Federal Grant Funding

Capital Funds

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.)

Clio East Apartments
100 Woods Avenue
Clio, SC 19525
(Marlboro County)

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

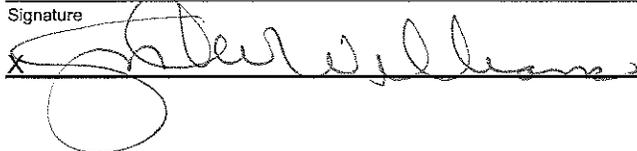
Cynthia W. Williams

Title

Executive Director

Signature

Date



06/30/2010

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing & Community Redevelopment Authority of Marlboro County

Program/Activity Receiving Federal Grant Funding

Capital Funds

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

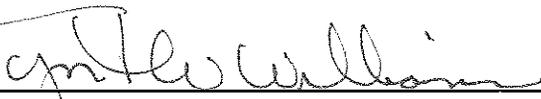
Cynthia W. Williams

Title

Executive Director

Signature

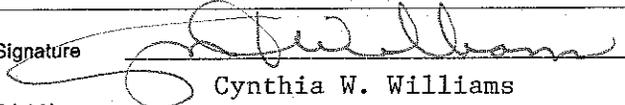
Date (mm/dd/yyyy)



06/30/2010

Disclosure of Lobbying Activities

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

1. Type of Federal Action <input type="checkbox"/> a. contract <input checked="" 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 checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only year (yyyy) _____ quarter _____ date of last report (mm/dd/yyyy) _____
4. Name and Address of Reporting Entity <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Housing & Community Redevelopment Authority of Marlboro County 100 Woods Avenue Clio, SC 29525 Congressional District, if known _____	5. If Reporting Entity in No. 4 is Subawardee, enter Name and Address of Prime Congressional District, if known _____	
6. Federal Department/Agency Public Housing	7. Federal Program Name/Description Capital Fund CFDA Number, if applicable _____	
8. Federal Action Number, if known	9. Award Amount, if known \$ _____	
10a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI)	b. Individuals Performing Services (including address if different from No. 10a.) (last name, first name, MI)	
(attach continuation sheet(s) if necessary)		
11. Amount of Payment (check all that apply) \$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned 12. Form of Payment (check all that apply) <input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind; specify: nature _____ value _____	13. Type of Payment (check all that apply) <input type="checkbox"/> a. retainer <input type="checkbox"/> b. one-time fee <input type="checkbox"/> c. commission <input type="checkbox"/> d. contingent fee <input type="checkbox"/> e. deferred <input type="checkbox"/> f. other (specify) _____	
14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11 (attach continuation sheet(s) if necessary)		
15. Continuation sheets attached <input type="checkbox"/> Yes <input type="checkbox"/> No		
16. 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  Print Name <u>Cynthia W. Williams</u> Title <u>Executive Director</u> Telephone No. <u>843/669-4163</u> Date (mm/dd/yyyy) <u>06/30/2010</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form-LLL (7/97)

Attachment SC059g01, RAB Comments 11.0(f)
Housing and Community Redevelopment Authority of Marlboro County

RESIDENT ADVISORY BOARD COMMENTS
REGARDING THE FIVE YEAR/ANNUAL AGENCY PLAN FOR 2010
HOUSING AND COMMUNITY REDEVELOPMENT AUTHORITY OF MARLBORO
COUNTY

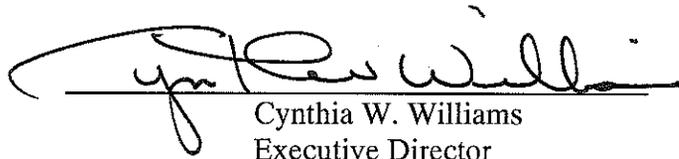
The staff met with the Resident Advisory Board to discuss information pertaining to the 2010 Five Year/Annual Agency Plan for the period October 1, 2010 through September 30, 2011.

The Executive Director went over the proposed Five-Year/Annual Plan for fiscal year beginning October 1, 2010. She went over in detail the plan discussing the following:

- Mission Statement
- Goals and Objectives
- Revisions to the ACOP, HCV Admin Plan
- Capital Fund Five Year Plan extensively (See Attachment B and made a part of these minutes)

Various comments were made by the board and staff. There was one recommendation that we include security cameras and delay interior door replacements. This was considered and will be included in our Five-Year Plan.

Overall, the board made good comments and supported the proposed Agency Plan with no changes.


Cynthia W. Williams
Executive Director

Attachment SC059h 01

Housing & Community Redevelopment Authority of Marlboro County
Challenged Elements 11.0(g)

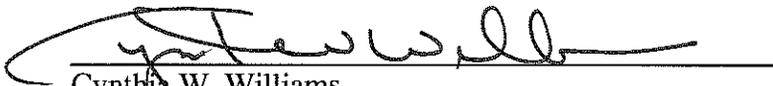
HOUSING AND COMMUNITY REDEVELOPMENT AUTHORITY OF MARLBORO
COUNTY

ANNUAL AGENCY PLAN

BEGINNING OCTOBER 1, 2010

CHALLENGED ELEMENTS

There were NO challenged elements during the Public Hearing nor the Resident Advisory
Board Meetings.


Cynthia W. Williams
Executive Director

Attachment SC059i01

Housing and Community Redevelopment of Authority of Marlboro County Violence Against Women Act 11.0(j)

Pursuant to HUD's requirement that our Five-Year and Annual Plan contain information regarding our goals, objectives, policies, or programs that will enable us to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking we have including the following:

The following is taken from our ACOP based on The Violence Against Women and Justice Department Reauthorization Act of 2005 that protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

10.4 DOMESTIC VIOLENCE POLICY

The pervasiveness and seriousness of domestic violence has illuminated it as an issue of national importance. In many instances, victims of domestic violence suffer not only the physical abuse, but also the devastation of being displaced from their homes. As a result, affordable housing issues become a serious consequence of domestic violence.

As a provider of low income affordable housing, the Housing Authority recognizes the need to establish provisions to enable victims of Domestic Violence to attain decent, safe and sanitary housing in an environment and under conditions that would help them to address their housing needs while removing themselves and families member from the abusive situation.

- A. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease or other "good cause" for termination of the assistance, tenancy, or occupancy rights of such a victim.
- B. Criminal activity directly relating to abuse, 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 assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of domestic violence, dating violence, or stalking.
- C. Notwithstanding any restrictions on admission, occupancy, or terminations of occupancy or assistance, or any Federal, State or local law to the contrary, a PHA, owner or manager may "bifurcate" a lease, or otherwise remove a household member from a lease, without regard to whether a household member is a signatory to the 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. This action may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by Federal, State, and local law for the termination of leases or assistance.
- D. Nothing in this section may be construed to limit the authority of a public housing agency, owner, or manager, when notified, to honor court orders addressing rights of access or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members in cases where a family breaks up.
- E. Nothing in this section limits any otherwise available authority of an owner or manager to evict or the public housing agency to terminate assistance to a tenant for any violation of a lease not premised on the act or acts of violence in question against the tenant or a member of the tenant's household, provided that the owner, manager, or public housing agency does not subject an individual who is or has been a victim of domestic violence, dating violence, or stalking to a more demanding standard than other tenants in determining whether to evict or terminate.
- F. Nothing in this section may be construed to limit the authority of an owner or manager to evict, or the public housing agency to terminate assistance, to any tenant if the owner, manager, or public housing agency can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant is not evicted or terminated from assistance.
- G. Nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section from victims of domestic violence, dating violence, or stalking.

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.

Housing & Community Redevelopment Authority of Marlboro
County

SC059

 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	Title
B. H. Guinn	Chairman
Signature	Date
	6-9-2010

2010 Capital Fund

Capital Fund Program (CFP) Amendment

To The Consolidated Annual Contributions Contract (form HUD-53012)

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

Whereas, (Public Housing Authority) Marlboro Co Hsg & Redev Authority (SC059) (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions Contract(s) ACC(s) Numbers(s) A3968 dated 12/2/1995

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities at existing public housing developments in order to ensure that such developments continue to be available to serve low-income families. HUD reserves the right to provide additional CFP assistance in this FY to the PHA. HUD will provide a revised ACC Amendment authorizing such additional amounts.

\$ 98,307.00 for Fiscal Year 2010 to be referred to under Capital Fund Grant Number SC16P05950110

PHA Tax Identification Number (TIN): On File

Whereas, HUD and the PHA are entering into the CFP Amendment Number 20

Now Therefore, the ACC(s) is (are) amended as follows:

1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).

2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.

3. (Check one)

a. For Non-qualified PHAs:

(i) In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1).

OR

(ii) If the Annual PHA Plan has not been adopted by the PHA and approved by HUD, the PHA may use its CFP assistance under this contract for work items contained in its CFP-Five-Year Action Plan (HUD-50075.2), before the Annual PHA Plan is approved.

b. For Qualified PHAs:

(i) The CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1) has been adopted by the PHA and verified by HUD. The capital and management activities shall be carried out as described therein.

OR

X (ii) If the CFP Annual Statement/Performance and Evaluation Report has not been adopted by the PHA and/or verified by HUD, the PHA may use its CFP assistance under this contract for work items contained in its approved CFP 5-Year Action Plan (HUD-50075.2), before the CFP Annual Statement/Performance and Evaluation Report is adopted by the PHA and verified by HUD.

For cases where HUD has approved a Capital Fund Financing Amendment to the ACC (CFP Amendment attached), HUD will deduct the payment for amortization scheduled payments from the grant immediately on the effective date of this CFP Amendment. The payment of CFP funds due per the amortization scheduled will be made directly to a designated trustee (Trustee Agreement attached) within 3 days of the due date.

The parties have executed this Agreement, and it will be effective on 7/15/2010. This is the date on which CFP assistance becomes available to the PHA for obligation.

Regardless of the selection above, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the United States Housing Act of 1937, as amended, (the "Act") and 48 month time period in which the PHA must expend this CFP assistance pursuant to section 9(j)(5) of the Act starts with the effective date of this CFP amendment (the date on which CFP assistance becomes available to the PHA for obligation). Any additional CFP assistance this FY will start with the same effective date.

4. Subject to the provisions of the ACC(s) and paragraph 3. and to assist in the capital and management activities, HUD agrees to disburse to the PHA or the designated trustee from time to time as needed up to the amount of the funding assistance specified herein.

5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modernization activities for any public housing or portion thereof and for a period of forty years after the last distribution of CFP assistance for development activities for any public housing and for a period of ten years following the last payment of assistance from the Operating Fund to the PHA. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. The PHA will accept all CFP assistance provided for this FY. If the PHA does not comply with any of its obligations under this Amendment and does not have its Annual PHA Plan approved within the period specified by HUD, HUD shall impose such penalties or take such remedial action as provided by law. HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the Annual PHA Plan. In such case, the PHA shall only incur additional costs with HUD approval.

7. Implementation or use of funding assistance provided under this Amendment is subject to the attached corrective action order(s).

(mark one) : [] Yes [X] No

8. The PHA acknowledges its responsibility for adherence to this Amendment.

U.S. Department of Housing and Urban Development By Date: Title

PHA Executive Director By Date: 7/6/2010 Title Cynthia W. Williams, Executive Director

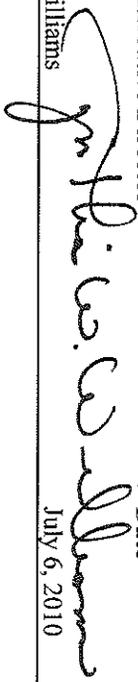
Part I: Summary

PHA Name: **Housing Authority of Marlboro County** Grant Type and Number: **Capital Fund Program Grant No: SC16P05950110 Replacement Housing Factor Grant No:** FFY of Grant: **2010**
 Date of CFFP: _____

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 No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFFP Funds				
2	1406 Operations	\$1,000			
3	1408 Management Improvements	\$7,500			
4	1410 Administration	\$9,827			
5	1411 Audit	\$2,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$9,150			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$25,000			
10	1460 Dwelling Structures	\$40,330			
11	1465.1 Dwelling Equipment—Nonexpendable	\$3,500			
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				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$98,307			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security—Soft Costs				
24	Amount of line 20 Related to Security—Hard Costs	\$7,500			
25	Amount of line 20 Related to Energy Conservation Measures				

Part I: Summary

PHA Name: Housing Authority of Marlboro County	Grant Type and Number Capital Fund Program Grant No: SC16P05950110 Replacement Housing Factor Grant No: Date of CFPP _____	FY of Grant: 2010 FY of Grant Approval: 2010
<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		
Signature of Executive Director  Cynthia W. Williams	Date July 6, 2010	Signature of Public Housing Director Date

Part II: Supporting Pages

PHA Name:		Grant Type and Number		FFY of Grant:				
Housing Authority of Marlboro County		Capital Fund Program Grant No: SC16P05950110 Replacement Housing Factor Grant No:		2010				
		CFPP (Yes/No): No						
Development Number/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	Operations	1406	N/A	\$1,000				
HA Wide Management	Security Patrols	1408	3 Officers	\$7,500				
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFPP Management Fee	1410	N/A	\$827				
		1410	N/A	\$9,000				
HA Wide Audit	CFPP Audit Costs	1411	4 Years	\$2,000				
HA Wide Fees/Costs	1) Annual UPCCS Inspections 2) Construction Inspection Costs	1430	1 Firm	\$550				
		1430	2 Staff	\$8,600				
HA Wide Site	Security Camera System	1450	1 Site	\$25,000				
59-1 Clio East	Interior Doors & Hardware	1460	55 Units	\$40,330				
HA Wide Dwelling Equip.	Appliances	1465	6 Units	\$3,500				

Part III: Implementation Schedule

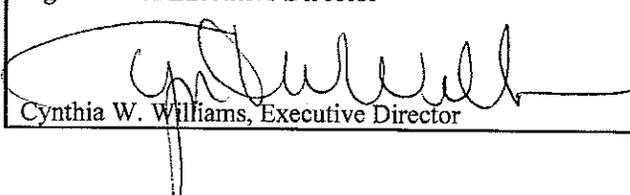
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Name: Housing Authority of Marlboro County	Grant Type and Number Capital Fund Program No: SC16P05950110 Replacement Housing Factor No:			CFPP (Yes/No): No			FFY of Grant: 2010
HA Wide Operations	7/14/2012			7/14/2014			
HA Wide Management	7/14/2012			7/14/2014			
HA Wide Administration	7/14/2012			7/14/2014			
HA Wide Audit	7/14/2012			7/14/2014			
HA Wide Fees/Cosits	7/14/2012			7/14/2014			
HA Wide Site	7/14/2012			7/14/2014			
59-1 Clio East	7/14/2012			7/14/2014			
HA Wide Dwelling Equipment	7/14/2012			7/14/2014			

Part I: Summary

PHA Name: Housing Authority of Marlboro County	Grant Type and Number Capital Fund Program Grant No: SC16P05950109 Replacement Housing Factor Grant No: Date of CFFP _____	FFY of Grant: 2009 FFY of Grant Approval: 2009
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 01)
 Performance and Evaluation Report for Period Ending: 3/31/2010
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$1,000	\$1,000	\$1,000	\$1,000
3	1408 Management Improvements	\$7,500	\$7,500	\$7,500	0
4	1410 Administration	\$9,867	\$10,088	\$9,500	\$9,500
5	1411 Audit	\$2,000	\$2,000	\$2,000	0
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$9,650	\$9,384	\$9,384	\$4,562
8	1440 Site Acquisition				
9	1450 Site Improvement	\$10,200	\$16,345	\$16,345	\$12,888
10	1460 Dwelling Structures	\$56,500	\$50,400	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	\$3,500	\$3,500	0	0
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				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$100,217	\$100,217	\$45,729	\$27,950
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security—Soft Costs				
24	Amount of line 20 Related to Security-- Hard Costs	\$7,500	\$7,500	\$7,500	0
25	Amount of line 20 Related to Energy Conservation Measures	\$4,000	\$3,775	\$275	0

Part I: Summary			
PHA Name: Housing Authority of Marlboro County		Grant Type and Number Capital Fund Program Grant No: SC16P05950109 Replacement Housing Factor Grant No: Date of CFFP _____	
		FFY of Grant: 2009 FFY of Grant Approval: 2009	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <input type="checkbox"/> Final Performance and Evaluation Report			
Signature of Executive Director		Signature of Public Housing Director	
			
Date April 1, 2010		Date	
Cynthia W. Williams, Executive Director			

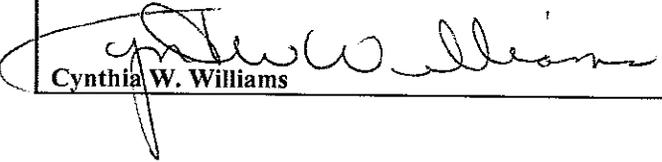
Part II: Supporting Pages

PHA Name:		Grant Type and Number				CFPP (Yes/No): No		FFY of Grant:
Housing Authority of Marlboro County		Capital Fund Program Grant No: SC16P05950109 Replacement Housing Factor Grant No:						2009
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	Operations	1406	N/A	\$1,000	\$1,000	\$1,000	\$1,000	Complete
HA Wide Management	Security Patrols	1408	3 Officer	\$7,500	\$7,500	\$7,500	0	Contract Signed
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFP Management Fee	1410	N/A	\$367	\$588	0	0	Obligate as Needed
		1410	N/A	\$9,500	\$9,500	\$9,500	\$9,500	Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$2,000	\$2,000	\$2,000	0	Contract Signed
HA Wide Fees/Costs	1) Annual UPCS Inspections 2) Energy Audit (5 Year) 2) Construction Inspection Fees	1430	1 Firm	\$550	\$509	\$509	\$509	Complete
		1430	1 Firm	\$500	\$275	\$275	0	Contract Signed
		1430	2 Staff	\$8,600	\$8,600	\$8,600	\$4,053	Staff in Place
59-1 Clio East	1) Site Work – Parking Lots 2) Interior Doors 3) CTV Wiring	1450	1 Site	\$10,200	\$16,345	\$16,345	\$12,888	Construction Phase
		1460	55 Units	\$25,000	\$18,900	0	0	Preparing IFB
		1460	55 Units	\$31,500	\$31,500	0	0	Preparing IFB
HA Wide Dwelling Equip.	Appliances	1465	5 Units	\$3,500	\$3,500	0	0	Preparing IFB

Part III: Implementation Schedule

PHA Name: Housing Authority of Marlboro County		Grant Type and Number Capital Fund Program No: SC16P05950109 CFFP (Yes/No): No Replacement Housing Factor No:					FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
HA Wide Operations	9/14/2011		9/30/2009	9/14/2013		12/31/2009		
HA Wide Management	9/14/2011		9/30/2009	9/14/2013				
HA Wide Administration	9/14/2011			9/14/2013				
HA Wide Audit	9/14/2011		9/30/2009	9/14/2013				
HA Wide Fees/Costs	9/14/2011		3/31/2010	9/14/2013				
59-1 Clio East	9/14/2011			9/14/2013				
HA Wide Dwelling Equipment	9/14/2011			9/14/2013				

Part I: Summary					
PHA Name: Housing Authority of Marlboro County		Grant Type and Number Capital Fund Program Grant No: SC16S05950109 Replacement Housing Factor Grant No: Date of CFFP _____		FFY of Grant: 2009 FFY of Grant Approval: 2009	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	\$12,700	\$12,700	\$12,700	\$11,282
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$1,925	\$1,925	\$1,925	\$425
8	1440 Site Acquisition				
9	1450 Site Improvement	\$112,391	\$112,391	\$112,391	\$112,391
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$127,016	\$127,016	\$127,016	\$124,098
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
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				

Part I: Summary			
PHA Name: Housing Authority of Marlboro County		Grant Type and Number Capital Fund Program Grant No: SC16S05950109 Replacement Housing Factor Grant No: Date of CFFP _____	
		FFY of Grant: 2009 FFY of Grant Approval: 2009	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <input type="checkbox"/> Final Performance and Evaluation Report			
Signature of Executive Director		Signature of Public Housing Director	
 Cynthia W. Williams			
Date April 1, 2010		Date	

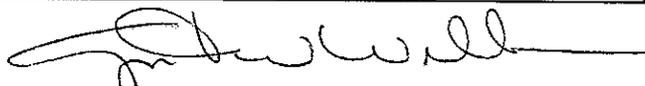
Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Housing Authority of Marlboro County	Grant Type and Number Capital Fund Program Grant No: SC16P05950108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 02)
 Performance and Evaluation Report for Period Ending: 3/31/10
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$8,700	\$8,700	\$8,700	\$8,700
3	1408 Management Improvements	\$2,000	\$2,000	\$2,000	\$2,000
4	1410 Administration	\$7,695	\$6,823	\$6,823	\$6,823
5	1411 Audit	\$1,500	\$1,500	\$1,500	\$500
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$9,145	\$9,125	\$9,125	\$9,125
8	1440 Site Acquisition				
9	1450 Site Improvement	\$25,674	\$26,566	\$26,566	\$26,566
10	1460 Dwelling Structures	\$41,000	\$41,000	\$41,000	\$41,000
11	1465.1 Dwelling Equipment—Nonexpendable	\$4,631	\$4,631	\$4,631	\$4,631
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				


CYNTHIA W. WILLIAMS
 Executive Director
 April 1, 2010

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Housing Authority of Marlboro County	Grant Type and Number Capital Fund Program Grant No: SC16P05950108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 02)
 Performance and Evaluation Report for Period Ending: 3/31/10
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	\$100,345	\$100,345	\$100,345	\$99,345
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Compliance				
24	Amount of line 21 Related to Security --Soft Costs				
25	Amount of line 21 Related to Security-- Hard Costs	\$2,000	\$2,000	\$2,000	\$2,000
26	Amount of line 21 Related to Energy Conservation Measures	\$45,631	\$45,631	\$45,631	\$45,631

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Marlboro County		Grant Type and Number Capital Fund Program Grant No: SC16P05950108 Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide Operations	Operations	1406	N/A	\$8,700	\$8,700	\$8,700	\$8,700	Complete
HA Wide Management	Security Patrols	1408	3 Officers	\$2,000	\$2,000	\$2,000	\$2,000	Complete
HA Wide Administration	1) IFB/RFP Advertising Costs 2) CFP Management Fee	1410	N/A	\$1,195	\$323	\$323	\$323	Complete
		1410	N/A	\$6,500	\$6,500	\$6,500	\$6,500	Complete
HA Wide Audit	CFP Audit Costs	1411	4 Years	\$1,500	\$1,500	\$1,500	\$500	Ongoing Expenditure
HA Wide Fees/Costs	1) Annual UPCS Inspections 2) Construction Inspection Costs	1430	1 Firm	\$545	\$525	\$525	\$525	Complete
		1430	3 Staff	\$8,600	\$8,600	\$8,600	\$8,600	Complete
HA Wide Site	Site Work – Parking Lots	1450	1 Site	\$25,674	\$26,566	\$26,566	\$26,566	Complete
59-1 Clio East	Security Storm Doors	1460	55 Units	\$41,000	\$41,000	\$41,000	\$41,000	Complete
HA Wide Dwelling Equip.	Appliances	1465	15 Units	\$4,631	\$4,631	\$4,631	\$4,631	Complete

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Housing Authority of Marlboro County		Grant Type and Number Capital Fund Program No: SC16P05950108 Replacement Housing Factor No:				Federal FY of Grant: 2008	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide Operations	6/12/2010		3/31/2009	6/12/2012		6/30/2009	
HA Wide Management	6/12/2010		6/30/2008	6/12/2012		3/31/2009	
HA Wide Administration	6/12/2010		6/30/2009	6/12/2012		6/30/2009	
HA Wide Audit	6/12/2010		6/30/2008	6/12/2012			
HA Wide Fees/Costs	6/12/2010		3/31/2009	6/12/2012		12/31/2009	
HA Wide Site	6/12/2010		9/30/2009	6/12/2012		12/31/2009	
59-1 Clio East	6/12/2010		9/30/2008	6/12/2012		3/31/2009	
HA Wide Dwelling Equipment	6/12/2010		9/30/2008	6/12/2012		9/30/2008	