

1.0	PHA Information PHA Name: Temple Housing Authority PHA Type: <input checked="" 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): 10/1/10 PHA Code: TX030																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: THA = 326 BHA = 15 Number of HCV units: <u> 0 </u>																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia <input checked="" 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" style="width:35%;">Participating PHAs</th> <th rowspan="2" style="width:10%;">PHA Code</th> <th rowspan="2" style="width:20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width:20%;">Programs Not in the Consortia</th> <th colspan="2" style="width:15%;">No. of Units in Each Program</th> </tr> <tr> <th style="width:5%;">PH</th> <th style="width:5%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1: Belton Housing Authority</td> <td>TX213</td> <td>Public Housing</td> <td>N/A</td> <td style="text-align: center;">156</td> <td style="text-align: center;">0</td> </tr> <tr> <td>PHA 2: Temple Housing Authority</td> <td>TX030</td> <td>Public Housing</td> <td>N/A</td> <td style="text-align: center;">326</td> <td style="text-align: center;">0</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: Belton Housing Authority	TX213	Public Housing	N/A	156	0	PHA 2: Temple Housing Authority	TX030	Public Housing	N/A	326	0	PHA 3:					
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PHA 2: Temple Housing Authority	TX030	Public Housing	N/A	326	0																						
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: Provide and professionally manage an adequate supply of safe, affordable housing of reasonable quality for low income persons while administering programs that offer opportunities for residents to advance in society. Be a leader and work in partnership with other agencies to enhance the quality of life for all persons of low income in the city.																										
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. B. Goals <i>The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.</i> HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing. <input checked="" type="checkbox"/> PHA Goal: Expand the supply of assisted housing Objectives: <input type="checkbox"/> Apply for additional rental vouchers: <input type="checkbox"/> Reduce public housing vacancies: <input checked="" type="checkbox"/> Leverage private or other public funds to create additional housing opportunities: <input checked="" type="checkbox"/> Acquire or build units or developments <input checked="" type="checkbox"/> Other (list below) Develop affordable single family homes for ownership by low income families. Add Housing Authorities to the Consortium as opportunities arise. <input checked="" type="checkbox"/> PHA Goal: Improve the quality of assisted housing Objectives: <input type="checkbox"/> Improve public housing management: (PHAS score) <input type="checkbox"/> Improve voucher management: (SEMAP score) <input type="checkbox"/> Increase customer satisfaction: <input type="checkbox"/> Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections) <input checked="" type="checkbox"/> Renovate or modernize public housing units: <input checked="" type="checkbox"/> Demolish or dispose of obsolete public housing: Demolish 4-6 elderly units to make space for office expansion needs in 5-10 years. <input type="checkbox"/> Provide replacement public housing: <input type="checkbox"/> Provide replacement vouchers: <input checked="" type="checkbox"/> Other: (list below) Operate community center on East side of Temple to serve resident/public needs. Operate community center on North side of town to serve resident needs. Promote energy conservation by purchasing energy star appliances, and by requiring energy upgrades during renovation, incorporating and implementing Green Assessment and Energy Audit recommendations when financially feasible.																										

	<p><input checked="" type="checkbox"/> PHA Goal: Increase assisted housing choices Objectives:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Provide voucher mobility counseling: <input type="checkbox"/> Conduct outreach efforts to potential voucher landlords <input type="checkbox"/> Increase voucher payment standards <input type="checkbox"/> Implement voucher homeownership program: <input checked="" type="checkbox"/> Implement public housing or other homeownership programs: <input type="checkbox"/> Implement public housing site-based waiting lists: <input type="checkbox"/> Convert public housing to vouchers: <input checked="" type="checkbox"/> Other: (list below) Continue to improve THA locally owned rental choice to include single family, duplexes and multifamily units. <p>HUD Strategic Goal: Improve community quality of life and economic vitality</p> <p><input checked="" type="checkbox"/> PHA Goal: Provide an improved living environment Objectives:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: Utilize income category preferences. <input type="checkbox"/> Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments: <input checked="" type="checkbox"/> Implement public housing security improvements: * Use security firm to patrol properties as needed. <input type="checkbox"/> Designate developments or buildings for particular resident groups (elderly, persons with disabilities) <input type="checkbox"/> Other: (list below) <p>HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals</p> <p><input checked="" type="checkbox"/> PHA Goal: Promote self-sufficiency and asset development of assisted households Objectives:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Increase the number and percentage of employed persons in assisted families: <input checked="" type="checkbox"/> Provide or attract supportive services to improve assistance recipients' employability: <input checked="" type="checkbox"/> Provide or attract supportive services to increase independence for the elderly or families with disabilities. <input checked="" type="checkbox"/> Other: (list below) <ul style="list-style-type: none"> · Provide GED training and scholarships for local college attendees · Operate community center on East side of Temple to serve resident/public needs and provide additional programs for elderly using service coordinators. · Operate community center on North side of town to serve resident needs. <p>HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans</p> <p><input checked="" type="checkbox"/> PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability. <input type="checkbox"/> 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: <input type="checkbox"/> Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: <input checked="" type="checkbox"/> Other: (list below) * Use Texas Department of Housing and Community Affairs, in house funding and City of Temple Down Payment Assistance funds to provide homeownership opportunities. * Act as developer and leader of partnership to build single family affordable homes for purchase by low income families. <p>Other PHA Goals and Objectives: (list below)</p> <p>No other goals or objectives.</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: (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>NOT REQUIRED TO SUBMIT IN 2010</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. Include statements related to these programs as applicable.</p> <p>NOT APPLICABLE</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. ATTACHED</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. ATTACHED</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. NOT APPLICABLE</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. NOT REQUIRED TO SUBMIT IN 2010</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. NOT REQUIRED TO SUBMIT IN 2010</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>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>NOT REQUIRED TO SUBMIT IN 2010</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)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p> <p>ATTACHED</p>

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

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

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

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

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

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year.

(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

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

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

(b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

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

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

(a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*

(b) Form HUD-50070, *Certification for a Drug-Free Workplace* **(PHAs receiving CFP grants only)**

(c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* **(PHAs receiving CFP grants only)**

(d) Form SF-LLL, *Disclosure of Lobbying Activities* **(PHAs receiving CFP grants only)**

(e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* **(PHAs receiving CFP grants only)**

(f) Resident Advisory Board (RAB) comments.

(g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.

(h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* **(Must be attached electronically for PHAs receiving CFP grants only).** See instructions in 8.1.

(i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* **(Must be attached electronically for PHAs receiving CFP grants only).** See instructions in 8.2.

(2) Optional 5-Year Action Plan – Temple Housing Authority

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name						<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:
Temple Housing Authority						
Development Number/Name/HA-Wide	Year 1 2010	Work Statement for Year 2 FFY Grant: 2011 PHA FY: 2011	Work Statement for Year 3 FFY Grant: 2012 PHA FY: 2012	Work Statement for Year 4 FFY Grant: 2013 PHA FY: 2013	Work Statement for Year 5 FFY Grant: 2014 PHA FY: 2014	
	Annual Statement					
AMP 1- Family (TX30-01, 02 & 7 family units in 07)		298,000	291,000	155,000	257,000	
AMP 2 - Elderly (TX 30-03 & 18 elderly units in 07)		30,000	29,000	15,000	33,000	
AMP 3 – Elderly Highrise (TX30-04)		10,000		150,000	30,000	
TX 30 PHA Wide		22,000	40,000	40,000	40,000	
TX 30 PHA Wide Admin		40,000	40,000	40,000	40,000	
CFP Funds Listed for 5-year planning	400,000	400,000	400,000	400,000	400,000	
Replacement Housing Factor Funds						

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1 2010	Activities for Year : 2 Temple FFY Grant: 2011 PHA FY: 2011			Activities for Year: 3 Temple FFY Grant: 2012 PHA FY: 2012		
	Development Name/Number	Major Work Categories	<i>Estimated Cost</i>	Development Name/Number	Major Work Categories	Estimated Cost
See Annual Statement	AMP 1 - Family (TX30-01, 02 & 7 family units in 07)	JMH/CV Rehab Baths – Single Story Units WB HVAC Replace Stairwell Treads	138,000 130,000 30,000	AMP 1 - Family (TX30-01, 02 & 7 family units in 07)	JMH, CV, WB Family Reroof Buildings (Exclude JMH 11) JMH/CV Concrete Work – Sidewalks, Ramps, Walls	266,000 25,000
	AMP 2 - Elderly (TX 30-03 & 18 elderly units in 07)	WB HVAC	30,000	AMP 2 - Elderly (TX 30-03 & 18 elderly units in 07)	WB Reroof Buildings	29,000
	AMP 3 -TX30-04	Exterior Lighting	10,000	AMP 3 - TX30-04		
	TX 30 PHA Wide	Appliances Water Heaters	15,000 7,000	TX 30 PHA Wide	Appliances Water heaters	30,000 10,000
	TX 30 PHA Wide Admin	Management fee	40,000	TX 30 PHA Wide Admin	Management fee	40,000
Total CFP Estimated Cost			\$400,000			\$400,000

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year : 4 Temple FFY Grant: 2013 PHA FY: 2013			Activities for Year: 5 Temple FFY Grant: 2014 PHA FY: 2014		
Development Name/Number	Major Work Categories	<i>Estimated Cost</i>	Development Name/Number	Major Work Categories	Estimated Cost
AMP 1 - Family (TX30-01, 02 & 7 family units in 07)	JMH/CV/WB Replace Kitchen Cabinets, Sinks, Faucets	155,000	AMP 1 - Family (TX30-01, 02 & 7 family units in 07)	JMH/CV/WB Replace Kitchen Cabinets, Sinks, Faucets JMH Fence JMH Resurface Parking Lot	147,000 80,000 30,000
AMP 2 - Elderly (TX 30-03 & 18 elderly units in 07)	AL/RAT/WB Install HC Ramps/Thresholds	15,000	AMP 2 - Elderly (TX 30-03 & 18 elderly units in 07)	WB elderly Kitchen Cabinets, Sinks, Faucets	33,000
AMP 3 TX30-04	Elevator Upgrade	150,000	AMP 3 -TX30-04	Resurace Parking Lot	30,000
TX 30 PHA Wide	Appliances Operations Energy Efficiency/Water Efficiency Upgrades/Submeters	25,000 5,000 10,000	TX 30 PHA Wide	Appliances Operations Energy Efficiency/Water Efficiency Upgrades/Submeters	25,000 5,000 10,000
TX 30 PHA Wide Admin	Management fee	40,000	TX 30 PHA Wide Admin	Management fee	40,000
Total CFP Estimated Cost		\$400,000			\$400,000

Part I: Summary		
PHA Name: Temple Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX03000000309R (Grants/Word/5 Year Plan/Temple 50075.1 Stimulus Competitive CFP.doc) Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 3/31/09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	815,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and Office of Public and Indian Housing
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development

OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Temple Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX03000000309R Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval:			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/09			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	815,000.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director			Signature of Public Housing Director		
Barbara B. Bozon, CPA			Date		
Date 6/29/2010					

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Part II: Supporting Pages								
PHA Name: Temple Housing Authority			Grant Type and Number Capital Fund Program Grant No: TX03000000309R CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 3, Frances Graham Hall	Solar Energy Generating System	1460	1	526,775				
	Remove and Replace Chillers	1460	3	288,225				

Part I: Summary			
PHA Name: Temple Housing Authority	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Grant Type and Number Capital Fund Program Grant No: TX21P03050109 Replacement Housing Factor Grant No: Date of CFFP:</td> <td style="width:50%; text-align: right;">(Grants/Word/5 Year Plan/Temple 50075.1 Temple 2009 CFP.doc)</td> </tr> </table>	Grant Type and Number Capital Fund Program Grant No: TX21P03050109 Replacement Housing Factor Grant No: Date of CFFP:	(Grants/Word/5 Year Plan/Temple 50075.1 Temple 2009 CFP.doc)
Grant Type and Number Capital Fund Program Grant No: TX21P03050109 Replacement Housing Factor Grant No: Date of CFFP:	(Grants/Word/5 Year Plan/Temple 50075.1 Temple 2009 CFP.doc)		
	FFY of Grant: 2009 FFY of Grant Approval:		

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 3/31/10 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	45,535.00	45,535.00	45,535.00	30,356.64
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	48,500.00	80,205.00	80,205.00	3,150.00
8	1440 Site Acquisition				
9	1450 Site Improvement	231,345.00	211,112.86	111,714.76	51,356.76
10	1460 Dwelling Structures	130,000.00	118,527.14	42,527.14	42,527.14
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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

Part I: Summary					
PHA Name: Temple Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX21P03050109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval:			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/10		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	455,380.00	455,380.00	279,981.90	127,390.54
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director			Signature of Public Housing Director		Date
Barbara B. Bozon, CPA					
Date 6/29/10					

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Part II: Supporting Pages								
PHA Name: Temple Housing Authority			Grant Type and Number Capital Fund Program Grant No: TX21P03050109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 -- JMH, CV, WB Family	TX30-02 Install fence Signage Landscaping WB Asbestos Consultant CV Playground WB (Family) Exterior Renovations	1450 1450 1450 1430 1450 1460	1 3 1	39,845 0 0 0 0 0	25,602.00 10,880.00 31,175.00 550.00 4,574.76 28,375.14	25,602.00 10,880.00 1,175.00 550.00 4,574.76 28,375.14	25,602.00 5,440.00 0 550.00 4,574.76 28,375.14	Complete Complete Complete Complete
AMP 2 -- AL, RAT, WB Elderly	Landscaping AL/RAT Reroof Signage AL/RAT - Utility system upgrade	1450 1460 1450 1450	 25 bldgs	35,000 0 5,000 84,000	0 14,152.00 9,120.00 47,183.00	0 14,152.00 9,120.00 47,183.00	0 14,152.00 4,560.00 0	N/A Complete
	AL/RAT/WB eld - exterior lighting AL/RAT - Sewer upgrade/Apt. drain lines AL/RAT - Arch/Engr roofs AL/RAT - Arch/Engr Elect Dist System AL/RAT Install new water lines	1450 1460 1430 1430 1460		10,000 110,000 48,500 0 0	20,392.10 0 2,600.00 25,250.00 76,000.00	0 0 2,600.00 25,250.00 0	0 0 2,600.00 0 0	N/A Complete
AMP 3 -- FGH	Arch/Engr Solar, Chillers, HVAC, Roof Install exterior lighting Replace generator auto control Signage Landscaping Reroof Building FGH Exterior Renovations, Awnings	1430 1450 1460 1450 1450 1460 1450		0 20,000 20,000 2,500 35,000 0 0	51,805.00 10,820.00 0 4,000.00 38,186.00 0 9,180.00	51,805.00 0 0 4,000.00 0 0 9,180.00	0 0 0 2,000.00 0 0 9,180.00	Complete
PHA Wide - Admin	Management fee (10%)	1408		45,535	45,535.00	45,535.00	30,356.64	

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Part I: Summary		
PHA Name: Temple Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX21P03050110 (Grants/Word/5 Year Plan/Temple 50075.1 Temple 2009 CFP.doc) Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval:

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	16,000.00			
4	1410 Administration (may not exceed 10% of line 21)	45,170.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	14,100.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	173,545.00			
10	1460 Dwelling Structures	179,900.00			
11	1465.1 Dwelling Equipment—Nonexpendable	23,000.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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

Part I: Summary					
PHA Name: Temple Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX21P03050109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval:			
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	451,715.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director			Signature of Public Housing Director		Date
Barbara B. Bozon, CPA					Date 6/18/10

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Part II: Supporting Pages								
PHA Name: Temple Housing Authority			Grant Type and Number Capital Fund Program Grant No: TX21P03050110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 -- JMH, CV, WB Family	WB Windows Architect JMH/CV/WB Exterior lighting Install HVAC temp limiting devices Landscaping	1460 1430 1450 1450 1450		80,000.00 10,100.00 30,000.00 2,500.00 30,000.00				
AMP 2 -- AL, RAT, WB Elderly	Landscaping Install HVAC temp limiting devices WB Elderly windows Exterior lighting AL/RAT Sewer upgrade/apt. drain lines	1450 1450 1460 1450 1460		46,545.00 2,500.00 5,000.00 10,000.00 94,900.00				
AMP 3 FGH	Architect Renovate common areas	1430 1450		4,000.00 52,000.00				
PHA Wide	Appliances – ranges Replace water heaters Physical needs assessment	1465 1465 1408		13,000.00 10,000.00 16,000.00				
PHA Wide - Admin	Management fee (10%)	1410		45,170.00				

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² To be completed for the Performance and Evaluation Report.

6/3/10
Mailed to
RAB Members



CENTRAL TEXAS HOUSING CONSORTIUM
TEMPLE HOUSING AUTHORITY BELTON HOUSING AUTHORITY

BARBARA B. BOZON, CPA
EXECUTIVE DIRECTOR

NOTICE

**Central Texas Housing Consortium
Resident Advisory Board**

To Inform:

**Comment Received at Public Hearing
Capital Fund Five-Year Action Plan
Capital Fund Annual Statements**

One comment was received at the Public Hearing regarding the Plan regarding replacement of thermostats at Frances Graham Hall. This item has been added to the 5-Year Plan as a work item.

