

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: OLNEY HOUSING AUTHORITY PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard PHA Code: TX041 <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 10/2010																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 181 Number of HCV units: 0																										
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 type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1"> <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:					
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:																											
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: The mission of the PHA is the same as that of the Department of Housing and Urban Development: 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. Olney Housing Authority: Goals and Objectives <ul style="list-style-type: none"> • Improve the quality of assisted housing, Modernize units to improve marketability and improve customer satisfaction. • Increase customer satisfaction: Solicit tenant's comments and suggestions regarding services provided. • Improve community quality of life and economic vitality • Ensure Equal Opportunity in Housing for all Americans; Our goal is to insure equal housing opportunities and tenant rights The Olney Housing Authority has remained on target with the objectives set forth in their plan. We strive to provide decent, safe and affordable housing in our community, ensuring equal opportunity for everyone. <i>The Executive Director has ensured the review of all existing policies and procedures to incorporate all necessary requirements and if warranted, will make revisions as needed.</i>																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: There have been no changes to the PHA Plan elements (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. The 5-Year Plan is available for viewing at the Olney Housing Authority Office, 302 W. Main St. Olney, Texas 76374																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i>																										
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.																										
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.																										
8.2	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.																										

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. The following is Not Applicable for the Olney Housing Authority.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>
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. The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination. To that end the PHA is reducing public housing vacancies, renovating and/or modernizing housing units as funding is available, improving customer satisfaction and good will by improving management/customer interaction.</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 Plan: Substantial Deviation from the 5-year Plan: Any change to Mission statement such as: 50% deletion from or addition to the goals and objectives as a whole 50% or more decrease in the quantifiable measurement of any individual goal or objective. Significant Amendment or Modification to the Annual Plan 50% variance in the funds projected in the Capital Fund Program Annual Statement Any increase or decrease over 50% in the funds projected in the Financial Resource statement and/or the Capital Fund Program Annual Statement Any submission to HUD that requires a separate notification to residents, such as Hope VI, Public Housing Conversion, Demolition/Disposition, designated Housing or Homeownership programs.</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>

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 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.

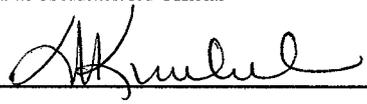
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority 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.

OLNEY HOUSING AUTHORITY
 PHA Name

TX041
 PHA Number/HA Code

X 5-Year PHA Plan for Fiscal Years 2010 - 2014
 _____ Annual PHA Plan for Fiscal Years 20 - 20

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

Name of Authorized Official 	Title Vice Chair
Signature	Date 7-9-10

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Olney Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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 Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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

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

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

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

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

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

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

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

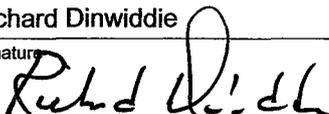
Name of Authorized Official

Richard Dinwiddie

Title

Executive Director

Signature

X 

Date

07/09/2010

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Olney Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

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

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-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 Richard Dinwiddie	Title Executive Director
Signature 	Date (mm/dd/yyyy) 07/09/2010



302 W. MAIN ST.
OLNEY, TX 76374
940/564-5639

A Resident Advisory Board Meeting was held at 12:00 PM on April 8th, 2010. The following residents attended this meeting:

Russell Menhennett, Theo Torres, Shannon Dillon, Angela Britt, Gwen Sedberry, Frank Goldsmith, Billie Pickett and Glen Allen York.

They commented that they were happy to see the carports. They reviewed the five year action plan and did not have anything new to add to it. They decided they would like to meet more frequently throughout the year.

We decided to start meeting quarterly throughout the year to talk about not only capital items but other ways to improve the marketability of the apartments.

Richard Dinwiddie
Executive Director
Olney Housing Authority

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		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: OLNEY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX21P04150110 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant	Type of Grant Statement		Total Actual Cost ¹ Expended
Line	Summary by Development Account	Revised ²	
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	49,831.00	
3	1408 Management Improvements	5,000.00	
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	69,5000.00	
10	1460 Dwelling Structures	102,660.00	
11	1465.1 Dwelling Equipment—Nonexpendable	19,167.00	
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment	3,000.00	
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities ⁴		

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

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name: OLNEY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: TX21P04150110 Replacement Housing Factor Grant No: Date of CFPP:	FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:) <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)	249,158.00	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>Richard A. ...</i>		Signature of Public Housing Director	
Date 7/9/10		Date	

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

Part II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: OLNEY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX21P04150110 CFFP (Yes/No): Replacement Housing Factor Grant No:						
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	
TX041-HA	OPERATIONS	1406		49,831.00				
TX041-HA	TRAINING	1408		5,000.00				
TX041-HA	BUILD GAZEBO	1450		39,500.00				
TX041-HA	LANDSCAPING	1450		5,000.00				
TX041-HA	OUTDOOR RECREATION EQUIP	1450		5,000.00				
TX041-HA	SEAL ROAD	1450		10,000.00				
TX041-HA	SIGNS	1450		10,000.00				
TX041-HA	GUTTERS AND DOWNSPOUTS	1460		10,897.00				
TX041-HA	PAINT EXTERIOR TRIM	1460		15,000.00				
TX041-HA	UPGRADE HVAC/REPAIR AC CLOSET	1460		66,763.00				
TX041-HA	VINYL/ALUMINUM TRIM	1460		10,000.00				
TX041-HA	REFRIGERATORS	1465.1		8,667.00				
TX041-HA	REPLACE LIGHT BULBS WITH CFP	1465.1		1,500.00				
TX041-HA	STOVES	1465.1		9,000.00				
TX041-HA	MISC MAINTENANCE EQUIP	1475		1,000.00				
TX041-HA	MISC YARD EQUIP	1475		1,000.00				
TX041-HA	SUNDRY OFFICE SUPPLIES/EQUIP	1475		1,000.00				

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

² To be completed for the Performance and Evaluation Report.

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

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 Office of Public and Indian Housing
 OMB No. 2577-0226
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Part I: Summary		FFY of Grant: 2009	
PHA Name: Olney Housing Authority		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: TX21P04150109 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	50,717.00	
3	1408 Management Improvements	5,000.00	
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	55,000.00	
10	1460 Dwelling Structures	127,631.00	
11	1465.1 Dwelling Equipment—Nonexpendable	4,000.00	
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment	3,000.00	
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs	5,000.00	
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		FFY of Grant: 2009	
PHA Name: Oliney Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX21P04150109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ²
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	249,538.00	
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	
<i>Richard D. ...</i>		<i>...</i>	
Date		Date	
7/9/13			

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.
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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		Grant Type and Number	FFY of Grant: 2009		
PHA Name:		Capital Fund Program Grant No: TX21S041501-09	FFY of Grant Approval: 2009		
OLNEY HOUSING AUTHORITY		Replacement Housing Factor Grant No:			
		Date of CFFP:			
Type of Grant		<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 3-31-2010		<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Original	Total Estimated Cost	Obligated	Total Actual Cost ¹
			Revised ²		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	135,988.00	98,763.00		
10	1460 Dwelling Structures	120,000.00	222,235.00		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	65,000.00	0		
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
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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		FFY of Grant: 2009 FFY of Grant Approval: 2009	
PHA Name: OLNEY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: TX21S041501-09 Replacement Housing Factor Grant No: Date of CFFP:		
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010			
Type of Grant	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated
Line		Revised²	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)	320,988.00	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>Robert D. ...</i>		Date 7/9/10	Signature of Public Housing Director
		Date	Date

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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		FFY of Grant: 2008 FFY of Grant Approval:		
PHA Name: Olney Housing Authority		Grant Type and Number Capital Fund Program Grant No: TX21P04150108 Replacement Housing Factor Grant No: Date of CFPP:		
Type of Grant	Revised Annual Statement (revision no:)			
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010	<input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost ¹	
Line	Summary by Development Account	Total Estimated Cost Revised ²	Obligated	Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) ³	50,717.00	50,717.00	50,717.00
3	1408 Management Improvements	5,000.00	467.30	467.30
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	9,000.00	105,960.00	105,960.00
10	1460 Dwelling Structures	167,868.00	11,742.92	11,742.92
11	1465.1 Dwelling Equipment—Nonexpendable	5,000.00	14,345.48	14,345.48
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment	11,000.00	70,352.5	70,352.30
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

Part I: Summary		FFY of Grant: 2008	
PHA Name: Olney Housing Authority	Grant Type and Number Capital Fund Program Grant No. TX21P04150108 Replacement Housing Factor Grant No. Date of CFFP:	FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010		<input type="checkbox"/> Revised Annual Statement (revision no:) <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)	253,585.00	247,113.04
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date		Date	
7/8/10		7/8/10	

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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 II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: Olney Housing Authority		Grant Type and Number Capital Fund Program Grant No: TX21P04150108 CFFP (Yes/No): Replacement Housing Factor Grant No:						
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	
TX041-HA	Operations	1406		50,717.00	50,717.00	50,717.00	50,717.00	
TX041-HA	Training	1408		5,000.00	5,000.00	467.30	467.30	
TX041-HA	Architectural Fees	1430		0	0	0	0	
TX041-HA	Landscaping	1450		5,000.00	6,300.00	6,300.00	6,300.00	
TX041-HA	Outdoor Recreation Equipment	1450		4,000.00	0	0	0	
TX041-HA	Carpools	1450		0	99,960.00	93,660.00	93,660.00	
TX041-HA	Water Heaters	1460		2,000.00	3,363.88	2,891.92	2,891.92	
TX041-HA	Refurbish/renovate bathrooms	1460		155,500.00	8,379.04	8,379.04	8,379.04	
TX041-HA	Vinyl/aluminum, siding/trim	1460		5,368.00	0	0	0	
TX041-HA	upgrade HVAC & Repair HVAC closets	1465.1		0	0	0	0	
TX041-HA	SRefrigerators/stoves	1465.1		2,000.00	14,345.48	14,345.48	14,345.48	
TX041-HA	Sundry Office Supplies	1475		1,000.00	1,969.93	1,969.93	1,969.93	
TX041-HA	Misc. Maint. Equip	1475		1,000.00	2,999.00	2,999.00	2,999.00	
TX041-HA	Misc. Yard Equip	1475		1,000.00	6,018.47	6,018.47	6,018.47	
TX041-HA	Replace Computer Equip	1475		8,000.00	3,151.00	3,151.00	3,151.00	
TX041-HA	Replace phone system	1475		0	3,052.43	3,052.43	3,052.43	
TX041-HA	Replace vehicles	1475		0	53,161.47	53,161.47	53,161.47	

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² To be completed for the Performance and Evaluation Report.

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

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

Part I: Summary		FFY of Grant: 2007 FFY of Grant Approval:		
PHA Name: Olney Housing Authority		Grant Type and Number Capital Fund Program Grant No: TX041P04150107 Replacement Housing Factor Grant No: Date of CFFP:		
Type of Grant	Type of Grant			
<input type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: 03/31/2010	<input type="checkbox"/> Revised Annual Statement (revision no:)			
<input checked="" type="checkbox"/> Performance by Development Account	<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost Revised ²	Obligated	Total Actual Cost ¹ Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) ³	45,384.00	45,384.00	45,384.00
3	1408 Management Improvements	5,000.00	4,389.90	4,389.90
4	1410 Administration (may not exceed 10% of line 21)	0	0	0
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement	89,641.76	89,641.76	89,641.76
10	1460 Dwelling Structures	90,000.00	90,378.81	90,378.71
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment	2,000.00	21,441.53	21,441.53
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities ⁴			

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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⁴ RHF funds shall be included here.

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

Part I: Summary		FFY of Grant: 2007 FFY of Grant Approval:	
PHA Name: Olney Housing Authority	Grant Type and Number Capital Fund Program Grant No: TX041P04150107 Replacement Housing Factor Grant No: Date of CFFP:		
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ²
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	251,236.00	251,236.00
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 7/9/10		Date	

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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 II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2007									
PHA Name: Olney Housing Authority		Capital Fund Program Grant No: TX041P04150107											
Development Number Name/PHA-Wide Activities		Development Account No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work			
General Description of Major Work Categories						Original		Revised ¹		Funds Obligated ²		Funds Expended ²	
TX041-HA	OPERATIONS	1406				45,384.00	45,384.00	45,384.00	45,384.00	45,384.00	45,384.00		
TX041-HA	TRAINING	1408				5,000.00	4,389.90	4,389.90	4,389.90	4,389.90	4,389.90		
TX041-HA	MOD COORDINATOR	1410				15,000.00	0	0	0	0	0		
TX041-HA	LANDSCAPING	1450				3,000.00	12,614.82	12,614.82	12,614.82	12,614.82	12,614.82		
TX041-HA	PLAYGROUND EQUIPMENT	1450				0	47,196.94	47,196.94	47,196.94	47,196.94	47,196.94		
TX041-HA	REPLACE PARKING AREA	1450				50,000.00	0	0	0	0	0		
TX041-HA	INSTALL CARPORTS	1450				40,000.00	29,830.00	29,830.00	29,830.00	29,830.00	29,830.00		
TX041-HA	FLOORING	1450				444.44	444.44	444.44	444.44	444.44	444.44		
TX041-HA	TREAT FOR TERMITES	1460				1,456.00	0	0	0	0	0		
TX041-HA	INSTALL VENT A HOODS	1460				15,000.00	0	0	0	0	0		
TX041-HA	REFURBISH BATHROOMS	1460				75,000.00	11,979.67	11,979.67	11,979.67	11,979.67	11,979.67		
TX041-HA	NEW WATER HEATERS	1460				2,000.00	2,380.05	2,380.05	2,380.05	2,380.05	2,380.05		
TX041-HA	REPLACEMENT WINDOWS	1460				0	77,028.61	77,028.61	77,028.61	77,028.61	77,028.61		
TX041-HA	NEW WATER HEATERS	1460				2,000.00	2,380.05	2,380.05	2,380.05	2,380.05	2,380.05		
TX041-HA	MISC MAINT EQUIP	1475				1,000.00	4,784.07	4,784.07	4,784.07	4,784.07	4,784.07		
TX041-HA	RADIOS	1475				0	4,600.00	4,600.00	4,600.00	4,600.00	4,600.00		
TX041-HA	REPLACE COMPUTERS	1475				0	8,992.00	8,992.00	8,992.00	8,992.00	8,992.00		
TX041-HA	SUNDRY OFFICE EQUIPMENT	1475				0	1729.99	1729.99	1729.99	1729.99	1729.99		

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

² To be completed for the Performance and Evaluation Report.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary

Olney Housing Authority		Olney, Texas 76374			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	TX041-HA	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	166,327.00	183,327.00	185,459.00	138,327.00	
C.	Management Improvements	5,000.00	5,000.00	5,000.00	5,000.00	
D.	PHA-Wide Non-dwelling Structures and Equipment	28,000.00	11,000.00	8,868.00	21,000.00	
E.	Administration					
F.	Other: Fees and Costs					35,000.00
G.	Operations	49,831.00	49,831.00	49,831.00	49,831.00	
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total	249,158.00	249,158.00	249,158.00	249,158.00	249,158.00

