

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Housing Authority of Owensboro</u> PHA Code: <u>KY009</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>7/2011</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>580</u> Number of HCV units: <u>289</u>					
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
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					
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.					
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: See attachment 6.0 (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. 2161 East 19 th Street, Owensboro, KY 42303					
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. POSSIBLE DEMOLISHION OF UNITS?????					
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	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.					

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The HAO historically has experienced a short waiting list for both its public housing and HCV programs. Over the last year the waiting list for Section 8 has increased dramatically and was closed until further notice. There was not a significant change in the number of people on the waiting list for public housing. Despite the short waiting list for public housing, the Authority will turn 25-33% of its units in any given year. The Authority offers significant supportive services, and reasonably concludes the economics may not be the driving force behind decisions. This historically has caused the Authority management to reasonably conclude that massive new expansions of affordable housing is less in demand than other areas of the country. The Authority has previously engaged in a long term planning session, where the population most in need in the near future was the elderly. Population growth for the area is predicted to be less than half the average for the state in the next 20 years. The Authority has not seen a demand for its accessible units in excess of the available number of accessible units. The Authority's units are well spaced throughout the jurisdiction, and are not concentrated in any one or two areas. The age of the Authority properties will sooner rather than later become of concern, since although it is unlikely that any current construction will withstand the test of time as well as that of the original construction, an aging population, a population with greater numbers of recognized disabilities, will require more modern facilities, and perhaps only ground floor units. The Authority's LEP analysis showed no significant ethnic populations requiring specialized housing services. The jurisdiction is subject to current economic conditions, which are adverse, but it has not relied on one industry so that it has typically weathered economic downturns more readily than other areas. At the same time, it has not experienced economic booms as have other jurisdictions. This significantly explains the relative stable nature of the housing needs over time. Two new financially assisted properties with a total of approximately 82 two bedroom units, serving special needs type populations have been added to the local inventory in the last several years. The turnover rate in one of these properties seems to approach 100%; the other property has had difficulty housing the special needs population according as best the HAO is aware. These two examples urge caution in the development of additional properties that are special need oriented. If HUD continues to raise FMR's when advertised rates are below the HUD FMR, then additional issues of affordability will develop when funding for the HCV program is reduced. The HAO suspects, but has difficulty quantifying, that there is a need for more affordable housing, but perhaps of the standard type, that is, not associated with services. The question that has not been answered is if housing is unaffordable, why do families fail to pay their deeply subsidized rent or simply fail to observe the most simple rules of a program, thus being evicted and forced into market or substandard facilities?

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.**

The waiting list for public housing has increased over what has historically been a short list with a short waiting time. Whether this is a permanent phenomena, or one which reflects a temporary economic situation cannot be determined at this time. Nonetheless, the HAO continues to study replacement housing and other forms of assisted housing, so that if the need appears permanent, the HAO can timely respond to it. Once again, the vagaries of funding and promises of significant domestic program funding cuts, cloud the forecasting future, and make planning difficult; sometimes useless. Proposed legislation to transform public housing (PETRA, SEVRA), all have implications for PHA's and their ability to expand beyond their traditional roles. Additional and replacement housing is a function of need and funding. The HAO will continue to study the changing demographics to determine the needs of the community and if demolition and replacement of units would meet the needs of the community. The HAO will continue to communicate regularly with the local governmental entity with respect to developing partnerships in the development of affordable housing. The HAO will continue to search for appropriate real estate on which to construct replacement housing, looking for land that will support future development for low-income housing. The HAO will continue with its aggressive modernization and renovation programs under the Capital Fund. The HAO will improve the quality of assisted housing by planning extensive exterior renovations of one or more apartment complexes. The HAO strives to provide adequate and affordable housing with suitable living conditions that is environmentally friendly. The HAO has planned interior renovations that include energy conservation measures and water conservation measures, which will reduce the utility consumption of the families to help reduce the rising costs of utilities.

Additional Information. Describe the following, as well as any additional information HUD has requested.

(a) **Progress in Meeting Mission and Goals.** Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- Year Plan.

The HAO continues to consider the feasibility of development or expansion of low income housing units for populations identified in studies as being in need.. The HAO continues to consider this as a potential that may be addressed, as an effort to increase the availability of decent safe and affordable housing. It also has communicated regularly with the local governmental entity with respect to developing partnerships in the development of affordable housing. It has also continued with its aggressive modernization and renovation programs under the Capital Fund. The HAO has completed all of its FFY 2005 Capital Fund work. It has completed the majority of its work items as well as obligation and actual expenditure of most of the funds in its FFY 2006 Capital Fund program. Additional or replacement housing is a function of need and funding. The HAO continues to study these and other factors with respect to development of new and or replacement of previously demolished units. Changing demographics, and significant competition from other assisted housing providers are factors that are also considered. The HAO has continued its commitment to resident services by contracting with Ameri Corp for a part time volunteer person, and then employing a person in a full-time capacity to provide additional needed services to its residents. The HAO has continued its supportive services programs for its residents and received the RIC program of the year award in 2008. Continuation of services and obtaining grant funds are demonstrations of success in meeting the strategic goal of improving the quality of assisted housing, and providing an improved living environment. It has continued with its practices of nondiscrimination to help ensure equal opportunity in housing for all Americans. The Housing Authority of Owensboro remains a high performer. Uncertainties about funding, asset management, and uncoordinated expansion of financially assisted housing in the jurisdiction have warranted caution in the implementation of new plans.

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

a. **Substantial Deviation from the 5-Year Plan:** a discretionary change in the plan(s) or policy (ies) of the Housing Authority that fundamentally changes the mission(s), goals(s), objectives(s), or plans(s) of the agency, as expressed in the Five (5) Year Plan, and which requires formal approval by the Board of Commissioners.

b. **Significant Amendment or Modification to the Annual Plan:** a discretionary change in the plan(s) or policy(ies) of the Housing Authority that fundamentally changes the mission(s), goals(s), objective(s), or plans(s) of the agency, as expressed in the Five (5) Year Plan and/or Annual Plan, and which requires formal approval by the Board of Commissioners.

Any change in the five year plan, annual plan, annual plan capital fund work statement, and/or five year plan capital fund work necessitated in the judgment of the HAO as the result of budget decreases or increases over what the HAO planned its work items and dollar assignments, is not a "discretionary change" and therefore, will not be considered substantial or significant for purposes of plan amendment procedures. This includes the possibility that entire work items may be deleted, in whole or in part, and funds transferred to other line items. This includes the possibility that future work items costing less may be substituted for current work items. Changes to policies are not amendments, modifications or deviations from the annual or five-year plan. Required public comment is received prior to implementation of such changes.

Any Notice, Guidance or other form of instruction, direction, clarification, information, etc., from DHUD or its offices, which is published or made effective on a date which makes inclusion of the provisions of the information in the annual plan planning and hearing process impracticable (such as, during the comment period or after the public hearing but before final board action), and which the HAO determines to implement, is neither a substantial deviation nor a significant amendment or modification, without regard to whether formal Board action required or taken to implement the particular provisions.

Changes to the American Recovery and Reinvestment Act Capital Fund stimulus program plan which are required or suggested by HUD or in response to clarifications, directive, guidance, etc. from HUD or other responsible entities, after adoption of the ARRA plan, are not substantial deviations or amendments to the ARRA plan.

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> <ul style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (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. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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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 there under 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.

6.0 PHA Plan Update

PHA Plan Elements

*(Year Revised)

Reference Material: ACCOP for Public Housing and Admin Policy for HCV

1) Eligibility, Selection and Admissions Policies, including Deconcentration and Waiting List Procedures.

Revision to the ACCOP for Public Housing regarding “Application Process”

- A. Each applicant will be required to complete a HUD-92006 form, which allows them to select individuals or agencies that the HAO may contact on behalf of the applicant.* (2009)
- B. All family members on the application for public housing must present a valid social security card before they can be admitted into public housing as outlined in the new federal regulation effective January 31, 2010 (74 FR 68924). *(2010)
- C. Current public housing families must submit a valid social security card for newborns within ninety (90) of their request to have the child added to their lease or the Housing Authority’s request for the social security card. Failure to provide the card within ninety (90) days will result in termination of housing assistance as outlined in the new federal regulation effective January 31st, 2010 (74 FR 68924). *(2010)

Revision to Admin Policy regarding Portability Procedures

- A. Applicant is now permitted to utilize portability with their new voucher *(2009)
- B. HAO can not deny a portability move due to funding issues unless it will be forced to terminate housing assistance payments for current participants during the calendar year in order to stay within budget allocations *(2009)
- C. Families may port from a unit in violation of lease if the family has complied with all other program requirements and has moved from the unit in order to protect the health or safety of a family member who is the victim of domestic violence, dating violence, or stalking. Family must provide documentation that would verify the claim that the move is prompted by incidences of abuse in the unit.*(2009)

Waiting List Info. – See Attachment 1 for Public Housing *(2010)
See Attachment 2 for HCV (Section 8) *(2010)

2) Financial Resources

List of Financial Resources - see Attachment 3 *(2010)

3) Rent Determination

No changes since last Annual Plan submittal

4) Operations and Management

Revision to Admin Plan regarding Section 8 Tenant Protections at Foreclosure

- A. Section 8 tenants who may be living in homes subject to foreclosure must be given a minimum 90 day notice by the new owner to vacate if the unit will be owner-occupied. *(2009)
- B. If the "immediate successor in interest" (generally the bank or other lending institution) shall assume both the existing Section 8 lease and HAP contract. *(2009)

Revision to Admin Plan regarding VAWA

- A. VAWA Terminations will be clarified to add that should a Section 8 participant claim protection or other accommodation to regular HAO policies based on VAWA, they will be asked to complete a certification form. Within the deadline for returning that certification, they will be asked to provide third party verification. *(2009)

Revision to ACCOP regarding HUD-92006 form

- A. HAO residents will be offered the opportunity to complete the HUD-92006 form at their next scheduled annual re-certification appointment. *(2009)

Revision to the ACOPP regarding "Unit Transfers"

A. Families who need to transfer due to being in the wrong bedroom size (too small or too large) may request to wait for an apartment in their current housing development or may choose to accept a transfer to any location. The Housing Authority will take their request for location into consideration but the family may be required to move to any housing development depending on the available housing needs of the Housing Authority. For example, they may request to remain in their current housing development while waiting to transfer from a 2-bedroom to a 1- bedroom, however, they may be required to move if it is anticipated that their wait for a 1-bedroom may exceed thirty (30) days and there is a currenty waiting list for 2-bedroom apartments at their housing development.

Revision to Micro Loan Policy

- A. Elderly or disabled residents who are faced with an unforeseen expense which may affect their ability to live independently may qualify for a micro loan. *(2009)

Revision to Section 3 Policy

- A. Revision included specific ARRA Competitive Grant requirements, outlines steps the HAO will take to effectuate Section 3 goals and incorporates appendix part 135 of 24 CFR. *(2009)

Adoption of Capital Fund Stimulus Grant Procurement Policy

- A. Purchases under \$100,000 threshold shall be by small purchase procedures. *(2009)

Adoption of policy mandating purchase and use of only low or no volatile paints, primers, adhesives and sealants and making said requirements mandatory upon contractors and vendors doing HAO businesses *(2009)

Adoption of “Forest Stewardship” Wood Products and Materials Policy
*(2009)

5) Grievance Procedures

No changes since last Annual Plan submittal

6) Designated Housing for Elderly and Disabled Families

The Plan proposes to designate 76 units for elderly only at KY009-006, Adams Village, and 30 units at KY009-0005, Rolling Heights Addition. This Plan was submitted on October 27th, 2009 and approved on November 3rd, 2009. The Plan will be in effect from December 6, 2009 – December 5, 2011. *(2009)

7) Community Service and Self-Sufficiency

PHA was awarded a three-year Service Coordinator Grant in the amount of \$171,750.00. This program works to promote the development of local strategies to coordinate the use of assistance under the Public Housing Program with public and private resources, for supportive services and resident empowerment activities. These services should enable participating families to increase earned income, reduce or eliminate the

need for welfare assistance, make progress toward achieving economic independence and housing self-sufficiency, or, in the case of elderly or disabled residents, help improve living conditions and enable residents to age-in-place. The Service Coordinator will coordinate and oversee delivery of services, facilitate self-help groups, market program, coordinate local program committee with local service providers, assist in creating a resident group to promote efforts and networking and general case management (intake, assessment, education and referral). *(2009)

Community Service and treatment of income changes have not changed since last Annual Plan submittal. *(2009)

8) Safety and Crime Prevention

No changes since last Annual Plan submittal

9) Pets

Revision to the ACCOP regarding the Pet Policy

- A. Persons who require an “assist”, “service”, or “support” animal to assist them with a disability may request that they be permitted to have the animal as a reasonable accommodation for their disability. *(2009)
- B. Any pet that causes bodily injury to any resident, guest, staff member, or other authorized person on premises, may be immediately and permanently removed from the premises without notification to the tenant and at the owner’s expense. *(2009)

10) Civil Rights Certification

No changes since last Annual Plan submittal

11) Fiscal Year Audit

FYE June 30, 2008 Audit Report – No material weaknesses or control deficiencies

12) Asset Management

No changes since last Annual Plan submittal

13) Violence Against Women Act (VAWA)

A. The HAO's admission policy provides a preference for victims of domestic violence. The preference is the top preference offered to applicants, with the exception of applicants who have been displaced by government action or disaster. The HAO refers current residents who may have issues, which threaten their lease to domestic violence treatment centers. The HAO for years have partnered with a residential domestic violence and drug rehabilitation center, and has set aside 12 units as special use units for occupancy by victims of domestic violence. The center includes a day care, health clinic, meeting and classrooms. *(2009)

2. Statement of Financial Resources

[24 CFR Part 903.12 (b), 903.7 (c)]

List on the following table the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2011 grants)		
a) Public Housing Operating Fund	1,450,000	
b) Public Housing Capital Fund	992,000	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	1,250,000	
f) Resident Opportunity and Self-Sufficiency Grants	92,000	
g) Community Development Block Grant	0	
h) HOME	0	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
PHA Reserve	1,500,000	
Sec 8 Reserve		
Sec 8- Other Housing Purposes	110,500	
CFP 501-10	992,000	
CFP 501-09	460,000	
Section 8 NRA	15,000	
3. Public Housing Dwelling Rental Income	1,360,000	
Excess Utilities	87,000	
4. Other income (list below)		
Maintenance Charges, Third Party Rent, etc	80,000	
Interest	23,000	
4. Non-federal sources (list below)		
Total resources	8,411,500	

1. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

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

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

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing (First Column: represents the applicants on waiting list that have been determined eligible for housing; Second Column (<i>Italic</i>): represents the applicants on waiting list that have not been determined eligible for housing.)			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	101 (49)		282
Extremely low income <=30% AMI	67 (33)	67%	
Very low income (>30% but <=50% AMI)	29 (14)	29%	
Low income (>50% but <80% AMI)	5 (2)	4%	
Families with children	45 (30)	50%	
Elderly families	5 (3)	5%	
Families with Disabilities	25 (15)	27%	
Race/ethnicity White/Non-Hispanic	85 (36)	81%	
Race/ethnicity White/Hispanic	1 (0)	1%	
Race/ethnicity Black/Non-Hispanic	13 (12)	17%	
Race/ethnicity Black/Hispanic	0 (0)	0%	
Other	3 (0)	2%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	47 (15)	41%	
2 BR	33 (24)	38%	
3 BR	19 (11)	20%	
4 BR	1 (0)	1%	
5 BR	0	0%	
5+ BR	0	0%	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/>			
No <input type="checkbox"/> Yes			

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	189		488
Extremely low income <=30% AMI	120	63%	
Very low income (>30% but <=50% AMI)	69	37%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	107	57%	
Elderly families	19	10%	
Families with Disabilities	49	26%	
Race/ethnicity White	155	82%	
Race/ethnicity Black	30	16%	
Race/ethnicity Other	4	2%	
Race/ethnicity	0	0%	
Singles	14	7%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/>			
No <input type="checkbox"/> Yes			

*The waiting list numbers include all persons who have applied, not just those found eligible.

Section 11:

F. RAB Comments:

The HAO held four meetings for residents regarding the plan. The previous plans, and the purposes of the plans were reviewed with those who attended.

The following suggestions were made:

Install ceiling fans in the bedrooms of the apartments

Install a playground at Nannie Locke Homes

Install park benches at Adams Village

Increase the size of the community room at Nannie Locke Homes

Install digital TV antennas on the buildings

Install some sort of canopy over the decks and patios or maybe a retractable awning

In response to these suggestions the Executive Director stated the following:

The Housing Authority has started replacing all the light fixtures with CFL light fixtures to lower energy consumption. With the newly replacement of the light fixtures, the Executive Director stated that they may look at installing ceiling fans in the bedrooms for a future project.

The Housing Authority would include a playground for Nannie Locke Homes in the next five-year plan. The Executive Director stated that the Housing Authority would hire an Engineer to design the parking area and playground for Nannie Locke Homes.

Park benches for Adams Village were in the works for this spring either through the Capital Fund Program or Operation monies.

The Housing Authority would consider other options for TV and Cable service for those that do not subscribe to Time Warner Cable for future wiring and renovation work.

G. Challenged Elements: No challenged elements

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:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: _____ 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 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
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				
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				
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)				
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				

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

Part I: Summary				
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____		FFY of Grant: _____ 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 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
Signature of Executive Director		Date	Signature of Public Housing Director	
			Date	

Capital Fund Program—Five-Year Action Plan

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/Number		Locality (City/County & State)			<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____
B.	Physical Improvements Subtotal	Annual Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total					

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

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

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
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Expires 4/30/2011

Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: _____ 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 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
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				
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				
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)				
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				

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Part I: Summary				
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____		FFY of Grant: _____ 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 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
Signature of Executive Director		Date	Signature of Public Housing Director	
			Date	

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:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: _____ 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 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
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				
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				
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)				
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				

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Part I: Summary				
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____		FFY of Grant: _____ 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 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
Signature of Executive Director		Date	Signature of Public Housing Director	
			Date	

Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: _____ 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 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
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				
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				
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)				
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				

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⁴ RHF funds shall be included here.

Part I: Summary				
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____		FFY of Grant: _____ 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 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
Signature of Executive Director		Date	Signature of Public Housing Director	
			Date	

Part I: Summary		
PHA Name: Housing Authority of Owensboro 2161 E 19th Street Owensboro KY, 42303	Grant Type and Number Capital Fund Program Grant No: KY00900000209R Replacement Housing Factor Grant No: N/A Date of CFFP: 9/30/09	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:3)
 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				
4	1410 Administration (may not exceed 10% of line 21)	\$15,000	\$91,722		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$978,717	\$902,010		
11	1465.1 Dwelling Equipment—Nonexpendable	\$92,008	\$91,993		
12	1470 Non-dwelling Structures	\$5,997	\$5,997		
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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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

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: Housing Authority of Owensboro 2161 E 19th Street Owensboro KY, 42303	Grant Type and Number Capital Fund Program Grant No: KY00900000209R Replacement Housing Factor Grant No: N/A Date of CFFP: 9/30/09	FFY of Grant:2009 FFY of Grant Approval: 2009			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <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)	\$1,091,722	\$1,091,722		
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	\$1,076,722	\$1,000,000		
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Housing Authority of Owensboro 2161 E 19th Street Owensboro KY, 42303			Grant Type and Number Capital Fund Program Grant No: KY00900000209R CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: N/A			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 2 / KY009000002								
	Replace Adams Village Water Heaters with Solar Water Heaters and Tankless Water Heaters	1465.1	19	\$331,000	\$310,946			
	Replace Boys and Girls Club Gym Lights to Energy Star Saving Fluorescent	1470	16	\$5997	\$5,997			
	Replace Refrigerators at Rolling Heights with Energy Star Refrigerators	1465.1	248	\$92,008	\$91,993			
	Replace Shower Heads with Low Flow Shower Heads	1460	354	\$15,930	\$9,500			
	Replace Kitchen and Bath Aerators with Water Sense Energy Star Qualified Aerators	1460	708	\$9,650	\$1,300			
	Replace Water Closets with 1.6 models	1460	250	\$56,750	\$42,264			
	Install Energy Star Attic Insulation in All Apartment Buildings	1460	179,660 sq.ft.	\$91,436	\$91,436			
	Install Energy Star Light Fixtures and Energy Star Qualified CFL's	1460	2,596/5,066	\$107,624	\$128,314			
	Administration	1410		\$15,000	\$91,722			

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary		
PHA Name: Housing Authority of Owensboro 2161 E 19th Street Owensboro KY, 42303	Grant Type and Number Capital Fund Program Grant No: KY00900000109R Replacement Housing Factor Grant No: N/A Date of CFFP: 9/30/09	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:2)
 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				
4	1410 Administration (may not exceed 10% of line 21)	\$5,000	\$10,700		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$350,778	\$345,078		
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: Housing Authority of Owensboro 2161 E 19th Street Owensboro KY, 42303	Grant Type and Number Capital Fund Program Grant No: KY00900000109R Replacement Housing Factor Grant No: N/A Date of CFFP: 9/30/09	FFY of Grant:2009 FFY of Grant Approval: 2009			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <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)	\$355,778	\$355,778		
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	\$350,778	\$345,078		
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Housing Authority of Owensboro 2161 E 19th Street Owensboro KY, 42303		Grant Type and Number Capital Fund Program Grant No: KY00900000109R CFFP (Yes/ No): YES Replacement Housing Factor Grant No: N/A			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/ KY009000001								
	Replace Shower Heads with Low Flow Shower Heads	1460	226	\$10,170	\$4,500			
	Replace Kitchen and Bath Aerators with Water Sense Energy Star Qualified Aerators	1460	452	\$6,667	\$1,000			
	Install Energy Star Light Fixtures and Energy Star Qualified CFL's	1460	1735/2648	\$157,286	\$170,000			
	Install Energy Star Attic Insulation in All Apartment Buildings	1460	132,781 sq.ft.	\$47,986	\$47,986			
	Replacement of Roofs at Nannie Locke Homes	1460	13	\$118,000	\$93,500			
	Install Water Saving Water Closets	1460	100	\$10,669	\$28,092			
	Administration	1410		\$5,000	\$10,700			

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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:
Summary**

PHA Name: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: Ky36P00950107 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 5)
 Performance and Evaluation Report for Period Ending: 12/31/2010 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	-0-	-0-		
2	1406 Operations	\$180,099	\$180,099	\$180,099	\$180,099
3	1408 Management Improvements	\$113,861	\$113,861	\$113,861	\$113,861
4	1410 Administration	\$75,000	\$75,000	\$75,000	\$75,000
5	1411 Audit	\$2,000	\$2,000	\$2,000	\$2,000
6	1415 Liquidated Damages	-0-	-0-	-0-	-0-
7	1430 Fees and Costs	\$1,000	\$3,000	\$3,000	\$777
8	1440 Site Acquisition	-0-	-0-	-0-	-0-
9	1450 Site Improvement	\$140,933	\$140,933	\$140,933	\$140,933
10	1460 Dwelling Structures	\$272,950	\$272,790	\$272,790	\$272,790
11	1465.1 Dwelling Equipment—Nonexpendable	\$51,592	\$51,592	\$51,592	\$51,592
12	1470 Nondwelling Structures	\$109,647	\$107,807	\$107,807	\$42,160
13	1475 Nondwelling Equipment	-0-	-0-	-0-	-0-
14	1485 Demolition	-0-	-0-	-0-	-0-
15	1490 Replacement Reserve	-0-	-0-	-0-	-0-
16	1492 Moving to Work	-0-	-0-	-0-	-0-

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

PHA Name: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: Ky36P00950107 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 5)
 Performance and Evaluation Report for Period Ending: 12/31/2010 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Demonstration				
17	1495.1 Relocation Costs	-0-	-0-	-0-	-0-
18	1499 Development Activities	-0-	-0-	-0-	-0-
19	1501 Collateralization or Debt Service	-0-	-0-	-0-	-0-
20	1502 Contingency	-0-	-0-	-0-	-0-
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$947,082	\$947,082	\$947,082	\$879,212
22	Amount of line 21 Related to LBP Activities	-0-	-0-	-0-	-0-
23	Amount of line 21 Related to Section 504 compliance	-0-	-0-	-0-	-0-
24	Amount of line 21 Related to Security – Soft Costs	\$15,600	\$15,600	\$15,600	\$15,600
25	Amount of Line 21 Related to Security – Hard Costs	-0-	-0-	-0-	-0-
26	Amount of line 21 Related to Energy Conservation Measures	-0-	-0-	-0-	-0-

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

PHA Name: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: KY 36P00950107 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007		
Development Number/NameHA -Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PG Walker KY 9-2	Replace Windows	1460		\$45,347	\$45,347	\$45,347	\$45,347	Complete
Rolling Heights Ky 9-3	Replace Windows	1460		\$138,382	\$138,222	\$138,222	\$138,222	Complete
	Install 2 new playgrounds	1450		\$53,790	\$53,790	\$53,790	\$53,790	Complete
	Daycare/Office Mod	1470		\$96,651	\$94,811	\$94,811	\$29,164	In Progress
Adams Village KY 9-6	Replace Stoves and Refrigerators	1465.1	75/each	\$51,592	\$51,592	\$51,592	\$51,592	Complete
	Community Room Carpet/Paint	1470		\$12,996	\$12,996	\$12,996	\$12,996	Complete
PHA WIDE	Install new gas meters	1460		\$19,731	\$19,731	\$19,731	\$19,731	Complete
	Landscaping	1450		\$20,095	\$20,095	\$20,095	\$20,095	Complete
	In-house MOD	1460		\$69,490	\$69,490	\$69,490	\$69,490	Complete
	Sidewalk Repair	1450		\$25,418	\$25,418	\$25,418	\$25,418	Complete
	Standing Water / Dirt Work	1450		\$41,630	\$41,630	\$41,630	\$41,630	Complete

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

PHA Name: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: KY 36P00950107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007			
Development Number/NameHA -Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Fees and Costs	A & E Fees for Various Work Items	1430		\$1,000	\$3,000	\$3,000	\$777	In Progress
Management Improvement	Drug Elimination Program, Boys Club, Girls Inc., After School Program, Off Duty Patrol	1408		\$109,370	\$109,370	\$109,370	\$109,370	Complete
	High School Employment /Resident Opportunities	1408		\$4,491	\$4,491	\$4,491	\$4,491	Complete
Administration	Capital Fund Salaries/Expenses	1410		\$75,000	\$75,000	\$75,000	\$75,000	Complete
Audit	Audit of the Capital Fund	1411		\$2,000	\$2,000	\$2,000	\$2,000	Complete
Operations		1406		\$180,099	\$180,099	\$180,099	\$180,099	Complete

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

PHA Name: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: Ky36P00950108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 5)
 Performance and Evaluation Report for Period Ending: 3/31/2011 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	-0-	-0-	-0-	-0-
2	1406 Operations	\$160,443	\$160,443	\$160,443	\$160,443
3	1408 Management Improvements	\$124,100	\$124,100	\$124,100	\$124,100
4	1410 Administration	\$94,700	\$94,694	\$94,694	\$94,694
5	1411 Audit	\$2,100	\$2,100	\$2,100	\$2,100
6	1415 Liquidated Damages	-0-	-0-	-0-	-0-
7	1430 Fees and Costs	\$30,000	\$26,282	\$26,282	\$26,282
8	1440 Site Acquisition	-0-	-0-	-0-	-0-
9	1450 Site Improvement	\$505,306	\$498,906	\$498,906	\$498,906
10	1460 Dwelling Structures	\$83,000	\$93,118	\$93,118	\$93,118
11	1465.1 Dwelling Equipment—Nonexpendable	\$0	\$0	-0-	-0-
12	1470 Nondwelling Structures	\$0	\$0	-0-	-0-
13	1475 Nondwelling Equipment	-0-	-0-	-0-	-0-
14	1485 Demolition	-0-	-0-	-0-	-0-
15	1490 Replacement Reserve	-0-	-0-	-0-	-0-
16	1492 Moving to Work Demonstration	-0-	-0-	-0-	-0-

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

PHA Name: HOUSING AUTHORITY OF OWENSBORO	Grant Type and Number Capital Fund Program Grant No: Ky36P00950108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 5)
 Performance and Evaluation Report for Period Ending: 3/31/2011 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
17	1495.1 Relocation Costs	-0-	-0-	-0-	-0-
18	1499 Development Activities	-0-	-0-	-0-	-0-
19	1501 Collateralization or Debt Service	-0-	-0-	-0-	-0-
20	1502 Contingency	-0-	-0-	-0-	-0-
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$999,643	\$999,643	\$999,643	\$999,643
22	Amount of line 21 Related to LBP Activities	-0-	-0-	-0-	-0-
23	Amount of line 21 Related to Section 504 compliance	-0-	-0-	-0-	-0-
24	Amount of line 21 Related to Security – Soft Costs	\$15,600	\$15,600	\$15,600	\$15,600
25	Amount of Line 21 Related to Security – Hard Costs	-0-	-0-	-0-	-0-
26	Amount of line 21 Related to Energy Conservation Measures	-0-	-0-	-0-	-0-

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

PHA Name: HOUSING AUTHORITY OF OWENSBORO		Grant Type and Number Capital Fund Program Grant No: KY 36P00950108 Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Management Improvement	Drug Elimination Program, Boys Club, Girls Inc., After School Program, Off Duty Patrol	1408		\$116,074	\$116,074	\$116,074	\$116,074	Complete
	High School Employment /Resident Opportunities	1408		\$8,026	\$8,026	\$8,026	\$8,026	Complete
Administration	Capital Fund Salaries/Expenses	1410		\$94,700	\$94,694	\$94,694	\$94,694	Complete
Audit	Audit of the Capital Fund	1411		\$2,100	\$2,100	\$2,100	\$2,100	Complete
Operations		1406		\$160,443	\$160,443	\$160,443	\$160,443	Complete

