

1.0	PHA Information PHA Name: <u>Benton Housing Authority</u> PHA Code: <u>AR175</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>04/2010</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>106</u> Number of HCV units: <u>699</u>																										
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia <u>N/A</u> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 35%;">Participating PHAs</th> <th rowspan="2" style="width: 10%;">PHA Code</th> <th rowspan="2" style="width: 20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width: 20%;">Programs Not in the Consortia</th> <th colspan="2" style="width: 15%;">No. of Units in Each Program</th> </tr> <tr> <th style="width: 5%;">PH</th> <th style="width: 5%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
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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: <input checked="" type="checkbox"/> 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. <div style="background-color: #e0e0e0; padding: 5px; margin: 5px 0;"> <i>The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, PHAs ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures would include targets such as: numbers of families served or PHAs scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.</i> </div> <p>HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.</p> <p style="margin-left: 40px;">PHA Goal: Expand the supply of assisted housing PHA Goal: Improve the quality of assisted housing PHA Goal: Increase assisted housing choices</p> <p>HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals</p> <p style="margin-left: 40px;">PHA Goal: Promote self-sufficiency and asset development of assisted households</p> <p>HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans</p> <p style="margin-left: 40px;">PHA Goal: Ensure equal opportunity and affirmatively further fair housing</p>																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: 1. Capital Fund Program Annual Statements and Five Year Plan. 2. Performance and Evaluation Reports. (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. <div style="text-align: center; margin-top: 10px;"> PHA's Main Administrative Office 1200 W. Pine Street Benton, AR 72015 </div>																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. Undergoing a CFFP for a new Community Room with debt repayment as indicated on the 50075.1 and 50075.2.																										
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. <i>Attached</i>																																																																																
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. <i>Attached</i>																																																																																
8.3	Capital Fund Financing Program (CFFP). <input checked="" 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.																																																																																
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> <p>Based upon the information contained in the Consolidated Plans applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.</p> <table border="1" data-bbox="240 705 1466 1066"> <thead> <tr> <th colspan="8">Housing Needs of Families in the Jurisdiction by Family Type</th> </tr> <tr> <th>Family Type</th> <th>Overall</th> <th>Afford-ability</th> <th>Supply</th> <th>Quality</th> <th>Accessibility</th> <th>Size</th> <th>Location</th> </tr> </thead> <tbody> <tr> <td>Income <= 30% of AMI</td> <td>466</td> <td>3</td> <td>3</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>Income >30% but <=50% of AMI</td> <td>529</td> <td>3</td> <td>3</td> <td>3</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>Income >50% but <80% of AMI</td> <td>655</td> <td>3</td> <td>3</td> <td>2</td> <td>1</td> <td>2</td> <td>1</td> </tr> <tr> <td>Elderly</td> <td>189</td> <td>5</td> <td>3</td> <td>3</td> <td>3</td> <td>2</td> <td>1</td> </tr> <tr> <td>Families with Disabilities</td> <td>322</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>White</td> <td>2,449</td> <td>3</td> <td>3</td> <td>2</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>African American</td> <td>198</td> <td>3</td> <td>3</td> <td>2</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>Hispanic</td> <td>119</td> <td>3</td> <td>3</td> <td>2</td> <td>1</td> <td>2</td> <td>3</td> </tr> </tbody> </table> <p>What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)</p> <p><input type="checkbox"/> Consolidated Plan of the Jurisdictions State of Arkansas Indicate year: 2000</p> <p><input checked="" type="checkbox"/> U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset</p> <p><input type="checkbox"/> American Housing Survey data Indicate year:</p> <p><input type="checkbox"/> Other housing market study Indicate year:</p>	Housing Needs of Families in the Jurisdiction by Family Type								Family Type	Overall	Afford-ability	Supply	Quality	Accessibility	Size	Location	Income <= 30% of AMI	466	3	3	3	1	2	3	Income >30% but <=50% of AMI	529	3	3	3	1	2	3	Income >50% but <80% of AMI	655	3	3	2	1	2	1	Elderly	189	5	3	3	3	2	1	Families with Disabilities	322							White	2,449	3	3	2	1	2	3	African American	198	3	3	2	1	2	3	Hispanic	119	3	3	2	1	2	3
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B. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families on the PHA's public housing and Section 8 waiting lists **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Apply for special-purpose vouchers targeted to the elderly, should they become available

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing**
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups

9.1

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.

We have been and will continue to support our mission statement listed in Section 5.1 of this template.

Our progress in meeting our established goals is as follows:

1. We continue to work on our goal of expanding the supply of assisted housing by applying for additional vouchers as they become available. In addition, we used the proceeds of the sale of some of our scattered sites to build new duplexes on vacant lots purchased by the Authority. This involves leveraging and using other funds available through the Arkansas Development and Finance Authority.
2. We are always striving to improve the quality of assisted housing by improving our PHAS score and using Capital and ARRA funds to renovate our units.
3. The Authority conducts outreach efforts to attract new voucher landlords and offers a homeownership program for both Section 8 and Public Housing tenants in an attempt to increase the housing choices available.
4. We promote self-sufficiency for our tenants by trying to attract employed persons to our units and supportive services to improve the employability of the residents and to increase the independence for the elderly or families with disabilities.
5. The Benton Housing Authority undertakes all measures to ensure equal opportunity and fair housing for everybody.

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

The Benton Housing Authority will consider the following to be changes in the agency plan necessary and sufficient to require a full review by the resident advisory board before corresponding changes in the agency plan can be adopted.

1. Any alteration to the PHA'S Mission Statement
2. Any change or amendment to stated Strategic Goal
3. Any change or amendment to stated Strategic Objective except in the case where the changes result from objective being met.
4. Any introduction of Strategic Goal or new Strategic Objective.
5. Any alteration of the Capitol Fund Program (CFP) that affects expenditure greater than twenty percent (20%) of CFP Annual Budget for that year.

In defining the above, the Housing Authority intends by "Strategic Goal" and Strategic Objective" specifically those items in its Five Year Plan and any change in the above items will be considered a "substantial deviation" from the plan.

Furthermore, the PHA considers the following changes to require a public process before amending said changes and that these items are a "significant amendments or modification" to the Agency Plan:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Additions of non-emergency work-items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.
3. Additions of new activities not included in any PHDEP Plan.
4. Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements, such changes will not be considered significant amendments by HUD

11.0

VIOLENCE AGAINST WOMEN ACT
PHA STATEMENT

The Benton Housing Authority (BHA) provides or plans to offer referrals, training and information to anyone being abused. This includes child or adult victims of domestic violence, dating violence, sexual assault or stalking.

Benton Housing Authority conducts criminal background checks on all new adult residents prior to moving in. BHA has a close working relationship with law enforcement agencies to promote safety within and around its properties. Additionally, BHA maintains an updated criminal trespass list to prevent violent and criminal behavior within and around its properties.

BHA has a positive working relationship with various social service agencies. We plan to partner with local social service agencies and have referral information available to our residents.

We intend to provide housing to victims directly from the domestic violence shelters that are fleeing domestic violence and need a safe place to reside. We refer our residents to local social service agencies when they need enhanced safety due to domestic violence.

We provide the VAWA Notice and Reauthorization to all applicants and tenants of their rights under VAWA together with the HUD 50066 form.

We are in the process of amending our lease and Admissions and Continued Occupancy Policy to include additional language that clearly specifies our right to bifurcate the lease to evict the perpetrator while protecting the victims from domestic violence. It clearly specifies our right to bifurcate the lease to evict the perpetrator while protecting the victim.

12.0	<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 thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

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

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

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

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

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

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

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

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

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Part I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name: Benton Housing Authority		Capital Fund Program Grant No: AR37P17550110		2010	
Date of CFFP:				FFY of Grant Approval:	
Type of Grant		Total Estimated Cost		Total Actual Cost 1	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised 2	Obligated	Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	\$14,999.52			
3	1408 Management Improvements	\$3,500			
4	1410 Administration (may not exceed 10% of line 21)	\$13,015			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$14,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$4,101			
10	1460 Dwelling Structures	\$66,426			
11	1465.1 Dwelling Equipment—Nonexpendable	\$2,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition	\$4,000			
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				
18a	1501 Collateralization or Debt Service				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$33,108.48			
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 – 20)	\$155,150			
21	Amount of line 21 Related to LBP Activities				
22	Amount of line 21 Related to Section 504 compliance				
23	Amount of line 21 Related to Security – Soft Costs				
24	Amount of Line 21 Related to Security – Hard Costs				
25	Amount of line 21 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 CFF 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: Bentou Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37P17550110	FFY of Grant: 2010	FFY of Grant Approval:
		Date of CFFP:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		Revised Annual Statement (revision no:) Total Estimated Cost Revised : Signature of Public Housing Director	
Line	Summary by Development Account	Original	Revised
		Total Actual Cost	Expended
Signature of Executive Director <i>John A. Green</i>		Date 12/14/2009	

Part I: Summary		Locality (City/County & State) Benton/Saline, Arkansas					<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
PHA Name/Number Benton Housing Authority/ AR175	Work Statement For Year 1 FFY2010	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			
A. Development Number/Name AR17500001 Scattered Sites PHA-WIDE Whispering Pines	Annual Statement	\$71,267	\$71,267	\$71,267	\$71,267	\$71,267	\$71,267	
B. Physical Improvements Subtotal		\$3,500	\$3,500	\$3,500	\$3,500	\$3,500	\$3,500	
C. Management Improvements		\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	
D. PHA-Wide Non-dwelling Structures and Equipment		\$13,015	\$13,015	\$13,015	\$13,015	\$13,015	\$13,015	
E. Administration		\$14,000	\$14,000	\$14,000	\$14,000	\$14,000	\$14,000	
F. Other		\$14,999.52	\$14,999.52	\$14,999.52	\$14,999.52	\$14,999.52	\$14,999.52	
G. Operations								
H. Demolition								
I. Development								
J. Capital Fund Financing- Debt Service		\$33,108.48	\$33,108.48	\$33,108.48	\$33,108.48	\$33,108.48	\$33,108.48	
K. Total CFP Funds		\$151,890	\$151,890	\$151,890	\$151,890	\$151,890	\$151,890	
L. Non-CFP Funds								
M. Grand Total								

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		Locality (City/County & State) Benton/Saline, Arkansas					<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
PHA Name/Number Benton Housing Authority/ AR175		Work Statement For Year 1 FFY2010					Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
A.	Development Number/Name AR17500001 Scattered Sites PHA-WIDE Whispering Pines							
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.	Non-CFP Funds							
M.	Grand Total							

Part I: Summary

PHA Name: Benton Housing Authority

Grant Type and Number
 Capital Fund Program Grant No: AR37P17550107

Date of CFFP:


FFY of Grant: 2007
 FFY of Grant Approval: _____

Line	Type of Grant <input type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: 9/30/09 <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09	Reserve for Disasters/ Emergencies <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report	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		\$15,000	\$15,000	\$15,000	\$15,000
3	1408 Management Improvements		\$3,500	\$3,750	\$3,750	\$3,750
4	1410 Administration (may not exceed 10% of line 21)		\$14,015	\$19,730	\$19,730	\$19,730
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$15,000	\$15,065.45	\$15,065.45	\$10,065.45
8	1440 Site Acquisition					
9	1450 Site Improvement		\$5,000	\$4,421	\$4,421	\$4,421
10	1460 Dwelling Structures		\$62,071.52	\$44,574.30	\$44,574.30	\$44,574.30
11	1465.1 Dwelling Equipment - Nonexpendable					
12	1470 Nondwelling Structures		\$0	\$12,045.34	\$12,045.34	\$9,418.76
13	1475 Nondwelling 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					
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment		\$33,108.48	\$33,108.48	\$33,108.48	\$33,108.48
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 - 20)		\$147,695	\$147,695	\$147,695	\$147,695
21	Amount of line 21 Related to LBP Activities					
22	Amount of line 21 Related to Section 504 compliance					
23	Amount of line 21 Related to Security - Soft Costs					
24	Amount of Line 21 Related to Security - Hard Costs					
25	Amount of line 21 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.

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	
PHA Name: Benton Housing Authority Grant Type and Number Capital Fund Program Grant No: AR37P17550107 Date of CFFP: _____		FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report		Total Estimated Cost Revised : Obligated : Expended :	
Line Summary by Development Account Signature of Executive Director 		Total Actual Cost Signature of Public Housing Director Date 12/14/2009	

Part I: Summary

PHA Name: Benton Housing Authority

Grant Type and Number
 Capital Fund Program Grant No: AR37P17550108

Date of CFFP:

FFY of Grant: 2008
 FFY of Grant Approval:

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09	Reserve for Disasters/ Emergencies <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost 1	
			Original	Revised 2	Obligated	Expended
1	Total non-CFF Funds					
2	1406 Operations (may not exceed 20% of line 21) 3		\$14,999.52	\$14,999.52	\$14,999.52	\$14,999.52
3	1408 Management Improvements		\$3,500	\$2,400	\$2,400	\$2,400
4	1410 Administration (may not exceed 10% of line 21)		\$14,015	\$14,015	\$14,015	\$8,476.79
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$15,000	\$21,075.40	\$21,075.40	\$21,075.40
8	1440 Site Acquisition					
9	1450 Site Improvement		\$9,101	\$5,150	\$5,150	\$5,150
10	1460 Dwelling Structures		\$62,166	\$8,784.76	\$8,784.76	\$8,784.76
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures		\$0	\$52,356.84	\$52,356.84	\$50,778.17
13	1475 Nondwelling 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					
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment		\$33,108.48	\$33,108.48	\$33,108.48	\$11,036.16
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 - 20)		\$151,890	\$151,890	\$151,890	\$122,700.80
21	Amount of line 21 Related to LBP Activities					
22	Amount of line 21 Related to Section 504 compliance					
23	Amount of line 21 Related to Security - Soft Costs					
24	Amount of Line 21 Related to Security - Hard Costs					
25	Amount of line 21 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.

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

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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: AR37P17550108		FFY of Grant: 2008	
Date of CFFP: _____		Date of CFFP: _____		FFY of Grant Approval: _____	
Type of Grant		Type of Grant		Type of Grant	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09		<input type="checkbox"/> Final Performance and Evaluation Report		<input type="checkbox"/> Final Performance and Evaluation Report	
Line Summary by Development Account		Total Estimated Cost		Total Actual Cost	
Signature of Executive Director		Original		Revised 2	
Date		Obligated		Expended	
<i>John P. ...</i>		Signature of Public Housing Director		Date	
12/14/2008					

Part I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name: Benton Housing Authority		Capital Fund Program Grant No: AR37P17550109		2009	
Date of CFFP:		Revised Annual Statement (revision no:)		FFY of Grant Approval:	
Type of Grant		Total Estimated Cost		Total Actual Cost 1	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised 2	Obligated	Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	\$14,999.52	\$14,999.52		
3	1408 Management Improvements	\$3,500	\$3,500		
4	1410 Administration (may not exceed 10% of line 21)	\$13,015	\$13,015		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$14,000	\$14,000		
8	1440 Site Acquisition				
9	1450 Site Improvement	\$9,101	\$9,101		
10	1460 Dwelling Structures	\$34,926	\$34,926		
11	1465.1 Dwelling Equipment—Nonexpendable	\$2,000	\$2,000		
12	1470 Nondwelling Structures	\$30,500	\$30,500		
13	1475 Nondwelling 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				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$33,108.48	\$33,108.48		
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 20)	\$155,150	\$155,150	\$0	\$0
21	Amount of line 21 Related to LBP Activities				
22	Amount of line 21 Related to Section 504 compliance				
23	Amount of line 21 Related to Security - Soft Costs				
24	Amount of Line 21 Related to Security - Hard Costs				
25	Amount of line 21 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 CFFP 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: 2009	
PHA Name: Benton Housing Authority		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: AR37P17550109			
Date of CFFP: _____			
<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09			
<input type="checkbox"/> Summary by Development Account			
Total Estimated Cost		Total Actual Cost	
Original		Obligated	
Revised:		Expended	
Signature of Executive Director <i>John Stearns</i>		Signature of Public Housing Director	
Date 12/14/2009		Date	

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: AR37S17550109 Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Benton Housing Authority		Reserve for Disasters/ Emergencies <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09 <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost 1	
Type of Grant	Summary by Development Account	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	\$21,012	\$21,012	\$20,021.57	\$20,021.57
8	1440 Site Acquisition				
9	1450 Site Improvement	\$100,000	\$112,901	\$88,000	
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	\$71,250	\$58,349	\$58,349	\$40,669.20
12	1470 Nondwelling Structures				
13	1475 Nondwelling 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				
18b	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)	\$192,262	\$192,262	\$166,370.57	\$60,690.77
21	Amount of line 21 Related to LBP Activities				
22	Amount of line 21 Related to Section 504 compliance				
23	Amount of line 21 Related to Security – Soft Costs				
24	Amount of Line 21 Related to Security – Hard Costs				
25	Amount of line 21 Related to Energy Conservation Measures				

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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

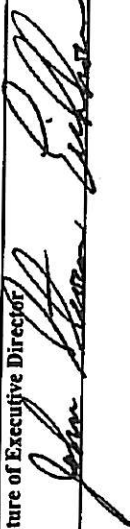
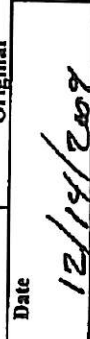
Part I: Summary		Grant Type and Number Capital Fund Program Grant No: AR37S17550109		FFY of Grant: 2009	
PHA Name: Benton Housing Authority		Date of CFFP: _____		FFY of Grant Approval: _____	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Revised Annual Statement (revision no:)			
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/09		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Revised :	Total Actual Cost	Expended
		Original	Signature of Public Housing Director	Obligated	Date
	Signature of Executive Director		<i>[Signature]</i>		
			<i>12/14/2009</i>		

Part I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name: Benton Housing Authority		Capital Fund Program Grant No: Loan #1002		Cap Fund Borrowing	
Date of CFFP:		Revised Annual Statement (revision no:)		FFY of Grant Approval:	
Type of Grant		Total Estimated Cost		Total Actual Cost 1	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/14		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised 2	Obligated	Expended
1	Total non-CFFP 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	\$21,055	\$21,055	\$21,055	\$21,055
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	\$382,717	\$382,717	\$382,717	\$382,717
13	1475 Nondwelling 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				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$21,734.24	\$21,734.24	\$21,734.24	\$21,734.24
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 – 20)	\$425,506.24	\$425,506.24	\$425,506.24	\$425,506.24
21	Amount of line 21 Related to LBP Activities				
22	Amount of line 21 Related to Section 504 compliance				
23	Amount of line 21 Related to Security – Soft Costs				
24	Amount of Line 21 Related to Security – Hard Costs				
25	Amount of line 21 Related to Energy Conservation Measures				

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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		FFY of Grant: Cap Fund Borrowing FFY of Grant Approval:	
PHA Name: Benton Housing Authority	Grant Type and Number Capital Fund Program Grant No: Loan #1002 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: 9/30/09	<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost
Signature of Executive Director	Original	Revised:	Obligated
			
Date	Date	Signature of Public Housing Director	Date
	12/14/2009		

Part II: Supporting Pages									
PHA Name: Benton Housing Authority			Grant Type and Number Capital Fund Program Grant No: Loan #1002 Date of CFFP:				FFY of Grant: Cap Fund Borrowing FFY of Grant Approval:		
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		
	Fees and Costs	1430							
	Costs after closing			\$6,150	\$6,150	\$6,150	\$6,150	Complete	
PHA - WIDE	Loan Costs of Issuance			\$14,905	\$14,905	\$14,905	\$14,905	Complete	
	Total Fees and Costs	1430		\$21,055	\$21,055	\$21,055	\$21,055		
	Non-dwelling Structures								
AR175-02	Extension to Main Office – Community Room	1470		\$382,717	\$382,717	\$382,717	\$382,717	Complete	
	Total Non-dwelling Structures	1740							
	Collateralization or Debt Service								
PHA-WIDE	Capitalized Interest	1501		\$5,180	\$5,180	\$5,180	\$5,180	Complete	
	Debt Service Reserve			\$16,554.24	\$16,554.24	\$16,554.24	\$16,554.24	Complete	
	Total Collateralization	1501		\$21,734.24	\$21,734.24	\$21,734.24	\$21,734.24		
	GRAND TOTAL			\$425,506.24	\$425,506.24	\$425,506.24	\$425,506.24		

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.

