

1.0	PHA Information PHA Name: _Montgomery County Housing Authority PHA Code: IL037 PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 12/31/2010																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 235 Number of HCV units: 89																										
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" 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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PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The Montgomery County Housing Authority is committed to achieving excellence in providing a quality living environment while promoting self sufficiency, upward mobility, and home ownership through partnerships with our residents and others.																										

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.

PHA Goal: Expand the supply of assisted housing by applying for additional rental vouchers; Reduce public housing vacancies, leverage private or other public funds to create additional housing opportunities; use bonds or conventional loans to build a group home for persons/families with mental and/or physical disabilities.

PHA Goal: Improve the quality of assisted housing by improving the PHA PHAS and SEMAP scores; increase customer satisfaction; renovate or modernize public housing units; demolish or dispose of obsolete public housing and provide replacement public and affordable housing; and provide replacement public housing and vouchers.

PHA Goal: Increase assisted housing choices by conducting outreach efforts to potential voucher landlords; Implement Section 8 or other homeownership programs; Implement public housing site-based waiting lists.

PHA Goal: Provide an improved living environment by implementing measures to deconcentrate poverty by bringing higher income public housing households into lower income developments; Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments; Designate developments or buildings for particular resident groups (elderly, persons with disabilities); Implement public housing security improvements.

PHA Goal: Promote self-sufficiency and asset development of families and individuals by increasing the number and percentage of employed persons in assisted families; provide or attract supportive services to improve assistance recipients employability; provide or attract supportive services to increase independence for the elderly or families with disabilities.

PHA Goal: Ensure equal opportunity and affirmatively further fair housing objectives by undertaking affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability; undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status and disability; undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.

OTHER PHA GOALS & OBJECTIVES:

- Provide urban revitalization services to the City of Litchfield and other municipalities upon request.
- Manage/develop tax-credit and other assisted housing for local CHDO's and other non-profits.
- Demo/dispose of 32 obsolete elderly 2-story units and replace using mixed financing like CFFP, RHF Grants, Tax Credits, and Trust Funds from IHDA.
- Construct 20 Single Family Homes in Hillsboro, Illinois using Tax Credits, RHF Grants, Home Funds and/or Trust Funds.
- Market and sell services to other Housing Authorities (fee accounting, new housing development consulting and housing counseling, etc.)
- Demolish obsolete administrative bldg in Hillsboro.
- Construct new maintenance building in Hillsboro
- Construct new group home for persons with mental/physical disabilities.
- Acquire other rental /affordable properties to assist low income families. (Raymond Rental Property)
- Develop additional single family homes and/or apartment complexes through out Montgomery County.

The MCHA exceeded all of the goals established for its FY2005 to FY2009 five-year plan. For the next five years, FY2010 to FY2014, the Authority plans to continue operating as a PHAS & SEMAP high performer; continue promoting the development of affordable rental and homeownership housing for low income families; continue to provide management/maintenance services to non profits that provide affordable housing to low income families; establish homeownership programs for low income families; provide urban revitalization services to Litchfield and other municipalities in Montgomery County; market and sell services to other Housing Authorities; and pursue additional sources of income to offset reduced HUD funding.

During the next five years FY2010 to FY2014, the Authority's Modernization priorities are to: demolish the Family Center and construct a Maintenance Building in Hillsboro, IL; update the interiors of 78 elderly units through-out the county. The Authority will be disposing of the obsolete two-story buildings of Hull Homes/Kirk Terrace and Ash Arnette/Kirk Terrace, and will be working with a closely held nonprofit organization to construct new elderly apartments using various financing. The financing for this project will include CFFP, RHF grants, tax credits, trust funds and AHP grant from the Federal Home Loan Bank. The Authority plans to use a conventional loan to build an eight bed group home for persons with mental/physical disabilities and rent the building to a nonprofit organization (FAYCO Enterprises). Should other major modernization needs be identified during the next five years via REAC or other inspections, the Capital Fund Plan will be adjusted accordingly (Examples include roof replacements, HVAC system modifications/replacements, replacing or repairing concrete walks, drives and parking areas, etc.).

	<p><u>PHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan</u></p> <p>The Authority exceeded all of the goals established for its FY2005 to FY2009 five-year plan. The Authority achieved PHAS and SEMAP high performer status; reduced public housing vacancies to less than 3% and vacant unit turnaround time to less than three days; helped establish non-profit corporations that have developed 40 new units of affordable rental housing for low-income families; increased both public housing and Section 8 reserves; reorganized the staff; expanded maintenance by one position and added a full-time Inspector/Lease Enforcer; dramatically increased the condition, appearance and marketability of the public housing units; updated all policies and procedures; and conducted on-going staff and commissioner training.</p> <p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>The MCHA submitted a disposition application to SAC to dispose of 32 units of public housing (16 units at IL037000001P Hull Homes/Kirk Terrace, Hillsboro, IL and 16 units at IL037000001P Ash Arnette Homes/Kirk Terrace, Litchfield, IL) in FY2009 and replace using mixed finance funds, including CFFP, RHF Grants, Tax Credits, Trust Funds, Energy Grant and an Affordable Housing Program Grant from the Federal Home Loan Bank.</p> <p>In addition, the MCHA is applying to project base 7 of the replacement units.</p> <p>The MCHA has updated its Capital Fund Program 5-Year Action Plan to include the addition of new work items for the 2009 Capital Fund stimulus Grant to include a new maintenance bldg in Hillsboro, new playground equipment in Hillsboro & Litchfield, new site signs, and to demolish an obsolete administrative bldg in order to add more parking at Long Homes.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>The PHA Plans and attachments (if any) are available for public inspection, and the public may obtain copies at the main administrative office of the PHA and the PHA web site: montgomeryhousing.org</p> <p>Montgomery County Housing Authority 216 Shelbyville Road Hillsboro, IL 62049</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>The PHA does not plan to apply for Hope VI.</p> <p>The PHA plans to develop and submit to HUD a disposition, CFFP and mixed finance applications in order to dispose of 32 units and replace 32 units of obsolete elderly public housing: (16 two-story units at (IL037000001P, Hull Homes/Kirk Terrace, Hillsboro, IL) and (16 two-story units at IL037000001P Ash Arnette/Kirk Terrace, Litchfield, IL). In addition, the PHA plans to project base 7 of the new 32 replacement units. The PHA intends to use the CFFP program to repay debt incurred to finance this development, with prior HUD approval, tax credits, trust funds, RHF Grants and Affordable Housing Program Grant From the Federal Home Loan Bank.</p> <p>The PHA plans to develop a voucher Homeownership Program and try to get at least 1 homeownership closing during FY 2010. The PHA has established a Voucher Homeownership Policy.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><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.</p>

<p>9.0</p>	<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>Currently the MCHA's waiting lists are all open.</p> <p>MCHA currently has 72 vouchers leased and 83 families on the waiting list; Public Housing has 235 low income units, which 216 are occupied and 19 are on Mod Hold, and 152 family, including elderly, on the waiting list. In addition we have 60 single family tax credit homes which are fully leased and 15 families on the waiting list.</p> <p>The MCHA has seen an increase in the need for affordable and accessible units in Montgomery County. The MCHA is partnering with a developer to manage a 47 unit affordable apartment bldg in Litchfield, IL, with leasing to begin in FFY2009. In addition, the MCHA partnering with FAYCO Enterprises to develop an eight bed group home for the mentally and physically disabled in Litchfield, IL in FY2010 or 2011..</p> <p>The MCHA plans to develop more single family homes with tax credits and mixed finance applications in the future, and look for additional ways to increase the affordable housing stock in Montgomery County.</p>
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<p>9.1</p>	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The MCHA is partnering with a developer to manage a rehabbed 47 unit affordable apartment bldg in Litchfield, IL, with leasing to begin in 2010.</p> <p>The MCHA plans to develop more single family homes with tax credits and mixed finance applications in the future, and look for additional ways to increase the affordable housing stock in Montgomery County through partnerships and mixed finance projects.</p>
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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.
- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

The PHA is on schedule with its FY2009 Annual Plan and its FY 2005-2009 Five Year Plan.. The Authority plans to continue promoting the development of affordable rental and homeownership housing for low income families and to provide management/maintenance services to non profits that provide affordable housing to low income families in Montgomery County.

The MCHA has met/ will meet, most of the goals described in the 5-year plan. The voucher homeownership goal of closing on at least one (1) homeownership has yet to be met, but we continue to try to counsel prospective homeowners and hope to accomplish this by the end of 2009/2010.

The MCHA is in compliance with meeting the statutory and/or regulatory requirements of the Carbon Monoxide Alarm Detector Act. The PHA installed Carbon Monoxide detectors in all of its dwelling and non-dwelling units in December 2007, and the PHA monitors and checks the batteries while performing Preventative Maintenance on the units once a year. In addition, the PHA Inspector checks the smoke alarms and carbon monoxide detectors at the annual UPCS inspection which is done once a year as well.

- 10.0** The MCHA is in compliance with the Violence Against Women Act (VAWA). The MCHA works in partnership with the local women's emergency shelter at the Salvation Army in Hillsboro and Litchfield to permanently house women/families that are victims of violence and/or domestic abuse. The Salvation Army, the Montgomery County Health Department's Elder Abuse division, and Hearts United make referrals to the MCHA of families/persons that are victims of violence and /or domestic or elder abuse.

The Authority met with the Resident Advisory Board (RAB) on July 1, 2009 and July 9, 2009 to discuss the 5-year plan, including the 5-year capital plan. There RAB advisory board is in agreement with the 5-year plan and did not submit any comments in writing.

The Authority held a Public Hearing on September 22, 2009 and one resident and the MCHA Board Chairman was in attendance and no comments were submitted in writing.

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

MCHA definition of **Substantial Deviation/Modification** are additions or deletions of Strategic Goals in the Five Year Agency Plan.

The MCHA definition of "**significant amendment** is Any program change with regard to demolition or disposition, designation of housing, homeownership programs or conversion activities; Capital Budget additions of non-emergency work items in excess of \$25,000 (items not included in the current Annual Statement or Five Year Action Plan) or change in excess of \$25,000 in use of replacement reserve funds; Changes to rent or admissions policies or organization of the waiting lists.

- 11.0** **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.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
- (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. 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, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

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.

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011
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Resolution Number 1275-2009

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ~~2010~~ 5-Year and/or ~~2010~~ Annual PHA Plan for the PHA fiscal year beginning ~~01/2010~~, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Montgomery County HA
PHA Name

IL037
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2010 - 2014

Annual PHA Plan for Fiscal Years 2010 - 2010

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

Name of Authorized Official

Title

Kenneth C. Durbin

Board Chairman

Signature

Date

Kenneth C. Durbin

09/24/2009

Attachment b

Civil Rights Certification

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

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Montgomery County Housing Authority

IL037

PHA Name

PHA Number/HA Code

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

Name of Authorized Official

Kenneth C. Durbin

Title

Board Chairman

Signature

Kenneth C. Durbin

Date

09/24/2009

**Certification of Payments
to Influence Federal Transactions**

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

Applicant Name

Montgomery County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund & Replacement Housing Fund

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

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

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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

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

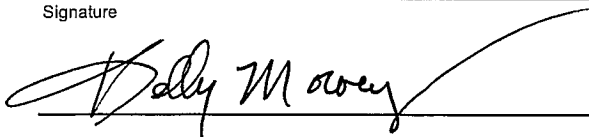
Name of Authorized Official

Kelly A. Moroney

Title

Chief Executive Officer

Signature



Date (mm/dd/yyyy)

09/24/2009

Attachment d

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB
0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input checked="" type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Montgomery County H.A. P.O. Box 591 216 Shelbyville Rd. Hillsboro IL 62049 Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U.S. Dept. Housing + Urban Dev.	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Kelly A. Moroney</u> Print Name: <u>Kelly A. Moroney</u> Title: <u>Chief Executive Officer</u> Telephone No.: <u>(217) 532-3672</u> Date: <u>9/24/09</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Montgomery County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program & Replacement Housing Fund

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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

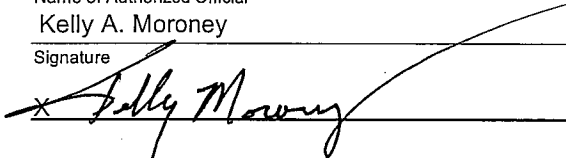
- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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

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

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

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

Name of Authorized Official Kelly A. Moroney	Title Chief Executive Officer
Signature 	Date September 24, 2009

Attachment f

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan**

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

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, DeShana L. Forney, Executive Director of the Illinois Housing Development Authority certify that the Five Year and Annual PHA Plan of the Montgomery County Housing Authority is consistent with the Consolidated Plan of Click to Enter Jurisdiction Name prepared pursuant to 24 CFR Part 91.

Signed / Dated by Appropriate State or Local Official

Part I: Summary	
PHA Name: Montgomery County Housing Authority	Grant Type and Number Capital Fund Program Grant No: IL06P03750110 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2010 FFY of Grant Approval:	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	40000			
3	1408 Management Improvements	20000			
4	1410 Administration (may not exceed 10% of line 21)	39689			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	114203			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	35000			
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: Montgomery County Housing Authority	Grant Type and Number Capital Fund Program Grant No: IL06P03750110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval:			
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	118000			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	396892			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		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: Montgomery County Housing Authority			Grant Type and Number Capital Fund Program Grant No: IL06P03750110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406		40000				
PHA-Wide	Resident Initiatives/HTN	1408		5000				
	Staff/Commissioners			5000				
	Utility Allowance Update			5000				
	Computer Upgrades			5000				
PHA-Wide	Administration-CFP Coordinator	1410		39689				
PHA-Wide	Fees & Costs	1430		30000				
IL037000001P - Cobetto Homes	Renovate Kitchens & Baths - New Cabinets, sinks, comodes, tubs & showers, flooring and appliances.	1460	6 units	114203				
PHA-Wide	Maintenance Vehicles	1475	2	35000				
IL037000001P-Hull & Ash-Arnette Homes	Debt Service for New Construction	9000		118000				
	TOTAL GRANT			396892				

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 II: Supporting Pages								
PHA Name: Montgomery County Housing Authority			Grant Type and Number Capital Fund Program Grant No: IL06P03750110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Montgomery County Housing Authority				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Widet	09/01/12		09/01/13		
IL037000001P Cobetto Homes	09/01/12		09/01/13		
IL037000001P -Hull & Ash-Arnette Homes	09/01/12		09/01/13		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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						
PHA Name/Number		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	114203	149203	149203	149203
C.	Management Improvements		20000	20000	20000	20000
D.	PHA-Wide Non-dwelling Structures and Equipment		35000			
E.	Administration		39689	39689	39689	39689
F.	Other		30000	30000	30000	30000
G.	Operations		40000	40000	40000	40000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service		118000	118000	118000	118000
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		396892	396892	396892	396892

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2010	Work Statement for Year 2011 FFY 2012			Work Statement for Year: 2012 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	IL037000001P-Cobetto Update Kitchens & Baths	6	114203	IL037000001P- Carlock Update Kitchens & Baths	9	149203
Annual Statement						
	Subtotal of Estimated Cost		\$114203	Subtotal of Estimated Cost		\$149203

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2010	Work Statement for Year 2013 FFY 2014			Work Statement for Year: 2014 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	IL037000001P-Huber Update Kitchens & Baths	13	149203	IL037000001P-Stewart Update Kitchens & Baths	12	149203
Annual Statement						
	Subtotal of Estimated Cost		\$ 149203	Subtotal of Estimated Cost		\$149203

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010 Annual Statement	Work Statement for Year 2011 FFY 2012		Work Statement for Year: 2012 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	PHA-Wide Managaement Improvements	20000	PHA-Wide Managaement Improvements	20000
	PHA-Wide Non-dwelling Equipment-Maint Vehicles	35000	PHA-Wide – Administration – Mod Coordinator	39689
	PHA-Wide – Administration – Mod Coordinator	39689	PHA – Wide Fees & Costs	30000
	PHA – Wide Fees & Costs	30000	PHA-Wide Operations	40000
	PHA-Wide Operations	40000	IL037000001P Hull & Ash Arnette CFFP Debt Service	118000
	IL037000001P Hull & Ash Arnette CFFP Debt Service	118000		
	Subtotal of Estimated Cost	\$282389	Subtotal of Estimated Cost	\$247689

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010	Work Statement for Year 2013 FFY 2014		Work Statement for Year: 2014 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	PHA-Wide Management Improvements	20000	PHA-Wide Management Improvements	20000
Annual				
Statement	PHA-Wide – Administration – Mod Coordinator	39689	PHA-Wide – Administration – Mod Coordinator	39689
	PHA – Wide Fees & Costs	30000	PHA – Wide Fees & Costs	30000
	PHA-Wide Operations	40000	PHA-Wide Operations	40000
	IL037000001P Hull & Ash Arnette CFFP Debt Service	118000	IL037000001P Hull & Ash Arnette CFFP Debt Service	118000
	Subtotal of Estimated Cost	\$ 247689	Subtotal of Estimated Cost	\$247689

Attachment i

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name: Montgomery County Housing Authority	Grant Type and Number Capital Fund Program Grant No: IL06P03750110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

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

Line	Summary by Development Account	Original	Total Estimated Cost	Revised ²	Obligated	Total Actual Cost ¹	Expended
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	118000					
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant:: (sum of lines 2 - 19)	396892					
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
Signature of Executive Director		Date		Signature of Public Housing Director		Date	

Solly Moroney

12/15/09

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.

Attachment j

**PHA Annual Statement
Performance and Evaluation Report
Replacement Housing Fund (RHF)**

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

OMB APProval No. 2577-0157

HA NAME MONTGOMERY COUNTY HOUSING AUTHORITY		Comprehensive Grant Number IL06R03750106	FFY of Grant Approval 2006
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disaster/Emergencies	<input type="checkbox"/> Revised Annual Statement/Revision Number 1	<input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 6/30/2009
<input type="checkbox"/> Final Performance and Evaluation Report			

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$0.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$37,602.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$37,602.00		\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director	Date (mm/dd/yyyy)	Signature of Public Housing Director/Office American Programs Administrator	Date (mm/dd/yyyy)
---------------------------------	-------------------	---	-------------------

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

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Funds Expended (2)
				Original	Revised (1)		
IL037-03	Replacement Reserve	1490		\$ 37,602.00			
	Subtotal			\$ 37,602.00			
	Total			\$ 37,602.00	\$0.00	\$269,609.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator Date (mm/dd/yyyy)

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

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

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Date (2)
	Original		Revised (1)	Actual (2)	Original	Revised (1)	
1406	7/30/2008				7/30/2009		
1408	7/30/2008				7/30/2009		
1410	7/30/2008				7/30/2009		
1430	7/30/2008				7/30/2009		
1450	7/30/2008				7/30/2009		
1460	7/30/2008				7/30/2009		
1485	7/30/2008				7/30/2009		

(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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

(mm/dd/yyyy)

Attachment K

**PHA Annual Statement
Performance and Evaluation Report**
Replacement Housing Fund (RHF)

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

OMB Approval No. 2577-0157
2006

HA NAME **MONTGOMERY COUNTY HOUSING AUTHORITY**

Comprehensive Grant Number
1L06R03750106

FY of Grant Approval
2006

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 1 Final Performance and Evaluation Report Performance and Evaluation Report for Program Year Ending **6/30/2009**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$0.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$37,602.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$37,602.00		\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement. Signature of Executive Director _____ Date (mm/dd/yyyy) _____

(2) To be completed for the Performance and Evaluation Report. Signature of Public Housing Director/Office American Programs Administrator _____ Date (mm/dd/yyyy) _____

Bobby McCreary

10/15/09

Attachment I

Performance and Evaluation Report
Replacement Housing Fund (RHF)

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

OMB APProval No. 2577-0157

MONTGOMERY COUNTY HOUSING AUTHORITY		Comprehensive Grant Number IL06R03750107	FFY of Grant Approval 2007
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disaster/Emergencies	<input type="checkbox"/> Revised Annual Statement/Revision Number 1	<input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 6/30/2009
<input type="checkbox"/> Final Performance and Evaluation Report			

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
8	1440 Site Acquisition			\$0.00	\$ -
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$0.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$34,942.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$34,942.00		\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report	
Signature of Executive Director	Date (mm/dd/yyyy)	Signature of Public Housing Director/Office American Programs Administrator	Date (mm/dd/yyyy)

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

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Statues of Proposed Funds Expended (2)
				Original	Revised (1)		
IL000001	Replacement Reserve	1490		\$ 34,942.00			

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

Signature of Executive Director and Date

Annual Statement / Performance and Evaluation Report

Part II : Supporting Pages

Capital Fund Program (CFP)

Development Number/Name HA - Wide Activities							Funds Expended (2)

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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator Date (mm/dd/yyyy)

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

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

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Date (2)
	Original		Revised (1)	Actual (2)	Original	Revised (1)	
1406	7/30/2008				7/30/2009		
1408	7/30/2008				7/30/2009		
1410	7/30/2008				7/30/2009		
1430	7/30/2008				7/30/2009		
1450	7/30/2008				7/30/2009		
1460	7/30/2008				7/30/2009		
1485	7/30/2008				7/30/2009		

(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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

(mm/dd/yyyy)

Attachments on

Performance and Evaluation Report
 Replacement Housing Fund (RHF)

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

OMB Approval No. 2577-0157

HA NAME

MONTGOMERY COUNTY HOUSING AUTHORITY

Comprehensive Grant Number
 IL06R03750107

FFY of Grant Approval
 2007

Original Annual Statement Reserve for Disaster/Emergencies

Revised Annual Statement/Revision Number 1

Performance and Evaluation Report for Program Year Ending

6/30/2009

Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)		Expended
		Original	Revised (1)	Obligated		
1	Total Non-CGP Funds	\$0.00				
2	1406 Operations	\$0.00				
3	1408 Management Improvements	\$0.00				
4	1410 Administration	\$0.00				
5	1411 Audit	\$0.00				
6	1415 Liquidated Damages	\$0.00				
7	1430 Fees and Costs	\$0.00				
8	1440 Site Acquisition	\$0.00		\$0.00		\$ -
9	1450 Site Improvement	\$0.00				
10	1460 Dwelling Structures	\$0.00				
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00				
12	1470 Nondwelling Structures	\$0.00				
13	1475 Nondwelling Equipment	\$0.00				
14	1485 Demolition	\$0.00				
15	1490 Replacement Reserve	\$34,942.00				
16	1495.1 Relocation Costs	\$0.00				
17	1498 Mod Used for Development	\$0.00				
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00				
19	Amount of Annual Grant (Sum of lines 2-18)	\$34,942.00				\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00			\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00			\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00			\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00			\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director

Date (mm/dd/yyyy)

Signature of Public Housing Director/Office American Programs Administrator

Date (mm/dd/yyyy)

[Signature]

ref/6/30/09

attachment n

**PHA Annual Statement
Performance and Evaluation Report
Replacement Housing Fund (RHF)**

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

OMB APProval No. 2577-0157

HA NAME MONTGOMERY COUNTY HOUSING AUTHORITY	Comprehensive Grant Number IL06R03750108	FFY of Grant Approval 2008
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Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 1 Performance and Evaluation Report for Program Year Ending **6/30/2009**
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$0.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$37,813.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$37,813.00		\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director	Date (mm/dd/yyyy)	Signature of Public Housing Director/Office American Programs Administrator	Date (mm/dd/yyyy)
---------------------------------	-------------------	---	-------------------

Annual Statement / Performance and Evaluation Report

Part II : Supporting Pages
Capital Fund Program (CFP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Funds Expended (2)
				Original	Revised (1)		
IL037-03	Replacement Reserve	1490		\$ 37,813.00			
	Subtotal			\$ 37,813.00			
	Total			\$ 37,813.00	\$0.00	\$269,609.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator Date (mm/dd/yyyy)

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

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

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Date (2)
	Original		Revised (1)	Actual (2)	Original	Revised (1)	
1406	7/30/2008				7/30/2009		
1408	7/30/2008				7/30/2009		
1410	7/30/2008				7/30/2009		
1430	7/30/2008				7/30/2009		
1450	7/30/2008				7/30/2009		
1460	7/30/2008				7/30/2009		
1485	7/30/2008				7/30/2009		

(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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

(mm/dd/yyyy)

Attachment

**PHA Annual Statement
Performance and Evaluation Report
Replacement Housing Fund (RHF)**

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

OMB Approval No. 2577-0157

HA NAME **MONTGOMERY COUNTY HOUSING AUTHORITY**

Comprehensive Grant Number
1L06R03750108

FFY of Grant Approval 2008

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number 1 Final Performance and Evaluation Report Performance and Evaluation Report for Program Year Ending 6/30/2009

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CCP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$0.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$37,813.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$37,813.00		\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Signature of Executive Director *Betsy Morisy*

Date (mm/dd/yyyy) *12/15/09*

Signature of Public Housing Director/Office American Programs Administrator

Date (mm/dd/yyyy)

Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part 1 Summary

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

OMB APPROVAL No. 2577-0157

HA NAME MONTGOMERY COUNTY HOUSING AUTHORITY	Comprehensive Grant Number IL06P03750108	FFY of Grant Approval 2008
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number <input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending		6/30/2008
<input type="checkbox"/> Final Performance and Evaluation Report		

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$60,000.00	\$180,000.00	\$180,000.00	\$120,000.00
3	1408 Management Improvements	\$20,000.00	\$20,000.00	\$4,398.00	\$1,460.00
4	1410 Administration	\$38,393.00	\$38,393.00	\$38,393.00	\$19,196.50
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$35,000.00	\$0.00		\$0.00
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00	\$123,499.00	\$ 30,000.00	8,550.00
10	1460 Dwelling Structures	\$243,499.00	\$0.00		\$0.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00	\$35,000.00	\$33,659.40	33,659.40
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$396,892.00	\$396,892.00	\$286,450.40	\$182,865.90
20	Amount of line 19 Related to LBP Activities	\$100,000.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$50,000.00	\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report	
Signature of Executive Director	Date (mm/dd/yyyy)	Signature of Public Housing Director/Office American Programs Administrator	Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
 Part II : Supporting Pages
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Status of Proposed Funds Expended (2)
				Original	Revised (1)		
	Operations	1406		\$60,000.00	\$180,000.00	\$180,000.00	120,000.00
PHA Wide Management Improvements	Resident Initiatives /HTN	1408		\$ 5,000.00	\$5,000.00	\$0.00	\$0.00
	Staff/Commissioner training			\$ 5,000.00	\$5,000.00	\$0.00	\$0.00
	Utility Allowance Update (LIPH & S8)			\$ 5,000.00	\$5,000.00	\$4,398.00	\$1,460.00
	Computer upgrades			\$ 5,000.00	\$5,000.00	\$0.00	\$0.00
	Subtotal			\$ 20,000.00	\$20,000.00	\$4,398.00	\$1,460.00
PHA Wide	ADMINISTRATION-MOD COORD	1410		\$38,393.00	\$38,393.00	\$38,393.00	\$19,196.50
	Subtotal			\$38,393.00	\$38,393.00	\$38,393.00	\$19,196.50
Fees & Costs	A/E Fees	1430		\$ 35,000.00	\$0.00	\$0.00	\$0.00
	Subtotal			\$ 35,000.00	\$0.00	\$0.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
 Part II : Supporting Pages
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Funds Expended (2)
				Original	Revised (1)		
	Repair and replace service lanes, parking lots and sidewalks per UPCS inspections	1450		\$ -	\$ 123,499.00	\$ 30,000.00	\$ 8,550.00
	Subtotal				\$ 123,499.00	\$ 30,000.00	\$ 8,550.00
L037000001	Update exteriors and new HVAC systems of one level buildings at Hillsboro Elderly.	1460		\$ 243,499.00			
	Subtotal			\$ 243,499.00	\$0.00	\$0.00	\$0.00
	Maintenance Vehicle	1475		\$ -	\$35,000.00	\$33,659.40	33,659.40
	Subtotal				\$35,000.00	\$33,659.40	33,659.40
	Total			\$ 396,892.00	\$396,892.00		\$182,865.90

(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

Signature of Executive Director and Date | Signature of Public Housing Director/Office American Programs Administrator | Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
Part III : Implementation Schedule
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Date (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1406	9/1/2010			9/1/2011			9/30/2009
1408	9/1/2010			9/1/2011			
1410	9/1/2008			9/1/2011			9/30/2009
1430	9/1/2010			9/1/2011			
1460	9/1/2010			9/1/2011			
1470	9/1/2010			9/1/2011			

(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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

(mm/dd/yyyy)

Attachment 2

Performance and Evaluation Report
 Comprehensive Grant Program (CGP) Part 1 Summary
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB Approval No. 2577-0157

HA NAME: MONTGOMERY COUNTY HOUSING AUTHORITY
 Comprehensive Grant Number: IL06P03750108
 FFY of Grant Approval: 2008
 [X] Original Annual Statement [] Reserve for Disaster/Emergencies [] Revised Annual Statement/Revision Number
 [] Final Performance and Evaluation Report [X] Performance and Evaluation Report for Program Year Ending: 6/30/2008

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	Expended
		Original	Revised (1)		
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$60,000.00	\$180,000.00	\$180,000.00	\$120,000.00
3	1408 Management Improvements	\$20,000.00	\$20,000.00	\$4,398.00	\$1,460.00
4	1410 Administration	\$38,393.00	\$38,393.00	\$38,393.00	\$19,196.50
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$35,000.00	\$0.00		\$0.00
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00	\$123,499.00	\$30,000.00	8,550.00
10	1460 Dwelling Structures	\$243,499.00	\$0.00		\$0.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00	\$35,000.00	\$33,659.40	33,659.40
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$396,892.00	\$396,892.00	\$286,450.40	\$182,865.90
20	Amount of line 19 Related to LBP Activities	\$100,000.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$50,000.00	\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.
 Signature of Executive Director: _____ Date (mm/dd/yyyy): _____
 Signature of Public Housing Director/Office American Programs Administrator: _____ Date (mm/dd/yyyy): _____

Sally Macey

10/15/09

Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part 1 Summary

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

OMB APPROVAL No. 2577-0157

MONTGOMERY COUNTY HOUSING AUTHORITY	Comprehensive Grant Number IL06P03750109	FFY of Grant Approval 2009
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number <input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 6/30/2009		<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$40,000.00			\$0.00
3	1408 Management Improvements	\$20,000.00			\$0.00
4	1410 Administration	\$38,393.00			\$0.00
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$30,000.00			\$0.00
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00			-
10	1460 Dwelling Structures	\$135,755.00			\$0.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			-
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18a	1501 Collateralization or Debt Service paid by the PHA	\$126,598.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$390,746.00	\$0.00	\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities		\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures		\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report	
Signature of Executive Director	Date (mm/dd/yyyy)	Signature of Public Housing Director/Office American Programs Administrator	Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
 Part II : Supporting Pages
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Statues of Proposed Funds Expended (2)
				Original	Revised (1)		
	Operations	1406		\$40,000.00			0.00
PHA Wide Management Improvements	Resident Initiatives /HTN	1408		\$ 5,000.00			\$0.00
	Staff/Commissioner training			\$ 5,000.00			\$0.00
	Utility Allowance Update (LIPH & S8)			\$ 5,000.00			\$0.00
	Computer upgrades			\$ 5,000.00			\$0.00
	Subtotal			\$ 20,000.00	\$0.00	\$0.00	\$0.00
PHA Wide	ADMINISTRATION-MOD COORD	1410		\$38,393.00			\$0.00
	Subtotal			\$38,393.00	\$0.00	\$0.00	\$0.00
Fees & Costs	A/E Fees	1430		\$ 30,000.00	\$0.00	\$0.00	\$0.00
	Subtotal			\$ 30,000.00	\$0.00	\$0.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
 Part II : Supporting Pages
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Funds Expended (2)
				Original	Revised (1)		
L037000001	Update kitchens & baths at elderly developments	1460		\$ 135,755.00			\$0.00
	Subtotal			\$ 135,755.00	\$0.00	\$0.00	\$0.00
L037000001	Hull & Ash Arnette Debt service repayment for new development	1501		\$ 126,598.00			\$0.00
	Subtotal			\$ 126,598.00	\$0.00	\$0.00	\$0.00
	Total			\$ 390,746.00	\$0.00		\$0.00

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

Signature of Executive Director and Date | Signature of Public Housing Director/Office American Programs Administrator | Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
Part III : Implementation Schedule
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Date (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1406	9/1/2010			9/1/2011			9/30/2009
1408	9/1/2010			9/1/2011			
1410	9/1/2008			9/1/2011			9/30/2009
1430	9/1/2010			9/1/2011			
1460	9/1/2010			9/1/2011			
1470	9/1/2010			9/1/2011			

(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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

(mm/dd/yyyy)

attachments 5

Performance and Evaluation Report
 Comprehensive Grant Program (CGP) Part 1 Summary
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB Approval No. 2577-0157

HA NAME: MONTGOMERY COUNTY HOUSING AUTHORITY
 Comprehensive Grant Number: IL06P03750109
 FFY of Grant Approval: 2009

[X] Original Annual Statement [] Reserve for Disaster/Emergencies [] Revised Annual Statement/Revision Number
 [] Final Performance and Evaluation Report [X] Performance and Evaluation Report for Program Year Ending 6/30/2009

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)		Expended
		Original	Revised (1)	Obligated		
1	Total Non-CGP Funds	\$0.00				
2	1406 Operations	\$40,000.00				\$0.00
3	1408 Management Improvements	\$20,000.00				\$0.00
4	1410 Administration	\$38,393.00				\$0.00
5	1411 Audit	\$0.00				
6	1415 Liquidated Damages	\$0.00				
7	1430 Fees and Costs	\$30,000.00				\$0.00
8	1440 Site Acquisition	\$0.00				
9	1450 Site Improvement	\$0.00				
10	1460 Dwelling Structures	\$135,755.00				\$0.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00				
12	1470 Nondwelling Structures	\$0.00				
13	1475 Nondwelling Equipment	\$0.00				
14	1485 Demolition	\$0.00				
15	1490 Replacement Reserve	\$0.00				
16	1495.1 Relocation Costs	\$0.00				
17	1498 Mod Used for Development	\$0.00				
18a	1501 Collateralization or Debt Services paid by the PHA	\$126,598.00				
19	Amount of Annual Grant (Sum of lines 2-18)	\$390,746.00	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report
 Signature of Executive Director: Kelly Morrey Date (mm/dd/yyyy): 10/15/09
 Signature of Public Housing Director/Office American Programs Administrator: Date (mm/dd/yyyy):

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**Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part 1 Summary**

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

OMB APPROVAL No. 2577-014

MONTGOMERY COUNTY HOUSING AUTHORITY	Comprehensive Grant Number IL06S03750109	FFY of Grant Approval 2009	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number <input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 6/30/2009		<input type="checkbox"/> Final Performance and Evaluation Report	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds	\$0.00			
2	1406 Operations	\$0.00			\$0.00
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$10,250.00		\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$105,000.00		\$0.00	\$0.00
10	1460 Dwelling Structures	\$225,000.00		\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$210,000.00		\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1495.1 Relocation Costs	\$0.00			
17	1498 Mod Used for Development	\$0.00			
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00			
19	Amount of Annual Grant (Sum of lines 2-18)	\$550,250.00	\$0.00	\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.		(2) To be completed for the Performance and Evaluation Report	
Signature of Executive Director	Date (mm/dd/yyyy)	Signature of Public Housing Director/Office American Programs Administrator	Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
Part II : Supporting Pages
Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Status of Proposed Funds Expended (2)
				Original	Revised (1)		
PHA Wide Site Improvements	Replace Development Signs	1450	12	\$ 5,000.00		\$0.00	
	Replace Playground Equipment & New Surface	1450	2	\$ 100,000.00		\$0.00	\$0.00
	Subtotal			\$ 105,000.00	\$0.00	\$0.00	\$0.00
Long Homes IL037000001P 37000001P	Demolish Obsolete Administrative Bldg.	1470		\$ 60,000.00			
	New Maintenance Facility	1470	1	\$150,000.00		\$0.00	\$0.00
	Subtotal			\$ 210,000.00	\$0.00	\$0.00	\$0.00
Long Homes IL037000001P	A/E Fees	1430		\$ 10,250.00	\$0.00	\$0.00	\$0.00
	Subtotal			\$ 10,250.00	\$0.00	\$0.00	\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report

Part II : Supporting Pages
Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Costs		Funds Obligated	Funds Expended (2)
				Original	Revised (1)		
IL037000001P	Replace Asphalt Shingles/Repair roofs buildings at Hillsboro & Litchfield Family	1460	75 units	\$ 225,000.00		\$0.00	\$0.00
	Subtotal			\$ 225,000.00	\$0.00	\$0.00	\$0.00
	Total			\$ 550,250.00	\$0.00		\$0.00

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

Signature of Executive Director and Date | Signature of Public Housing Director/Office American Programs Administrator | Date (mm/dd/yyyy)

Annual Statement / Performance and Evaluation Report
Part III : Implementation Schedule
 Comprehensive Grant Program (CGP)

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

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Date (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
PHA-Wide	04/01/10			04/01/11			
Kirk Terrace IL037000001P	04/01/10			04/01/11			
Long Homes IL037000001P	04/01/10			04/01/11			

(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

Signature of Executive Director and Date

Signature of Public Housing Director/Office American Programs Administrator

(mm/dd/yyyy)

attachment **4**

Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part 1 Summary

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

OMB Approval No. 2577-01

HA NAME

MONTGOMERY COUNTY HOUSING AUTHORITY

Comprehensive Grant Number
 IL06S03750109

FFY of Grant Approval

2009

Original Annual Statement Reserve for Disaster/Emergencies

Revised Annual Statement/Revision Number

Performance and Evaluation Report for Program Year Ending

6/30/2009

Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)		Expended
		Original	Revised (1)	Obligated		
1	Total Non-CGP Funds	\$0.00				
2	1406 Operations	\$0.00				\$0.00
3	1408 Management Improvements	\$0.00				
4	1410 Administration	\$0.00				
5	1411 Audit	\$0.00				
6	1415 Liquidated Damages	\$0.00				
7	1430 Fees and Costs	\$10,250.00		\$0.00		\$0.00
8	1440 Site Acquisition	\$0.00				
9	1450 Site Improvement	\$105,000.00		\$0.00		\$0.00
10	1460 Dwelling Structures	\$225,000.00		\$0.00		\$0.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$0.00				
12	1470 Nondwelling Structures	\$210,000.00		\$0.00		\$0.00
13	1475 Nondwelling Equipment	\$0.00				
14	1485 Demolition	\$0.00				
15	1490 Replacement Reserve	\$0.00				
16	1495.1 Relocation Costs	\$0.00				
17	1498 Mod Used for Development	\$0.00				
18	1502 Contingency (may not exceed 8% of line 19)	\$0.00				
19	Amount of Annual Grant (Sum of lines 2-18)	\$550,250.00	\$0.00	\$0.00		\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00	\$0.00	\$0.00		\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00		\$0.00
22	Amount of line 19 Related to Security	\$0.00	\$0.00	\$0.00		\$0.00
23	Amount of line 19 Related to Conservation Measures	\$0.00	\$0.00	\$0.00		\$0.00

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

(2) To be completed for the Performance and Evaluation Report

Signature of Executive Director

Date (mm/dd/yyyy)

Signature of Public Housing Director/Office American Programs Administrator

Date (mm/dd/yyyy)

Sally M. Money 10/15/09