

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Mishawaka Housing Authority</u> PHA Code: <u>IN020</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2010</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>299</u> Number of HCV units: <u>307</u>												
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
PH	HCV												
PHA 1:													
PHA 2:													
PHA 3:													
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: To provide to low and moderate income families quality housing that is affordable, in decent, safe, and sanitary condition, and in good repair. To explore opportunities to increase housing/options and to promote resident self-sufficiency and independence.												

<p>5.2</p>	<p>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.</p> <p>Management Strategic Goals: Manage MHA’s existing public housing program in an efficient and effective manner utilizing basic business practices and sound/progressive management strategies. Manage MHA in a manner that results in compliance with applicable statutes and regulations as defined by program and audit findings. Promote professional growth through internal resources for educational and career advancement programs; continue efforts of staffing that are representative of the city’s racial and gender composition.</p> <p>Objectives: Recognition by HUD as at least a standard performer under the PHAS standards during each of the five years covered by this Plan. Achieve an annual audit with no findings. Achieve and sustain an occupancy rate of not less than 96% at each Project. Continue internal reassessment strategies and implement operational changes to meet the challenges and opportunities presented by federal and state housing and welfare reform initiatives. Continue assessment and acquisition of the technology necessary to perform efficiently and effectively. Continue/complete implementation and licensing of supportive services being available at River View 500.</p> <p>Marketing Strategic Goals: Enhance the marketability of the MHA public housing property. Make public housing the affordable housing choice for the very and low income residents in the community. Make River View 500 the supportive services choice for community residents needing the service and qualifying for a Medicaid Waiver.</p> <p>Objectives: MHA shall achieve acceptable curb appeal for its public housing properties by improving/maintaining landscaping, keeping the grass cut/trimming, making properties litter-free, and other seasonal/maintenance strategies throughout the year. Work to expand housing options for the elderly, disabled, those needing supportive services. Explore opportunities to partner with other community entities/organizations to increase housing options for low and moderate income, in-fill housing, affordable housing production, and redevelopment. Continue to utilize the Community Development Corporation of Mishawaka, IN to expand housing/development/management projects. Explore opportunities for resident owned and operated businesses as well as linking residents to community resources to assist in achieving their goals of economic independence and self-sufficiency. Explore opportunities with community partners for youth development programs and services.</p> <p>Tenant-Based Housing Strategic Goals: Manage the MHA’s tenant-based program in an efficient and effective manner.</p> <p>Objectives: Attain at least a standard performer status under SEMAP or other rating mechanism that may be used by HUD. MHA will work to maintain the number of landlords participating in the program during the five year period.</p> <p>Maintenance Strategic Goals: Maintain MHA property in a decent condition. Upgrade the units at River View 500 to attract supportive services residents. Deliver timely and high quality maintenance service to public housing residents.</p> <p>Objectives: Achieve and maintain an average response time of no more than twenty four (24) hours in responding to emergency work orders. Achieve and maintain an average response time that rates at the highest level on the PHAS ratings in responding to routine work orders. Meet all goals for modernization grants and constantly monitor the modernization needs of each property. Provide resources to plan for physical improvement needs of the properties both in the short and long-term.</p> <p>Equal Opportunity Strategic Goals: Look for opportunities to expand housing opportunities beyond areas of low-income and minority concentration. Operate the Mishawaka Housing Authority in full compliance with all Equal Opportunity laws and regulations and affirmatively further fair housing. The Mishawaka Housing Authority shall ensure equal treatment of all applicants, residents, tenant-based participants, employees, and vendors.</p> <p>Objectives: Participate with community organizations/representatives to insure non-discrimination in MHA’s housing programs and seek opportunities to further Fair Housing objectives. Affirmatively approach equal access to assisted housing regardless of race, color, religion, national origin, familial status, and disability.</p> <p>Fiscal Responsibility Strategic Goals: Ensure full compliance with all applicable standards, regulations, and program requirements including generally accepted accounting practices.</p> <p>Objectives: Continue to seek entrepreneurial opportunities to develop new sources of non-HUD funding. Seek opportunities to manage non-public housing properties on a fee-for-service basis. The Mishawaka Housing Authority will operate so that expenses will not exceed income. Annual audits will be issued without findings each year. Resources, financial and otherwise, will be fully utilized to achieve licensing and operation of River View 500 as a supportive services location approved to collect Medicaid Waiver funds for the provision of this service.</p>
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PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

Changes to the ACOP made during 2009 were based, by and large, on changes initiated by HUD which required changes to the ACOP. Those changes were in the areas of eligibility criteria related to Social Security number documentation, suitability related to rental history being provided solely by a family member; tenant rejection of unit offers related to status on waiting list; income related to documentation of child support payment or lack of payment; verification of social security benefits related to inclusion of HUD's on-line systems; pet policy as relates to therapy animals; added to glossary the term bifurcate. Tenant selection and assignment are detailed in Section 10.0 of the ACOP; management of the waiting list is included in Section 9.0 of the ACOP.

Changes to the Administrative Plan were based, by and large, on changes initiated by HUD requiring changes to MHA's policies. Those changes were in the areas of eligibility related to social security number documentation; moves with continued assistance related to a landlord initiating legal action against a participant with MHA's response being to wait until the legal action has been completed before making a determination to issue a voucher; portability related to the terms of VAWA; income related to documentation of child support or the lack thereof; further definition of cost saving considerations; and added the term bifurcate to the glossary. The Administrative Plan outlines the specific requirements in Sections 4.0, 5.0, and 6.0.

Changes to the ACOP and the Administrative Plan were conducted in compliance with the requirements of changing such policies.

(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.

Barbee Creek Village, 601 E. 11th St., Mishawaka, IN 46544
River View 500, 500 Lincolnway East, Mishawaka, IN 46544
Battell School Apartments, 120 E. Battell St., Mishawaka, IN 46545
The Mishawaka Housing Authority does not have a website.

1. Eligibility, Selection and Admissions Policies, including deconcentration and wait list procedures:

The policies governing eligibility, selection, and admission for public housing and the voucher program follow the CFR requirements.

The public housing program further utilizes the following local preferences:

* Adult household member working for at least 6 months and at least 20 hours a week. This preference is extended to elderly families and all families whose head or spouse is receiving income based on an inability to work.**

* Adult family member who either lives or works or has been hired within the City limits.**

* Elderly and disabled will be offered housing before other single persons.**

Victims of domestic violence and where children are involved.

* Previous tenants in good standing.

* Federally declared disasters.

* Families of military on active duty, to include National Guard.

Those preferences listed above with a double asterisk also apply to the voucher program as well as adult members enrolled in an employment training program or higher education (with required limitations).

There are no site based waiting lists.

2. Financial Resources

Anticipated subsidy=\$800,000

Rental income=\$490,000

Capital Funding=\$470,000

Anticipated HAP=\$1,400,000

Anticipated administrative fee=\$150,000

Anticipated fee-for-service=\$28,000

Anticipated Medicaid Waiver fees=\$35,000

3. Rent Determination

Public housing rents and voucher tenant rent amounts comply with the regulatory requirements. The tenant rent determination requirements are outlined in Section 13.0 of the ACOP and in Section 11.0 of the Administrative Plan.

4. Operation and Management

The rules, standards, and policies comply with the regulatory requirements. The pest control company contracted by MHA is required to take specific action to eradicate infestation including cockroaches. MHA plans to utilize forced labor supported by the Capital Fund during the course of this 5 Year Plan.

5. Grievance Procedures

The grievance procedures used by MHA are those outlined by the regulations. The Resident Grievance Procedure is provided to each resident at move-in, included in notification of actions taken related to residents, and is posted in the main lobby of the MHA.

6. Designated housing for Elderly and Disabled Families

At the present time there are no properties designated as elderly/disabled. There are properties that are of a unit size that lend themselves to one (1) resident or a married couple and tend to be occupied by elderly and/or disabled individuals or couples. There will be discussion with HUD staff shortly related to the advisability of designating the River View 500 building with its 113 units as elderly/disabled based on the provision of supportive services to Medicaid Waiver eligible residents in that building.

7. Community Service and Self-Sufficiency

MHA networks with community organizations for residents to participate in community service options and self-sufficiency programs. MHA is of a size where the expertise and training is not possible internally to provide. Section 14.0 of the ACOP outlines the requirements of the Community Service provisions.

8. Safety and Crime Prevention

MHA has Neighborhood Enforcement Officers (NET) who provide additional service in the areas including public housing properties. The communication and cooperation between the Housing Authority and the NET Officers insures safe properties and catching problem circumstances and people before neighborhoods become a problem. None of the Housing Authority properties are in high crime areas in

7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> N/A
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	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. Trends through waiting list observations, phone calls, and communication with other housing providers in the community: Lower income families are entering the assisted living housing market with the expectation that more amenities are available than public housing provides. More elderly/disabled people entering a stage of their life where they need non-medical assistance to continue to live independently. Fewer opportunities are available in the community for those with limited incomes. Fewer landlords are participating in the tenant-based program because of state property tax burdens. Housing is being abandoned by owners rather than pay the applicable taxes leaving fewer properties for voucher holders to choose from. Fewer vouchers can be funded with the money available due to higher subsidy requirements for families. Longer waiting lists and fewer move-outs in public housing because there is no where else to move that is affordable. The Mishawaka schools are viewed as preferable to the cities surrounding Mishawaka causing families with children to want to locate in this community if possible.
9.1	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. Prepare units for reoccupancy as quickly as possible. Process applications for housing as quickly as possible. Thorough review of all information necessary to calculate subsidy/tenant rent. Incorporate newly determined utility allowances in rent calculations for public housing residents and voucher holders. Maintain up to date listing of property available for voucher holders.
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. The stated mission, goals and objectives of the Mishawaka Housing Authority as detailed in the 5 Year Plan have been, by and large, accomplished. Those goals/objectives not fully accomplished are: * Exploring opportunities for resident owned and operated businesses-Able to generate only limited interest by residents (most of MHA's residents are elderly/disabled) * Youth development programs have been explored with limited success because most community organizations are struggling to fund existing programs-expansion is not an option for them at this time. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" Substantial deviation or significant modifications are defined as discretionary changes in the plans or policies of the Housing Authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

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

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

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

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

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

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

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

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

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

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

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	86,000			
3	1408 Management Improvements	15,000			
4	1410 Administration (may not exceed 10% of line 21)	43,000			
5	1411 Audit	6,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	13,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	110,000			
10	1460 Dwelling Structures	121,000			
11	1465.1 Dwelling Equipment—Nonexpendable	13,500			
12	1470 Non-dwelling Structures	10,000			
13	1475 Non-dwelling Equipment	12,500			
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.

Part I: Summary						
PHA Name: Mishawaka Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval: 2010	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	430,000				
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: Mishawaka Housing Authority		Grant Type and Number Capital Fund Program Grant No: 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	
IN020-001								
Barbee Creek Village	A&E	1430		5,000				
	Site Improvements	1450		50,000				
	Parking/Drainage/Concrete/Asphalt/ Landscaping/Signage							
	Dwelling Structures	1460		67,200				
	Electrical/Masonry/Siding/Soffit/downspouts/ Painting/Cabinets/Flooring/Plumbing/Doors/ Windows/Mechanical/HVAC/Hot water heaters/roofing							
	Appliances	1465.1		5,000				
	Non-Dwelling Structures	1470		5,000				
	Non-dwelling Equipment	1475		5,000				
IN020-003-Battell	A&E	1430		3,000				
	Site Improvements	1450		10,000				
	Concrete/Asphalt/Parking/Drainage/Signage/ Landscaping							
	Dwelling Structures	1460		13,400				
	Electrical/Masonry/Painting/Cabinets/Flooring/							

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: Mishawaka Housing Authority		Grant Type and Number Capital Fund Program Grant No: 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	
	Plumbing/Doors/Mechanical/HVAC/hot water							
	Non-Dwelling Structures	1470		3,000				
	Appliances	1465.1		3,500				
	Non-Dwelling Equipment	1475		3,500				
IN020-002-	A&E	1430		5,000				
River View 500	Site Improvements	1450		50,000				
	Parking/Drainage/Concrete/Asphalt/Signage/Landscaping							
	Dwelling Structures	1460		40,400				
	Electrical/Masonry/Painting/Cabinets/Flooring/Plumbing/Doors/Mechanical/HVAC/hot water							
	Appliances	1465.1		5,000				
	Non-Dwelling Structures	1470		5,000				
	Non-Dwelling Equipment	1475		4,000				
HA_Wide	Operations	1460		86,000				
	Mgt./Maint. Improvements	1408		15,000				
	Administration	1410		43,000				
	Audit	1411		6,000				

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: Mishawaka 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	
IN020-001	9/12		9/14		
IN020-002	9/12		9/14		
IN020-003	9/12		9/14		
HA-Wide	9/12		9/14		

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 Mishawaka Housing Authority-IN020			Locality (City/County & State) Mishawaka, St. Joseph, Indiana		<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	244,500	244,500	244,500	244,500
C.	Management Improvements		15,000	15,000	15,000	15,000
D.	PHA-Wide Non-dwelling Structures and Equipment		22,500	22,500	22,500	22,500
E.	Administration		43,000	43,000	43,000	43,000
F.	Other		19,000	19,000	19,000	19,000
G.	Operations		86,000	86,000	86,000	86,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		430,000	430,000	430,000	430,000

Part I: Summary (Continuation)

PHA Name/Number		Locality (City/county & State)				<input type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____	
		Annual Statement					

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2</u> FFY <u>2011</u>			Work Statement for Year: <u>3</u> FFY <u>2012</u>		
	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	IN-020-001			IN-020-001		
Annual	1430		5,000	1430		5,000
Statement	1450		50,000	1450		50,000
	1460		67,200	1460		67,200
	1465.1		5,000	1465.1		5,000
	1470		5,000	1470		5,000
	1475		5,000	1475		5,000
	IN-020-002			IN-020-002		
	1430		5,000	1430		5,000
	1450		50,000	1450		50,000
	1460		40,400	1460		40,400
	1465.1		5,000	1465.1		5,000
	1470		2,000	1470		2,000
	1475		4,000	1475		4,000
	IN-020-003			IN-020-003		
	1430		3,000	1430		3,000
	1450		10,000	1450		10,000
	1460		13,400	1460		13,400
	1465.1 & 1475		7,000	1465.1 & 1475		7,000
	1470		3,000	1470		3,000
	Subtotal of Estimated Cost		\$280,000	Subtotal of Estimated Cost		\$280,000

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY ____2010__	Work Statement for Year ____4____ FFY ____2013__			Work Statement for Year: ____5____ FFY ____2014__		
	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	IN-020-001			IN-020-001		
Annual	1430		5,000	1430		5,000
Statement	1450		50,000	1450		50,000
	1460		67,200	1460		67,200
	1465.1		5,000	1465.1		5,000
	1470		5,000	1470		5,000
	1475		5,000	1475		5,000
	IN-020-002			IN-020-002		
	1430		5,000	1430		5,000
	1450		50,000	1450		50,000
	1460		40,400	1460		40,400
	1465.1		5,000	1465.1		5,000
	1470		2,000	1470		2,000
	1475		4,000	1475		4,000
	IN-020-003			IN-020-003		
	1430		3,000	1430		3,000
	1450		10,000	1450		10,000
	1460		13,400	1460		13,400
	1465.1 & 1475		7,000	1465.1 & 1475		7,000
			3,000			3,000
	Subtotal of Estimated Cost		\$280,000	Subtotal of Estimated Cost		\$280,000

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

Part I: Summary	
PHA Name: Mishawaka HA	Grant Type and Number Capital Fund Program Grant No: IN36P020501-06 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2006 FFY of Grant Approval: 2006	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12-31-2009 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	65,000.00		65,000.00	65,000.00
3	1408 Management Improvements	22,598.38		22,598.38	22,598.38
4	1410 Administration (may not exceed 10% of line 21)	45,290.00		45,290.00	45,290.00
5	1411 Audit	6,000.00		6,000.00	6,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	148,393.83		148,393.83	148,393.83
10	1460 Dwelling Structures	118,486.30		118,486.30	118,486.30
11	1465.1 Dwelling Equipment—Nonexpendable	25,673.00		25,673.00	25,673.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	21,543.49		21,543.49	21,543.49
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: Mishawaka HA		Grant Type and Number Capital Fund Program Grant No: IN36P020501-06 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2006 FFY of Grant Approval: 2006	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2009			<input checked="" type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	452,985.00		452,985.00	452,985.00	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director Colleen Olund		Date 12/09	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: Mishawaka Housing Authority			Grant Type and Number Capital Fund Program Grant No: IN36P020501-06 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
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	
IN202-001	Non-dwelling Equipment	1475		1,776.29		1,776.29	1,776.29	Complete
Barbee Creek Village	Management/Maint Improvements	1408		9,947.12		9,947.12	9,947.12	Complete
	Dwelling Structures	1460		54,596.35		54,596.35	54,596.35	Complete
	Site Improvements	1450		116,783.14		116,783.14	116,783.14	Complete
	Appliances	1465.1		1,503.00		1,503.00	1,503.00	Complete
IN020-002	Non-dwelling Equipment	1475		11,323.54		11,323.54	11,323.54	Complete
River View 500	Dwelling Structures	1460		27,886.98		27,886.98	27,886.98	Complete
	Site Improvement	1450		26,438.48		26,438.48	26,438.48	Complete
	Dwelling Equipment	1465.1		3,234.00		3,234.00	3,234.00	Complete
	Operations	1406		65,000.00		65,000.00	65,000.00	Complete
	Management/Maintenance Improvements	1408		9,382.65		9,382.65	9,382.65	Complete

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: Mishawaka Housing Authority			Grant Type and Number Capital Fund Program Grant No: IN36P020501-06 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
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	
IN020-003	Dwelling Structures	1460		36,002.97		36,002.97	36,002.97	Complete
Battell School Apts	Site Improvements	1450		5,172.21		5,172.21	5,172.21	Complete
	Appliances	1465		20,936.00		20,936.00	20,936.00	Complete
								Complete
HA Wide	Management/Maintenance Improvements	1408		3,268.61		3,268.61	3,268.61	Complete
	Administration	1410		45,290.00		45,290.00	45,290.00	Complete
	Audit	1406		6,000.00		6,000.00	6,000.00	Complete
	Equipment	1475		8,443.66		8,443.66	8,443.66	Complete

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: Mishawaka Housing Authority					Federal FFY of Grant: 2006
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	
IN020-001	9/08	9/08	9/10	9/08	
IN020-002	9/08	9/08	9/10	9/08	
IN020-003	9/08	9/08	9/10	9/08	
HA Wide	9/08	9/08	9/10	9/08	

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 I: Summary		
PHA Name: Mishawaka HA	Grant Type and Number Capital Fund Program Grant No: IN36P020501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12-31-2009 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	65,000.00	65,000.00	65,000.00	65,000.00
3	1408 Management Improvements	22,500.00	21,972.94	21,972.94	21,972.94
4	1410 Administration (may not exceed 10% of line 21)	40,000.00	40,000.00	40,000.00	40,000.00
5	1411 Audit	6,000.00	6,000.00	6,000.00	6,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	26,000.00	26,000.00	26,000.00	26,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	53,080.00	120,365.79	120,365.79	120,365.79
10	1460 Dwelling Structures	159,400.00	137,667.28	137,667.28	137,667.28
11	1465.1 Dwelling Equipment—Nonexpendable	38,000.00	12,489.07	12,489.07	12,489.07
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	25,000.00	5,484.92	5,484.92	5,484.92
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.

Part I: Summary						
PHA Name: Mishawaka HA		Grant Type and Number Capital Fund Program Grant No: IN36P020501-07 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2007 FFY of Grant Approval: 2007	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2009			<input checked="" type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	434,980.00	434,980.00	434,980.00	434,980.00	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director Colleen Olund		Date 12/09	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: Mishawaka Housing Authority			Grant Type and Number Capital Fund Program Grant No: IN36P020501-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
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	
IN202-001	Non-dwelling Equipment	1475		25,000.00	1,079.92	1,079.92	1,079.92	Complete
Barbee Creek Village	ADA/Code/Safety	1450 & 1460		5,000.00	0	0	0	
	Dwelling Structures	1460		75,200.00	108,613.49	108,613.49	108,613.49	complete
	Site Improvements	1450		16,290.00	75,368.98	75,368.98	75,368.98	complete
	Appliances	1465.1		15,000.00	0	0	0	
	A&E	1430		5,000.00	0	0	0	
IN020-002	Nondwelling Equipment	1475		0	4,405.00	4,405.00	4,405.00	Completed
River View 500	ADA/Code/Safety	1450 & 1460		3,000.00	0	0	0	
	Dwelling Structures	1460		63,200.00	24,487.03	24,487.03	24,487.03	complete
	Site Improvement	1450		16,750.00	29,588.62	29,588.62	29,588.62	complete
	Appliances	1465.1		20,000.00	12,489.07	12,489.07	12,489.07	complete
	A&E	1430		18,000.00	26,000.00	26,000.00	26,000.00	complete
IN020-003	ADA/Code/Safety	1450 & 1460		3,000.00	0	0	0	
Battell School Apts	Dwelling Structures	1460		20,040.00	4,566.76	4,566.76	4,566.76	complete
	Site Improvements	1450		10,000.00	15,408.19	15,408.19	15,408.19	complete
	Appliances	1465.1		3,000.00	0	0	0	
	A&E	1430		3,000.00	0	0	0	

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: Mishawaka Housing Authority					Federal FFY of Grant: 2007
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	
IN020-001	9/09	6/09	9/11	6/09	
IN020-002	9/09	6/09	9/11	6/09	
IN020-003	9/09	6/09	9/11	6/09	
HA Wide	9/09	6/09	9/11	6/09	

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

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

Part I: Summary	
PHA Name: Mishawaka HA	Grant Type and Number Capital Fund Program Grant No: IN36P020501-08 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2008 FFY of Grant Approval: 2008	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12-31-2009 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	65,000.00		65,000.00	65,000.00
3	1408 Management Improvements	22,500.00		16,592.19	16,592.19
4	1410 Administration (may not exceed 10% of line 21)	47,300.00		47,300.00	47,300.00
5	1411 Audit	7,000.00		7,000.00	7,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	26,000.00		10,155.53	10,155.53
8	1440 Site Acquisition				
9	1450 Site Improvement	53,000.00		34,549.31	34,549.31
10	1460 Dwelling Structures	194,438.00		38,864.83	38,864.83
11	1465.1 Dwelling Equipment—Nonexpendable	38,000.00		248.99	248.99
12	1470 Non-dwelling Structures	5,000.00		1,403.49	1,403.49
13	1475 Non-dwelling Equipment	15,000.00		8,756.00	8,756.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary						
PHA Name: Mishawaka HA		Grant Type and Number Capital Fund Program Grant No: IN36P020501-08 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2008 FFY of Grant Approval: 2008	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2009			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	473,238.00		229,870.34	229,870.34	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities	20,000.00				
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	38,000.00				
Signature of Executive Director Colleen Olund		Date 12/09	Signature of Public Housing Director		Date	

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Part II: Supporting Pages								
PHA Name: Mishawaka Housing Authority			Grant Type and Number Capital Fund Program Grant No: IN36P020501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
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	
IN202-001	Non-dwelling Equipment	1475		15,000.00		8,756.00	8,756.00	Incomplete
Barbee Creek Village	ADA/Code/Safety							Incomplete
	Dwelling Structures	1460		81,308.00		4,384.66	4,384.66	Incomplete
	Site Improvements	1450		26,250.00		16,297.61	16,297.61	Incomplete
	Appliances	1465.1		15,000.00		0	0	Incomplete
	A&E	1430		5,000.00		0	0	Incomplete
	Nondwelling Structures	1470		5,000.00		1,403.49	1,403.49	Incomplete
IN020-002	ADA/Code/Safety							Incomplete
River View 500	Dwelling Structures	1460		90,050.00		34,028.48	34,028.48	Incomplete
	Site Improvement	1450		16,750.00		5,284.93	5,284.93	Incomplete
	Appliances	1465.1		20,000.00		248.99	248.99	Incomplete
	A&E	1430		18,000.00		10,155.53	10,155.53	Incomplete
IN020-003	ADA/Code/Safety							Incomplete
Battell School Apts	Dwelling Structures	1460		23,080.00		451.69	451.69	Incomplete
	Site Improvements	1450		10,000.00		12,966.77	12,966.77	Incomplete
	Appliances	1465.1		3,000.00		0	0	Incomplete
	A&E	1430		3,000.00		0	0	Incomplete
								Incomplete

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Mishawaka Housing Authority					Federal FFY of Grant: 2008
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	
IN020-001	6/10		6/12		
IN020-002	6/10		6/12		
IN020-003	6/10		6/12		
HA Wide	6/10		6/12		

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Part I: Summary		
PHA Name: Mishawaka HA	Grant Type and Number Capital Fund Program Grant No: IN36S020501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12-31-2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000.00		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000.00		20,728.58	20,728.58
10	1460 Dwelling Structures	509,025.00		94,118.03	94,118.03
11	1465.1 Dwelling Equipment—Nonexpendable	40,000.00		0	0
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
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Part I: Summary						
PHA Name: Mishawaka HA		Grant Type and Number Capital Fund Program Grant No: IN36S020501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-2009			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	599,025.00		114,846.61	114,846.61	
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 Colleen Olund		Date 12/09	Signature of Public Housing Director		Date	

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Part II: Supporting Pages								
PHA Name: Mishawaka Housing Authority			Grant Type and Number Capital Fund Program Grant No: IN36S020501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN202-001								
Barbee Creek Village	ADA/Code/Safety							
	Dwelling Structures	1460		200,000.00		53,762.42	53,762.42	Incomplete
	Site Improvements	1450		25,000.00		3,528.58	3,528.58	Incomplete
	Appliances	1465.1		25,000.00		0	0	Incomplete
IN020-002								
River View 500	Dwelling Structures	1460		249,025.00		40,355.61	40,355.61	Incomplete
	Site Improvement	1450		5,000.00		17,200.00	17,200.00	Incomplete
	Appliances	1465.1		5,000.00		0	0	Incomplete
	A&E	1430		10,000.00		0	0	Incomplete
IN020-003								
Battell School Apts	Dwelling Structures	1460		60,000.00		0	0	Incomplete
	Site Improvements	1450		10,000.00		0	0	Incomplete
	Appliances	1465.1		10,000.00		0	0	Incomplete

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Mishawaka Housing Authority					Federal FFY of Grant: 2009
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	
IN020-001	3/10		3/12		
IN020-002	3/10		3/12		
IN020-003	3/10		3/12		

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