

**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

1.0	<b>PHA Information</b>				
	PHA Name: Madison County Housing Authority			PHA Code: IL015	
	PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard	<input checked="" type="checkbox"/> HCV (Section 8)			
PHA Fiscal Year Beginning: (MM/YYYY): 01/2011					
2.0	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above)		Number of HCV units: 997 authorized		
Number of PH units: 371					
3.0	<b>Submission Type</b>				
<input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	<b>PHA Consortia</b> <input checked="" type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	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	<b>Mission.</b> 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:  See attachment 5.1.				
5.2	<b>Goals and Objectives.</b> 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.  See attachment 5.2.				
6.0	<b>PHA Plan Update</b>				
(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:  The following plan elements have been revised: eligibility, selection and admission policies, resident reporting, termination of lease, financial resources, operation and management, fiscal year audit, payment standards, and asset management. See attachment 6.0a.					
(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.  The public may obtain copies of the 5 Year and Annual PHA Plan at the MCHA Central Office located at 1609 Olive Street, Collinsville, IL.					
7.0	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>				
8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> 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	<b>Capital Fund Program Five-Year Action Plan.</b> 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	<b>Capital Fund Financing Program (CFFP).</b> <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	<p><b>Housing Needs.</b> 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>See attachment 9.0.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> 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: <b>Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p>See attachment 9.1.</p>
10.0	<p>Additional <b>Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>See attachment 10a.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>See attachment 10b.</p>

11.0	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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## **Attachments to HUD Form 50075**

### **Attachment 5.1 Mission**

The PHA's mission is:

- \* Provide excellent and positive professional management, services, and communications,
- \* Develop and maintain a mutual respect and partnership with residents,
- \* Encourage and maintain community concern and involvement,
- \* Hire, develop, and retain well-trained, efficient employees,
- \* Seek additional funding, both public and private, for affordable housing and resident programs, and
- \* Require innovation and accountability in the utilization of all Madison County Housing Authority resources.

### **Attachment 5.2 Goals and Objectives**

*MCHA has a goal to expand the supply of decent, safe, affordable housing.*

In order to reach this goal, MCHA has set the following objectives: to apply for additional rental vouchers if appropriate, to maintain low public housing vacancies, to leverage private or other public funds to create additional housing opportunities, and to acquire or build new developments.

*MCHA has a goal to improve the quality of assisted housing.*

In order to reach this goal, MCHA has set the following objectives: to improve public housing management scores, to improve voucher management (SEMAP) score, to increase customer satisfaction, to make concentrated efforts to improve management, to renovate or modernize public housing units, to demolish or dispose of obsolete public housing, and to provide replacement public housing units and replacement or relocation vouchers.

*MCHA has a goal to increase assisted housing choices.*

In order to reach this goal, MCHA has set the following objectives: to conduct outreach efforts to potential voucher landlords, and to implement site-based waiting lists at Washington Avenue Apartments, Alton Pointe Apartments, Meachum Crossing Apartments, 21<sup>st</sup> Century Homes, Collinsville Commons and at other developments.

*MCHA has a goal to improve community quality of life and economic vitality.*

In order to reach this goal, MCHA has set the following objectives: to provide an improved living environment, to implement measures to promote income mixing in public housing by

assuring access for lower income families into higher income developments, to implement public housing security improvements, to designate developments for particular resident groups. (possible designation change at Olin and Braner Buildings)

*MCHA has a goal to promote self-sufficiency and asset development of assisted households.* In order to reach this goal, MCHA has set the following objectives: to increase the number and percentage of employed persons in assisted families, and to provide or attract supportive services to improve assistance recipients' employability.

*MCHA has a goal to ensure equal opportunity and to affirmatively further fair housing.* In order to reach this goal, MCHA has set the following objectives: to undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability, to 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, and to undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.

### **Attachment 6.0a Plan Element Revisions since last submission**

#### **1. Eligibility, Selection and Admission Policies, including deconcentration and Wait List Procedures**

The MCHA Admissions and Occupancy Plan (ACOP) and the Section 8 Administrative Plan are updated periodically as necessary. To obtain a copy of the most recent version of these documents, please visit the MCHA Central Office or any of the public housing or mixed finance complex offices (Braner, Northgate, Garesche, Olin, Washington Avenue, or Alton Pointe)

A summary of the changes made to both plans since the submission of the last PHA Agency Plan is provided below.

ACOP changes effective June 17, 2010—Provision added requiring residents to report all changes in income or household circumstances in writing within 15 business days of the date the change takes effect. MCHA will conduct an interim reexamination for the reported change. Rent increases are effective on the first day of the month following 30 days of the date of change in income. Family will be notified 30 days in advance. Once rental rate is established, it shall remain in effect until the effective date of the next annual re-exam, unless another interim re-exam is warranted or resident elects to change from a flat rent calculation method to an income based method.

Provision added to clarify the requirement of a 30 day notice for resident initiated lease termination. If resident does not provide a 30 day notice or tenant moves before the end of the 30 day notice, the security deposit is retained by MCHA.

In the event of a move out beyond resident’s control, management will review on a case by case basis and make a decision regarding whether the security deposit shall be retained.

Regarding the death of resident(s), a personal representative of the resident’s estate may terminate the lease upon 30 days written notice. The termination of the lease shall not relieve resident’s estate from any liabilities for any tenant charges. If rent is paid until the end of the month, personal representatives may use this time to remove personal belongings. If the personal belongs remain in the unit until the following month, the rent will be pro-rated.

Clarification was added to the ACOP regarding the timing of rent decreases and rent increases.

If resident is no longer able to comply with the provisions of the lease (by reason of mental or physical impairment) and landlord is unable to make a reasonable accommodation to enable resident to comply with lease, then action will be taken. MCHA staff will assist resident with suitable service and housing referrals.

Admin Plan Change effective 07/2010—Households requesting Section 8 rental assistance will be denied if any household member is currently engaged in, or has been engaged in criminal activities within the past five years. (see Admin Plan for list of activities).

Section 8 Payment Standards were approved by the Board in September, 2010.

**2. Statement of Financial Resources**

<b>Sources and Uses of Funds</b>		
<b>Anticipated Sources of Funds</b>	<b>Anticipated Funding</b>	<b>Anticipated Uses of Funds</b>
Operating Funds (HUD)	1,150,000	Operations
Capital Fund Grant (HUD)	650,000	Capital improvements
Replacement Housing Factor Grant (2 <sup>nd</sup> 5 Year Increment—1 <sup>st</sup> Year) (HUD)	400,000	Development of new public housing units
HCV Section 8 Program (HUD)	5,460,279	HAP payments, administrative
HCV Family Self-Sufficiency (FSS) Coordinator (Grant)	32,000	FSS Coordinator
Community Services Block Grant	12,000	FSS Coordinator
Available CFP and RHF Funds		Capital Improvements Public Housing Developments
IL06P015501-10	626,696	“
IL06P015501-07	256,736	“
IL06P015501-08	499,611	“
IL06P015501-09	760,961	“
IL06S015501-09 Stimulus Funds	1,568,680	“

IL06R015501-08	719,221	Development of new public housing units
IL06R015501-09	488,787	“
	191,443 501-10-2	
	629,525 501-10-1	
	419,242 501-07	
Rental Income from Public Housing Units	400,000	Operations of public housing
<b>Other income</b>		
Investments	35,000	operations
Back rent debts to MCHA	20,000	Section 8 Program, UIG debt
CFP and RHF Loan repayments	5,000	Affordable housing
Proceeds from lease of property AMP 611	5,748	Operations of AMP
Participation fee Alton Pointe	60,000	Affordable housing
<b>Total resources</b>		

**3. Rent Determinations—No revisions.**

**4. Operations and Management**

4 (a) See Organizational Chart in Additional Requirements Section of Plan

4 (b) HUD Programs Under PHA Management

<i>Program Name</i>	<i>Units or Vouchers</i>	<i>Expected Turnover</i>
Public Housing	375 units	57
Section 8 Vouchers	972 authorized	207
Section 8 Mod Rehab	25 units	5
Section 8 New Const.	92 units	19
Developments		
Family Self-Sufficiency	70 slots	10

**5. Grievance Procedures—An impartial staff person will conduct all grievance hearings.**

**6. Designated Housing for Elderly and Disabled Families—Possible revision to make Braner and Olin Building (currently elderly and disabled) elderly buildings.**

**7. Community Service and Self-Sufficiency—No revisions.**

**8. Safety and Crime Prevention—MCHA will implement the addition of security cameras on each floor and in all elevators at the Braner Building if funding permits.**

**9. Pets—No revisions.**

**10. Civil Rights Certification—Not applicable.**

**11. Fiscal Year Audit—No revisions.**

**12. Asset Management –See Public Housing Asset Management Table.**

MCHA Public Housing Asset Management Table								
Development ID		Activity Description						
Name, Number, Location	# of Units	Capital Fund Program Parts 11 and III	Development Activities	Demolition Disposition	Designated Housing	Conversion Component	Homeowner Component	Other
Viola Jones, Venice AMP 127	37	See Exhibit 8.1 and 8.2	Possible redevelopment of site or site nearby If suitable with mixed finance housing	<b>Approved for Disposition in May, 2010.</b>	NA	NA	NA	
Garesche Homes, Madison AMP 127	78	See Exhibit 8.1 and 8.2	Possible redevelopment of site with mixed finance housing. In interim, make security improvements.	<b>Approved for Disposition in May, 2010.</b>	NA	NA	NA	
Northgate Homes AMP 611	99	See Exhibit 8.1 and 8.2 Invest CFP Funds to Renovate	Possible HUD Competitive Funding for Energy Efficiency or Green Improvements	Proposed for demolition disposition in 2013	NA	NA	NA	
Braner Building, Collinsville, AMP 611 (rehab and unit conversion in progress)	69*	See Exhibit 8.1 and 8.2 Invest CFP Funds to Renovate	Utilize ARRA Stimulus Funds for Needed Rehab	NA	Elderly Disabled	NA	NA	
Olin Building, East Alton AMP 611	59	See Exhibit 8.1 and 8.2 Invest CFP Funds to Renovate	Possible HUD Competitive Funding for Energy Efficiency or Green Improvements	NA	Elderly Disabled	NA	NA	

**13. Violence Against Women Act (VAWA)**

In compliance with HUD Notices PIH 2006-23 and PIH 2007-5 pertaining to the passage of the Violence Against Women Act and Department of Justice Reauthorization Act of 2005, Madison County will prohibit the eviction of, and removal of assistance from, certain persons living in public or Section 8 assisted housing if the asserted groups for such action is an instance of domestic violence, dating violence, sexual assault, or stalking, as the terms are

defined in Section 3 of the United States Housing Act of 1937 as amended by VAWA (42 USC 13925). All related policy changes are specifically defined in the Administrative and Continued Occupancy Policy (ACOP) and the Section 8 Administrative Plan.

**Attachment 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** In 2010-2011, MCHA intends to redevelop the Garesche and Viola Jones existing public housing sites (AMP 127) in the cities of Madison and Venice. The redevelopment may occur on these two sites or on a site in the same neighborhood if appropriate. Future redevelopment efforts will include the Northgate Homes Complex in Collinsville. The MCHA will utilize RHF funds for the redevelopment of some public housing units and may partner with various non-profits to produce affordable housing.
- (b) **Demolition and/or Disposition** In early 2010, MCHA made application to HUD for the disposition of the Garesche and Viola Jones public housing projects in support of affordable housing development activities. HUD approved the Disposition application for both developments in May, 2010.
- (c) **Project Based Vouchers** MCHA expects to continue to utilize 30 Project Based Vouchers for various affordable housing developments, including new mixed finance developments during FY 2011. These vouchers will be targeted to new construction or newly rehabilitated rental units in areas undergoing significant revitalization with on-going public/private investment, to developments with a mixture of income levels served, and in areas with stabilized or decreasing poverty rates. Sites proposed must be adequate for number of units proposed and have adequate utilities to serve development.

**Attachment 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Reports—See attachment.**

**Attachment 8.2 Capital Fund Program Five-Year Action Plan—See attachment.**

**Attachment 9.0 Housing Needs of Families in the Served by the PHA (2005 Con Plan)**

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford-ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access-ibility</b>	<b>Size</b>	<b>Loca-tion</b>
Income <= 30% of AMI	5652	na	na	na	na	na	na
Income >30% but <=50% of AMI	3586	na	na	na	na	na	na
Income >50% but	3571	na	na	na	na	na	na



<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
<80% of AMI							

## Housing Needs of Families on the Various MCHA Waiting Lists

<b>Garesche Homes Public Housing Waiting List</b>		
	# of families	% of total families
Waiting list total	382	100
Families with children	252	66
Elderly families	3	Less than 1
Families with Disabilities	63	16
Race/ethnicity White	68	17.8
Race/ethnicity Black	308	80.6
Race/ethnicity Am. Indian	3	.78
Race/ethnicity Asian	2	Less than 1
Characteristics by Bedroom		
Size		
1BR	122	21.5
2 BR	163	50.6
3 BR	91	25.1
4 BR	1	.5
5 BR	5	2.1
5+ BR		
This waiting list is currently open for 5 bedroom units. We expect to open this list later this year.		

<b>Viola Jones Public Housing Waiting list City of Venice</b>		
	# of families	% of total families
Waiting list total	294	
Families with children	206	70
Elderly families	2	Less than 1
Families with Disabilities	45	15
Race/ethnicity White	29	9.8
Race/ethnicity Black	262	89.11
Race/ethnicity Am Indian	2	Less than 1
Race/ethnicity Asian	0	
Race/ethnicity Hispanic	0	
Characteristics by Bedroom		
Size		
1BR	84	16.86
2 BR	134	57
3 BR	67	22
4 BR	8	3.4
The waiting list is currently closed and we expect to open the list later this PHA Plan year.		

Washington Avenue Apartments Public Housing Waiting List (City of Madison)		
	# of families	% of total families
Waiting list total	140	
Families with children	132	94
Elderly families	0	
Families with Disabilities	22	16
Race/ethnicity white	21	15
Race/ethnicity black	117	84
Race/ethnicity amer. Indian	1	Less than 1
Characteristics by Bedroom Size		
1BR	0	2
2 BR	93	59
3 BR	47	40
This waiting list is currently closed. We do expect to reopen the list later in PHA Plan year.		

Northgate Homes Public Housing Complex Waiting List, City of Collinsville		
	# of families	% of total families
Waiting list total	229	100
Families with children	147	64
Elderly families	6	3
Families with Disabilities	50	22
Race/ethnicity white	67	29
Race/ethnicity black	158	69
Race/ethnicity amer. Indian	3	1
Race/ethnicity Hawaiiin/Pac Islander	1	Less than 1
Race/ethnicity asian	0	0
Race/ethnicity Hispanic	0	0
Characteristics by Bedroom Size		
1BR	71	27
2 BR	88	35
3 BR	59	30
4 BR	11	7
5 BR	0	0
5+ BR		
This waiting list is closed currently and we expect to reopen the list later in the fiscal year.		

Olin Building Public Housing Waiting List		
	# of families	% of total families
Waiting list total	37	100
Families with children	5	14
Elderly families	4	11
Families with Disabilities	29	78
Race/ethnicity white	23	62
Race/ethnicity black	14	37
Race/ethnicity amer. Indian	0	0
Race/ethnicity asian	0	0
Race/ethnicity Hispanic	0	0
Characteristics by Bedroom Size		
0 BR	6	22
1BR	24	57
2 BR	7	21
3 BR		
4 BR		
5 BR		
5+ BR		
This waiting list is currently open as of 7.14.2010.		

Braner Building Public Housing Waiting List –City of Collinsville			
	# of families	% of total families	
Waiting list total	36	100	
Families with children	4	11	
Elderly families	3	8	
Families with Disabilities	30	83	
Race/ethnicity white	21	58	
Race/ethnicity black	15	42	
Race/ethnicity amer. Indian	0	0	
Race/ethnicity asian	0	0	
Characteristics by Bedroom Size			
0 BR	19	56	
1BR	12	33	
2 BR	5	10	
This waiting list is currently open as of 7.14.2010.			

Section 8 tenant-based assistance waiting list		
	# of families	% of total families
Waiting list total	622	100
Families with children	450	72
Elderly families	18	2
Families with Disabilities	145	23
Race/ethnicity white	128	21
Race/ethnicity black	481	77
Race/ethnicity amer. Indian	5	Less than 1
This waiting list is currently closed but we expect to reopen the list later in the PHA Plan year.		

Alton Pointe Project Based Vouchers Development Waiting list, City of Alton		
	# of families	% of total families
Waiting list total	62	100
Families with children	38	61
Elderly families	1	2
Families with Disabilities	13	20
Race/ethnicity white	14	23
Race/ethnicity black	46	74
Race/ethnicity amer. Indian	3	3
Characteristics by Bedroom Size		
1BR	21	30
2 BR	24	37
3 BR	17	32
4 BR	0	0
This waiting list is closed currently and we expect to reopen the list later in the PHA Plan year.		

Alton Pointe Apartments Public Housing Waiting List, City of Alton			
	# of families	% of total families	Annual Turnover
Waiting list total	232	100	
Families with children	145	63	
Elderly families	4	2	
Families with Disabilities	56	24	
Race/ethnicity white	73	31	
Race/ethnicity black	157	67	
Race/ethnicity Amer. Indian	1	1	
Race/ethnicity Asian/Pac islander	1	Less than 1	
Characteristics by Bedroom Size			
1BR	82	27	
2 BR	102	41	
3 BR	48	31	
This waiting list is currently closed and we expect to reopen the list later in the PHA Plan year.			

Meachum Crossing Apartments Project-based vouchers waiting list, City of Venice			
	# of families	% of total families	Annual Turnover
Waiting list total	159	100	
Families with children	113	71	
Elderly families	3	2	
Families with Disabilities	29	18	
Race/ethnicity white	15	9	
Race/ethnicity black	141	88	
Race/ethnicity amer. Indian	2	1	
Characteristics by Bedroom Size			
1BR	35	21	
2 BR	89	50	
3 BR	35	28	
This waiting list is currently open as of 7.14.2010.			

Meachum Crossing Apartments Public Housing Units Waiting List, City of Venice		
	# of families	% of total families
Waiting list total	111	100
Families with children	76	68
Elderly families	4	4
Families with Disabilities	15	14
Race/ethnicity white	10	9
Race/ethnicity black	99	89
Race/ethnicity amer. Indian	1	Less than 1
Race/ethnicity asian/Pac islander	0	0
Race/ethnicity Hispanic	0	
Characteristics by Bedroom		
Size		
1BR	24	16
2 BR	52	46
3 BR	33	37
This waiting list is currently open as of 7.14.2010.		

## **Attachment 9.1 Strategy for Addressing Housing Needs**

MCHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year includes the following steps.

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

- Reduce turnover time for vacated public housing units
- Continue to reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies

### **Step 2: Increase the number of affordable housing units by:**

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

### **Step 3. Target available assistance to families at or below 30 % of AMI (addressing need for Families at or below 30% of median)**

- Adopt rent policies to support and encourage work

### **Step 4: Target available assistance to families at or below 50% of AMI (addressing need for Families at or below 50% of median)**

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work

### **Step 5: Target available assistance to the elderly (addressing needs of the elderly)**

- Seek designation of public housing for the elderly

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

**Step 6: Target available assistance to Families with Disabilities (addressing needs of the disabled)**

Carry out the modifications needed in public housing based on the section 504 Needs Assessment

Apply for special-purpose vouchers targeted to families with disabilities, should they become available

Affirmatively market thru local non-profit agencies that assist families with disabilities

**Step 7: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs (addressing needs of Races or ethnicities with disproportionate housing needs)**

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

**Step 8: Conduct activities to affirmatively further fair housing**

Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

Market the section 8 program to owners outside of areas of poverty /minority concentrations

Work with landlord organizations to expand list of landlords participating in the Section 8 program

**Reasons for Selecting Various Strategies and Steps**

Funding constraints

Staffing constraints

Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA

Influence of the housing market on PHA programs

Results of consultation with local or state government

Results of consultation with residents and the Resident Advisory Board

Results of consultation with advocacy groups

**Attachment 10.0a Progress Meeting Mission and Goals**

**Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

PHA Goal: Expand the supply of assisted housing

Objectives:

**Apply for additional rental vouchers: If they become available**

2010 update MCHA is proposing to demolish all dilapidated and functionally obsolete public housing complexes including the Garesche, Viola Jones, and Northgate homes complexes.

As such, it will be necessary to request relocation vouchers for these displaced tenants in the future.

**Reduce public housing vacancies:**

*Vacancies at MCHA are currently 10.9% as of 7/13/2010 \**

<i>Vacant</i>	<i>Total</i>	<i>Development</i>
6	21	Alton Pointe Apartments, Alton
0	7	Washington Avenue Apartments, Madison
3	78	Garesche Homes, Madison
3	37	Viola Jones Homes Venice
0	99	Northgate Homes, Collinsville
2	59	Olin Building, East Alton
27 *	69*	Braner Building * Undergoing Major Rehab
0	5	Meachum Crossing
41	375	<i>Total</i>

*(\* Percentage vacancy effected by rehabilitation of Braner Building. Excluding Braner Building, MCHA vacancy rate is 3.7% as of 7/13/2010.)*

**Leverage private or other public funds to create additional housing opportunities:**

*Madison County Housing Authority successfully leveraged its replacement factor funds on the new Meachum Crossing Apartments, a 78 unit mixed finance rental development with 5 public housing units, and a total development budget in excess of \$16 million. Madison County Housing Authority will continue to leverage its replacement housing factor funds and utilize on the redevelopment projects planned in Madison, Venice, and Collinsville.*

**Acquire or build units or developments**

*See above section action. MCHA will produce new affordable housing units through affiliate and non-related organizations.*

Other (list below)

**Work with other agencies and developers to expand housing using allotment of project based vouchers**

MCHA will continue to work with various affordable housing developers to implement the project based voucher program.

PHA Goal: Improve the quality of assisted housing

Objectives:

Improve public housing and SEMAP scores

It remains our goal to become a HUD “high performer” housing authority.

Increase customer satisfaction: work with resident groups to improve living conditions, reduce turnover rate

Concentrate on efforts to improve specific management functions

*Update MCHA has privatized both HQS and UPCS inspections in hopes of improving effectiveness and efficiency. MCHA managers and Section 8 caseworkers have received continued training by Nan McKay, NAHRO, and MCHA Management. MCHA has hired*



*PHA finance to assist with Asset Management transition and has updated software to accommodate HUD mandated changes. MCHA has increased efforts at collection of back rent debts from Section 8 and public housing programs.*

Renovate or modernize public housing units:

*MCHA undergoing major rehabilitation and unit conversion at the Braner Building. Rehab is expected to be completed by mid 2011.*

Demolish or dispose of obsolete public housing

HUD approved the disposition application of the Garesche and Viola Jones sites in May, 2010. As such, MCHA intends to redevelop the Garesche and Viola Jones public housing sites with new affordable rental units.

Provide replacement public housing:

*Update*

*7 public housing units date of full availability at the Washington Avenue Apartments March 31, 2005.*

*21 public housing units certificate of occupancy of May 31, 2008 at the Alton Pointe Apartments.*

*5 public housing units at Meachum Crossing Apartments expected were available for occupancy in November, 2009.*

Provide replacement vouchers:

*HUD has informed us that replacement vouchers are not available at this time.*

PHA Goal: Increase assisted housing choices

Objectives:

Conduct outreach efforts to potential voucher landlords

*Our Executive Director and Section 8 Director have met with various landlord groups to promote the HCV Voucher Program.*

Increase voucher payment standards if funding available

MCHA Board of Commissioners approved utilizing 100% of the fair market rents as payment standards for the Section 8 program effective November, 2009.

Implement public housing or other homeownership programs: MCHA staff will refer potential homebuyers to Madison County Community Development, who administer various homeownership programs.

Implement public housing site-based waiting lists: *Washington Avenue Apartments, Alton Pointe Apartments, Meachum Crossing, and 21<sup>st</sup> Century Homes and any future mixed finance or project based voucher developments will have site based waiting lists.*

**HUD Strategic Goal: Improve community quality of life and economic vitality**

PHA Goal: Provide an improved living environment

Objectives:

Implement measures to de-concentrate poverty by bringing higher income public housing households into lower income developments:

*The Washington Avenue, Alton Pointe, and Meachum Crossing contain units affordable to tenants at 30%, 50%, and 60% of the median income. Future affordable housing development efforts will continue to provide housing for a variety of income levels.*

Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:

The most recent mixed finance developments, containing public housing units, (Washington Avenue, Alton Pointe, and Meachum Crossing) contain a mixture of income levels, and market rate units.

Implement public housing security improvements:

Meachum Crossing Apartments will contain security cameras, and security alarms in all units, and have a gated secure entry for the development. MCHA intends to put security cameras on all floors at the Braner Building during FY 2010.

Designate developments or buildings for particular resident groups (elderly, persons with disabilities) *Olin and Braner are elderly disabled developments. MCHA may pursue the possibility with HUD of having the Braner and Olin Building serve only the near elderly and elderly.*

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

Increase the number and percentage of employed persons in assisted families:

MCHA operates the FSS Program for Section 8 tenants and will begin to encourage better outreach of social services to residents in public housing developments.

*Current Community Service Data as of 07/14/2010(tenants of public housing with zero income must provide community service unless elderly or disabled)*

<i>Development</i>	<i># of C.S.</i>	<i># of Occupied Units</i>
Alton Pointe	7	15
Braner, Coll	0	42 (bldg under rehab, elderly disabled)
Garesche, Madison	23	75
Viola Jones, Venice	15	34
Northgate, Coll	29	99
Wash Ave, Madison	0	7
Meachum Crossing	0	5
Olin	0	57 (elderly/disabled)
Total	74	334

Approximately 22% of tenants are eligible for community service hours.

Provide or attract supportive services to improve assistance recipients' employability:

Information on Madison County Employment and Training and two community colleges in the area is distributed to residents.

Provide or attract supportive services to increase independence for the elderly or families with disabilities.

### **Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: The Authority shall mix its public housing development populations as much as possible with respect to race, color, religion national origin, sex, familial status, and disability. *MCHA complies with all EEO requirements and affirmatively furthers fair housing.*

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: *MCHA complies with all EEO requirements and affirmatively furthers fair housing.*

Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: *The Authority will work with local agencies representing persons with all types of disabilities to assist them in obtaining affordable housing.*

Other: All MCHA staff has been trained in areas of fair housing and equal opportunity and cultural diversity.

### **Attachment 10.0b Significant Amendment and Substantial Deviation/Modification**

Madison County Housing Authority has defined Substantial Deviation of Annual Plans from the 5 Year Plan and Significant Amendment or Modification of the Annual Plan as follows:

- changes to rent or admissions policies or organization of the waiting list;
- additions of non-emergency work items (items not included in the current Annual Statement or 5 Year Action Plan) or change in use of replacement reserve funds under the Capital Fund;
- and any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

The PHA will consult with the Resident Advisory Board on proposed significant amendments to the Plan. In addition, the PHA will ensure consistency with the Madison County Consolidated Plan regarding any proposed amendments.

# **Other HUD Required Submittals**

## **Protections Under the Violence Against Women Reauthorization Act of 2005 (VAWA)**

The Madison County Housing understands that the primary objectives of the VAWA are to reduce violence against women and to protect, or increase the protection of, the safety and confidentiality of women who are victims of abuse.

To assist with this effort, the MCHA will provide all applicants with notification of their protections and rights under VAWA at the time they request an application for housing assistance. The notice will explain the protections afforded under the law, inform each applicant of MCHA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

Include in all notices of denial a statement explaining the protection against denial provided by VAWA.

Provide all tenants with notification of their protections and rights under VAWA at the time of admission and annual reexamination.

The notice will explain the protections afforded under the law, inform the tenant of MCHA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

Include in all lease termination notices a statement explaining the protection against termination or eviction provided by VAWA.

Below is from the ACOP:

### **NOTIFICATION TO ALL APPLICANTS**

The MCHA will provide all applicants with notification of their protections and rights under VAWA at the time they request an application for housing assistance.

The notice will explain the protections afforded under the law, inform each applicant of the MCHA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The MCHA will also include in all notices of denial a statement explaining the protection against denial provided by VAWA.

## NOTIFICATION TO TENANTS

VAWA requires MCHAs to notify tenants assisted under public housing of their rights under this law, including their right to confidentiality and limits thereof.

The MCHA will provide all tenants with notification of their protections and rights under VAWA at the time of admission and at annual reexamination.

The notice will explain the protections afforded under the law, inform the tenant of MCHA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The MCHA will also include in all lease terminations notices a statement explaining the protection against termination or eviction provided by VAWA.

Below is from Admin Plan:

## NOTIFICATION TO PARTICIPANTS

VAWA requires MCHA to notify public housing program participants of their rights under this law, including their right to confidentiality and limits thereof.

The MCHA will provide all participants with notification of their protections and rights under VAWA at the time of admission and at annual reexamination.

The notice will explain the protections afforded under the law, inform the participant of MCHA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The MCHA will also include in all assistance termination notices a statement explaining termination protection provided by VAWA.

## NOTIFICATION TO APPLICANTS

The MCHA will provide all applicants with notification of their protections and rights under VAWA at the time they request an application for housing assistance.

The notice will explain the protections afforded under the law, inform each application of MCHA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The MCHA will also include in all notices of denial a statement explaining the protection against denial provided by VAWA.

## NOTIFICATION TO OWNERS AND MANAGERS

VAWA requires MCHA to notify owners and managers of their rights and responsibilities under this law.

Information property owners and managers of their screening and termination responsibilities related to VAWA. The MCHA may utilize any or all of the following means to notify owners of their VAWA responsibilities:

As appropriate in day-to-day interactions with owners and managers, inserts in correspondence, owner workshops and or meetings, orientations and other mailings, signs in lobby and or mass mailings which include model VAWA certification form.

## **Carbon Monoxide Alarm Detector Act Policy**

Madison County Housing Authority will ensure that all public housing units contain at least one approved carbon monoxide detector alarm in operating condition within 15 feet of every room used for sleeping purposes.

In addition, carbon monoxide detectors were installed in all MCHA units during FY 2007 in compliance with the Carbon Monoxide Alarm Detector Act Policy.

In compliance with Illinois Public Act 094-0741, effective January 1, 2007, Madison County Housing Authority will ensure landlords participating in the Section 8 program install carbon monoxide detectors in all buildings containing bedrooms and sleeping facilities.



## **MCHA Resident Advisory Board Members**

Lester Campbell (Section 8 resident)

Bill Easler (May Building)

Robert Blevins (Stevens Building)

Rhonda Clark (Section 8 tenant)

Ardies Richardson (Viola Jones)

Katha Edmonds (Section 8 tenant)

Cosonja McClellan (Garesche Homes)

## Resident Comments and Minutes from the Public Hearing on draft Annual Plan and 5 Year Plan

A Resident Advisory Board meeting was held on July 14, 2010 at the Meachum Crossing Apartments in Venice.

The following items were discussed at the meeting: timeline for Annual and 5 Year Plan completion, draft Annual and 5 Year Plan, deadline for submitting comments for the annual plan, and Stimulus Funding use. Future plans for redevelopment of the Garesche Homes and Viola Jones projects were discussed. The MCHA role of continuing to develop affordable housing, including new public housing units, was discussed.

The Resident Advisory Board members in attendance did not have any comments on the draft Plan that was distributed, other to express a general agreement with discussion. Resident Advisory Board members were requested to submit written comments to the MCHA Executive or Deputy Director by September 9, 2010 (date of public meeting).

## Minutes of Public Meeting held on September 9, 2010 on draft Annual and 5 Year Plan

The MCHA staff held a public meeting at 11 a.m. at the Central Office, 1609 Olive Street, in Collinsville, IL to discuss and receive comments on the draft Annual and 5 Year PHA Plan. MCHA staff were in attendance at the meeting. However, no other people attended the public meeting. In addition, MCHA did not receive any written comments regarding the draft Annual and 5 Year Plan.

Amendment to the  
Madison County Housing Authority Procurement Policy  
Relating to the Receipt of  
American Recovery and Reinvestment Act Capital Funds Grants  
(ARRA funds)  
Resolution Approved by MCHA Board of Commissioners 10/8/09

Consistent with the Public Housing Notices PIH 2009-12 and PIH 2009-31, the following form shall be included as a part of any solicitation and award pertaining to ARRA funds.

In addition, this Amendment to the Procurement Policy shall expire upon the full expenditure of the ARRA funds.

**Verification of Compliance with Section 1605 of the ARRA Act of 2009**

**Invitation For Bids (IFB) No. \_\_\_\_\_,**

**Section 1605 of the Recovery Act: Buy American (if applicable)**

**Section 1605 of the Recovery Act provides-**

**Use of American Iron, Steel, and Manufactured Goods. (a) None of the funds appropriated or otherwise made available by this Act may be used for a project for the construction, alteration, maintenance, or repair of a public building or public work unless all of the iron, steel and manufactured goods used in the project are produced in the United States.**

**(b) Subsection (a) shall not apply in any case or category of cases in which the head of the Federal department or agency involved finds that--**

**(1) applying subsection (a) would be inconsistent with the public interest (2) iron, steel and the relevant manufactured goods are not produced in the United States in sufficient and reasonably available quantities and of a satisfactory quality; or (3) inclusion of iron, steel, and manufactured goods produced in the United States will increase the cost of the overall project by more than 25 percent.**

**(c) If the head of a Federal department or agency determines that it is necessary to waive the application of subsection (a) based on a finding under subsection (b), the head of the department or agency shall publish in the Federal Register a detailed written justification as to why the provision is being waived.**

**(d) This section shall be applied in a manner consistent with United States obligations under international agreements.**

**The undersigned bidder hereby acknowledges receipt of the above applicable law and verifies that the bid he/she has submitted in response to the above noted IFB is in full compliance with the listed requirements. Further, the bidder verifies that he/she will, if awarded a contract by the HA as a result of the above noted IFB, submit to the HA documentation that will verify compliance with the requirements of the above Section 1605.**

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<b>Signature</b>	<b>Date</b>	<b>Printed Name</b>	<b>Company</b>
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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

Part I: Summary		FFY of Grant: 2007 FFY of Grant Approval:	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015501-07 Date of CFFP:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFF Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>	729,242.00	310,000.00
		729,242.00	729,242.00

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.  
<sup>4</sup> 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

<b>Part I: Summary</b>		FFY of Grant: 2007	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: I Replacement Housing Factor Grant No: L06R015501-07 Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Reserve for Disasters/Emergencies			
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHIA		
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)	729,242.00	729,242.00
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 <sup>1</sup>		Signature of Public Housing Director	
Date 07/20/2010		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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

<b>Part II: Supporting Pages</b>				<b>Federal FFY of Grant: 2007</b>				
<b>PHA Name:</b> MADISON COUNTY HOUSING AUTHORITY				<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06R015501-07 CFPP (Yes/No): Replacement Housing Factor Grant No:				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AGENCY WIDE	DEVELOPMENT ACTIVITY	1499		729,242.00	729,242.00	729,242.00	310,000.00	
<b>TOTALS</b>				729,242.00	729,242.00	729,242.00	310,000.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b> <b>PHA Name: MADISON COUNTY HOUSING AUTHORITY</b>							<b>Federal FFY of Grant: 2007</b>	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)	Original Expenditure End Date	Actual Expenditure End Date	Reasons for Revised Target Dates		
	Original Obligation End Date	Actual Obligation End Date						
AGENCY WIDE DEVELOPMENT ACTIVITY	09/12/2009	09/12/2009	09/12/2011	09/12/2011	09/12/2011			

<sup>1</sup> 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.



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

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

Part I: Summary		FFY of Grant: 2008 FFY of Grant Approval:		
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015501-08 Date of CFFP:		
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			
3	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)			
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities <sup>4</sup>	719,221.00	719,221.00	0.00

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

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

Part I: Summary		FFY of Grant: 2008 FFY of Grant Approval:	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: 1 Replacement Housing Factor Grant No: L06R015501-08 Date of CFFP:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup> Obligated
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)	719,221.00	719,221.00
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		Date 07/20/2010,	Signature of Public Housing Director
			Date

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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 II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06R015501-08 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AGENCY WIDE	DEVELOPMENT ACTIVITY	1499		719,221.00	719,221.00	719,221.00		
<b>TOTALS</b>				719,221.00	719,221.00	<input type="checkbox"/>	719,221.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>			<b>Federal FFY of Grant: 2008</b>		
<b>Development Number Name/PHA-Wide Activities</b>	<b>All Fund Obligated (Quarter Ending Date)</b>		<b>All Funds Expended (Quarter Ending Date)</b>		<b>Reasons for Revised Target Dates<sup>1</sup></b>
	<b>Original Obligation End Date</b>	<b>Actual Obligation End Date</b>	<b>Original Expenditure End Date</b>	<b>Actual Expenditure End Date</b>	
	<b>09/12/2011</b>	<b>09/12/2011</b>	<b>09/12/2013</b>	<b>09/12/2013</b>	
<b>AGENCY WIDE DEVELOPMENT ACTIVITY</b>					

<sup>1</sup> 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.

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

Part I: Summary		FFY of Grant: 2009		
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>		FFY of Grant Approval:		
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015501-09 Date of CFFP:				
Type of Grant	<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies			
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			
3	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)			
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities <sup>4</sup>	407,486.00	488,787.00	0.00

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: 1 Replacement Housing Factor Grant No: L06R015501-09 Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Reserve for Disasters/Emergencies <input type="checkbox"/>			
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHIA		
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)	407,486.00	488,787.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date 07-20-2010		Date	

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

<b>Part II: Supporting Pages</b>		<b>Federal FFY of Grant: 2009</b>					
<b>PHA Name:</b> MADISON COUNTY HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06R015501-09 CFPP (Yes/ No): Replacement Housing Factor Grant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work	
				Original	Revised <sup>1</sup>		Funds Obligated <sup>2</sup>
AGENCY WIDE	DEVELOPMENT ACTIVITY	1499		407,486.00	488,787.00	488,787.00	0.00
<b>TOTALS</b>				<b>407486.00</b>	<b>488787.00</b>	<b>488,787.00</b>	<b>0.00</b>

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

Part III: Implementation Schedule for Capital Fund Financing Program					Federal FFY of Grant: 2009
PHA Name: MADISON COUNTY HOUSING AUTHORITY					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AGENCY WIDE DEVELOPMENT ACTIVITY	09/14/2011	09/14/2011	09/14/2013	09/14/2013	

<sup>1</sup> 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.



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

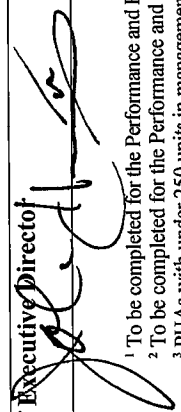
Part I: Summary		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015501-10 Date of CFFP:	
Type of Grant	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: 06/30/2010 <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>	629,525.00	629,525.00

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

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: 1 Replacement Housing Factor Grant No: L06R015501-10 Date of CFFP:			
Type of Grant	<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Revised Annual Statement (revision no: 1 )		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup> 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)	629,525.00	629,525.00
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		Date 07-20-2010	Signature of Public Housing Director
			Date



<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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 II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06R015502-10 CFPP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AGENCY WIDE	DEVELOPMENT ACTIVITY	1499		629,525.00	629,525.00			
<b>TOTALS</b>				<b>629,525.00</b>	<b>629,525.00</b>			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

Part III: Implementation Schedule for Capital Fund Financing Program						Federal FFY of Grant: 2010
PHA Name: MADISON COUNTY HOUSING AUTHORITY						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Original Expenditure End Date	Actual Expenditure End Date
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
AGENCY WIDE DEVELOPMENT ACTIVITY						
DEVELOPMENT ACTIVITY						

<sup>1</sup> 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.

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

Part I: Summary		FFY of Grant: 2010 FFY of Grant Approval:		
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015502-10 Date of CFPP:		
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			
3	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)			
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities <sup>4</sup>	488,787.00		191,443.00

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

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name:	Grant Type and Number	FFY of Grant Approval:	
MADISON COUNTY HOUSING AUTHORITY	Capital Fund Program Grant No: 1 Replacement Housing Factor Grant No: L06R015502-10 Date of CFFP:		
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: 06/30/2010	<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup> 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)	488787.00	191,443.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date 07-20-2010		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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  
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<b>Part II: Supporting Pages</b>			<b>Federal FFY of Grant: 2010</b>					
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: CFPP (Yes/No): Replacement Housing Factor Grant No: IL06R015502-10						
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AGENCY WIDE	DEVELOPMENT ACTIVITY	1499		488,787.00	191,443.00			
<b>TOTALS</b>				<b>488,787.00</b>	<b>191,443.00</b>			

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: MADISON COUNTY HOUSING AUTHORITY					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2010
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AGENCY WIDE DEVELOPMENT ACTIVITY					Reasons for Revised Target Dates
DEVELOPMENT ACTIVITY					

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.



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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015503-09 Date of CFP:	FFY of Grant: 2010 FFY of Grant Approval:
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
Line		Original	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>	176,560.00	176,560.00

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name:	Grant Type and Number	FFY of Grant Approval:	
MADISON COUNTY HOUSING AUTHORITY	Capital Fund Program Grant No: 1 Replacement Housing Factor Grant No: L06R015503-09 Date of CFFP:		
Type of Grant			
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Obligated
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)	176,560.00	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date 07-20-2010		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHIF 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  
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 Expires 4/30/2011

Part II: Supporting Pages		Federal FFY of Grant: 2010					
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Replacement Housing Factor Grant No: IL06R015503-09		Status of Work			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>
AGENCY WIDE	DEVELOPMENT ACTIVITY	1499	176,560.00	176,560.00			
<b>TOTALS</b>			176,560.00	176,560.00			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>							Federal FFY of Grant: 2010
PHA Name: MADISON COUNTY HOUSING AUTHORITY							
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates		
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date			
AGENCY WIDE DEVELOPMENT ACTIVITY							
DEVELOPMENT ACTIVITY	04/01/2012	04/01/2012	04/01/2014	04/01/2014			

<sup>1</sup> 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.

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

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

Part I: Summary		FFY of Grant: 2011 FFY of Grant Approval:	
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R015501-11 Date of CFFP:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
		Obligated	
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs	0.00	
17	1499 Development Activities <sup>4</sup>	629,525.00	629,525.00

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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  
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<b>Part I: Summary</b>		FFY of Grant: 2011	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: 1 Replacement Housing Factor Grant No: L06R015501-11 Date of CFFPP:		<input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies	
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	629,525.00	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>[Signature]</i>		Signature of Public Housing Director	
Date 9/9/10		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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  
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Part II: Supporting Pages		Federal FFY of Grant: 2011						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06R015502-10 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA- Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AGENCY WIDE								
	DEVELOPMENT ACTIVITY	1499		629,525.00				
TOTALS						629,525.00		

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: MADISON COUNTY HOUSING AUTHORITY						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
AGENCY WIDE DEVELOPMENT ACTIVITY						
DEV ACTIVITY	09/30/2012		09/30/2014			

<sup>1</sup> 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.



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

Part I: Summary		Grant Type and Number		FFY of Grant: 2006	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Capital Fund Program Grant No: IL06P015501-06 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010	<input type="checkbox"/> Reserve for Disasters/Emergencies	) )		
Line	Summary by Development Account	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>	Expended
		Revised <sup>2</sup>			
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	204,694.80	144,694.80	79,146.21	
3	1408 Management Improvements	22,528.24	22,528.24	22,490.63	
4	1410 Administration (may not exceed 10% of line 21)	100,428.40	100,428.40	100,428.40	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	117,934.95	117,934.95	117,934.95	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	410,608.17	470,608.17	390,608.57	470,518.57
11	1465.1 Dwelling Equipment—Nonexpendable	74,970.44	74,970.44	74,970.44	74,970.44
12	1470 Non-dwelling Structures	92,309.00	92,309.00	92,309.00	92,309.00
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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

<b>Part I: Summary</b>		FFY of Grant: 2006 FFY of Grant Approval:	
PHA Name: MADISON COUNTY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: IL06P015501-06 Replacement Housing Factor Grant No: Date of CFFP:		
Type of Grant		<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2009 <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,023,474.00	1,023,474.00
21	Amount of line 20 Related to LBP Activities		957,798.20
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 07/20/2010	Signature of Public Housing Director
			Date

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

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part II: Supporting Pages		Federal FFY of Grant: 2006						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P015501-06 CFPP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IL 015-001	STRUCTURAL REPAIRS/AC UNITS	1460		0.00	0.00	0.00	0.00	
	CONSULTANT FEES	1430		3,183.84	3,183.84	3,183.84	3,183.84	COMPLETE
	A/E FEES - Security Fence	1430		258.00	258.00	258.00	258.00	COMPLETE
AMP 127	CONSULTANT FEES	1430		13,463.03	13,463.03	13,463.03	0.00	
IL 015-006	WAREHOUSES	1470		46,154.50	46,154.50	46,154.50	46,154.50	COMPLETE
	A/C UNITS & GUARDS	1460		0.00	0.00	0.00	0.00	
	CONSULTANT FEES	1430		4,041.16	4,041.16	4,041.16	4,041.16	COMPLETE
IL 015-007	NEW APPLIANCES	1465		0.00	0.00	0.00	0.00	
	WAREHOUSES	1470		46,154.50	46,154.50	46,154.50	46,154.50	COMPLETE
IL 015-010	UPGRADE PLUMBING	1460		179,618.00	179,618.00	179,618.40	179,618.00	COMPLETE
	KITCHEN IMPROVEMENTS	1460		101,437.03	101,437.03	101,437.03	101,437.03	COMPLETE
	UNIT CONVERSION/RENOVATION	1460		0.00	0.00	0.00	0.00	
	EIFS EMERGENCY PROJECT	1460		109,553.14	109,553.14	109,553.14	109,553.14	COMPLETE
IL 015-011	PLUMBING	1460		0.00	60,000	60,000	60,000	COMPLETE
	NEW APPLIANCES	1465		74,970.44	74,970.44	74,970.44	74,970.44	COMPLETE
	CONSULTANT FEES	1430		67,954.69	67,954.69	67,954.69	67,954.69	COMPLETE
	PLUMBING IMPROVEMENTS	1460		20,000.00	20,000.00	20,000.00	19,910.40	
AGENCY WIDE	MANAGEMENT IMPROVEMENTS	1408		22,528.24	22,528.24	22,528.24	22,490.63	
	SALARIES & BENEFITS	1410		100,428.40	100,428.40	100,428.40	100,428.40	COMPLETE

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.



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

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

Part III: Implementation Schedule for Capital Fund Financing Program							Federal FFY of Grant: 2006
PHA Name: MADISON COUNTY HOUSING AUTHORITY							Reasons for Revised Target Dates <sup>1</sup>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Actual Expenditure End Date	Actual Expenditure End Date	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date			
IL 015-001	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		
IL 015-002	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		
IL 015-006	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		
IL 015-007	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		
IL 015-010	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		
IL 015-011	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		
AGENCY WIDE	7/17/2008	7/17/2008	7/17/2010	7/17/2010	7/17/2010		

<sup>1</sup> 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.

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

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

Part I: Summary		Grant Type and Number		FFY of Grant: 2007	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Capital Fund Program Grant No: IL06P015501-07 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no: )		
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Final Performance and Evaluation Report	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	154,594.00	154,594.00	154,594.00	79,236.36
3	1408 Management Improvements	30,000.00	30,000.00	30,000.00	14,198.20
4	1410 Administration (may not exceed 10% of line 21)	77,297.00	77,297.00	77,297.00	77,297.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	70,000.00	82,000.00	82,000.00	61,947.87
8	1440 Site Acquisition				
9	1450 Site Improvement	5000.00	0.00	0.00	0.00
10	1460 Dwelling Structures	416,083.00	429,083.00	429,083.00	283,531.19
11	1465.1 Dwelling Equipment—Nonexpendable	20000.00	0.00	0.00	0.00
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 <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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

<b>Part I: Summary</b>		FFY of Grant: 2007	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: IL06P015501-07 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
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)	772,974.00	772,974.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date 07/20/2010		Date	

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

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Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P015501-07 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA- Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IL-015-001	APPLIANCES	1465		0.00	0.00		0.00	
	LANDSCAPING & SITE IMPROVE	1450		0.00	0.00		0.00	
	GUTTERING/DOWNSPOUTS/EXTERIOR IMPROVEMENTS	1460		0.00	0.00		0.00	
IL-015-002	A/C & UNIT GUARDS	1460		0.00	0.00		0.00	
	SITE IMPROVEMENTS W/ LANDSCAPING	1450		0.00	0.00		0.00	
IL-015-006	SEWER IMPROVEMENTS	1460		0.00	0.00		0.00	
	APPLIANCES	1465		0.00	0.00		0.00	
IL-015-010	AC UNITS / GUARDS	1460		158,451.00	158,451.00	158,451.00	91,097.50	
	EMERGENCY GENERATOR	1475		0.00	0.00	0.00	0.00	
	EMERGENCY ELECTRICAL CONSULTANT FEES	1430		7,000.00	7,000.00	7,000.00	5,377.00	
	EMERGENCY ELECTRICAL UPGRADE	1460		89,799.00	89,799.00	89,799.00	89,799.00	COMPLETE
IL-015-011	PLUMBING IMPROVEMENTS	1460		2,858.25	2,858.25	2,858.25	2,800.00	
	PLUMBING IMPROVEMENTS	1460		68,884.31	68,884.31	68,884.31	2,700.00	
	HVAC IMPROVEMENTS	1460		82,664.69	82,664.69	82,664.69	82,664.69	COMPLETE
	CONSULTANT FEES	1430		50,000.00	50,000.00	50,000.00	50,000.00	COMPLETE
	CONSULTANT FEES ASBESTOS	1430		25,000.00	25,000.00	25,000.00	6,570.87	
	PLUMBING: SPRINKLER SYSTEM IMPROVEMENTS	1460		14,470.00	14,470.00	14,470.00	14,470.00	COMPLETE
	PLUMBING; WATER LINE IMPROVEMENTS	1460		11,955.75	11,955.75	11,955.75	0.00	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.



Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P015501-07 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AGENCY WIDE	MANAGEMENT IMPROVEMENTS	1408		30,000.00	30,000.00	30,000.00	14,198.20	
	SALARIES & BENEFITS	1410		77,297.00	77,297.00	77,297.00	77,297.00	COMPLETE
	FEES & COSTS / A&E FEES	1430		0.00	0.00	0.00	0.00	
	OPERATIONS	1406		154,594.00	154,594.00	154,594.00	79,263.36	
TOTALS				772,974.00	772,974.00	772,974.00	516,237.62	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
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<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					<b>Federal FFY of Grant: 2007</b>
<b>PHA Name: MADISON COUNTY HOUSING AUTHORITY</b>					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IL015-001	09/12/2009	09/12/2009	09/12/2011	09/12/2011	
IL015-002	09/12/2009	09/12/2009	09/12/2011	09/12/2011	
IL015-006	09/12/2009	09/12/2009	09/12/2011	09/12/2011	
IL015-010	09/12/2009	09/12/2009	09/12/2011	09/12/2011	
IL015-011	09/12/2009	09/12/2009	09/12/2011	09/12/2011	
AGENCY WIDE	09/12/2009	09/12/2009	09/12/2011	09/12/2011	

<sup>1</sup> 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.

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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: IL06P015501-08 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval:	
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>					
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		<input type="checkbox"/> Revised Annual Statement (revision no: )	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended	
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	154,000.00	154,000.00	1,864.15	
3	1408 Management Improvements	40,000.00	0.00	0.00	
4	1410 Administration (may not exceed 10% of line 21)	77,300.00	77,300.00	43,128.29	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	39,825.00	39,825.00	30,767.34	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	368,851.00	408,213.00	150,396.00	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	39,362.00	0.00		
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	19,856.00	19,856.00	13,426.69	
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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

<b>Part I: Summary</b>		FFY of Grant: 2008 FFY of Grant Approval:			
PHA Name: MADISON COUNTY HOUSING AUTHORITY Grant Type and Number Capital Fund Program Grant No: IL06F015501-08 Replacement Housing Factor Grant No: Date of CFFP:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account		Total Actual Cost <sup>1</sup>			
Line		Original	Revised <sup>2</sup>	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)	739,194.00	739,194.00	699,194.00	239,582.47
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 07/20/2010		Signature of Public Housing Director	

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

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Part II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P015501-08 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IL 015-010	EMERGENCY ELECTRICAL IMPROVEMENTS	1460		85,000.00	85,000.00	85,000.00	85,000.00	COMPLETE
	EMERGENCY ELECTRICAL IMPROVEMENTS	1460		27,597.00	27,597.00	27,597.00	27,596.00	COMPLETE
IL 015-011	PLUMBING IMROVEMENTS	1460		28,254.00	28,254.00	28,254.00	0.00	
	CONSULTANT FEES	1430		39,825.00	39,825.00	39,825.00	30,767.34	
	ASBESTOS ABATEMENT	1460		228,000.00	228,000.00	228,000.00	37,800.00	
	RELOCATION	1495		19,856.00	19,856.00	19,856.00	37,800.00	
	ROOF	1460		0.00	28,509.96	28,509.96	0.00	
	PAINTING	1460		0.00	10,852.04	10,852.04	0.00	
AGENCY WIDE	UNIT REHABILITATION	1460		0.00	0.00			
	CAMERA MONITORING & SECURITY	1408		20,000.00	20,000.00	0.00	0.00	
	NON DWELLING IMPROVEMENTS	1470		39,362.00	0.00			
	MANAGEMENT IMPROVEMENTS	1408		20,000.00	20,000.00	0.00	0.00	
	SALARIES & BENEFITS	1410		77,300.00	77,300.00	77,300.00	43,128.29	
	FEES & COSTS/ A&E FEES	1430		0.00	0.00			
	OPERATIONS	1406		154,000.00	154,000.00	154,000.00	1,864.15	
TOTALS				739,194.00	739,194.00	699,194.00	239,582.47	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

U.S. Department of Housing and Urban Development  
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<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>							<b>Federal FFY of Grant: 2008</b>	
PHA Name: MADISON COUNTY HOUSING AUTHORITY								
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>			
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date				
IL 015-010	06/12/2010	06/12/2010	06/12/2012	06/12/2012				
IL 015-011	06/12/2010	06/12/2010	06/12/2012	06/12/2012				
AGENCY WIDE	06/12/2010	06/12/2010	06/12/2012	06/12/2012				

<sup>1</sup> 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.

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

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:		
PHA Name: <b>MADISON COUNTY HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: IL06P015501-09 Replacement Housing Factor Grant No: Date of CFFP:		
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost Revised <sup>1</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	157,000.00	0.00	0.00
3	1408 Management Improvements	50,000.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	78,000.00	0.00	0.00
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs	30,000.00	30,000.00	22,427.90
8	1440 Site Acquisition			
9	1450 Site Improvement	0.00		
10	1460 Dwelling Structures	149,000.00	94,171.04	0.00
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment			
14	1485 Demolition	100,000.00	0.00	
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs	224,756.00	50,000.00	5,366.30
17	1499 Development Activities <sup>4</sup>			

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

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

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

Part I: Summary		FFY of Grant: 2009	
PHA Name:	Grant Type and Number	FFY of Grant Approval:	
MADISON COUNTY HOUSING AUTHORITY	Capital Fund Program Grant No: IL06P015501-09 Replacement Housing Factor Grant No: Date of CFFP:		
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: 06/30/2010	<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup> 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)	788,756.00	174,171.04 27,794.20
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 07/20/2010	Signature of Public Housing Director
			Date

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



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
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 Expires 4/30/2011

<b>Part II: Supporting Pages</b>		<b>Federal FFY of Grant: 2009</b>						
<b>PHA Name:</b> MADISON COUNTY HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06P015501-09 CFPP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 127								
IL 015-001	GARESCHE HOMES SITE IMPROVE	1450		0.00	0.00			
	GARESCHE DEMOLITION	1485		50,000.00	0.00			
	GARESCHE RELOCATION	1495		114,756.00	114,756.00	0.00	0.00	
IL015-002	VIOLA JONES DEMOLITON	1485		50,000.00	0.00			
IL 015-002	VIOLA JONES RELOCATION	1495		60,000.00	60,000.00	0.00	0.00	
AMP 611								
IL 015-006	NORTHGATE HVAC IMPROVEMENTS	1460		50,000.00	50,000.00	0.00	0.00	
IL 015-011	BRANER PLUMBING IMPROVE	1460		59,000.00	77,509.96	25,756.00	0.00	
	BRANER RELOCATION	1495		50,000.00	50,000.00	50,000.00	5,366.30	
	BRANER ROOF REPLACEMENT	1460		40,000.00	121,490.04	68,415.04	0.00	
AGENCY WIDE	OPERATIONS	1406		157,000.00	157,000.00	0.00	0.00	
	CAMERA MONITORING & SECURITY	1408		20,000.00	20,000.00	0.00	0.00	
	MANAGEMENT IMPROVE & TRAIN	1408		30,000.00	30,000.00	0.00	0.00	
	SALARIES & BENEFITS	1410		78,000.00	78,000.00	0.00	0.00	
	FEES & COSTS/A&E FEES	1430		30,000.00	30,000.00	30,000.00	22,427.90	
<b>TOTALS</b>				<b>788,756.00</b>	<b>788,756.00</b>	<b>174,171.04</b>	<b>27,794.20</b>	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>						<b>Federal FFY of Grant: 2009</b>	
PHA Name: MADISON COUNTY HOUSING AUTHORITY							
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>		
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date			
IAMP 611							
IL 015-001	9/14/2011	9/14/2011	09/14/2013	09/14/2013			
IL 015-006	9/14/2011	9/14/2011	09/14/2013	09/14/2013			
IL 015-011	09/14/2011	9/14/2011	09/14/2013	09/14/2013			
AGENCY WIDE	09/14/2011	9/14/2011	09/14/2013	09/14/2013			

<sup>1</sup> 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.

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

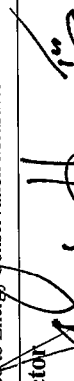
U.S. Department of Housing and Urban Development  
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 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06S015501-09 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010	<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
		Obligated	Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	184,606.00	184,606.00
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement	2,000.00	4,000.00
10	1460 Dwelling Structures	1,603,459.00	1,572,459.00
11	1465.1 Dwelling Equipment—Nonexpendable	20,000.00	16,000.00
12	1470 Non-dwelling Structures	36,000.00	69,000.00
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs	0.00	0.00
17	1499 Development Activities <sup>4</sup>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: L06S015501-09 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Reserve for Disasters/Emergencies			
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,846,065.00	1,846,065.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director 		Signature of Public Housing Director	
Date 07-20-2010		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06S015501-09 CFPP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 611	PLUMBING/WATER HEATER IMPROVEMENTS	1460		495,000.00	467,995.00	467,995.00	159,068.00	
IL 015-011	KITCHEN/BATH IMPROVEMENTS	1460		209,500.00	199,964.00	199,964.00	48,463.00	
BRANER BLDG	ASBESTOS ABATEMENT	1460		0.00	0.00			
	ADA IMPROVEMENTS	1460		60,000.00	0.00			
	EXTERIOR IMPROVEMENTS	1470		36,000.00	69,000.00	69,000.00	0.00	
	BALCONY RAILINGS							
	EXT. PENTHOUSE LADDERS							
	PENTHOUSE FLASHING							
	EXT. DOOR IMPROVEMENTS							
	REHAB OF UNITS	1460		0.00	0.00			
	ROOF	1460		0.00	0.00			
	BUILDING IMPROVEMENTS	1460		0.00	0.00			
	UNIT CONVERSION	1460		149,959.00	37,000.00	37,000.00	13,400.00	
	PAINTING	1460		57,000.00	65,000.00	65,000.00	0.00	
	CLOSETS, DOORS, INTERIOR IMPROVEMENTS	1460		356,000.00	408,000.00	408,000.00	0.00	
	ELECTRICAL IMPROVEMENTS	1460		100,000.00	135,000.00	135,000.00	13,978.00	
	FLOORING	1460		88,000.00	72,000.00	72,000.00	16,152.00	
	ADMINISTRATION	1410		184,606.00	184,606.00	184,606.00	25,505.07	
	RELOCATION	1495		0.00	0.00			

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.



Part III: Implementation Schedule for Capital Fund Financing Program						Federal FFY of Grant: 2009	
PHA Name: MADISON COUNTY HOUSING AUTHORITY							
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>		
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date			
AMP 611 IL 015-011 BRANER BUILDING	03/17/2010	03/17/2010	03/17/2012	03/17/2012			

<sup>1</sup> 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.

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  
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Part I: Summary		Grant Type and Number		FFY of Grant: 2010	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Capital Fund Program Grant No: IL06P015501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval:	
Type of Grant		Revised Annual Statement (revision no: )			
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report			
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010					
Line	Summary by Development Account	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>	Expended
		Original	Revised <sup>2</sup>		
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	130000.00	130000.00		
3	1408 Management Improvements	30000.00	30000.00		
4	1410 Administration (may not exceed 10% of line 21)	65000.00	65000.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30000.00	30000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement	25000.00	25000.00		
10	1460 Dwelling Structures	25000.00	25000.00		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition	175000.00	151696.00		
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	150000.00	150000.00		
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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  
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<b>Part I: Summary</b>		FFY of Grant: 2010			
PHA Name: MADISON COUNTY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: IL06P015501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> 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)	650000.00	626696.00		
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	20000.00	20000.00		
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date 07-20-2010</b>		<b>Signature of Public Housing Director</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> 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

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Part II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P015501-10 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 611								
IL 015-006	SITE IMPROVE, LANDSCAPE & REC IMPROVEMENTS	1450		25000.00	25000.00			
	PLUMBING IMPROVEMENTS	1460		25000.00	25000.00			
AMP 127	UNIT REHAB	1460		0.00	0.00			
	DEMOLITION	1485		0.00	0.00			
IL 015-001	GARESICHE DEMOLITION	1485		100000.00	87000.00			
	GARESICHE RELOCATION	1495		90000.00	90000.00			
IL 015-002	VIOLA JONES DEMOLITION	1485		75000.00	64696.00			
	VIOLA JONES RELOCATION	1495		60000.00	60000.00			
	RELOCATION	1495		0.00	0.00			
AGENCY WIDE	CAMERAS, MONITORING & SECURITY IMPROVEMENTS	1408		20000.00	20000.00			
	MANAGEMENT IMPROVEMENTS /TRAINING	1408		30000.00	30000.00			
	SALARIES, BENEFITS	1410		65000.00	65000.00			
	FEES AND COSTS	1430		30000.00	30000.00			
	OPERATIONS	1406		130000.00	130000.00			
TOTALS				650000.00	626696.00			

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					<b>Federal FFY of Grant: 2010</b>	
<b>PHA Name: MADISON COUNTY HOUSING AUTHORITY</b>						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
IAMP 611						
AMP 127						
AMP 127						
AGENCY WIDE						
AGENCY WIDE						
AMP 127						
AGENCY WIDE						
AGENCY WIDE						
AGENCY WIDE						

<sup>1</sup> 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.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

Part I: Summary		FFY of Grant: 2011	
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: IL06P015501-11 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no: 2 )	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Performance and Evaluation Report	<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	125,339.00	
3	1408 Management Improvements	30,000.00	
4	1410 Administration (may not exceed 10% of line 21)	62,669.00	
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs	30,000.00	
8	1440 Site Acquisition		
9	1450 Site Improvement	378,668.00	
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> RHF funds shall be included here.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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 Expires 4/30/2011

<b>Part I: Summary</b>		FFY of Grant: 2011		
PHA Name: MADISON COUNTY HOUSING AUTHORITY		FFY of Grant Approval:		
Grant Type and Number Capital Fund Program Grant No: IL06P015501-11 Replacement Housing Factor Grant No: Date of CFFP:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account		Total Estimated Cost Revised <sup>2</sup>		
Line		Original	Obligated	Total Actual Cost <sup>1</sup> 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)	626,696.00		
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Activities			
23	Amount of line 20 Related to Security - Soft Costs			
24	Amount of line 20 Related to Security - Hard Costs			
25	Amount of line 20 Related to Energy Conservation Measures			
Signature of Executive Director		Signature of Public Housing Director		Date
<i>[Signature]</i>		<i>[Signature]</i>		9/21/10

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

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 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part II: Supporting Pages		Federal FFY of Grant: 2011						
PHA Name: MADISON COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: IL06P015501-11 CFPP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA - Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 611								
IL 015-011	MASONRY CLEANING, TUCKPOINTING, SEALANT AND CONCRETE REPAIR	1450		103,688.00				
IL 015-011	ELEVATOR IMPROVEMENTS	1450		250,000.00				
IL 015-011	PARKING IMPROVEMENTS	1450		5,000.00				
IL 015-010	PARKING IMPROVEMENTS	1450		5,000.00	0.00			
IL 015-006	PARKING IMPROVEMENTS	1450		15,000.00	0.00			
				0.00	0.00			
AGENCY WIDE								
	MANAGEMENT IMPROVEMENTS /TRAINING	1408		30000.00				
	SALARIES, BENEFITS	1410		62,669.00				
	FEES AND COSTS	1430		30,000.00				
	OPERATIONS	1406		125,339.00				
TOTALS				626,696.00				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

Part III: Implementation Schedule for Capital Fund Financing Program				Federal FFY of Grant: 2011	
PHA Name: MADISON COUNTY HOUSING AUTHORITY					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 611	09/30/2012		09/30/2014		

<sup>1</sup> 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

<b>Part I: Summary</b>						
PHA Name/Number Madison County Housing Authority IL015		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 _____	Work Statement for Year 2 FFY ____2012_____	Work Statement for Year 3 FFY ____2013_____	Work Statement for Year 4 FFY ____2014_____	Work Statement for Year 5 FFY ____2015_____
B.	Physical Improvements Subtotal	Annual Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total					



**Part 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 ____2011____	Work Statement for Year 2 FFY ____2012____	Work Statement for Year 3 FFY ____2013____	Work Statement for Year 4 FFY ____2014____	Work Statement for Year 5 FFY ____2015____	
	IL 015-006 AMP 611 Northgate Homes	Annual Statement	335,000	1,385,000	165,000	420,000	
	IL015-010 AMP 611 Olin Building		545,000	105,000	560,000	105,000	

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY _____	Work Statement for Year ____2012_____ FFY ____2012____			Work Statement for Year: ____2013_____ 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				IL0150006 Northgate Homes Exterior Building Improvements (remove replace siding flues)		300,000
Annual	IL0150010 Olin Bldg Common Area Furnishings		15,000	IL0150006 Northgate Homes Asbestos Abatement –Siding Flues		85,000
Statement	IL0150010 Olin Bldg Elevators Repair/Replacement	2	280,000	IL0150006 Northgate Homes Window Replacement		1000,000
	Olin Building Bathroom Improvements	59	100,000	IL0150010 Olin Building PTAC replacement	64	45,000
	Olin Building Roof Replacement	1	110,000	IL0150010 Olin Building Flooring Improvements		60,000
	Northgate Sewage System Replacement	1	175,000			
	Northgate Homes Furnace and Water Heater Improvements	99	160,000			
	Subtotal of Estimated Cost		\$ 880,000	Subtotal of Estimated Cost		\$ 1,490,000

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY _____	Work Statement for Year _____ 2014 _____ FFY _____ 2014 _____			Work Statement for Year: _2015_____ 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	IL0150010 Olin Building Park/Trash Improvements		40,000	IL0150006 Northgate Homes Exterior Improvements (replacement of siding chimneys and flues)		240,000
Annual	IL0150010 Olin Building Entry /Security Systems		30,000	IL0150006 Northgate Homes Asbestos Abatement		80,000
Statement	<i>Northgate Homes Kitchen and Bath Replacement</i>		200,000	IL0150006 Northgate Homes Window Replacement	375	100,000
	Northgate Homes Door and Lock Improvements		40,000			
	<i>IL0150006 Northgate Homes Flooring Replacement</i>		50,000	IL0150010 Olin Building PTAC Replacement	63	45,000
	Northgate Homes Recreation Room and Office Improvements	1	15,000			
	Northgate Homes Flooring Replacement	99	100,000			
	Northgate Homes Asbestos Removal (flooring)	99	50,000			
	<i>IL0150006 Northgate Homes Furnace and Hot Water Heater Improvements</i>	99	150,000			

**Capital Fund Program—Five-Year Action Plan**

**U.S. Department of Housing and Urban Development  
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	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

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

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