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	PHA Information										
	PHA Name: McKeesport Housing Authority			<u></u>							
	PHA Type:	Performing	\boxtimes Standard	☐ HCV (Section 8)							
	PHA Fiscal Year Beginning: (MM/YYYY):	04/2011									
• 0											
2.0	Inventory (based on ACC units at time of FY										
	Number of PH units: 993	Nun	nber of HCV units: <u>542</u>								
3.0	Submission Type										
3.0	✓ 5-Year and Annual Plan	☐ Annual I	Plan Only	5-Year Plan Only							
	3- Tear and Annual Flan	Aiiiiuai i	rian Only	3-1 car 1 fair Only							
4.0	PHA Consortia	JA Consortio	a: (Check box if submitting a join	at Dian and complete table hal	ow.)						
	riia Consorua	1A CONSOLUA	a. (Check box if submitting a join	it Fian and complete table ber							
		PHA	Ducamana(a) In alreded in the	Ducamana Nat in the	No. of Unit	s in Each					
	Participating PHAs	Code	Program(s) Included in the Consortia	Programs Not in the Consortia	Program						
		Code	Consortia	Consortia	PH	HCV					
	PHA 1:										
	PHA 2:										
	PHA 3:										
5.0	5-Year Plan. Complete items 5.1 and 5.2 on	ly at 5-Year I	Plan update.								
5.1	Mission. State the PHA's Mission for serving										
	jurisdiction for the next five years: The mi				n Development	: To promote					
	adequate and affordable housing, economic of	pportunity a	nd a suitable living environment	free from discrimination							
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very										
5.2											
	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.										
	and objectives described in the previous 5-10	zai i iaii.									
	See Attachment										
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6.0	PHA Plan Update										
0.0											
	(a) Identify all PHA Plan elements that have										
	(b) Identify the specific location(s) where the										
	elements, see Section 6.0 of the instruction	ons. The PH	A plan elements can be obtained	at the main office and each o	f the three AM	P offices.					
7.0	II VI Mi J Ei M. Jii.	. Dl		i Ci of Dublic II							
7.0	Hope VI, Mixed Finance Modernization of Programs, and Project-based Vouchers. In				ousing, Homeo	ownersnip					
	11 ograms, and 11 oject-based vouchers. In	iciuae siaien	nenis reiaiea io inese programs i	із аррисавіе. Зее анасытені							
8.0	Capital Improvements. Please complete Pa	rts 8.1 throug	gh 8.3 as applicable.								
0.0	Cupium improvementos ricuse comprete ru	ins on unou	gri oro, ao appricaoro.								
0.1	Capital Fund Program Annual Statement/	Performanc	e and Evaluation Report. As p	oart of the PHA 5-Year and Ar	nual Plan, ann	ually					
8.1	complete and submit the Capital Fund Progr										
	open CFP grant and CFFP financing. See atta	achment		•							
8.2	Capital Fund Program Five-Year Action I										
0.2	Program Five-Year Action Plan, form HUD-				ent year, and ad	d latest year					
	for a five year period). Large capital items m	nust be includ	ded in the Five-Year Action Plan								
	See attachment										
8.3	Capital Fund Financing Program (CFFP).		: 1E 1B (CED) = :	. ** . ** . ***	<b>.</b>						
	Check if the PHA proposes to use any por	rtion of its Ca	apıtaı Fund Program (CFP)/Repl	acement Housing Factor (RHI	f) to repay deb	t incurred to					
	finance capital improvements.										
	Housing Noods Peredon's Control	dod 1 /1	maliachla Consultati i Di i i c	amontion nu::1-11 IIII	ad oth	11r. ov!1-1.1					
9.0	Housing Needs. Based on information provi										
	data, make a reasonable effort to identify the the jurisdiction served by the PHA, including										
	other families who are on the public housing										
					rusing needs III	usi auuress					
	issues of affordability, supply, quality, access	sibility, size o	of units, and location. See at	tacnment							

- 9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. See attachment

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

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

  (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" See attachment
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. See attachment
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

    (g) Challenged Elements
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

#### **Instructions form HUD-50075**

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

#### 1.0 PHA Information

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

#### 2.0 Inventory

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

#### 3.0 Submission Type

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

#### 4.0 PHA Consortia

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

#### 5.0 Five-Year Plan

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

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
  - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
  - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

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

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

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
  - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
  - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

**Note:** This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <a href="http://www.hud.gov/offices/pih/centers/sac/conversion.cfm">http://www.hud.gov/offices/pih/centers/sac/conversion.cfm</a>

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
  - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
    - (a) To submit the initial budget for a new grant or CFFP;
    - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
    - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

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

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

#### 8.2 Capital Fund Program Five-Year Action Plan

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

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

- portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
- $\underline{http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm}$
- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
  - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments.
  - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

# **PHA Annual Plan Attachment**

- 1.0 See Template
- 2.0 See Template
- 3.0 See Template
- 4.0 See Template
- 5.0 See Template
- 5.1 See Template

#### 5.2 – PHA Goals & Objectives

## 1. Expand the supply of assisted housing

- a. Maintain occupancy levels
- b. Leverage private or other funds to create additional housing opportunities
- c. Acquire or build units or developments

## 2. <u>Improve the quality of assisted housing</u>

- a. Improve public housing management
- b. Improve voucher management
- c. Improve customer satisfaction
- d. Renovate or modernize public housing units
- e. Demolish obsolete public housing to re-vitalize the community
- f. Provide Replacement Housing

# 3. <u>Increase assisted housing choices</u>

- a. Provide voucher mobility counseling
- b. Conduct outreach efforts to potential voucher landlords
- c. Provide educational seminars to landlords/tenants for HUD regulation updates

# 4. <u>Ensure equal opportunity in Housing for all applicants & residents</u>

- a. Ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status & disability.
- b. Ensure that affirmative measures are in place to provide accessible housing to persons with disabilities, either by providing UFAS compliant units or reasonable accommodations.

# 5. <u>Minimize occupancy losses.</u>

- a. Established flat rents.
- b. Utilize EIV System to decrease fraud

- c. Post and notify delinquent residents of outside funding sources for help in paying delinquent rent.
- d. Off-peak Rent Office hours for working families to pay rent.
- e. Refer families to agencies to receive assistance with budgeting & housekeeping
- f. To secure in-home services for the elderly and the disabled in order for the tenant to remain independent. During 2004 approximately 20% of tenants who left the PHA did so because they required living assistance. MHA will add a Call for Aid system in Isbir Manor to enhance marketability and increase safety and security.

## 6. <u>Implement a comprehensive marketing strategy.</u>

- a. The McKeesport Housing Authority has implemented a comprehensive marketing plan 08/2008. This plan includes advertising in the local newspaper and newsletters with target population. A representative of the Housing Authority visits senior groups, social service organizations, and participate in housing fairs throughout Allegheny County. The PHA is distributing flyers throughout the community.
- b. The plan includes changing the current ads to reflect positive changes in public housing. Brochures and pamphlets are being developed to be distributed during presentations that will reflect changes/improvements in its communities.
- c. The Housing Authority will also hold open houses at its developments that prospective tenants may visit and inquire about the units and programs available.
- d. The Housing Authority has presented marketing ideas to its current residents to generate referrals. A survey of the current tenants provided several avenues in which to generate referrals.
- e. To Increase internet use for tenant reporting, applicants, and interested parties.
- f. The PHA markets with social service agencies in Allegheny County to advertise and promote the units

# 7. <u>Improve the quality and appearance of the public housing stock.</u>

- a. The maintenance department has a dedicated team for common areas and grounds. This team focuses on litter, grass, snow, graffiti, etc. This has impacted the communities.
- b. To submit an application for total demolition and begin replacing units. The PHA was denied tax credits during two application periods.

## 8. <u>Provide quality management and maintenance services</u>

- a. Management inspections 2x yearly to resolve maintenance and housekeeping issues. All inspections will with conform to REAC standards. The PHA has also created a quality assurance team to review completed work and gauge customer satisfaction.
- b. Bi-Monthly Community Forums staffed by Management, Maintenance, and other departments to listen to resident complaints and issues. The PHA changed the meetings bi-monthly as a result of a lack of participation by the tenants.

## 9. Perform an assessment of resident needs.

- a. Hold bi-monthly Community Forums at all locations staffed by management, and Maintenance to gather resident input in order to establish an open forum for residents to speak directly with staff.
- b. The Authority reviews the results of the annual RASS survey. The PHA implements an action plan to address concerns of the residents.
- c. The Housing Authority also conducted needs assessments in the areas of family needs, educational, recreational and social concerns. As a result of a survey conducted, the McKeesport Housing Authority has implemented a referral service to meet the needs of its residents. The results of the surveys will be a priority in the development of programs at each of the sites.

#### 10. Implement energy conservation measures.

a. Implementation of the energy performance contract as identified by Tower Engineering. The plan is due to be presented and implemented by summer 2011.

#### 6.0 See Template & below

#### **VAWA**

- A. The PHA will make referrals to either the SHIP referral center or to Woman's Place if a participant requests our assistance with issues of domestic violence.
- B. The PHA currently does not have any programs for Domestic Violence that it administrates. If a participant requests assistance in this area, the PHA provider's referrals to either the SHIP referral center or to Woman's Place. The PHA will then work with the agency to assist the family.
- C. The City of McKeesport Police Department is usually the entity notified when issues of domestic violence are occurring. It is the policy of McKeesport Police Department to provide any victims of domestic violence of possible remedies to domestic violence and instruction on how to obtain a PFA. The police department provides all victims with a packet of information and referral sources and has all victims sign a victim's rights card. The PHA will provide any accommodations necessary to assist victims of domestic violence.

## 7.0 Hope IV, Mixed Finance Modernization or Development

- (a).(1). The PHA will submit a Capital Fund Financing application to PHFA for funding to complete renovations in PA 5-1 (E.R. Crawford Village). This will reduce the unit count from 164 units to 76 units.
  - (a.)(2). The PHA will submit the application for Capital Fund Financing in 2010.
  - (b.)(1). The PHA will submit an application for the demolition of buildings 49, 52, 54, 56 & 57 in E.R. Crawford Village. The project number is PA5-4 located in AMP1. This will include a total of 50 units 20 (1-bedrooms), 20 (2-bedrooms), and 10 (3-bedrooms). The application will be submitted to both SAC & Pittsburgh Field Office pending the completion of the environmental review.
- (b)(2). The demolition process in PA 5-4 will be completed by 12/2010. The PHA will begin re-locating affected residents in the summer of 2010 in accordance with the relocation plan outlined in the demolition plan. **This project is current delayed as a result of MHA not receiving tax credits through PHFA.
  - (c)(1) N/A
  - (c)(2) N/A
  - (c)(3) N/A
  - (d)(1) McKeesport Housing Authority currently administers a Home Ownership Program through the Housing Choice Voucher Program. To date, the Authority has completed 6 homeownership contracts. McKeesport Housing Authority will establish a minimum homeowner down payment requirement of at least 3 percent of the purchase price. Of this amount, at least 1 percent of the purchase price must come from the buyer's personal resources.

In accordance with PIH Notice 2000-43, MHA's capacity is established through its compliance with this regulatory measure which can be found at 24 CFR 982.625(d)(1).

### 8.0 Capital Improvements

# 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.

The PHA will complete the renovation of PA 5-1 (Crawford Village Buildings 1-22). The PHA will use a mixed finance application for the completion of the project. *MHA was denied by PHFA on two rounds of tax credit allocations. MHA will pursue other financing options.

The PHA will demolish five buildings in PA 5-4 (Crawford Village Buildings 42-62). The development has 198 units and it is extremely dense. This development was modernized in 1990. The PHA plans to modernize and further de-densify this area upon completion of PA 5-1. In order to achieve social viability, significant rehabilitation needs to occur in this area. For example, some of the units do not have showers in them. Family size was not considered when this project was built, as a 1-bedroom unit has the same amount of living space as a 3-bedroom unit. The development has less than 30 parking spaces available for the tenants in two parking lots. Ten of the buildings have street parking which is not adequate to meet the needs of the number of tenants in the area. The Authority will create parking areas with the demolition of the buildings in order to increase the marketability, emergency access, and tenant access.

The Authority will complete UFAS compliant units at Steelview Manor).

# 8.2 Capital Fund Program Five-Year Action Plan

2011

AMP 1

The PHA will begin work in the PA 5-1(Crawford Village Buildings 1-22) renovation/rehab project.

The Authority will complete site repair in PA5-3 (Crawford Village Buildings 23-41). A long pathway of stairs descends from the top of the development to the bottom. This is frequently used by residents to access the office, bus stop, and other facilities. The stairs will be replaced with a pathway to assist residents using the pathway.

## <u>AMP 2</u>

The Authority will make energy efficient upgrades to the HVAC system in PA 5-2. (Harrison Village Buildings 1-5).

The Authority will begin the renovation of buildings 7, 9, and 10 (PA 5-5) in Harrison Village. These three buildings will complete total rehabilitation of the site. This project will also satisfy all of the UFAS requirements in the development.

UFAS work will be completed in Isbir Manor. The Authority will also install a call for aid system to enhance marketability of the project and increase safety and security.

#### <u>AMP 3</u>

The Authority will begin preliminary reviews for boiler replacement and fire alarm upgrades.

#### 2012

#### AMP 1

Continuation of the rehabilitation of PA 5-1 (Crawford Village Buildings 1-22).

HVAC energy efficient enhancements will be completed in PA 5-3 (Crawford Village Buildings 23-41).

HVAC energy efficient enhancements will be completed in PA 5-4 (Crawford Village Buildings 42-62).

#### AMP 2

Harrison Village (Buildings 1-5) will have routine maintenance performed on the exterior of the building. This will include measures to increase energy efficiency.

Harrison Village (PA 5-5) renovations of buildings 7, 9, 10 will continue.

#### AMP 3

The Boiler will be replaced at McKeesport Towers. The boiler is nearing the end of its useful life. The boiler is also not energy efficient and does not allow the tenant to have any control of the temperature in their unit. **This line item was completed 9/2010 as a result of recommendation by engineer.

#### 2013

#### <u>AMP 1</u>

The Authority will complete the rehab of PA 5-1 (Crawford Village 1-22).

The Authority will complete additional site work in Crawford Village (Bldgs. 23-41) to increase curb appeal and marketability.

The Authority will complete UFAS compliant unit re-configuration at Steelview Manor.

#### <u>AMP 2</u>

Site work will be completed to increase marketability and curb appeal in Harrison Village (Buildings 1-5).

The Authority will complete the rehab of Buildings 7, 9, & 10 in Harrison Village.

The Authority will complete site work to increase marketability and curb appeal at the scattered site locations.

#### <u>AMP 3</u>

The Authority will complete final UFAS compliance in accordance the 504 transition plan at McKeesport Towers, including the fire alarm panel.

#### 2014

#### AMP 1

The Authority will continue financing of the rehabilitation of PA 5-1. (Crawford Village Buildings 1-22).

The Authority will complete HVAC repairs to increase energy efficiency in Crawford Village (Buildings 23-41).

The Authority will begin complete modernization and rehabilitation of Crawford Village (Buildings 42-62).

#### AMP 2

The Authority will complete the renovation on the exterior doors in Harrison Village (Buildings 1-5). This will increase energy efficiency.

The Authority will continue to finance the rehabilitation of buildings 7, 9, & 10 in Harrison Village.

Isbir Manor will require significant plumbing repairs throughout the units. This includes replacement of the original plumbing in the building. The Authority has recognized that the materials used during initial construction have reached the end of their useful life.

The scattered site work is to be determined based on any identified needs. The Authority currently does not have any renovation planned aside from routine maintenance.

#### AMP 3

The Authority will continue to reconfigure and renovate units at McKeesport Towers to increase marketability. Currently the building has 140 efficiency units. The demand for larger units exceeds the demand for the efficiency units.

## 9. 0 Housing Needs

The Authority has reviewed the statistics relating to the Housing Needs in the Consolidated Plan for the jurisdiction of the City of McKeesport. The housing needs in the area are significantly greater for individuals whose income is less than 30% of the

AMI. The Plan also shows an increased need of housing for both elderly & disabled tenants.

The Authority will continue to reduce the turnover for vacated public housing units. The Authority will continue to implement the Master Plan for E.R. Crawford Village which will include the renovation of PA 5-1 (Crawford Village Buildings 1-22). This renovation project will provide in excess of 20 UFAS complaint units for the Crawford Village community. The Authority will also enter into a service agreement with local providers to assist the elderly and disabled tenants within the communities. This will add an additional 9 UFAS units to the current housing stock. The Authority has also entered into an agreement with UPMC SHIP referral center to assist tenants and applicants with obtaining the necessary services to increase the success of tenancy.

The Authority will continue to brief applicants on the waiting list for the Section 8 department. The list will also be re-opened in the spring of 2010. Outreach & marketing efforts will occur with various social service agencies in the area to increase awareness of the availability.

#### 10.0 Additional information

(a). Progress in Meeting Mission & Goals

PA 5-1 (Crawford Village Buildings 1-22)

The Authority is currently working on conversion of the units in PA 5-1. This includes asbestos removal throughout the project (Completed)

PA 5-5 (Harrison Village Buildings 7-15)

The Authority is nearing completion of renovations of Moran Field in Harrison Village. (Completed)

PA 5-11 (Scattered Sites)

The Authority plans to acquire property immediately adjacent to the Locust Street properties. This will allow for a playground/park for the residents of the development. This will also improve the marketability and curb appeal of the development.

PA 5-6 (Isbir & Steelview Manor)

The Authority has completed several identified items for Steelview Manor on the 504 transition plan. Steelview Manor and Isbir Manor had two new elevators installed during the past year. To date, three UFAS units were completed and the reuired 5% will be completed by the end of 2010. **Isbir Manor currently meets the 5% obligation for UFAS compliance. The units at Steelview are currently vacant and the contract is scheduled to be placed out for bid.

The Authority is nearing completion of a centralized laundry facility for the residents at both Isbir & Steelview Manor. This facility will be UFAS compliant and increase marketability of the development.

The Authority will also replace railings on each floor at both Isbir & Steelview Manor. This will also include painting and repair of the porches. This will be completed in the Spring of 2010. (Projected completed)

The Authority is in the process of completing a development proposal for the use of Replacement Housing Factor money.

#### PHA Wide

The Authority provided security enhancements at all of the high-rise buildings with the implementation of a hand scanner door access system.

# (b). Significant amendment & Substantial deviation/modification

From time to time, the Annual Plan and/or the Five Year Plan may require revisions. Board of Commissioner's formal approval of revisions to the Annual Plan and/or Five Year Plan will only be required when the proposed changes constitute a "substantial deviation" or a "significant amendment or modification" to the approved plan.

The McKeesport Housing Authority's definition of "substantial deviation" and "significant amendment or modification" is as follows:

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require the formal approval of the Board of Commissioners such as:

- 1. Changes to rent or admissions policies
- 2. Addition of non-emergency work items above & beyond those listed in the plan
- 3. Any changes regarding demolition, disposition, designation, & home ownership and or conversion activities
- (c) The Authority will comply with all reviews, audits and recommendations suggested by the HUD office

# 11.0 Required Submission

- (a) PA005M01
- (b) PA005M01
- (c) PA005M01
- (d) PA005M01
- (e) PA005M01
- (f) Comments received did not impact PHA plan. Resident requests were for routine maintenance/management requests
- (g) No elements of the Plan were challenged
- (h) PA005A01
- (i) PA005B01

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

U.S. Department of Housing and Urban Developm Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

PHA Name:	Grant Type and Number		Federal FY of Grant:
	Capital Fund Program Grant No:	Replacement Housing Factor Grant No:	2011
McKeesport Housing Authority	Date of CFFP:	PA28P005501-11	FFY of Grant Approval:
			2012

1	. Commer 3					
PHA Name:	(0.	Grant Type and Number	Tumber			Federal FY of Grant:
		Capital Fund Program Grant	ogram Grant No:	Replacement Ho	Replacement Housing Factor Grant No:	2011
McKees	McKeesport Housing Authority	Date of CFFP:			PA28P005501-11	FFY of Grant Approval:
A. 3 - 40 L						2012
Type of Grant	Grant					
□ Original	☑ Original Annual Statement ☐ Reserve for Disasters/Emergencies		☐ Revised Annual S	Annual Statement (revision no.	l )	
☐ Perform	Performance and Evaluation Report for Period Ending		☐ Final Performan	☐ Final Performance and Evaluation Report		
Line	Summary by Development Account		Total Estimated Cost	st	Total Ac	Actual Cost 1
		Original	1	Revised 2	Obligated	Expended
1 .	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) 3		1	1	1	1
3	1408 Management Improvements	11	110,000.00	1	1	1
4	1410 Administration	21	215,502.00	1	1	1
5	1411 Audit		1	1	1	1
6	1415 Liquidated Damages		1	1	1	1
7	1430 Fees and Costs	33	330,000.00	1		
8	1440 Site Acquisition		-	1	1	1
9	1450 Site Improvement	28	287,521.00	1		1
10	1460 Dwelling Structures	99	992,000.00	1	1	1
11	1465.1 Dwelling Equipment - Nonexpendable		1	1	1	1
12	1470 Non-dwelling Structures		20,000.00	-	-	1
13	1475 Non-dwelling Equipment		20,000.00	1	1	1
14	1485 Demolition	(5)	50,000.00	1	1	1
15	1492 Moving to Work Demonstration		1	1	1	1
16	1495.1 Relocation Costs	(1)	30,000.00	1	-1	1
17	1499 Development Activities 4		,	1	1	1
18a	1501 Collaterization or Debt Service paid by the PHA	10	100,000.00	-	1	1
18ba	9000 Collaterization or Debt Service paid Via System of Direct					
	Payment		-	1		1
19	1502 Contingency (may not exceed 8% of line 20)			-	1	1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 2,15	2,155,023.00   \$	1	\$	49
21			1		-	1
22	line 20 Related to	37	375,000.00	1	1	1
23	Amount of line 20 Related to Security - Soft Costs			1	1	1
24	Amount of line 20 Related to Security - Hard Costs		15,000.00	r	ľ	1
25	Amount of line 20 Related to Energy Conversation Measures		1		ı	ı
						The same of the sa

To be completed for the Performance and Evaluation Report.

PA 005 A 01

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

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

RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2011
McKeesport Housing Authority	Date of CFFP:		PA28P005501-11	FFY of Grant Approval:
				2012
Type of Grant				
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		☐ Revised Annual Statement (revision no.		
☐ Performance and Evaluation Report for Period Ending —		☐ Final Performance and Evaluation Report		
Line   Summary by Development Account	Total Esti	Total Estimated Cost	Total A	Total Actual Cost 1
	Original	Revised ²	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	ing Director	Date
July of Variables	12/1/2010			
		the state of the s		

Page 2 of 6

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

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

Expires 4/30/2011

art II: Sup	art II: Supporting Pages							
HA Name:		Grant Type and Number	lumber	CFFP:	Yes   No	Federal FY of Gra	Grant:	
CKeesport	Housing Authority	Capital Fund Program Grant No:	cam Grant No:	PA28P005501-11	-11	2011		
		Replacement Housing Factor Grant No:	ng Factor Gra	nt No:		1 0		
Development	General Description of Major Work	Development	Quantity	Total Estimated	nated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 1								
A 5-1	Site Work	1450.00	5	73,071.00				
	Repayment of debt financing	1501.00		100,000.00				
	A/E Fees	1430.00		200,000.00				
	Renovated Townhouses	1460.00	6	600,000.00				
	Building Inspector	1430.00		80,000.00				
A 5-4	Demolition of 5 Buildings	1485.00		50,000.00				
	Roof Replacement	1460.00		50,000.00				
	Relocation Costs	1495.10		30,000.00				
PA 5-6	UFAS Site work - access ramp	1450.00		57,400.00				
	Water Storage Tank Replacement	1460.00	_	15,000.00				
AMPZ								
PA 5-6	UFAS Site work - access ramp	1450.00		7,050.00				
	Water Storage Tank Replacement	1460.00	_	15,000.00				
PA 5-2 & 5	Furnace Replacement-Rec Center	1470.00	1	20,000.00				
PA 5-11 & 12	Demolition of Church for a recreation park	1450.00		150,000.00				
	Architect/Engineering fees	1430.00		25,000.00				

^{2 1} To be completed for the Performance and Evaluation Report or a Revised Annual Statement. To be completed for the Performance and Evaluation Report.



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

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

Part II: Sup	Supporting Pages							
PHA Name:		Grant Type and Number	umber	CFFP:	☐ Yes ☐ No	Federal FY of Gr	Grant:	
McKeesport	Housing Buthority	Capital Fund Program Grant No:	am Grant No:	PA28P0055	-11	2011		
-		Replacement Housing Factor Grant No:	g Factor Gran	nt No:				
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	nated Cost	Total Actual	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 3								
PA 5-7	Fire Alarm Panel and Call for Aide System	1460.00		250,000.00				
McKeesport	Architect/Engineering Fees	1430.00		25,000.00				
Towers	Renovate Dryer Exhaust System	1460.00		12,000.00				
	Unit Renovation - Visitability	1460.00	6	50,000.00				
PHA Wide	Tenant Services/Section 3 Programs	1408.00		100,000.00				
	Consulting Services	1408.00		10,000.00				
	Computer / Security Equipment	1475.00		20,000.00				
	COCC Administrative Fee	1410.00		215,502.00				

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



Expires 4/30/2011

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

Part III: Implementation Schedule for Capital Fund Financing Program

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PHA Name:	McKeesport Housing Authority	g Authority			Federal FY of Grant: 2011
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Er	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	
PA 5-1	6/30/2012		6/30/2013		
PA 5-4	6/30/2012		6/30/2013		
PA 5-6	6/30/2012		6/30/2013		
PA 5-6	6/30/2012		6/30/2013		
PA 5-7	6/30/2012		6/30/2013		
PA 5-11 & 12	6/30/2012		6/30/2013		

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



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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name:	McKeesport Housing Authority	g Authority			Federal FY of Grant:
1	777 5:525	277:		1	1000
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Ending Date)	ding Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



# McKeesport Housing Authority RHF Debt Financing and Participation in Capital Fund Financing Program PHA Plan FFY 2012

# A

#### Participation in Capital Fund Financing Program

In order to leverage its annual appropriation of Capital Funds the Housing Authority plans to participate in a financing plan using 4% or 9% Tax Credits, an Energy Performance Contract, and a loan with FNMA via the Capital Fund Financing Program to rehabilitate PA 5-1. Additional details will be provided in Annual Statements.

The Authority is considering additional demolition in the PA 5-1 Community and may utilize RHF Funds as an additional funding tool.



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Grand Total	Total Non-CFP Funds	Total CFP Funds	Debt Service	Capital Fund Financing -	Development	Demolition	Operations	Other	Administration	Structures and Equipment	PHA-Wide Non-dwelling	Management Improvements	Subtotal	Physical Improvements		Name	Development Number and	PHA Name/Number McKeesport	Part I: Summary
2,155,023.00														Annual Statement	FFY <u>2011</u>	for Year 1	Work Statement	PA005	
2,155,023.00			300,000.00						215,502.00			20,000.00	1,619,521.00			FFY 2012	Work Statement for Year 2	Locality (City/County & State)	
2,155,023.00			300,000.00						215,502.00			20,000.00	1,619,521.00			FFY 2013	Work Statement for Year 3	McKeesport, PA	
2,155,023.00			300,000.00						215,502.00			20,000.00	1,619,521.00			FFY 2014	Work Statement for Year 4	✓ Original 5-Year Plan	
2,155,023.00			300,000.00						215,502.00			20,000.00	1,619,521.00			FFY 2015	Work Statement for Year 5	Revision No:	

In order to leverage its annual appropriation of Capital Funds, the Housing Authority plans to apply for Low Income Housing Tax Credits and the Capital Fund Financing Program in order to increase the pool of public funds available to rehabilitate, modernize, acquire or create additional housing opportunities. Additional details will be provided in Annual Statements.

PACOS BOI

PHA Name/Number McKeesport	PA005	Locality (City/County & State)	McKeesport, PA	Original 5-Year Plan
Development Number and	Work Statement	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4
A. Name	for Year 1	FFY 2012	FFY 2013	FFY 2014
	FFY 2011			
AMP 1	Annual			
PA 5-1 Crawford Village	Statement	349,521.00	874,521.00	1,089,521.00
PA 5-3 Crawford Village		25,000.00	100,000.00	10,000.00
PA 5-4 Crawford Village		25,000.00	100,000.00	100,000.00
PA 5-6 Steelview Manor		25,000.00	225,000.00	50,000.00
AMP 2				
PA 5-2 Harrison Village		60,000.00	10,000.00	10,000.00
PA 5-5 Harrison Village		100,000.00	100,000.00	100,000.00
PA 5-6 Isbir Manor		100,000.00	100,000.00	100,000.00
PA 5-8, 11,12 Scattered Sites		10,000.00	10,000.00	10,000.00
AMP 3				
PA 5-7 McKeesport Towers		925,000.00	100,000.00	100,000.00
COCC / PHA Wide				
COCC - Administration		215,502.00	215,502.00	215,502.00
Management Improvements		20,000.00	20,000.00	20,000.00
Debt Service		300,000.00	300,000.00	300,000.00
		2.155.023.00	2.155.023.00	2.105.023.00

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DavelOpment	
Color of   Color   C	
CHARLEY   BELIME ON COSE   Description of   Number/Name	PA 5-7 Ventilation Repair
Content   Cost	PA 5-7 Window Repla
Development	PA 5-7 Unit Reconfig. Renovation
Development	
Development	
Development	
	Harrison Village Rec Center renovation.
Development   Description of   Development   Description of   Development   Description of   Development   Devel	Sites -
Development   Development   Development   Development   Development   Number/Name     Number/Name       Number/Name	PA 5-6 Isbir Unit Reconfig. & Renovat
### RETAINSTORY   ASSISTANCE   COST   Development   Quantity   Estimated Cost   Number/Name	PA 5-5 Complete Rehab Buildings 7,9, & 10
### Partity ###################################	PA 5-2 HVAC Repairs
### Action of the property and the prope	
### Action of cost   Development   Development   Development   Development   Development   Development   Development   Development   Development   Number/Name   Seneral Description of   Major Work Categories   Major Work Categories   Major Work Categories   Development   Developmen	
### Partity Estimated Cost   Development   Quantity   Estimated me	
Off         Quantity         Estimated Cost         Development         Quantity         Estimated           9s         Number/Name         General Description of         Major Work Categories         Major Work Categories           AMP 1         PA 5-1 Complete Rehab & 20         \$ 274,521.00         PA 5-1 Complete Rehab & 20         \$ 8           25,000.00         PA 5-3 HVAC Repairs         20         \$ 8	PA 5-6 Steelview Entry Door Replacements
Off	PA 5-4 Roof Replacement
Number/Name       iption of     Quantity     Estimated Cost     Development     Quantity     Estimated       iption of     Major Work Categories       tegories     Major Work Categories       1     AMP 1       Rehab &     20     \$ 274,521.00     PA 5-1 Complete Rehab &       Units     20     \$ 274,521.00     Develop of UFAS Units     20	Statement PA 5-3 Site work
Quantity  Estimated Cost  Number/Name  General Description of  Major Work Categories  AMP 1	Annual PA 5-1 Complete Rehab Develop of UFAS Units
Quantity  Estimated Cost  Number/Name  General Description of  Major Work Categories	See AMP 1
Quantity  Estimated Cost  Number/Name  General Description of	Major Work Categories
Quantity  Estimated Cost  Development  Number/Name	
Quantity Estimated Cost Development Quantity	2010 Number/Name
1	Year 1 FFY Development
FFY 2013 FFY 2014	Statement for
Work Statement for Year 2013 Work Statement for Year 2013	Work Work S

び

2015  antity Estimated  20 \$ 1,0  18	20 \$ 1,0  of
Development   Development   Development   Development   Development   Development   Number/Name   Development   Number/Name   Development   Development   Number/Name   Development   Develop of URAS Units   Develop	### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ### 1  ##
Development   Quantity   Estimated Cost   Development   Quantity   PFY   2016	## AMP 1    AMP 1     AMP 1     AMP 2
Development   Pay   2015   Estimated Cost   Development   Pay   2015   Pay   2015   Pay   2015   Pay   2015   Pay   2015   Pay   2016   Pay   2016	## 20 \$ 1,089,521.00 PA 5-1 Complete Rehab & 10,000.00 PA 5-3 HVAC  of
Development   Quantity   Estimated Cost   Development   Quantity   Mumber/Mame   Quantity   Mumber/Mame   Quantity   Qu	## 20 ## 1,089,521.00   PA 5-1 Complete Rehab & 10,000.00   PA 5-3 HVAC
Development   Quantity   Estimated Cost   Development   Quantity   Mumber/Mame   Quantity   Mumber/Mame   Quantity   Qu	## AMP 1    AMP 1
Development   Number/Name   Development	## 20 \$ 1,089,521.00 PA 5-1 Complete Rehab & Develop of UFAS Units  10,000.00 PA 5-3 HVAC  110,000.00 PA 5-4 Complete Rehab of 100,000.00 PA 5-6 Steelview - Unit 50,000.00 PA 5-6 Steelview - Unit 50,000.00 PA 5-6 Steelview - Unit 50,000.00 PA 5-2 Exterior 10,000.00 PA 5-5 Complete Rehab of 18 18 100,000.00 PA 5-5 Complete Rehab 18 100,000.00 PA 5-5 Complete Rehab 100,000.00 PA 5-5 Complete Reh
Note	&         20         \$ 1,089,521.00         PA 5-1 Complete Rehab & Develop of UFAS Units           of         10,000.00         PA 5-3 HVAC           it         5         50,000.00         PA 5-6 Steelview - Unit           5         50,000.00         PA 5-6 Steelview - Unit           5         50,000.00         PA 5-6 Steelview - Unit           6         50,000.00         PA 5-6 Steelview - Unit           7         50,000.00         PA 5-6 Steelview - Unit           8         50,000.00         PA 5-6 Steelview - Unit           9         50,000.00         PA 5-7 Steelview - Unit           9         50,000.00         PA 5-7 Exterior           9         8 5-7 Complete Rehab           10,000.00         PA 5-6 Isbir Plumbing and
Development   Duantity   Estimated Cost   Development   Number/Name	## AMP 1  ## 20  ## 20  ## 5-1 Complete Rehab & 10,000.00 PA 5-3 HVAC    10,000.00 PA 5-3 HVAC   PA 5-6 Steelview - Unit   S0,000.00   PA 5-6 Steelview - Unit   S0,000.00   PA 5-7 Exterior   PA 5-6 Exterior   PA 5-6 Isbir Plumbing and   PA 5-6 Isbir Plumbing and   Isbir Plumbing an
Development	## AMP 1  ## 20  ## 20  ## 3-1 Complete Rehab & Develop of UFAS Units  10,000.00 PA 5-3 HVAC  100,000.00 Units  ## 5-6 Steelview - Unit  5  50,000.00 Renovation/Reconfig.  50,000.00  ## 5-6 Steelview - Unit  50,000.00  ## 5-7 Exterior  10,000.00 Door/Porch Renovation  PA 5-2 Exterior  PA 5-5 Complete Rehab  100,000.00 Buildings 7,9, & 10
Development	## AMP 1  ## 20
Development   Quantity   Estimated Cost   Development   Quantity   Estimated Cost   Number/Name   Quantity   Estimated Cost   Development   Quantity   Q	## 20 \$ 1,089,521.00 Develop of UFAS Units  10,000.00 PA 5-3 HVAC  100,000.00 Units  100,000.00 Units  5 50,000.00 Renovation/Reconfig.  50,000.00 AMP 2
Mork Statement For Year   2015   Estimated Cost   Development   Quantity   2016	## 20 ## 1,089,521.00   PA 5-1 Complete Rehab & 10,000.00   PA 5-3 HVAC    of
Pay 5-3 Site   Work   Statement   FFY   2015   Estimated   Cost   Development   Quantity   Quanti	## 20 ## 1,089,521.00   PA 5-1 Complete Rehab &   1,089,521.00   Develop of UFAS Units   10,000.00   PA 5-3 HVAC   PA 5-4 Complete Rehab of   100,000.00   Units   PA 5-6 Steelview - Unit   50,000.00   Renovation/Reconfig.
Development   Development   Quantity   Estimated Cost   Development   Quantity   Quant	## AMP 1  ## 20 ## 1,089,521.00   PA 5-1 Complete Rehab & PA 5-3 HVAC    10,000.00   PA 5-3 HVAC   PA 5-4 Complete Rehab of PA 5-6 Steelview - Unit PA
Number/Name   Development	&       AMP 1         &       20       \$ 1,089,521.00       Develop of UFAS Units         of       10,000.00       PA 5-3 HVAC         PA 5-4 Complete Rehab of 100,000.00       PA 5-4 Complete Rehab of Units
Work Statement for year 2015    Pry 2015	& 20 \$ 1,089,521.00 Develop of UFAS Units  10,000.00 PA 5-3 HVAC
Work Statement for year 2015  FFY 2015  Development  Number/Name  General Description of Major Work Categories  AMP 1  PA 5-1 Complete Rehab & 20  PA 5-1 Complete Rehab & 20  S 1,089,521.00  PA 5-1 Complete Rehab & 20  PA 5-1 Complete Rehab & 20  PA 5-1 Complete Rehab & 20	& 20 \$ 1,089,521.00 Develop of UPAS Units
Mork Statement for year 2015  FFY 2015  Development Number/Name  General Description of Major Work Categories  AMP 1  MORK Statement for year 2016  FFY 2016  FFY 2016  FFY 2016  And	AMP
Mork Statement for rear 2015 Work Statement for rear 2016  PFY 2015 Estimated Cost Development Number/Name  General Description of Major Work Categories Major Work Categories	
Mork Statement for year 2015 work Statement for year 2016  Development Quantity Estimated Cost Development Quantity  Number/Name General Description of General Description of	
Number/Name    Work Statement for year 2015   Work Statement for year 2016	General
Development Or rear 2015 Estimated Cost Development Quantity Estimated Cost	
WORK Statement for year 2015 Work Statement for year 2016	Quantity Estimated Cost Development
Work Statement for rear	2015 FFY
2074	Work Statement for Year 2014 Work Statement for Year

									Statement	Annual	<b>以春</b> 春			2011	Year 1 FFY	Statement for	Work	Part II:
Sub								Consulting fees	Computer and Security Equipment		COCC Administration Fee	Major Work Categories	General Description of	Number/Name	Development		Work States	Supporting Pages
Subtotal of Estimated Cost															Quantity	FFY 2013	Work Statement for Year 2012	Pages-Management Needs
\$ 235,502.00								10,000.00	10,000.00		\$215,502.00				Estimated Cost			s Work Statement(s)
								Consulting fees	Computer and Security Equipment		COCC Administration Fee	Major Work Categories	General Description of	Number/Name	Development		Work State	(s)
															Quantity	FFY 2014	Work Statement for Year 2013	
\$ 235,502.00								10,000.00	10,000.00		\$215,502.00				Estimated Cost		J.,	

									Statement	Annual	な事中			2011	Year 1 FFY	Statement for	Work	Part II: :
Sub								Consulting fees	Equipment		COCC Administration Fee	Major Work Categories	General Description of	Number/Name	Development		Work States	Supporting Pages
Subtotal of Estimated Cost															Quantity	FFY 2015	Work Statement for Year 2014	Pages-Management Needs
\$ 235,502.00								10,000.00	10,000.00		\$215,502.00				Estimated Cost			s Work Statement(s)
								Consulting fees	Equipment		COCC Administration Fee	Major Work Categories	General Description of	Number/Name	Development		Work State	(8)
															Quantity	FFY 2016	Work Statement for Year 2015	
\$ 235,502.00								10,000.00	10,000.00		\$215,502.00				Estimated Cost		_[ G	

# McKeesport Housing Authority Participation in Mixed Finance & Capital Fund Financing Program PHA Plan FFY 2011

#### Participation in Mixed Finance & Capital Fund Financing Program

In order to leverage its annual appropriation of Capital Funds the Housing Authority plans to apply for Low Income Housing Tax Credits and the Capital Fund Financing Program in order to increase the pool of public funds available to rehabilitate, modernize, acquire or create additional housing opportunities. Additional details will be provided in Annual Statements.

The Authority plans to apply for the next bond pool available in order to accomplish the following objectives:

1) Expedite 504 compliance in Crawford Village

2) Reduce the backlog of uncompleted vacant units in Crawford Village.

3) Obtain a cost savings in renovating PA 5-1 by completing the work in one phase versus piece-meal

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

U.S. Department of Housing and Urban Developm Office of Public and Indian Housing OMB No. 2577-0226

					Expires 4/30/2011
Part I:	: Summary				
PHA Name:	е:	Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2010
McKees	McKeesport Housing Authority	Date of CFFP:	PA	PA28P005501-10	FFY of Grant Approval:
					2011
Type of	of Grant				
□ Original	☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies	✓ Revis	Revised Annual Statement (revision no.	<u>1</u>	
☑ Perform	Performance and Evaluation Report for Period Ending 09/30/2010	☐ Fina	Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estir	Estimated Cost	Total Actu	Actual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)		-		1
s cu	1408 Management Improvements	30,000.00	215 502 00	212 202 00	1
5		1	-	1	1
6	1415 Liquidated Damages	1	L	1	1
7	1430 Fees and Costs	250,000.00	25,000.00	-	1
8	1440 Site Acquisition		-		1
9	1450 Site Improvement	259,521.00	559,785.11	-	-
10	1460 Dwelling Structures	650,000.00	300,000.00	1	
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	1
12	1470 Non-dwelling Structures	500,000.00	925,335.89	925,335.89	1
13	1475 Non-dwelling Equipment	20,000.00	129,400.00	49,400.00	-
14	1485 Demolition	100,000.00	1	-	1
15	1492 Moving to Work Demonstration	-			-
16	1495.1 Relocation Costs	30,000.00	1		-
17	1499 Development Activities 4	1	-	1	1
18a	1501 Collaterization or Debt Service paid by the PHA	100,000.00	-1	-	-
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	1	1	ı	1
19	1502 Contingency (may not exceed 8% of line 20)		1	-	-
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 2,155,023.00	\$ 2,155,023.00 \$	1,190,237.89	\$
21	Amount of line 20 Related to LBP Activities			1	1
22	Amount of line 20 Related to Section 504 Compliance	375,000.00	-		1
23	Amount of line 20 Related to Security - Soft Costs		-	1	1
24	Amount of line 20 Related to Security - Hard Costs	15,000.00			1
25	line	-	1	1	1

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To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:	Replacement	Replacement Housing Factor Grant No:	2010
McKeesport Housing Authority	Date of CFFP:		PA28P005501-10	FFY of Grant Approval:
				2011
Type of Grant				
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.	1	
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final Pe	☐ Final Performance and Evaluation Report		
Line   Summary by Development Account	Total Estimated Cost	mated Cost	Total A	Total Actual Cost 1
	Original	Revised ²	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	ng Director	Date
2 00 -				

Expires 4/30/2011

Part II: Sup	II: Supporting Pages							
PHA Name:		Grant Type and Number	Number	CFFP:	✓ Yes □ No	Federal FY of Gr	Grant:	
W-W	U)	Capital Fund Program Grant No:	ram Grant No:	PA28P005501-10	-10	3010		
McNeesborn	r monatrid warmonter	Replacement Housing	ng Factor Grant No:	nt No:		L C		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
1 AMA								
PA 5-1	Site Work	1450.00	5	59,521.00	559,785.11			
	Repayment of debt financing	1501.00		100,000.00	-			
	A/E Fees	1430.00	N PART AND A	200,000.00	25,000.00			
	Community/Storage Building	1470.00		500,000.00	905,335.89	905,335.89		
	Community/Office Eqt & Furniture	1475.00			99,400.00	49,400.00		
	Repair gym floor	1470.00			20,000.00	20,000.00		
	Computer equipment	1475.00			15,000.00			
PA 5-4	Demolition of 5 Buildings	1485.00		100,000.00	-			Moved to a
	Relocation Costs	1495.10		30,000.00				later year.
PA 5-6	504 Conversion - Steelview Manor	1460.00	9	250,000.00	300,000.00			
AMP 2								
PA 5-6	504 Conversion - Isbir Manor	1460.00	3	150,000.00	-			Complete
	Computer equipment	1475.00			7,500.00			
PA 5-11 & 12	Demolition of Church for a recreation park	1450.00		200,000.00	r			Moved to a
	Architect/Engineering fees	1430.00		25,000.00				later year.

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

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

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

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

To be completed for the 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
Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name:	McKeesport Housing Authority	y Authority			Federal FY of Grant: 2010
Development Number	All Funds Obligated	Obligated	All Funds	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Er	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	
PA 5-1	6/30/2012		6/30/2013		
PA 5-4	6/30/2012		6/30/2013		
PA 5-6	6/30/2012		6/30/2013		
PA 5-6	6/30/2012		6/30/2013		
PA 5-7	6/30/2012		6/30/2013		
PA 5-11 & 12	6/30/2012		6/30/2013		

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



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
Expires 4/30/2011

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t III: Implementation Schedule for Capital Fund Financing Program

Name:	McKeesport Housing Authority	g Authority			Federal FY of Grant: 2010
evelopment Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Ending Date)	nding Date)	Reasons for Revised Target Dates
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

Obligation and expenditure end dates 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 and Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

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

Expires 4/30/2011

OMB No. 2577-0226

	Communicat 3				
HA Name:		Grant Type and Number		I	Federal FY of Grant:
		Capital Fund Program Grant No		Replacement Housing Factor Grant No:	2009
icKees	ckeesport Housing Authority	Date of CFFP:			FFY of Grant Approval:
					2010
ype of Grant	rant				
Origina	Original Annual Statement Reserve for Disasters/Emergencies	✓ Revis	Revised Annual Statement (revision no.	2	
☑ Perform	Performance and Evaluation Report for Period Ending 09/30/2010	☐ Fina	Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated	ated Cost	Total Actual Cost	al Cost 1
		Original	Revised 2	Obligated	Expended
Н	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	-		1	1
3	1408 Management Improvements	10,000.00	10,000.00	1	1
4	1410 Administration	216,688.00	216,688.00	216,688.00	216,688.00
5	1411 Audit			1	1
6	1415 Liquidated Damages				1
7	1430 Fees and Costs	212,000.00	238,899.91	150,566.06	38,342.26
80	1440 Site Acquisition	-	1	1	-
9	1450 Site Improvement	50,000.00	145,762.28	95,762.28	95,762.28
10	1460 Dwelling Structures	1,183,201.00	860,538.81	1,282,302.85	1,010,876.24
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	-
12	1470 Non-dwelling Structures	-	500,000.00	421,569.81	1
13	1475 Non-dwelling Equipment	70,000.00	70,000.00	1	1
14	1485 Demolition	125,000.00	125,000.00	1	1
15	1492 Moving to Work Demonstration		1	1	1
16	1495.1 Relocation Costs	-	1	1	
17	1499 Development Activities 4	I	1	1	1
18a	1501 Collaterization or Debt Service paid by the PHA	300,000.00	1	1	1
18ba	9000 Collaterization or Debt Service paid Via System of Direct Payment	•		•	•
19	1502 Contingency (may not exceed 8% of line 20)				1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 2,166,889.00	\$ 2,166,889.00 \$	2,166,889.00	\$ 1,361,668.78
21	Amount of line 20 Related to LBP Activities	-	1	1	-
22	Amount of line 20 Related to Section 504 Compliance	375,000.00	375,000.00	249,617.55	190,710.65
23	Amount of line 20 Related to Security - Soft Costs		1	1	-
24	Amount of line 20 Related to Security - Hard Costs	15,000.00	15,000.00	1	1
27	Amount of line 20 Related to Energy Conversation Measures	-	1		1

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To be completed for the Performance and Evaluation Report.

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

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

RHF funds shall be included here.

I: Summary				
Vame :	Grant Type and Number			Federal FY of Grant:
eesport Housing Authority	Capital Fund Program Grant No: Date of CFFP:	Replacement Hou	Replacement Housing Factor Grant No: PA28P005501-09	2009 FFY of Grant Approval: 2010
of Grant  Reserve for Disasters/Emergencies		✓ Revised Annual Statement (revision no.	<u> </u> Σ	
rformance and Evaluation Report for Period Ending 09/30/2010	☐ Final F	Final Performance and Evaluation Report		
Summary by Development Account	Total Estimated Cost	ated Cost	Total Act	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
nature of Executive Director	Date	Signature of Public Housing Director	Director	Date
Sty 2 Bulley	12/1/2010			

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

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

Part II: Sup	Supporting Pages							
PHA Name:		Grant Type and Number	Number	CFFP:	✓ Yes	Federal FY of Grant:	ant:	
Mokapanort	Housing Authority	Capital Fund Program Grant No:	ram Grant No:	PA28P005501-09	-09	2009		
 		Replacement Housing Factor Grant	ng Factor Gran	t No:				
Development	General Description of Major Work	Development	Quantity	Total Estimated	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 1								
PA 5-1	Complete renovation of rowhouses	1460.00	5	958,201.00	3,682.64			
	Site Work	1450.00		50,000.00	50,000.00			
	Repayment of debt financing	1501.00		300,000.00	-			
	A/E Fees	1430.00		200,000.00	200,000.00	123,666.15	12,692.15	
	Community and Storage Building	1470.00			500,000.00	421,569.81		
PA 5-4	Demolition 5 Buildings	1485.00	5	125,000.00	125,000.00			
	A/E Fee - Demolition	1430.00		12,000.00	12,000.00			
PA 5-6	504 Conversion - Steelview Manor	1460.00	9	100,000.00	25,000.00			
	Exterior Railings/Central Laundry- Steelview	1460.00			250,000.00	450,913.36	399,925.44	399,925.44 90% Complete
	A/E Fee - 504 Conversion	1430.00	6		778.12	778.12	778.12	Complete
AMP 2								
PA 5-6	504 Conversion - Isbir Manor	1460.00	9	100,000.00	25,000.00	107,248.44	52,338.23	50% Complete
	Exterior Railings/Central Laundry- Isbir	1460.00			250,000.00	402,372.02	352,179.90	352,179.90 90% Complete
	A/E Fee - 504 Conversion	1430.00	3		1,678.13	1,678.13	1,678.13	1,678.13 Complete
PA 5-5	Moran Field	1450.00			95,762.28	95,762.28	95,762.28	Complete
	Heating System Upgrade	1460.00	27		74,185.00	74,185.00	74,185.00	Complete

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



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

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

Part II: Sup	II: Supporting Pages							
PHA Name:		Grant Type and Number	Number	CFFP:	✓ Yes	Federal FY of Grant:	mt:	
McKeesport	McKeesport Housing Authority	Capital Fund Program Grant No:	ram Grant No:	PA28P005501-09	-09	2009		
h	0	Replacement Housing Factor Grant	ng Factor Gran	t No:				
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	aal Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 3								
PA 5-7	504 Conversion	1460.00	9	25,000.00	25,000.00	39,912.86	35,916.17	
	Boiler Replacement - A/E Fees	1430.00			24,443.66	24,443.66	23,193.86	
	Boiler Replacement	1460.00			207,671.17	207,671.17	96,331.50	
PHA Wide	Tenant Outreach, Security Systems	1408.00		5,000.00	5,000.00			
	Consulting Services	1408.00		5,000.00	5,000.00			
	Computer Equipment/Software	1475.00		70,000.00	70,000.00			
	COCC Administrative Fee	1410.00		216,688.00	216,688.00	216,688.00	216,688.00	

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

2 To be completed for the Performance and Evaluation Report.



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

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

Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2009
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Ending Date)	ding Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	
PA 5-1	6/30/2010	3/31/2010	6/30/2011		
PA 5-5	6/30/2010	3/31/2010	6/30/2011	6/30/2010	
PA 5-6	6/30/2010	3/31/2010	6/30/2011		
PA 5-7	6/30/2010	3/31/2010	6/30/2011		

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



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

		T V									Н	PHA	Par
									Activities	Name/PHA-Wide	Development Number	PHA Name:	t III: Implementati
							End Date	Original Obligation		(Quarter E	All Funds	McKeesport Housing Authority	on Schedule for Capit
							End Date	Actual Obligation		(Quarter Ending Date)	All Funds Obligated	y Authority	Part III: Implementation Schedule for Capital Fund Financing Program
							End Date	Original Obligation		(Quarter E	All Funds		gram
							End Date	Actual Obligation		Ending Date)	All Funds Expended		
										Reasons for Revised Target Dates 1		Federal FY of Grant: 2009	

¹ Obligation and expenditure end dates 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 and Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

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

OMB No. 2577-0226 Expires 4/30/2011

Fart T:	Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant	No:	Replacement Housing Factor Grant No:	2009
McKeesport	port Housing Authority	Date of CFFP:			FFY of Grant Approval:
					2010
Type of Grant	irant				
Origina Origina	Original Annual Statement Reserve for Disasters/Emergencies	✓ Revised	ed Annual Statement (revision no.	2	
✓ Perform	Performance and Evaluation Report for Period Ending 09/30/2010	☐ Fina	Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estima	Estimated Cost	Total Actual Cost	ual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)	1	1	1	-
ω	1408 Management Improvements	1	-	1	-
4	1410 Administration	1	1	1	1
5	1411 Audit	1	-	1	
6	1415 Liquidated Damages	1	1	1	1
7	1430 Fees and Costs	300,000.00	338,601.50	338,601.50	317,261.50
8	1440 Site Acquisition	-	1	1	1
9	1450 Site Improvement	1,230,000.00	606,260.68	606,260.68	606,260.68
10	1460 Dwelling Structures	375,000.00	138,002.27	138,002.27	138,002.27
11	1465.1 Dwelling Equipment - Nonexpendable	1	-	1	1
12	1470 Non-dwelling Structures	1,179,882.00	2,002,017.55	2,002,017.55	1,381,394.54
13	1475 Non-dwelling Equipment	1	-	1	1
14	1485 Demolition	1	1	1	1
15	1492 Moving to Work Demonstration		1	1	i
16	1495.1 Relocation Costs		1	-	1
17	1499 Development Activities 4		-	1	-
18a	1501 Collaterization or Debt Service paid by the PHA	1	1	1	-
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	1	1	1	
19	1502 Contingency (may not exceed 8% of line 20)	1	1		
20	-	\$ 3,084,882.00	\$ 3,084,882.00	\$ 3,084,882.00	\$ 2,442,918.99
21	Amount of line 20 Related to LBP Activities				-
22	Amount of line 20 Related to Section 504 Compliance		1	1	-
23	Amount of line 20 Related to Security - Soft Costs		1	1	-
24	Amount of line 20 Related to Security - Hard Costs		1	1	1
25	Amount of line 20 Related to Energy Conversation Measures	1	1	1	

9A 005 E01

To be completed for the Performance and Evaluation Report.

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

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

RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:	Replacement Hou	Replacement Housing Factor Grant No:	2009
McKeesport Housing Authority	Date of CFFP:		PA28S00551-09	FFY of Grant Approval:
				2010
Type of Grant				
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		✓ Revised Annual Statement (revision no.	N J	
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final	Final Performance and Evaluation Report	·	
Line   Summary by Development Account	Total Estimated Cost	mated Cost	Total Ac	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
Hel & Buckley	12/1/2010			
	the state of the s	The second secon		

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

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

Part II: Sup	II: Supporting Pages							
PHA Name:		Grant Type and Number	umber	CFFP:	✓ Yes	Federal FY of Grant:	nt:	
Vario cont	Housing Buthority	Capital Fund Program Grant No:	ram Grant No:	PA28S00551-09	09	2009		
200000000000000000000000000000000000000		Replacement Housing Factor Grant	ng Factor Gran	t No:		1		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	al Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
AND 4						האדרתמנכת	pyberraea -	
PA5-1	Ashestos/Environmental Remediation	1450.00	17	900,000,00	348 460 68	348 460 68	348 460 68	Complete
		1450.00						
	Site Preparation	1450.00	17	330,000.00	257,800.00	257,800.00	257,800.00	Complete
	Community building	1470.00	_	779,882.00	1,618,148.30	1,618,148.30	1,064,044.37	60% Complete
	Storage Building	1470.00	1	250,000.00	383,869.25	383,869.25	317,350.17	60% Complete
	Assistant Escipos	1420 00	4	200 000 00	220 601 60	220 601 60	247 264 60	COOK Complete
	C							
PA 5-6	UFAS Compliance	1460.00	5	75,000.00	-	1	1	
Steelview								
AMP II								
PA 5-2	Community Building Renovations	1470.00	ω	150,000.00		1	1.	
PA 5-6 Isbir	UFAS Compliance	1460.00	ω	50,000.00	-	-		

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

2 To be completed for the Performance and Evaluation Report.

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

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

Part II: Sup	II: Supporting Pages			And the second s		A STATE OF THE STA		
	i i	Grant Type and Number	Tumber	CFFP:	S No	Federal FY of Grant:	nt:	
McKeesport	McKeesport Housing Authority	Capital Fund Program Grant No:	cam Grant No:	PA28S00551-09	09	2009		
		Replacement Housing Factor Grant No:	ig Factor Gran					
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	aal Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
AMP III								
PA 5-7 Towers	UFAS Compliance	1460.00	5	250,000.00	138,002.27	138,002.27	138,002.27	Complete

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

^{2 1} To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Expires 4/30/2011

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

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	
PA 5-1 Crawford Village	2/28/2010	3/31/2010	2/28/2012		
PA 5-7 Towers	2/28/2010	3/31/2010	2/28/2012		

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

Office of Public and Indian Housing

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

capital rund rinancing Program	1g Program				EXPIRES 4/30/2011
Part III: Implementati	III: Implementation Schedule for Capital Fund Financing Program	l Fund Financing Prog	)ram		
PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
	McKeesborr Honsting	variot + c \lambda			2009
Development Number	All Funds Obligated	Obligated	All Funds	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Ending Date)	ding Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



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

U.S. Department of Housing and Urban Developm Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

Part I:	Summary							
PHA Name:		Grant	Grant Type and Number					Federal FY of Grant:
		Capita	Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	using Fac	ctor Grant No:	2009
McKees	McKeesport Housing Authority	Date	Date of CFFP:			PA00500000209E		FFY of Grant Approval:
								2010
Type of Grant	3rant							
□ Original	☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		☑ Revise	d Annual Statem	☑ Revised Annual Statement (revision no.	ļμ	<u> </u>	
☑ Performa	Performance and Evaluation Report for Period Ending 09/30/2010		☐ Final	Performance and	☐ Final Performance and Evaluation Report			
Line	Summary by Development Account		Total Estimated Cost	ated Cost			Total Actual Cost	ual Cost 1
					Revised 2		Obligated	Expended
1	Total non-CFP Funds	-53	15,000.00	\$	15,000.00	-S	15,000.00	
2	1406 Operations (may not exceed 20% of line 21) 3		1		1		1	1
ω	1408 Management Improvements		1		1		1	1
4			1		1		-	1
20 (	1415 Liquidated Damages		1		-		1	1
7			5,000.00		11,328.79		11,328.79	11,328.79
8	1440 Site Acquisition		-		1		1	-
9	1450 Site Improvement		1		1		1	1
10	1460 Dwelling Structures		142,000.00	1	133,415.00		133,415.00	133,415.00
11	1465.1 Dwelling Equipment - Nonexpendable		81,000.00		83,256.21		83,256.21	-
12	1470 Non-dwelling Structures		1		1		1	1
13	1475 Non-dwelling Equipment		1		1		1	1
14	1485 Demolition		1		1		1	1
15	1492 Moving to Work Demonstration		1		1		1	1
16	1495.1 Relocation Costs		1		1		1	1
17	1499 Development Activities 4		1		1		1	1
18a	1501 Collaterization or Debt Service paid by the PHA		1		1		1	
18ba	9000 Collaterization or Debt Service paid Via System of Direct							
19	1502 Contingency (may not exceed 8% of line 20)		1		1		1	ı
20		\$	228,000.00	\$ 2	228,000.00	\$	228,000.00	\$ 144,743.79
. 21	Amount of line 20 Related to LBP Activities		1		1		1	1
22	Amount of line 20 Related to Section 504 Compliance		125,000.00	П	133,415.00		133,415.00	133,415.00
23	Amount of line 20 Related to Security - Soft Costs				1		1	1
24	line 20 Related to				-		-	1
25	Amount of line 20 Related to Energy Conversation Measures		1		1		1	1

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

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

RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2009
McKeesport Housing Authority	Date of CFFP:		PA00500000209E	FFY of Grant Approval:
				2010
Type of Grant □ Original Annual Statement □ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.	<b>⊥</b>	
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final F	☐ Final Performance and Evaluation Report	,	
Line   Summary by Development Account	Total Esti	Total Estimated Cost	Total A	Total Actual Cost 1
	Original	Revised ²	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
A UD L	13/1/3010			
	H I I I I I I I I I I I I I I I I I I I			

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

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

Part II: Supp	Supporting Pages							
PHA Name:		Grant Type and Number	Number	CFFP:	☑ Yes ☐ No	Federal FY of Grant:	ant:	
McKeesport	Housing Authority	Capital Fund Program Grant No: PA	ram Grant No:	PA00500000209E	09E	2009		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2								
PA 5-6 Isbir	Fire Alarm Panel, pull stations, audio	1460.00	73	142,000.00	133,415.00	133,415.00	133,415.00	
	and visual indicators							
	Wireless call to aide system	1465.10	73	81,000.00	83,256.21	83,256.21		
	Architect/Engineering Fees	1430.00	1	5,000.00	11,328.79	11,328.79	11,328.79	
The second secon								

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

Annual Statement / Performance and Evaluation Report
Capital Fund Program, 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

art II: Supporting Pages	orting Pages							
HA Name:		Grant Type and Number	Number	CFFP:	☑Yes □ No	Federal FY of Grant:	ant:	
Acknown	CKeesport Housing Buthority	Capital Fund Prog	ram Grant No:	Capital Fund Program Grant No: PA00500000209E		2009		
TO POSTOR		Replacement Housing Factor Grant No:	ng Factor Gran	it No:		1000		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	nated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
The second secon		The second secon			The second secon	And the second s	The second secon	

 $^{1\,}$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

To be completed for the Performance and Evaluation Report.

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

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

AMP 2 PHA Name: Part III: Implementation Schedule for Capital Fund Financing Program Development Number Name/PHA-Wide Capital Fund Financing Program Activities PA 5-6 McKeesport Housing Authority Original Obligation 8/31/2010 End Date (Quarter Ending Date) All Funds Obligated Actual Obligation 8/31/2010 End Date Original Obligation 8/31/2011 End Date (Quarter Ending Date) All Funds Expended Actual Obligation End Date Federal FY of Grant: Reasons for Revised Target Dates 1 2009 Expires 4/30/2011

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



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
Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	g Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	D)
Name/PHA-Wide Activities	(Quarter Ending Date)	nding Date)	(Quarter Ending Date)	ding Date)	Reasons for Revised Target Dates 1
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

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

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

Part I:	Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2008
McKees	McKeesport Housing Authority	Date of CFFP:		PA28P005501-08	FFY of Grant Approval:
					2009
Type of Grant	Srant			The state of the s	
□ Original	☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies	✓ Revised	sed Annual Statement (revision no.	ω	
☑ Performa	Performance and Evaluation Report for Period Ending 09/30/2010	☑ Fina	☐ Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	mated Cost	Total Actual Cost	cual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds		\$ 25,000.00		
2	1406 Operations (may not exceed 20% of line 21) 3	213,704.00		1	1
ω		35,000.00	-	1	1
4	1410 Administration	213,704.00	213,704.00	213,704.00	213,704.00
5	1411 Audit	1	1	1	1
6	1415 Liquidated Damages	T	1	T	1
7	1430 Fees and Costs	50,000.00	530,589.61	530,589.61	530,589.61
8	1440 Site Acquisition	25,000.00	1	ı	1
9	1450 Site Improvement	250,000.00	217,228.50	217,228.50	217,228.50
10	1460 Dwelling Structures	729,636.00	1,171,121.89	1,171,121.89	1,171,121.89
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	1
12	1470 Non-dwelling Structures	1	1	1	1
13	1475 Non-dwelling Equipment	15,000.00	1	-	1
14	1485 Demolition	Ī	1	f	1
15	1492 Moving to Work Demonstration		1	1	1
16	1495.1 Relocation Costs	5,000.00	4,400.00	4,400.00	4,400.00
17	1499 Development Activities 4	1		1	1
18a	1501 Collaterization or Debt Service paid by the PHA	600,000.00	1	1	
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	SIIC .				
19	ingency (may n				
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 2,137,044.00	\$ 2,137,044.00	\$ 2,137,044.00	\$ 2,137,044.00
21	Amount of line 20 Related to LBP Activities	1	1	1	1
22	Amount of line 20 Related to Section 504 Compliance	450,000.00	450,000.00	450,000.00	425,000.00
23	Amount of line 20 Related to Security - Soft Costs		1	1	1
24	Amount of line 20 Related to Security - Hard Costs	15,000.00	1	1	1
25	Amount of line 20 Related to Energy Conversation Measures	1	_	_	1

2



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

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

⁴ RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2008
McKeesport Housing Authority	Date of CFFP:		PA28P005501-08	FFY of Grant Approval:
				2009
Type of Grant	]			
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.	lω	
Performance and Evaluation Report for Period Ending 09/30/2010	✓ Final	☑ Final Performance and Evaluation Report		
Line Summary by Development Account	Total Est	Total Estimated Cost	Total Ac	Total Actual Cost 1
	Original	Revised ²	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	ng Director	Date
/ July of I will low-	12/1/2010			

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

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

Part II: Sup	Part II: Supporting Pages							
PHA Name:		Grant Type and Number	Number	CFFP:	☐ Yes ☑ No	Federal FY of Grant:	ant:	
MCKOO STOTT		Capital Fund Program Grant No:	ram Grant No:	PA28P005501-08	80-	2008		
		Replacement Housing Factor Grant	ng Factor Gran	nt No:				
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 1								
PA 5-1	Complete renovation of rowhouses	1460.00	5	29,636.00				
	Site Work	1450.00		50,000.00	-			
	A/E fees	1430.00		50,000.00	283,849.33	283,849.33	283,849.33	
PA 5-1	Repayment of debt financing	1501.00		600,000.00				
	Relocation Costs	1495.10			100.00	100.00	100.00	
	Physical Needs Assessment	1430.00			52,281.02	52,281.02	52,281.02	
	Energy Audit	1430.00			37,583.00	37,583.00	37,583.00	
PA 5-6	504 Conversion - Steelview Manor	1460.00	9	50,000.00				
PA 5-6	Elevator Replacement -Steelview Manor	1460.00	_	250,000.00	304,309.05	304,309.05	304,309.05	
	Replace Railings & Central Laundry	1460.00	8		153,698.27	153,698.27	153,698.27	
	A/E Fees - Railings & Central Laundry	1430.00			37,837.29	37,837.29	37,837.29	
AMP 2								
PA 5-6	Elevator Replacement - Isbir Manor	1460.00	1	250,000.00	295,012.41	295,012.41	295,012.41	
	504 Conversion - Isbir Manor	1460.00	9	50,000.00	126,836.61	126,836.61	126,836.61	
	Relocation Costs	1495.10	6	5,000.00				
	Replace Railings & Central Laundry	1460.00	8	152,411.68	152,411.68	152,411.68	152,411.68	
PA 5-5	Insulation/Weatherization	1460.00			14,375.00	14,375.00	14,375.00	14,375.00 Moved from prior yr

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



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

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

PHA Name:		Grant Type and Number	lumber	CFFP:	☐ Yes ☑ No	Federal FY of Gra	Grant:	
		Capital Fund Program Grant No:	ram Grant No:	PA28P005501-08	80-	3000		
MCVeesborr	r Housting Warringtrey	Replacement Housing Factor Gra	ng Factor Gra			1000		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2 (Continued)	ıtinued)							
	A/E Fees - Railings & Central Laundry	1430.00	2		41,425.59	41,425.59	41,425.59	
PA 5-5	Renovation of Moran Field:	1450.00						
	Site work (grading/fencing/bleachers)	1450.00		75,000.00	160,000.00	160,000.00	160,000.00	160,000.00 City of McKeesport
	Concrete sidewalks, pads, steps	1450.00			57,228.50	57,228.50	57,228.50	to provide: paving
	Asphalt material only	1450.00						labol o eqt.
	A/E Fees	1430.00			62,370.82	62,370.82	62,370.82	
PA 5-11	Purchase land for playground/park	1440.00	1	25,000.00				
	Demo structure and site improvements	1450.00	1	125,000.00				
AMP 3								
PA 5-7	504 Conversion	1460.00	9	100,000.00	124,478.87	124,478.87	124,478.87	
	A/E Fees	1430.00			15,242.56	15,242.56	15,242.56	
	Tenant Relocation	1495.10	16		4,300.00	4,300.00	4,300.00	
PHA Wide	Tenant Outreach, Security Systems	1408.00		15,000.00				
	Consulting Services	1408.00		20,000.00	ľ	-		
	Computer Equipment	1475.00		15,000.00				
	Operating Costs	1406.00		213,704.00				
	COCC Administrative Fee	1410.00		213,704.00	213,704.00	213,704.00	213,704.00	

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



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
Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	g Authority			Federal FY of Grant: 2008
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Er	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	
PA 5-1 Renov of					
rowhouses/site work	12/31/2008	12/31/2008	3/31/2001	3/31/2010	
PA 5-6 Elev Replaceme	12/31/2008	12/31/2008	3/31/2009	3/31/2009	
Railings/Laundry	9/30/2009	9/30/2009	3/31/2010	3/31/2010	
PA 5-6 Isb Elev					
Replacement	12/31/2008	12/31/2008	3/31/2009	3/31/2009	
Railings/Laundry	9/30/2009	9/30/2009	3/31/2010	3/31/2010	
PA 5-5 Moran Field	9/30/2008	9/30/2009	3/31/2010	3/31/2010	
PA 5-7 504 Conversion	6/30/2009	6/30/2009	9/30/2009	9/30/2009	

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



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

PHA Name:	McKeesport Housing Authority	, Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Er	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



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

> U.S. Department of Housing and Urban Developm Office of Public and Indian Housing

4/30/2011	Expires		
2577-0226	OMB No.		
-		1	- 1

S .	To construct on Z				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant N	0:	Replacement Housing Factor Grant No:	2009
McKees	McKeesport Housing Authority	Date of CFFP:		PA28R005501-10	FFY of Grant Approval:
					2010
Type of Grant	rant				
Origina	Original Annual Statement Reserve for Disasters/Emergencies	□ Re	Revised Annual Statement (revision no.	1	
✓ Perform	✓ Performance and Evaluation Report for Period Ending 09/30/2010		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Esti	Total Estimated Cost	Total Actual	ual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)	1	1	1	1
. ω	1408 Management Improvements			t	1
ω 4	1411 Audit	1	1	1 3	1 1
6	1415 Liquidated Damages	1	1	t	1
7	1430 Fees and Costs				1
8	1440 Site Acquisition	1	1		1
9	1450 Site Improvement	1	1		
10	1460 Dwelling Structures	1	1		-
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	
12	1470 Non-dwelling Structures	1	1	1	1
13	1475 Non-dwelling Equipment	1	1	1	1
14	1485 Demolition	1	1	1	1
15	1492 Moving to Work Demonstration	ı	1	1	1
16	1495.1 Relocation Costs	1	1	1	1
17	1499 Development Activities 4	124,302.00	1	1	1
18a	1501 Collaterization or Debt Service paid by the PHA	1	1	1	1
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	ray mette			1	
6T	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 124,302.00	٠.	-0	-70
21	line		1	1	
22	Amount of line 20 Related to Section 504 Compliance	124,302.00	1		
23	Amount of line 20 Related to Security - Soft Costs		1		1
24	Amount of line 20 Related to Security - Hard Costs		1	1	1
25	Amount of line 20 Related to Energy Conversation Measures	1	1	1	-



To be completed for the Performance and Evaluation Report.

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

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

RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
McKeesport Housing Authority	Capital Fund Program Grant No: Date of CFFP:	Rep	PA28R005501-10	2009 FFY of Grant Approval: 2010
Type of Grant				2010
Type of Grant ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.		
Performance and Evaluation Report for Period Ending 09/30/2010	Final	☐ Final Performance and Evaluation Report		1
Line Summary by Development Account	Total Esti	Total Estimated Cost	Total Ac	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	g Director	Date
Let I I Duckland	12/1/2010			

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

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

Part II: Suppo	Supporting Pages							
Jame		Grant Type and Number	lumber	CFFP:	Yes 🗸 No	Federal FY of Grant:	nnt:	
McKeesport F	Housing Authority	Capital Fund Program Grant No: Replacement Housing Factor Gr	ng Factor Gra	Capital Fund Program Grant No: Replacement Housing Factor Gra PA28R005501-10	10	2009		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
AMP 2 PA 5-13 1	1 New Scattered Site UFAS 3BR	1499.00	1	124,302.00				Design
3								

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

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

Expires 4/30/2011

F	,				
PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds	Funds Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

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

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Capital Fund Financing Program	Program				Expires 4/30/2011
Part III: Implementation Schedule for Capital Fund Financing Program	on Schedule for Capita	.l Fund Financing Prog	)ram		
PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

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

> U.S. Department of Housing and Urban Developm Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

Part I:	Part I: Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2011
McKees	McKeesport Housing Authority	Date of CFFP:		PA28R005501-11	FFY of Grant Approval:
					2012
Type of Grant	Skant				
✓ Origina	✓ Original Annual Statement	□ Re	Revised Annual Statement (revision no.	- )	
☐ Perform	Performance and Evaluation Report for Period Ending		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Esti	Total Estimated Cost	Total Actual Cost	ual Cost 1
Shirt Section		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	1	1	1	-
ω	1408 Management Improvements		-	-	1
4	1410 Administration	-	1	ı	1
5	1411 Audit	1	-		_
6	1415 Liquidated Damages	1	1	1	1
7	1430 Fees and Costs	1	-	1	
80	1440 Site Acquisition	-	1	1	1
9	1450 Site Improvement	1	1	1	1
10	1460 Dwelling Structures	1	1	1	-
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	1
12	1470 Non-dwelling Structures	1	1	-1	
13	1475 Non-dwelling Equipment	T	1	T	1
14	1485 Demolition	ī	1	T	1
15	1492 Moving to Work Demonstration	1	1	ı	1
16	1495.1 Relocation Costs	1	1	T	1
17	1499 Development Activities 4	124,302.00	1	ı	1
18a	1501 Collaterization or Debt Service paid by the PHA	1	1	1	
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	1	1	1	1
19	1502 Contingency (may not exceed 8% of line 20)	1	1	1	1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 124,302.00	-0.	₹0.	₹0:
21	Amount of line 20 Related to LBP Activities	1	1	I	1
22	Amount of line 20 Related to Section 504 Compliance	124,302.00	-		
23	Amount of line 20 Related to Security - Soft Costs		1		1
24	line		1	1	
25	Amount of line 20 Related to Energy Conversation Measures	1	1	1	-

To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:	Replacement I	Replacement Housing Factor Grant No:	2011
McKeesport Housing Authority	Date of CFFP:		PA28R005501-11	FFY of Grant Approval:
				2012
Type of Grant ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.		
Performance and Evaluation Report for Period Ending —	Final F	Final Performance and Evaluation Report		
Line Summary by Development Account	Total Estimated Cost	nated Cost	Total A	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housi	lic Housing Director	Date
The Districtions	12/1/2010			

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

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

Part II: Supporting Pages	orting Pages							
PHA Name:		Grant Type and Number	lumber	CFFP:	☐ Yes ☑ No	Federal FY of Grant:	mt:	
Makapanort	McKeesport Housing Authority	Capital Fund Program Grant No:	cam Grant No:			2011		
Tacked a poor c	monoting suctionary	Replacement Housing Factor Gra PA28R005501-11	ng Factor Gra	PA28R005501-	11	C H		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	nated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2 PA 5-13	1 New Scattered Site UFAS 3BR	1499.00	1	124,302.00				Design

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

2 To be completed for the Performance and Evaluation Report.

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

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

Expires 4/30/2011

PHA Name:	McCoosport Housing Buthority	מולילים מולים מולים מולילים מו			Federal FY of Grant:
					TT02
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates $^{\mathrm{1}}$
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

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

Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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¹ Obligation and expenditure end dates 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 and Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

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

OMB No. 2577-0226 Expires 4/30/2011

Fare T:	Summary						-
PHA Name:		Grant Type and Number	mber			Federal FY of Grant:	_
		Capital Fund Program Grant No:	gram Grant		Replacement Housing Factor Grant No:	2009	_
McKees	McKeesport Housing Authority	Date of CFFP:			PA28R005501-09	FFY of Grant Approval:	_
						2010	_
Type of Grant	xant						
☐ Origina	☐ Reserve for Disasters/Emergencies		☐ Revise	Revised Annual Statement (revision no.	-		_
✓ Perform	Performance and Evaluation Report for Period Ending 09/30/2010		☐ Final	Final Performance and Evaluation Report			_
Line	Summary by Development Account	ı	Total Estimated Cost	ted Cost	Total Actual	tual Cost 1	_
		Original		Revised 2	Obligated	Expended	
1	Total non-CFP Funds						-
2	1406 Operations (may not exceed 20% of line 21)		1	1	1	1	_
ω	1408 Management Improvements		1	1	1	1	-
4	1410 Administration		,	1	1	1	-
ப	1411 Audit		1	1	1	1	_
0	1415 Liquidated Damages		1	1	1	1	_
7	1430 Fees and Costs		1	1	1	1	_
00	1440 Site Acquisition		1	1	1	1	_
9	1450 Site Improvement		1	1	1	1	_
10	1460 Dwelling Structures		ı	1	1		_
11	1465.1 Dwelling Equipment - Nonexpendable		1	1	1	1	_
12	1470 Non-dwelling Structures		1.	1	1	t	-
13	1475 Non-dwelling Equipment		1	1	1		-
14	1485 Demolition		1	1	1	1	-
15	1492 Moving to Work Demonstration		-	1	1	1	-
16	1495.1 Relocation Costs		1	1	1	I	_
17	1499 Development Activities 4	125,	125,616.00	1	1	1	_
18a	1501 Collaterization or Debt Service paid by the PHA		1	-1	1	1	_
18ba	9000 Collaterization or Debt Service paid Via System of Direct						
			-		1	1	-
19			1	1		1	-
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 125,	616.00	1	-0.2	-0.2	-
21	Amount of line 20 Related to LBP Activities		1	1	1	1	-
22	Amount of line 20 Related to Section 504 Compliance	125,	125,616.00	1			_
23	Amount of line 20 Related to Security - Soft Costs			1		1	_
24	Amount of line 20 Related to Security - Hard Costs				1		_
25	Amount of line 20 Related to Energy Conversation Measures		1	1	1	1	_
							1

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To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:	Replacement Hou	Replacement Housing Factor Grant No:	2009
McKeesport Housing Authority	Date of CFFP:		PA28R005501-09	FFY of Grant Approval:
				2010
Type of Grant				
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.	I	
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final I	Final Performance and Evaluation Report		
Line Summary by Development Account	Total Estimated Cost	mated Cost	Total Actual Cost	tual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
Steel 2 Buckleur	12/1/2010			

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

Part II: Supporting Pages	orting Pages							
PHA Name:		Grant Type and Number	umber	CFFP:	Yes V No	Federal FY of Grant:	ant:	
McKeesport	McKeesport Housing Authority	Capital Fund Program Grant No: Replacement Housing Factor Gr	ng Factor Gra	Capital Fund Program Grant No: Replacement Housing Factor Gra PA28R005501-09	09	2009		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2 PA 5-13	1 New Scattered Site UFAS 3BR	1499.00	1	125,616.00				Design

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

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

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

Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2009
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

U.S. Department of Housing and Urban Development

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

Office of Public and Indian Housing Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2009
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

¹ Obligation and expenditure end dates 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 and Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Developm
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

Part I:	Part I: Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2009
McKees	McKeesport Housing Authority	Date of CFFP:		PA28R005502-09	FFY of Grant Approval:
					2010
Type of Grant	rant				
Origina	Original Annual Statement Reserve for Disasters/Emergencies	Re	Revised Annual Statement (revision no.		
✓ Perforn	Performance and Evaluation Report for Period Ending 09/30/2010.		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Esti	Total Estimated Cost	Total Actual Cost	tual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)	-	-	_	1
ω	1408 Management Improvements	1	1	-	-
4	1410 Administration		1	1	1
5	1411 Audit	1	1	1	1
6	1415 Liquidated Damages	1	1	1	1
7	1430 Fees and Costs	1	1	-	1
8	1440 Site Acquisition	1	1	1	1
9	1450 Site Improvement	1	1		_
10	1460 Dwelling Structures	1	1	1	
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	1
12	1470 Non-dwelling Structures	1	ı	1	1
13	1475 Non-dwelling Equipment	1	1	1	1
14	1485 Demolition	1	1	-	T
15	1492 Moving to Work Demonstration	1	1	1	1
16	1495.1 Relocation Costs	1	1	1	F
17	1499 Development Activities 4	175,467.00	1		1
18a	1501 Collaterization or Debt Service paid by the PHA	1		-	1
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	1	1	1	
19	1502 Contingency (may not exceed 8% of line 20)	1	1	-	1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 175,467.00	₹0.	-€0:	₹\$
21	Amount of line 20 Related to LBP Activities	1	1		1
22	Amount of line 20 Related to Section 504 Compliance	175,467.00			
23	Amount of line 20 Related to Security - Soft Costs		1		-
24	line		-1	1	I
25	Amount of line 20 Related to Energy Conversation Measures	1	I	1	_

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

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Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
	Capital Fund Program Grant No:	Replacement Hou	Replacement Housing Factor Grant No:	2009
McKeesport Housing Authority	Date of CFFP:		PA28R005502-09	FFY of Grant Approval:
				2010
Type of Grant				
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.		
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final I	Final Performance and Evaluation Report		
Line Summary by Development Account	Total Estimated Cost	nated Cost	Total Ac	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
2 20 1				
Med a jucation	12/1/2010			

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

Part II: Supporting Pages	orting Pages							
PHA Name:		Grant Type and Number	umber	CFFP:	Yes I No	Federal FY of Grant:	int:	
Makeenort	McKeesport Housing Authority	Capital Fund Program Grant No:	am Grant No:			2009		
		Replacement Housin	ng Factor Gra	Replacement Housing Factor Gra PA28R005502-09	09			
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2 PA 5-13	1 New Scattered Site UFAS 3BR	1499.00	1	175,467.00				Design

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

 $^{^{2}}$  To be completed for the Performance and Evaluation Report.

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

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

Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2009
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



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

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

Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2009
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

¹ Obligation and expenditure end dates 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 and Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Developm
Office of Public and Indian Housing
OMB No. 2577-0226

					Expires 4/30/2011
Part I:	Part I: Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant No:		Replacement Housing Factor Grant No:	2008
McKees	McKeesport Housing Authority	Date of CFFP:			FFY of Grant Approval:
					2009
Type of Grant	rant				
☐ Origina	☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies	□ Revised	sed Annual Statement (revision no.	-	
✓ Perform	Performance and Evaluation Report for Period Ending 09/30/2010		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3		1		_
ω	1408 Management Improvements	1	1	1	_
4	1410 Administration	1	-	-	-
5	1411 Audit		1	_	_
6	1415 Liquidated Damages		1	ı	1

Perioriii	La Lettotilique qui examatori reboit foi reiba ciming		and training and training report		
Line	Summary by Development Account	Total Estima	ated Cost	Total Actual Cost	ual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)		_	1	
ω	1408 Management Improvements	-	-	t	
4	1410 Administration		1	1	
ហ	1411 Audit			_	
6	1415 Liquidated Damages	_	1	-1	
7	1430 Fees and Costs		_	1	
80	Acq				
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		1	1	
15	1492 Moving to Work Demonstration	1	1		
16	1495.1 Relocation Costs		-	-	
17	1499 Development Activities 4	134,968.00			
18a	1501 Collaterization or Debt Service paid by the PHA	1	1	-	
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	1	1	1	
19	1502 Contingency (may not exceed 8% of line 20)	1	1	1	
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 134,968.00	1	₹\$-	₹03-
21	Amount of line 20 Related to LBP Activities	1	1		
22	Amount of line 20 Related to Section 504 Compliance	134,968.00	1		
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs		1		
25	Amount of line 20 Related to Energy Conversation Measures	1			

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

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art I: Summarv				
HA Name:	Grant Type and Number			Federal FY of Grant:
CKeesport Housing Authority	Capital Fund Program Grant No: Date of CFFP:	Replacement House	Replacement Housing Factor Grant No: PA28R005501-08	2008  FFY of Grant Approval: 2009
ype of Grant  Original Annual Statement  Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.		
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final P	Final Performance and Evaluation Report	`	
Line Summary by Development Account	Total Estimated Cost	ated Cost	Total A	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
Step & Thicknew	12/1/2010			
9	The second secon			

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

Part II: Supp	II: Supporting Pages							
PHA Name:		Grant Type and Number	lumber	CFFP:	Yes 🗸 No	Federal FY of Grant:	nt:	
Maroogoort	Goneine Buthority	Capital Fund Program Grant No:	cam Grant No:			2008		
TO CO	הנהעפפס ליסדי יוי מים דיות שיתיוי דיר ל	Replacement Housi	ng Factor Gra	Replacement Housing Factor Gra PA28R005501-08	80	1000		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	al Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1		Funds	
						COL		
AMP 2 PA 5-13 1	New Scattered Site UFAS 3BR	1499.00	1	134,968.00				Design

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

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

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

Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program  DHA Name:	on Schedule for Capita	al Fund Financing Prog	(ram		4
PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2008
Development Number	All Funds	All Funds Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	nding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates ¹
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Capital Fund Financing Program	g Program				Expires 4/30/2011
Part III: Implementation Schedule for Capital Fund Financing Program	on Schedule for Capita	l Fund Financing Prog	)ram		
PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Er	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

¹ Obligation and expenditure end dates 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 Financing Program Capital Fund Program and Capital Fund Program Replacement Housing Factor and

> U.S. Department of Housing and Urban Developm Office of Public and Indian Housing

Expires 4/30/2011

OMB No. 2577-0226

Part I:	Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant N	0:	Replacement Housing Factor Grant No:	2008
McKees	McKeesport Housing Authority	Date of CFFP:		PA28R005502-08	FFY of Grant Approval:
					2009
Type of Grant	Frant				
Origin	Original Annual Statement Reserve for Disasters/Emergencies	Re	Revised Annual Statement (revision no.	· ·	
✓ Perforr	Performance and Evaluation Report for Period Ending 09/30/2010		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Esti	Total Estimated Cost	Total Actual Cost	ual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)	1	1	1	-
ω	1408 Management Improvements	1	Ī	ſ	1
4	1410 Administration	1	í	f	ť
5	1411 Audit	1	1	i	ſ
6	1415 Liquidated Damages	1	1	-1	1
7	1430 Fees and Costs	ſ	1	1	1
8	1440 Site Acquisition	1	1	1	1
9	1450 Site Improvement	1	1	-1	1
10	1460 Dwelling Structures	-1	1	1	
11	1465.1 Dwelling Equipment - Nonexpendable	ı	1	1	1
12	1470 Non-dwelling Structures	1	1	1	1
13	1475 Non-dwelling Equipment	1	1	1	1
14	1485 Demolition	1	1	1	1
15	1492 Moving to Work Demonstration	L	1	ī	1
16	1495.1 Relocation Costs	-1-	1.	I.	1
17	1499 Development Activities 4	165,084.00	I	1	1
18a	1501 Collaterization or Debt Service paid by the PHA	ı	1	ī	1
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
19	1502 Contingency (may not exceed 8% of line 20)	1	1	1	1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 165,084.00	-t∆r	₹02	₹02-
21	Amount of line 20 Related to LBP Activities	1			
22	Amount of line 20 Related to Section 504 Compliance	165,084.00	1		
23	Amount of line 20 Related to Security - Soft Costs				-
24	Amount of line 20 Related to Security - Hard Costs		1	1_	1
25	Amount of line 20 Related to Energy Conversation Measures			1	1

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To be completed for the Performance and Evaluation Report.

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

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

RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
McKeesport Housing Authority	Capital Fund Program Grant No: Date of CFFP:	Replacement Hou	PA28R005502-08	2008  FFY of Grant Approval:
Type of Grant				
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.	 	
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final I	Final Performance and Evaluation Report	· ·	
Line   Summary by Development Account	Total Estimated Cost	mated Cost	Total Ac	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
Step of Suchland	12/1/2010			

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

Part II: Suppo	II: Supporting Pages							
PHA Name:		Grant Type and Number	umber	CFFP:	Yes 🗸 No	Federal FY of Grant:	mt:	
McKeesport 1	Housing Authority	Capital Fund Program Grant No: Replacement Housing Factor Gr	am Grant No:	Capital Fund Program Grant No: Replacement Housing Factor Gra PA28R005502-08	08	2008		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2 PA 5-13 1	1 New Scattered Site UFAS 3BR	1499.00	1	165,084.00				Design

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

2 To be completed for the Performance and Evaluation Report.

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

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

Expires 4/30/2011

Part III: Implementati	Part III: Implementation Schedule for Capital Fund Financing Program	l Fund Financing Prog	yram		
PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Capital Fund Financing Program

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2008
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter Er	Ending Date)	Reasons for Revised Target Dates $^{\mathrm{1}}$
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

¹ Obligation and expenditure end dates 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 and Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

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

Expires 4/30/2011

OMB No. 2577-0226

FOTC T:	эшшат ў				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant N	0:	Replacement Housing Factor Grant No:	2007
McKees	McKeesport Housing Authority	Date of CFFP:		PA28R005501-07	FFY of Grant Approval:
					2008
Type of Grant	rant				
☐ Origina	Original Annual Statement   Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.		
✓ Perform	Performance and Evaluation Report for Period Ending 09/30/2010		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Est	Estimated Cost	Total Act	Actual Cost 1
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	1	ì	1	1
ω	1408 Management Improvements	1	1	1	-
4	1410 Administration	1	1	1	Î
ហ	1411 Audit	1	1	1	1
6	1415 Liquidated Damages	1	1	1	1
7	1430 Fees and Costs	1	1	1	1
8	1440 Site Acquisition	1	1	1	
9	1450 Site Improvement	1	1	T	1
10	1460 Dwelling Structures	1	1	1	1
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	1	1
12	1470 Non-dwelling Structures	1	1	1	1
13	1475 Non-dwelling Equipment	1	1	1	1
14	1485 Demolition	1	1	1	-1
15	1492 Moving to Work Demonstration	1	1	1	1
16	1495.1 Relocation Costs	1	1	1	
17	1499 Development Activities 4	40,567.00	1	ı	1
18a	1501 Collaterization or Debt Service paid by the PHA	1	1	1	-
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	1		1	
19	1502 Contingency (may not exceed 8% of line 20)		-	1	1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 40,567.00	-0.	٠	-{\chi_{\chi_{\chi}}}
21	Amount of line 20 Related to LBP Activities		1	1	1
22	Amount of line 20 Related to Section 504 Compliance		1		
23	Amount of line 20 Related to Security - Soft Costs		1		1
24	Amount of line 20 Related to Security - Hard Costs		1	1	
25	Amount of line 20 Related to Energy Conversation Measures		_		

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To be completed for the Performance and Evaluation Report.

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

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

RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
McKeesport Housing Authority	Capital Fund Program Grant No: Date of CFFP:		No:	2007  FFY of Grant Approval:
McKeesport Housing Authority	Date of CFFP:	I m	PA28R005501-07	FFY of Grant Approval: 2008
Type of Grant  Original Annual Statement  Reserve for Disasters/Emergencies		ceil Revised Annual Statement (revision no.	- ,	
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final	Final Performance and Evaluation Report	,	
Line   Summary by Development Account	Total Esti	Total Estimated Cost	Total Actual Cost	ual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	Director	Date
	12/1/2010			
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Annual Statement / Performance and Evaluation Report Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Part II: Suppo	II: Supporting Pages							
PHA Name:		Grant Type and Number	Number	CFFP:	☐ Yes ☑ No	Federal FY of Grant:	nt:	
Makapanort	McKeesport Housing Buthority	Capital Fund Program Grant No:	ram Grant No:			2007		
Tack deport	TO COLLEGE STATE OF THE STATE O	Replacement Housing Factor Gra PA28R005501-07	ng Factor Gra	PA28R005501-	.07			
Development	General Description of Major Work	Development	Quantity	Total Esti	Total Estimated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds		
						טטיד דאמר במת	Pyberraea -	
AMP 2 PA 5-13 1	New Scattered Site UFAS 3BR	1499.00	1	40,567.00				Design
			The second secon					

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

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

Part II: Supp	II: Supporting Pages							
PHA Name:		Grant Type and Number	<b>Tumber</b>	CFFP:	☐ Yes ☑ No	Federal FY of Grant:	mt:	
Makapanort	McKeesport Housing Buthority	Capital Fund Program Grant No:	cam Grant No:			2007		
Track Cop Door o	TOUR TITE SECTION TO	Replacement Housing Factor Gra PA28R005501-07	ng Factor Gra	PA28R005501-	07	1000		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	mated Cost	Total Actual Cost	ual Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	

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

^{2 1} To be completed for the Performance and Evaluation Report.

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

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

Expires 4/30/2011

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PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2007
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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

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

Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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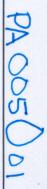
¹ Obligation and expenditure end dates can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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

> U.S. Department of Housing and Urban Developm Office of Public and Indian Housing

Expires 4/30/2011 OMB No. 2577-0226

Part I:	Summary				
PHA Name:		Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant N	0:	Replacement Housing Factor Grant No:	2006
McKees	McKeesport Housing Authority	Date of CFFP:		PA28R005501-06	FFY of Grant Approval:
					2007
Type of Grant	irant				
Origina	Original Annual Statement Reserve for Disasters/Emergencies	□ Re	Revised Annual Statement (revision no.	 	
✓ Perforn	✓ Performance and Evaluation Report for Period Ending 09/30/2010		Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Est:	Total Estimated Cost	Total Act	Actual Cost 1
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	1	-	1	1
ω	1408 Management Improvements	-	1	1	-
4	1410 Administration	ı	-	1	1
ហ	1411 Audit	1	1	1	1
6	1415 Liquidated Damages	-1	1	1	1
7	1430 Fees and Costs	ı	1	1	1-
80	1440 Site Acquisition	1	-	1	1
9	1450 Site Improvement	1	1	1	1
10	1460 Dwelling Structures	1	1	T	1
11	1465.1 Dwelling Equipment - Nonexpendable	1	1	ı	-
12	1470 Non-dwelling Structures	1	1	1	1
13	1475 Non-dwelling Equipment	1	-1	1	1
14	1485 Demolition	F	-	1	-
15	1492 Moving to Work Demonstration	1	1	1	1
16	1495.1 Relocation Costs	L	1	1	1
17	1499 Development Activities 4	37,923.00	1	1	-
18a	1501 Collaterization or Debt Service paid by the PHA	1	1	1	1
18ba	9000 Collaterization or Debt Service paid Via System of Direct				
	Payment	-1	1	ť	1
19	1502 Contingency (may not exceed 8% of line 20)	1	1	1	1
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 37,923.00	₹0.	1	₹0.
21	Amount of line 20 Related to LBP Activities	T	1	1	1
22	Amount of line 20 Related to Section 504 Compliance	37,923.00	1	1	1
23	Amount of line 20 Related to Security - Soft Costs		T	1	
24	Amount of line 20 Related to Security - Hard Costs		1	Į.	1
25	Amount of line 20 Related to Energy Conversation Measures	1	1	-	



To be completed for the Performance and Evaluation Report.

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

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

RHF funds shall be included here

Part I: Summary				
PHA Name:	Grant Type and Number			Federal FY of Grant:
McKeesport Housing Authority	Capital Fund Program Grant No: Date of CFFP:	Replacement H	Replacement Housing Factor Grant No: PA28R005501-06	2006  FFY of Grant Approval:  2007
□ Original Annual Statement □ Reserve for Disasters/Emergencies		Revised Annual Statement (revision no.		
Performance and Evaluation Report for Period Ending 09/30/2010	☐ Final P	Final Performance and Evaluation Report		
Line   Summary by Development Account	Total Estimated Cost	ated Cost	Total Ac	Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing Director	g Director	Date
An D Dulley	12/1/2010			

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

Part II: Suppo	II: Supporting Pages							
PHA Name:		Grant Type and Number	(umber	CFFP:	Yes V No	Federal FY of Grant:	nt:	
Moderanort	McKeesport Housing Authority	Capital Fund Program Grant No:	cam Grant No:			2006		
		Replacement Housi	ng Factor Gra	Replacement Housing Factor Gra PA28R005501-06	06	1		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	al Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1	Funds	Funds	
						Obligated 2	Expended 2	
AMP 2 PA 5-13 N	New Scattered Site - UFAS 3BR	1499.00	1	37,923.00				

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

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

Don't TT. Ginon								
PHA Name:	Vame:	Grant Type and Number	Number	CFFP:	Yes V No	Federal FY of Grant:	nt:	
Moderanort	McKeesport Housing Authority	Capital Fund Program Grant No:	ram Grant No:			2006		
		Replacement Housi	ng Factor Gra	Replacement Housing Factor Gra PA28R005501-06	06	0		
Development	General Description of Major Work	Development	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	al Cost	Status of Work
Number	Categories	Account No.						
Name/HA-Wide								
Activities								
				Original	Revised 1			
						Obligated ~	Expended	

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

^{2 1} To be completed for the Performance and Evaluation Report.

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

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

Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant: 2006
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



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

Expires 4/30/2011

PHA Name:	McKeesport Housing Authority	Authority			Federal FY of Grant:
Development Number	All Funds Obligated	Obligated	All Funds Expended	Expended	
Name/PHA-Wide	(Quarter Ending Date)	ding Date)	(Quarter En	Ending Date)	Reasons for Revised Target Dates 1
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



Expires 4/30/2011

Part I:	Summary					
PHA Name		Grant	Type and Number			Federal FY of Grant:
		Caniba	1 Don't Don't Don't			CFFP
			al Fund Program Gran	Replacement Ho	ousing Factor Grant No:	CFF
McKees	sport Housing Authority	Date	of CFFP:	In Process		FFY of Grant Approval:
						CFFP
						CFFP
Type of G	Frant					
	al Annual Statement Reserve for Disasters/Emergencies		Пъ	deed According to the control of the		
				vised Annual Statement (revision no.	- )	
Perform	nance and Evaluation Report for Period Ending		☐ Fir	nal Performance and Evaluation Report		
Line	Summary by Development Account		Total Esti	mated Cost	Total Ac	tual Cost 1
			Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	\$	8,950,000.00			
2	1406 Operations (may not exceed 20% of line 21) 3					
3	1408 Management Improvements				The state of the s	(
4	1410 Administration				- 100 m	
5	1411 Audit					-
6	1415 Liquidated Damages				- 11	
7	1430 Fees and Costs				-	
8	1440 Site Acquisition					
9	1450 Site Improvement		350,000.00	Company and the second	-	
10	1460 Dwelling Structures		3,650,000.00			
11	1465.1 Dwelling Equipment - Nonexpendable					
12	1470 Non-dwelling Structures			- lai	T. 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 - 170 -	
13	1475 Non-dwelling Equipment				-	
14	1485 Demolition				- 1	
15	1492 Moving to Work Demonstration			<u></u>		Company and the company and the
16	1495.1 Relocation Costs		14	-		-
17	1499 Development Activities 4				100 100 100 100 100 100 100 100 100 100	REPORT OF THE PROPERTY OF THE PARTY OF THE P
18a	1501 Collaterization or Debt Service paid by the PHA					- //
18ba	9000 Collaterization or Debt Service paid Via System of Direct					
	Payment		Author the			
19	1502 Contingency (may not exceed 8% of line 20)				- C	
20	Amount of Annual Grant (Sum of lines 2-19)	\$	4,000,000.00	\$ -	\$ -	\$ -
21	Amount of line 20 Related to LBP Activities					MINIES RETURNING AND THE
22	Amount of line 20 Related to Section 504 Compliance		1,200,000.00			
23	Amount of line 20 Related to Security - Soft Costs				M	-
24	Amount of line 20 Related to Security - Hard Costs				TT	
25	Amount of line 20 Related to Energy Conversation Measures					



¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part	1: Summary					
PHA Na	me: esport Housing Authority	Grant Type and Number  Capital Fund Program Grant No: Date of CFFP:	Replacement Ho	ousing Factor Grant No:	Federal FY of Grant:  CFFP  FFY of Grant Approval:  CFFP	
☑ Orig	E Grant  Jinal Annual Statement  Reserve for Disasters/Emerge primance and Evaluation Report for Period Ending		ed Annual Statement (revision no.	- )		
Line   Summary by Development Account		Total Estimated Cost			otal Actual Cost 1	
		Original	Revised 2	Obligated	Expended	
0	tal 2 Ruellew	Date 12/1/2010	Signature of Public Housing	g Director	Date	

PHA Name: McKeesport	Housing Authority	Grant Type and N Capital Fund Progra Replacement Housis	ram Grant No: ng Factor Gra	CFFP - In F		Federal FY of Gra		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estin	mated Cost	Total Actu	al Cost	Status of Wor
				Original	Revised 1	Funds Obligated 2	Funds Expended ²	
AMP 1	Complete renovation and/or new	1460.00	52	3,650,000.00				Design
PA 5-1	units including UFAS units	1450.00		350,000.00				

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

 $^{^{2}}$  To be completed for the Performance and Evaluation Report.

Annual Statement / Performance and Evaluation Report

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Capital Fund Financing Program

Part II: Sup	porting Pages							
PHA Name:	Housing Authority	Grant Type and Capital Fund Prog Replacement Hous	gram Grant No:	CFFP - In	√Yes No Process	Federal FY of Gra	ant:	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Esti	mated Cost	Total Act	ual Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
							New York Control of the Control of t	

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

² To be completed for the Performance and Evaluation Report.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Office of Public and Indian Housing

Capital Fund Financing Program

Expires 4/30/2011

PHA Name:	McKeesport Housing	Authority			Federal FY of Grant: CFFP
Development Number	All Funds	Obligated	All Funds	Expended	
Name/PHA-Wide	(Quarter En	ding Date)	(Quarter En	ding Date)	Reasons for Revised Target Dates
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	
MP 1 - PA 5-1	12/31/2012		9/30/2014		

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

Capital Fund Financing Program

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Office of Public and Indian Housing

Expires 4/30/2011

PHA Name:  McKeesport Housing Authority					Federal FY of Grant: CFFP
Development Number	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		
Name/PHA-Wide					Reasons for Revised Target Dates
Activities					
	Original Obligation	Actual Obligation	Original Obligation	Actual Obligation	
	End Date	End Date	End Date	End Date	

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



# McKeesport Housing Authority RHF Debt Financing and Participation in Capital Fund Financing Program PHA Plan FFY 2011

#### Participation in Capital Fund Financing Program

In order to leverage its annual appropriation of Capital Funds the Housing Authority plans to participate in a financing plan using 4% or 9% Tax Credits, an Energy Performance Contract, and a loan with PNC Bank via the Capital Fund Financing Program to rehabilitate PA 5-1. Additional details will be provided in Annual Statements.

RHF funds will also be utilized in the event additional demolition of structures are deemed feasible as opposed to rehab.



### PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the  $\times$  5-Year and/or  $\times$  Annual PHA Plan for the PHA fiscal year beginning 2011 _____, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.



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

McKeesport Housing Authority	PA005
PHA Name	PHA Number/HA Code
5-Year PHA Plan for Fiscal Years 20 - 20 12 Annual PHA Plan for Fiscal Years 20 1 - 20 12  Annual PHA Plan for Fiscal Years 20 1 - 20 12  Thereby certify that all the information stated herein, as well as any information provide prosecute false claims and statements. Conviction may result in criminal and/or civil per	ed in the accompaniment herewith, is true and accurate. <b>Warning:</b> HUD will
Name of Authorized Official  James R. Brewster	Title Chairman of the Board/Senator
Signature R Buts	Date /////



## Certification of Payments to Influence Federal Transactions

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

Applicant Name		
McKeesport Housing Authority		
Program/Activity Receiving Federal Grant Funding		
Public Housing Operating & Capital Funds and Section 8 Voucher Funding		

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

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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

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

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Title

James R. Brewster

Chairman of the Board/Senator

Signature

Date (mm/dd/yyyy)

1-11-11

Previous edition is obsolete

**form HUD 50071** (3/98) ref. Handboooks 7417.1, 7475.13, 7485.1, & 7485.3



# Certification for a Drug-Free Workplace

### U.S. Department of Housing and Urban Development

Applicant Name  McKeesport Housing Authority			
Program/Activity Receiving Federal Grant Funding			
Public Housing Operating & Capital Funds and Section 8 Vouch	ner Funding		
Acting on behalf of the above named Applicant as its Authoriz the Department of Housing and Urban Development (HUD) regard	red Official, I make the following certifications and agreements to rding the sites listed below:		
I certify that the above named Applicant will or will continue or provide a drug-free workplace by:  a. Publishing a statement notifying employees that the unawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.  b. Establishing an on-going drug-free awareness program to inform employees  (1) The dangers of drug abuse in the workplace;  (2) The Applicant's policy of maintaining a drug-free workplace;  (3) Any available drug counseling, rehabilitation, and employee assistance programs; and  (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.  c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement equired by paragraph a.;  d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	(1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.  e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction Employers of convicted employees must provide notice, including position title, to every grant officer or other designee or whose grant activity the convicted employee was working unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;  f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted  (1) Taking appropriate personnel action against such are employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or		
	<ul> <li>(2) Requiring such employee to participate satisfact rily in a drug abuse assistance or rehabilitation program a proved for such purposes by a Federal, State, or local health, la enforcement, or other appropriate agency;</li> <li>g. Making a good faith effort to continue to maintain a drug</li> </ul>		
Check here if there are workplaces on file that are not identified on the attact. I hereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction may (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)  Name of Authorized Official  James R. Brewster	mance shall include the street address, city, county, State, and zip code ogram/activity receiving grant funding.)  ched sheets.  Formation provided in the accompaniment herewith, is true and accurate y result in criminal and/or civil penalties.  Title Chairman of the Board/Senator		
Signature V Oan R B	1/1c/c1		
	form <b>HUD-50070</b> (3/98) ref. Handbooks 7417.1, 7475.13, 7485.1 & .3		

### **DISCLOSURE OF LOBBYING ACTIVITIES**

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

1. Type of Federal Action:	2. Status of Federa		3. Report Type:			
A a. contract	D	offer/application	A a. initial filing			
b. grant		l award	b. material change			
c. cooperative agreement	c. post-	-award	For Material Change Only:			
d. loan			year quarter			
e. loan guarantee			date of last report			
f. loan insurance	L	T				
4. Name and Address of Reportin			ntity in No. 4 is a Subawardee, Enter Name			
➤ Prime Subawardee		and Address of	Prime:			
Tier	, if known:	D. 1.1: - 11	O			
			Capital Fund Grant 14.850			
		Public Housing - 0	Operating Subsidy 14.855			
		15-004 left street				
Congressional District, if knowl	7: ^{4c}		District, if known:			
6. Federal Department/Agency:		7. Federal Progra	m Name/Description:			
U.S. Department of Housing & Urba	an Development					
		CEDA Number	is annicable.			
		CFDA Number,	if applicable:			
8. Federal Action Number, if known:		9. Award Amount	t, if known:			
		\$				
10. a. Name and Address of Lobb	ving Registrant	b. Individuals Per	rforming Services (including address if			
( if individual, last name, first i		different from N				
		(last name, firs				
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact		Signature:	-R Be			
upon which reliance was placed by the tier above wh	en this transaction was made	Print Name: Yame	es R. Brewster			
or entered into. This disclosure is required pursua information will be available for public inspection. A	Any person who fails to file the					
required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		Title: Chairman of the Board/Senator				
		Telephone No.: 4	12-673-6942 Date: /-//-/)			
Federal Use Only:		The state of the same	Authorized for Local Reproduction			
rederar ose only.			Standard Form LLL (Rev. 7-97)			

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

I, Senator James Brew	ster the	e Chairma	n certi	y that	the	Five	Year	and
Annual PHA Plan of the	McKeespoi	ort Housing Authority	is consistent wi	th the	Cons	olidat	ed Pla	n of
City of McKeesport	prepa	ared pursuant to 24	CFR Part 91.					

Signed / Dated by Appropriate State or Local Official

Rale