Attachment E

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

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 06/30/2017

Part I:	Summary					Expires 00/30/2017		
PHA Na	ime: Housing Authority of the Milwaukee	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:				FFY of Grant: 2017 FFY of Grant Approval:		
Type of ⊠ Orig □ Perf		Reserve for Disasters/Emergencies t for Period Ending:		☐ Revised Annual Stater ☐ Final Performance an				
Line	Summary by Development	Account		Total Estimated Cost		Total Actual Cost ¹		
1	Total non-CFP Funds		Original	Revised ²	Obligated	Expended		
1								
2	1406 Operations (may not exe	ceed 20% of line 21) ³	1,080,000					
3	1408 Management Improvem	nents	100,000					
4	1410 Administration (may no	t exceed 10% of line 21)	540,000					
5	1411 Audit		10,000					
6	1415 Liquidated Damages							
7	1430 Fees and Costs		400,000					
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures		1,730,000					
11	1465.1 Dwelling Equipment-	-Nonexpendable	10,000					
12	1470 Non-dwelling Structures	S	840,000					
13	1475 Non-dwelling Equipmen	nt	10,000					
14	1485 Demolition							
15	1492 Moving to Work Demor	nstration						
16	1495.1 Relocation Costs		576,714					
17	1499 Development Activities	4	10,000					

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

⁴ RHF funds shall be included here.

Part I: S	ummary						
PHA Nam Housing A of the City Milwauke	of Barbaran Grant Type and Number Capital Fund Program Grant No: Barbaran Grant No:		FFY of Grant:207 FFY of Grant Approval:				
Type of Grant Image: Construction of the second							
	rmance and Evaluation Report for Period Ending:			inal Performance and Evaluation Report			
Line	Summary by Development Account		Fotal Estimated Cost		Actual Cost ¹		
		Original	Revised	² Obligated	Expended		
18a	1501 Collateralization or Debt Service paid by the PHA	10,000					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)	83,286					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	5,400,000					
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
Signatur	re of Executive Director Date		Signature of Public Ho	ousing Director	Date		

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⁴ RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: Housing Author	Capital Fun CFFP (Yes/	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2017			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.Quantity		Total Estin	Total Estimated Cost		Total Actual Cost	
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Arlington Court/WI002000013	HVAC Improvements		1460		150,000				
Becher Court/WI002000018	Roofing, roofing repairs, flashing, gutters/downspouts Water infiltration mitigation		1460 1460		200,000				
Hillside Terraee/WI002000001	Family Resource Center improve	ements	1470		165,000				
Lincoln Court/WI002000019	Façade restoration		1460		160,000				
Riverview/WI002000062	HVAC improvements		1460		150,000				
Westlawn/WI002000002	Phase 2 revitalization		1460		300,000				
Central Support East/WI002000016	Roofing, roofing repairs, flashing gutters/downspouts HVAC improvements	g,	1470 1470		150,000 100,000				
Central Support West/WI002000016	Roofing, roofing repairs, flashing gutters/downspouts	g,	1470		250,000				
Community Services Facility	Water infiltration mitigation		1470		175,000				
PHA-wide	Mitigation of environmental haz ADA/504 accommodations Extraordinary maintenance Section 32 Homeownership reha RAD conversion work items Dwelling equipment Non-dwelling equipment		1460 1460 1460 1460 1460 1465.1 1475		50,000 10,000 350,000 10,000 350,000 10,000				
					10,000				

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

² To be completed for the Performance and Evaluation Report.

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form HUD-50075.1 (07/2014)

Part II: Supporting Pages	5								
PHA Name: Housing Authority of the City of Milwaukee			7 pe and Number und Program Grant No es/ No): nent Housing Factor Gr			Federal	FFY of Grant: 2()17	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estimated Cost		d Cost Total Actual Co		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

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A Name: Housing Author	Federal FFY of Grant: 2017				
Development Number Name/PHA-Wide Activities		l Obligated Ending Date)	All Fund (Quarter I	s Expended Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

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

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