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

	Summary				•		
	Ame: IL020 IE HOUSING AUTHORITY Grant Type and Nut Capital Fund Progran Replacement Housing Date of CFFP:	n Grant No: IL01P02050119			FFY of Grant: 2019 FFY of Grant Approval: 2019		
	Grant ginal Annual Statement Reserve for Disaste ormance and Evaluation Report for Period Ending:	rs/Emergencies	☐ Revised Annual Staten ☐ Final Performance and				
Line	Summary by Development Account		al Estimated Cost	_	Total Actual Cost ¹		
	The Land Company	Original	Revised ²	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	\$0.00	\$0.00	\$0.00	\$0.00		
3	1408 Management Improvements	\$105,924.00	\$0.00	\$0.00	\$0.00		
4	1410 Administration (may not exceed 10% of line 21	\$60,095.00	\$0.00	\$0.00	\$0.00		
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	\$40,000.00	\$0.00	\$0.00	\$0.00		
8	1440 Site Acquisition						
9	1450 Site Improvement	\$100,000.00	\$0.00	\$0.00	\$0.00		
10	1460 Dwelling Structures	\$713,226.00	\$0.00	\$0.00	\$0.00		
11	1465.1 Dwelling Equipment—Nonexpendable	\$20,000.00	\$0.00	\$0.00	\$0.00		
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00		
13	1475 Non-dwelling Equipment	\$20,000.00	\$0.00	\$0.00	\$0.00		
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00		

Page1 form **HUD-50075.1** (07/2014)

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

⁴ RHF funds shall be included here.

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

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

Expires 06/30/2017

PHA Nar MOLINE HOUSIN AUTHO	Grant Type and Number Capital Fund Program Grant No: IL01P02050119 Replacement Housing Factor Grant No: Date of CFFP:			of Grant:2019 of Grant Approval: 2019	
Type of (\times Orig	Grant ginal Annual Statement Reserve for Disasters/En		□ Davicad	Annual Statement (revision no:	,
= `	ormance and Evaluation Report for Period Ending:	iergencies	_	erformance and Evaluation Repo	<i>)</i> rt
Line	Summary by Development Account	Total I	Estimated Cost		otal Actual Cost ¹
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,059,245.00	\$0.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	, , , , , , , , , , , , , , , , , , , ,			
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	7 3 3 3	7 0 0 0	7 0 10 0	7 0 0 0
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy Conservation Measures				
Signatu	re of Executive Director	Date Sign	ature of Public Housing	g Director	Date

Page2 form **HUD-50075.1** (07/2014)

¹ To be completed for the Performance and Evaluation Report.

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⁴ RHF funds shall be included here.

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

PHA Name: MOLINE I		nt Type and Number			Federal	FFY of Grant: 20	19		
THA Name. MODINE	ital Fund Program Grant P (Yes/ No):	l Fund Program Grant No: IL01P02050119				reuciai fr i di Grant: 2019			
Development Number Name/PHA-Wide Activities	General Description of Major Wor Categories	k Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
Tedvides				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
PHA-Wide	Software Addit & Upgrades	1408	LS	\$50,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Staff Dev Training	1408	LS	\$50,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Consultants	1408	LS	\$19,400.00	\$0.00	\$0.00	\$0.00	N/A	
	Subtotal	1408		\$119,400.00	\$0.00	\$0.00	\$0.00		
PHA-Wide	Mod Director Salary	1410	LS	\$20,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Accounting Salary	1410	LS	\$20,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Employee Benefits	1410	LS	\$20,095.00	\$0.00	\$0.00	\$0.00	N/A	
	Subtotal	1410		\$60,095.00	\$0.00	\$0.00	\$0.00		
PHA-Wide	A&E Fees	1430	LS	\$40,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Concrete Work	1450	LS	\$80,000.00	\$0.00	\$0.00	\$0.00	N/A	
AMP 1	Resurface Main Road – SV	1450	LS	\$20,000.00	\$0.00	\$0.00	\$0.00	N/A	
	Subtotal	1450		\$100,000.00	\$0.00	\$0.00	\$0.00		
PHA-Wide	Boiler Upgrades – SV & HH	1460	LS	\$50,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Bathroom Remodel – SV & HH	1460	LS	\$200,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA-Wide	Upgrade Electrical Service	1460	LS	\$463,226.00	\$0.00	\$0.00	\$0.00		
	Subtotal	1460		\$713,226.00	\$0.00	\$0.00	\$0.00		
PHA-Wide	Appliances	1465.1	LS	\$20,000.00	\$0.00	\$0.00	\$0.00	N/A	
PHA Wide	Tools and Equipment	1475	LS	\$20,000.00	\$0.00	\$0.00	\$0.00		
	Grand Total			\$1,059,245.00	\$0.00	\$0.00	\$0.00		

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

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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
OMB No. 2577-0226
Expires 06/30/2017

Part II: Supporting Pages	- -									
PHA Name: MOLINE H	A Name: MOLINE HOUSING AUTHORITY ()		Grant Type and Number Capital Fund Program Grant No: IL01P02050119 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2019			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	r Work Development Quantity Total Estimated Account No.		ited Cost	Cost Total Actual Cost		Status of Work			
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²		

Page4 form **HUD-50075.1** (07/2014)

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² To be completed for the Performance and Evaluation Report.

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

Part III: Implementation Sch	edule for Capital Fund	Financing Program			
PHA Name: MOLINE HOU		-			Federal FFY of Grant: 2019
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	04/12/2021		04/12/2023		N/A

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.

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Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 06/30/2017

A Name: MOLINE HOU	Federal FFY of Grant: 2018				
Development Number Name/PHA-Wide Activities	All Fund (Quarter I	Obligated Ending Date)	All Fund (Quarter F	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	

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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.