	Summary					
	nme: Housing Authority of the Milwaukee	Grant Type and Number Capital Fund Program Grant No: W	FFY of Grant: 2018 FFY of Grant Approval:			
		Replacement Housing Factor Gran Date of CFFP:	t No:			
Type of		Reserve for Disasters/Emergenc for Period Ending:	ies	⊠ Revised Annual Statemer □ Final Performance and H	nt (revision no:revision no: 2 Evaluation Report)
Line	Summary by Development		Te	tal Estimated Cost		Total Actual Cost 1
			Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exe	ceed 20% of line 21) ³	\$2,197,472	2,089,464		
3	1408 Management Improvem	ients	\$100,000	100,000		
4	1410 Administration (may not exceed 10% of line 21)		\$878,989	835,786		
5	1411 Audit		\$10,000	10,000		
6	1415 Liquidated Damages			,		
7	1430 Fees and Costs		\$500,000	450,000		
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		\$3,185,000	3,004,178		
11	1465.1 Dwelling Equipment-	-Nonexpendable	\$10,000	10,000		
12	1470 Non-dwelling Structure	S	\$364,986	314,986		
13	1475 Non-dwelling Equipme	nt				
14	1485 Demolition					
15	1492 Moving to Work Demo	nstration				
16	1495.1 Relocation Costs		\$50,000	50,000		
17	1499 Development Activities	4	\$1,001,166	1,001,166		

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

	Summary				•
PHA Na	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: FFY of Grant Approval:	
Type of Orig		r Disasters/Emergencies	a 🗌	Revised Annual Statement (revision no:)
Per	formance and Evaluation Report for Period Ending:		🗆 H	inal Performance and Evaluation Report	
Line	Summary by Development Account		Total Estimated Cost		ctual Cost ¹
		Origin	al Revised	1 ² Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	10,000	10,000		
18ba	9000 Collateralization or Debt Service paid Via System of Payment	Direct			
19	1502 Contingency (may not exceed 8% of line 20)				
20	1503 RAD -CFP	25,241	25,241		
21	1504 RAD Investment Activity	457,036	457,036		
22	Amount of Annual Grant:: (sum of lines 2 - 19)	8,789,890	8,357,857		
23	Amount of line 20 Related to LBP Activities				
24	Amount of line 20 Related to Section 504 Activities				
25	Amount of line 20 Related to Security - Soft Costs				
26	Amount of line 20 Related to Security - Hard Costs				
27	Amount of line 20 Related to Energy Conservation Measure	res			
Signatu	ure of Executive Director	Date	Signature of Public H	ousing Director	Date

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

Part II: Supporting Pages	3									
PHA Name:			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal I	Federal FFY of Grant:			
Development Number Name/PHA-Wide ActivitiesGeneral Description of Major Categories		Work	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
								+		

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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

form HUD-50075.1 (07/2014)

Part II: Supporting Pages	3									
PHA Name:			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal I	Federal FFY of Grant:			
Development Number Name/PHA-Wide ActivitiesGeneral Description of Major Categories		Work	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
								+		

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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

form HUD-50075.1 (07/2014)

Part III: Implementation Schedule for Capital Fund Financing Program								
PHA Name:					Federal FFY of Grant:			
Development Number Name/PHA-Wide Activities		l Obligated Ending Date)		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 Obligated (Quarter Ending Date)			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.