





DRAFT VERSION ~ November 30, 2020

CR-05 - Goals and Outcomes

Progress the jurisdiction has made in carrying out its strategic plan and its action plan. 91.520(a)

This could be an overview that includes major initiatives and highlights that were proposed and executed throughout the program year.

The 2019-2020 Consolidated Annual Performance and Evaluation Report (CAPER) summarizes how the City of Fort Worth (City) spent federal funds for housing and community development, and reports City progress in meeting its goals for the reporting period October 1, 2019 through September 30, 2020. The CAPER includes activities funded by the Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), HOME Investment Partnerships (HOME), and Housing Opportunities for Persons with AIDS (HOPWA) grants. The following is a summary of City progress in meeting its goals:

- 1. Rental Housing: One rental housing development, Mistletoe Station Apartments, a new 100-unit mixed income multifamily complex located in the City's Near Southside Medical District, was completed during the program year, with a total of eleven (11) units. There are also several under construction including the following Columbia at Renaissance Square Phase II Development, The Sphinx at Sierra Vista Senior Villas, and Everly Plaza. Columbia at Renaissance Square Phase II is a 120 unit senior multifamily rental development, which will provide mixed income, quality, affordable, and accessible housing to individuals at a market rate and for individuals who earn sixty percent (60%) or less of the Area Median Income (AMI). The Sphinx at Sierra Vista Senior Villas is a 272-unit affordable housing development restricted to individuals aged 55 years or older and having an income of 60% or less of the AMI. Everly Plaza is an 88-unit senior multifamily residential complex, which will provide mixed income, affordable housing to individuals at a market rate and for individuals who earn thirty percent (30%) or less of the AMI.
- 2. Single-Family Construction: During the program year, there were eleven (11) units completed and sold, but were not completed in IDIS. These eleven will be completed and included in the subsequent CAPER. In addition, there are four single family homes currently in planning stages. All homes will be developed and sold by the City's nonprofit partner, Development Corporation of Tarrant County.
- 3. Homeownership: 70 homebuyers received down payment and closing cost assistance, and 293 households received homewownership training.
- 4. Housing Rehabilitation: 388 low- and moderate-income homeowners received repairs to their homes through the Cowtown Brush-Up Program, Preserve-A-Home, Priority Repair Program, and Lead Safe Program. Also, 59 income-eligible homeowners received accessibility improvements.
- 5. Homeless Housing and Service Activities: 74 persons at risk of becoming homeless were provided with Homelessness Prevention assistance; 96 homeless households received Rapid Rehousing rental assistance and associated case management services. In addition, the City provided funds to support Emergency Shelter Operations on behalf of 6,635 homeless persons.
- 6. Public Service Activities: 692 low-income youth received reading and educational support services; 270 low-income youth received coaching, mentoring, counseling and other services; 1,453 homeless persons received case management and other supportive services; 276 persons with disabilities received support services; 347 seniors received transportation services; 331 low-income persons received educational services to support their ability to find employment; 133 low-income seniors received assistance with financial exploitation prevention services.

Comparison of the proposed versus actual outcomes for each outcome measure submitted with the consolidated plan and explain, if applicable, why progress was not made toward meeting goals and objectives. 91.520(g)

Categories, priority levels, funding sources and amounts, outcomes/objectives, goal outcome indicators, units of measure, targets, actual outcomes/outputs, and percentage completed for each of the grantee's program year goals.

| Goal | Category | Source / Amount | Indicator | Unit of Measure | Expected – Strategic Plan | Actual – Strategic Plan | Percent Complete | Expected – Program Year | Actual – Program Year | Percent Complete |
|----------------------------------------------|---------------------------------------------|--------------------------------------------------|--------------------------------------------------------------------------------------------|------------------------|------------------------------------|-------------------------------|---------------------|----------------------------------|-----------------------------|---------------------|
| Children/Youth Training and Mentorship | Non- Housing Community Development | CDBG: \$428,419.47 | Public service activities other than Low/Moderate Income Housing Benefit | Persons Assisted | 3760 | 1755 | 46.68% | 722 | 962 | 133.24% |
| Homeless Services | Homeless | CDBG: \$163,601.00/ HOPWA: \$ / ESG: \$ | Public service activities other than Low/Moderate Income Housing Benefit | Persons Assisted | 850 | 2587 | 304.35% | 673 | 1453 | 215.90% |
| Homeless Services | Homeless | CDBG: \$ / HOPWA: \$ / ESG: \$ | Public service activities for Low/Moderate Income Housing Benefit | Households Assisted | 375 | 0 | 0.00% | 0 | 0 | 0.00% |

| Homeless Services | Homeless | CDBG: \$ / HOPWA: \$397,064.86/ ESG:\$87,821.8 2 | Tenant-based rental assistance / Rapid Rehousing | Households Assisted | 503 | 267 | 53.08% | 124 | 149 | 120.16% |
|-----------------------------------------------------------|--------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------------|-------|-------|---------|-------|------|---------|
| Homeless Services | Homeless | CDBG: \$ / HOPWA: \$ / ESG:\$355,079. 91 | Homeless Person Overnight Shelter | Persons Assisted | 26615 | 18755 | 70.47% | 3715 | 6635 | 178.60% |
| Homeless Services | Homeless | CDBG: \$ / HOPWA: \$ / ESG:\$125,046. 00 | Homelessness Prevention | Persons Assisted | 4580 | 150 | 3.28% | 125 | 74 | 59.20% |
| Homeless Services | Homeless | CDBG: \$ / HOPWA: \$ / ESG: \$ | Jobs created/retaine d | Jobs | 0 | 0 | | 0 | 0 | |
| Homeless Services | Homeless | CDBG: \$ / HOPWA: \$215,482.15/ ESG: \$ | HIV/AIDS Housing Operations | Household Housing Unit | 300 | 423 | 141.00% | 174 | 163 | 93.68% |
| Improve Accessibility of Public / Private Spaces | Non- Homeless Special Needs | CDBG: \$2,769,069.96 | Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit | Persons Assisted | 10000 | 0 | 0.00% | 11500 | 0 | 0.00% |

| Improve Accessibility of Public / Private Spaces | Non- Homeless Special Needs | CDBG: \$100,000.00 | Homeowner Housing Rehabilitated | Household Housing Unit | 355 | 117 | 32.96% | 65 | 59 | 90.77% |
|-----------------------------------------------------------|---------------------------------------------|---------------------------------------|--------------------------------------------------------------------------------------------|------------------------------|------|-----|--------|-----|-----|---------|
| Poverty Reduction and Household Stabilization | Non- Housing Community Development | CDBG: \$163,449.37 | Public service activities other than Low/Moderate Income Housing Benefit | Persons Assisted | 3850 | 927 | 24.08% | 267 | 331 | 123.97% |
| Preserve Aging Housing Stock | Affordable Housing | CDBG: \$ / HOME: \$ | Rental units rehabilitated | Household Housing Unit | 100 | 0 | 0.00% | 0 | 0 | 0.00% |
| Preserve Aging Housing Stock | Affordable Housing | CDBG: \$1,647,405.76/ HOME: \$ | Homeowner Housing Rehabilitated | Household Housing Unit | 2245 | 889 | 39.60% | 536 | 388 | 72.39% |
| Promote Affordable Housing for Renters/Owners | Affordable Housing | CDBG: \$124,814.39/ HOME: \$ | Public service activities for Low/Moderate Income Housing Benefit | Households Assisted | 2070 | 674 | 32.56% | 375 | 293 | 78.13% |
| Promote Affordable Housing for Renters/Owners | Affordable Housing | CDBG: \$ / HOME: \$2,058,500.00 | Rental units constructed | Household Housing Unit | 64 | 11 | 17.19% | 43 | 11 | 25.58% |
| Promote Affordable Housing for Renters/Owners | Affordable Housing | CDBG: \$ / HOME: \$359,472.97 | Homeowner Housing Added | Household Housing Unit | 36 | 0 | 0.00% | 11 | 0 | 0.00% |

| Promote Affordable Housing for Renters/Owners | Affordable Housing | CDBG: \$ / HOME: \$1,041,306.00 | Direct Financial Assistance to Homebuyers | Households Assisted | 300 | 147 | 49.00% | 45 | 70 | 155.56% |
|--------------------------------------------------------|---------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------|-------|------|--------|-------|-----|---------|
| Support programming for Aging-In- Place | Non- Homeless Special Needs | CDBG: \$252,968.99 | Public service activities other than Low/Moderate Income Housing Benefit | Persons Assisted | 4640 | 1431 | 30.84% | 928 | 756 | 81.47% |
| Targeted Neighborhood Revitalization | Non- Housing Community Development | CDBG: \$ | Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit | Persons Assisted | 11002 | 0 | 0.00% | 10002 | 0 | 0.00% |

 Table 1 - Accomplishments – Program Year & Strategic Plan to Date

Assess how the jurisdiction's use of funds, particulary CDBG, addresses the priorities and specific objectives identified in the plan, giving special attention to the highest priority activities identified.

Goals were met for the following activities:

- Children/Youth Training and Mentoring: 962 low-income youth received training, educational support services, and mentoring for 133.24% of Con Plan Two-Year goal
- Public Services for Homeless: 1453 persons experiencing homelessness were provided case management services for 215.90% of Con Plan Two-Year goal
- Tenant-based Rental Assistance/Rapid Rehousing: 149 households received Tenant-Based Rental Assistance and Rapid Rehousing rental assistance for 120.16% of Con Plan Two-Year goal
- Shelter Services: 6635 persons experiencing homelessness received shelter services for 178.6% of Con Plan Two-Year goal
- Poverty Reduction and Household Stabilization: 331 persons received employment services for 123.97% of Con Plan Two-Year goal
- Homebuyer Assistance Program: 70 first-time homebuyers received down payment and/or closing cost assistance for 155.56% of Con Plan Two-Year goal

Goals were not met for the following activities: 74 persons were provided homeless prevention services, less than the projected 51 persons. 163 persons with HIV/AIDS were assisted with HOPWA STRMU, TBRA, and supportive services with housing, 11 less than anticipated. 59 housholds were assisted with housing accessibility modifications, 6 short of the goal of 65 households assisted. 388 homeowners were assisted with home repairs, 148 less than the anticipated 536 homeowners. 293 first-time homebuyers received housing counseling and education, 82 less that the anticipated 375 persons served. 11 rental units were added, less than the 43 anticipated. 756 out of a projected 928 seniors received services supporting aging in place. No activities took place for rental rehabilitation units, single family homes, or public facilities accessibility improvements. All of these activities are currently in the planning stages and/or underway.

CR-10 - Racial and Ethnic composition of families assisted

Describe the families assisted (including the racial and ethnic status of families assisted). 91.520(a)

Table 2 – Table of assistance to racial and ethnic populations by source of funds

Narrative

The demographics on this table indicate that City-funded programs are effective in reaching low-income minority pouplations. For home repair programs, 80% of Cowtown Brushup homeowner clients were African American ; while 65% of Priority Repair Program clients were African American and 57% were Hispanic. For the Lead Hazard Reduction program, 42% were African American and 50% Hispanic. For REACH, a city subrecipient providing accessibility improvements, 49% of homeowner clients were African American and 36% were Hispanic. For the City-administered Homebuyer Assistance Program, 39% of participants were African American, 34% were Hispanic, and 14% were Asian. For homeless services programs funded with the Emergency Solutions Grant, 52% of the persons assisted were African American and 15% were Hispanic. For program servicing persons living with HIV/AIDS and funded by HOPWA funds, 61% were African American and 10% were Hispanic.

CR-15 - Resources and Investments 91.520(a)

| Source of Funds | Source | Resources Made | Amount Expended |
|-----------------|------------------|-----------------------|---------------------|
| | | Available | During Program Year |
| CDBG | public - federal | 7,420,678 | 8,737,187 |
| HOME | public - federal | 2,737,983 | 3,238,240 |
| HOPWA | public - federal | 1,505,634 | 1,525,435 |
| ESG | public - federal | 616,266 | 663,500 |

Identify the resources made available

 Table 3 - Resources Made Available

Narrative

The above resources made available include all funds allocated for 2019-2020 program year and anticipated program income. The expenditures include funds from both current and prior years, as well as expenditures of program income received during the year. Many projects, such as public facilities or affordable housing development, take more than one year to complete. During the reporting period the following Federal Program Administration requirements were met:

- CDBG: 100% of CDBG funds spent were dedicated to activities that benefitted low- and moderateincome individuals, thus exceeding the 70% minimum standard for overall program benefit. 20% of the CDBG funds expended were spent on planning and administration, thus complying with the 20% cap for administration. 14.28% of the CDBG funds were spent on public service activities, thus complying with the 15% cap for public servicew activities.
- Timeliness Test: The City expended CDBG funds in a timely manner in accordance with HUD regulations, which require that a grantee not have more than 1.5 times its prior year grant amount on hand, 60 days before the end of its program year.
- HOME:HOME funds spent for planning and administration were less thant the 10% cap for administration. The funds expended included Program Income from loan repayments received during the year. The City met the statuory 24-month total commitment and CHDO reservation deadlines for its FY 2018 HOME allocation, as well as the statuory 5-year expenditure requirement for its FY 2015 HOME allocation. The HOME match liability incurred for Program Year (PY) 2019-2020 was \$631,215.13 based on total HOME expenditures for the year. The City had a carry-over from 2018-2019 of \$566,435.65, and contributed an additional \$\$1,643,522.75 in eligible match during the year, therefore retaining a carryover of \$1,578,743.27 to be used in program year 2020-2021.

Identify the geographic distribution and location of investments

| Target Area | Planned Percentage of Allocation | Actual Percentage of Allocation | Narrative Description |
|-------------|-------------------------------------|------------------------------------|-----------------------|
| Citywide | 100 | 100 | Comprehensive |

 Table 4 – Identify the geographic distribution and location of investments

Narrative

Through the benefits of most HUD-funded programs are geographically distributed citywide, and the Consolidated Plan does not designate particular target area goals, the city also funded some projects in targeted areas during the program year.

Citywide Programs: Rehabilitation and homebuyer programs are offered citywide, with all residents eligible to apply based on income and other program requirements. These include the Cowtown Brushup,

Lead Safe, REACH, and Priority Repair programs which offer housing rehabilitation assistance to low- and moderate-income homeowners citywide. However, based on the age of housing stock and the residency pattern of lower-income homeowners, the majority of homes completed for these housing rehabilitation programs are located in central city areas as shown on the attached maps. The Homebuyer Assistance Program (HAP) provided down payment and closing cost assistance to income-eligible applicants on a citywide basis. The attached map shows the geographic distribution and location of investments for the HAP program.

Neighborhood street reconstruction projects funded with CDBG are provided in eligible eareas citywide. These areas must have 51% low-and moderate-income population in order to quality, and are generally located in areas inside Highway Loop 820. A list of potential streets is provided by the City Transportation and Public Works Department each year, showing the streets in the worst condition in eligible areas. The list is published to obtain citizen input regarding which streets should be reconstructed with federal funds. This process is used each year for the development of the annual Action Plan for use of CDBG and other HUD grant funds.

Targeted Projects: Some federal funds have been allocated to targeted areas to revitalize neighborhoods. The city also works with various Community Housing Development Organizations (CHDOs) and housing developers to construct infill housing in targeted neighborhoods. During the program year, HUD grant funds were provided to developers building houses in the Diamond Hill-Jarvis and Riverside neighborhoods. Attached maps show the locatiosn of the single-family homes sold during the reporting period.

Leveraging

Explain how federal funds leveraged additional resources (private, state and local funds), including a description of how matching requirements were satisfied, as well as how any publicly owned land or property located within the jurisdiction that were used to address the needs identified in the plan.

Private and local funds are leveraged by both housing and public services activities. For public services, CDBG, ESG, and HOPWA subrecipient non-profit agencies documented leveraged funds from additional private and public, non-HUD resources. The statutory ESG match requirement was met by each of the five (5) subrecipient agencies as outlined below.

Center for Transforming Lives met the ESG match requirement through the leveraging of donations and grants received from Tarrant County, City of Arlington, and Continuum of Care. These leveraged funds were used to cover staff salaries and fringe benefits, utilities, operation expenses, and rental assistance/security deposits for clients. Presbyterian Night Shelter met the ESG match requirement through the leveraging of private fundraising, donations, Tarrant County ESG, and FEMA Emergency Food & Shelter Program. Leveraged funds were used to cover the costs of staff salaries, fringe benefits, utilities, operation expenses and meals served to shelter clients. The Salvation Army met the ESG match requirement through the leveraging of private fundraising, Direction Home grant, TDHCA ESG, and unrestricted general donations. Leveraged funds were used to pay for staff salaries, fringe benefits, and rental assistance to clients. SafeHaven of Tarrant County met the ESG match requirements through the leveraging of private funding, donations, Texas Criminal Justice Division funds, HUD SHP, and Texas Health and Human Services Commission funds. Leveraged funds were used to cover shelter staff salaries, fringe benefits, maintenance, utilities, and supplies. True Worth Shelter met the ESG match requirement through the leveraging of private donations from the Fort Worth Foundation and Tarrant County ESG. Leveraged funds were used to cover costs for staff salaries, fringe benefits, utilities, maintenance, and program supplies.

For HOPWA, the two project sponsors (AIDS Outreach Center, Tarrant County Samaritan Housing), leveraged funds from fundraising, private donations, Tarrant County Public Health Department, Tarrant County Community Development, and other Federal resources including Ryan White HIV/AIDS program funds.

The Homebuyer Assistance Program (HAP) leveraged in \$10,000,913.00 in funds from home mortgages made by private lenders. HOME-funded Multi-family Developments leverage significant amounts of private funding through Low Income Housing Tax Credits (LIHTC). HOME-funded Multi-family Rental Housing projects underway include The Sphinx at Sierra Vista Senior Villas and Columbia Renaissaince Square Phase II, Everly Plaza.

HOME match obligations were met through the leverage of General Funds for the Beaty Street Apartments projects and Homebuyer Assistance Program.

| Fiscal Year Summary – HOME Match | |
|--------------------------------------------------------------------------------|--------------|
| 1. Excess match from prior Federal fiscal year | 566,435.65 |
| 2. Match contributed during current Federal fiscal year | 1,643,522.75 |
| 3. Total match available for current Federal fiscal year (Line 1 plus Line 2) | 2,209,958.40 |
| 4. Match liability for current Federal fiscal year | 631,215.13 |
| 5. Excess match carried over to next Federal fiscal year (Line 3 minus Line 4) | 1,578,743.27 |

 Table 5 – Fiscal Year Summary - HOME Match Report

| | | | Match Contrib | oution for the Fo | ederal Fiscal Ye | ar | | |
|--------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------|-------------------------------------|------------------------------------|--------------------------------|------------------------------------------------------------------------|-------------------|--------------|
| Project No. or Other ID | Date of Contribution | Cash (non-Federal sources) | Foregone Taxes, Fees, Charges | Appraised Land/Real Property | Required Infrastructur e | Site Preparation, Construction Materials, Donated labor | Bond Financing | Total Match |
| Csh – General Fund – Beaty Street Apartments | 01/08/2020 | 30,220.00 | 0 | 0 | 0 | 0 | 0 | 30,220.00 |
| Cash – General Fund - HAPs | Various | 447,353.00 | 0 | 0 | 0 | 0 | 0 | 447,353.00 |
| Present value of yield foregone – Trinity Habitat for Humanity – Homebuyer Assistance Program | Various | 1,165,949.75 | 0 | 0 | 0 | 0 | 0 | 1,165,949.75 |

HOME MBE/WBE report

| Program Income – Enter | Program Income – Enter the program amounts for the reporting period | | | | | | | | | |
|--------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------|-----------------------------------------------------|--|--|--|--|--|--|
| Balance on hand at beginning of reporting period \$ | Amount received during reporting period \$ | Total amount expended during reporting period \$ | Amount expended for TBRA \$ | Balance on hand at end of reporting period \$ | | | | | | |
| 85,655.05 | 82,944.19 | 154,713.63 | 0 | 13,885.61 | | | | | | |

Table 7 – Program Income

| Minority Business Enterprises and Women Business Enter | rprises – Indicate the number and dollar |
|--------------------------------------------------------------|------------------------------------------|
| value of contracts for HOME projects completed during the re | porting period |

| value of contr | acts for HOME | projects compl | leted during the | e reporting period | od | |
|----------------|---------------|--------------------------------------------|---------------------------------|------------------------|----------|------------|
| | Total | Ν | /Iinority Busin | ess Enterprise | s | White Non- |
| | | Alaskan Native or American Indian | Asian or Pacific Islander | Black Non- Hispanic | Hispanic | Hispanic |
| Contracts | | | | | | |
| Dollar | | | | | | |
| Amount | 0 | 0 | 0 | 0 | 0 | 0 |
| Number | 0 | 0 | 0 | 0 | 0 | 0 |
| Sub-Contrac | ts | | | | | |
| Number | 0 | 0 | 0 | 0 | 0 | 0 |
| Dollar | | | | | | |
| Amount | 0 | 0 | 0 | 0 | 0 | 0 |
| | Total | Women Business Enterprises | Male | | | |
| Contracts | | | | | | |
| Dollar | | | | | | |
| Amount | 0 | 0 | 0 | | | |
| Number | 0 | 0 | 0 | | | |
| Sub-Contrac | ts | | | | | |
| Number | 0 | 0 | 0 | | | |
| Dollar | | | | | | |

0 Table 8 - Minority Business and Women Business Enterprises

| Minority Owners of Rental Property – Indicate the number of HOME assisted rental property | erty |
|-------------------------------------------------------------------------------------------|------|
| owners and the total amount of HOME funds in these rental properties assisted | |

0

0

| | Total | | Minority Property Own | | | White Non- | |
|--------|-------|--------------------------------------------|---------------------------------|------------------------|----------|------------|--|
| | | Alaskan Native or American Indian | Asian or Pacific Islander | Black Non- Hispanic | Hispanic | Hispanic | |
| Number | 0 | 0 | 0 | 0 | 0 | 0 | |
| Dollar | | | | | | | |
| Amount | 0 | 0 | 0 | 0 | 0 | 0 | |

| Table 9 - | - Minority | Owners | of Rental | Property |
|-----------|------------|--------|-----------|----------|
|-----------|------------|--------|-----------|----------|

| Relocation and Real Property Acquisition – Indicate the number of persons displaced, the cost of | | | | |
|---------------------------------------------------------------------------------------------------------|---|---|--|--|
| relocation payments, the number of parcels acquired, and the cost of acquisition | | | | |
| Parcels Acquired | 0 | 0 | | |
| Businesses Displaced | 0 | 0 | | |

Amount

| Nonprofit OrganizationsDisplacedHouseholds TemporarilyRelocated, not Displaced | | 0 | 0 | | | |
|--------------------------------------------------------------------------------|-------|---|---|--------------------------------------------|---------------|------------------------|
| Households Displaced | Total | | | erty Enterprises Black Non- Hispanic | s Hispanic | White Non- Hispanic |
| Number | 0 | 0 | 0 | 0 | 0 | 0 |
| Cost | 0 | 0 | 0 | 0 | 0 | 0 |

 Table 10 – Relocation and Real Property Acquisition

CR-20 - Affordable Housing 91.520(b)

Evaluation of the jurisdiction's progress in providing affordable housing, including the number and types of families served, the number of extremely low-income, low-income, moderate-income, and middle-income persons served.

| | One-Year Goal | Actual |
|------------------------------------------|----------------------|--------|
| Number of Homeless households to be | | |
| provided affordable housing units | 59 | 96 |
| Number of Non-Homeless households to be | | |
| provided affordable housing units | 629 | 469 |
| Number of Special-Needs households to be | | |
| provided affordable housing units | 230 | 183 |
| Total | 918 | 748 |

| Table 11 – Nu | mber of Households |
|---------------|--------------------|
|---------------|--------------------|

| | One-Year Goal | Actual |
|----------------------------------------|----------------------|--------|
| Number of households supported through | | |
| Rental Assistance | 224 | 220 |
| Number of households supported through | | |
| The Production of New Units | 48 | 11 |
| Number of households supported through | | |
| Rehab of Existing Units | 601 | 447 |
| Number of households supported through | | |
| Acquisition of Existing Units | 45 | 70 |
| Total | 918 | 748 |

 Table 12 – Number of Households Supported

Discuss the difference between goals and outcomes and problems encountered in meeting these goals.

Table 11 above summarizes housing activities by household type, while Table 12 provides the same information but summarized by assistance type. The City met all of its goals with the exception of the production of new units. Delays in construction date, developer financing, and other time delays in closing on homes and completeing the activities in IDIS prevented this.

The number of households to be assiste4d with Rental Assistance includes HOPWA TBRA clients, Rapid Rehousing clients, and HOPWA Facility Based Housing Assistance. The number of new units produces includes single-family and multi-family new construction – only HOME-assisted units are reported. Rehabilitation of existing units includes the Preserve-A-Home, Priority Repair, Cowtown Brushup, LeadSafe, and REACh accessibility programs.

The number of homeless persons provided housing includes Rapid Rehousing activities performed by the Center for Transforming Lives, a subrecipient. The number of non-homeless provided with affordable housing includes both the rehabilitation programs (with the exception of REACH) and the new production of units, as summarized above. The number of special needs persons to be provided with affordable housing inclues HOPWA TBRA, HOPWA Facility Based, and the REACH accessibility rehab program.

Discuss how these outcomes will impact future annual action plans.

For Rapid Rehousing, the City will continue to explore opportunities to expand partnerships with existing or new providers. Although the City did not reach its one-year goal for supply of single family housing, this is primarily due to the extended planning and construction phases associated with these projects.

Include the number of extremely low-income, low-income, and moderate-income persons served by each activity where information on income by family size is required to determine the eligibility of the activity.

| Number of Households Served | CDBG Actual | HOME Actual |
|-----------------------------|--------------------|--------------------|
| Extremely Low-income | 2609 | 4 |
| Low-income | 746 | 16 |
| Moderate-income | 771 | 50 |
| Total | 4126 | 70 |

 Table 13 – Number of Households Served

CR-25 - Homeless and Other Special Needs 91.220(d, e); 91.320(d, e); 91.520(c)

Evaluate the jurisdiction's progress in meeting its specific objectives for reducing and ending homelessness through:

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

In order to better serve the unsheltered population, the City of Fort Worth ("City")– through its Direcitons Home unit - has funded 100 emergency shelter overflow beds. Case management is also provided and approximately 50 assessments a month are being conducted to identify the most appropriate housing intervention for each client.

Unsheltered homelessness within the City dropped 20% from Point in Time Counts in 2018 to 2019.

The City has also created a HOPE team through the Fort Worth Police Department. This team of officers – police and fire - is assigned to an area where emergency shelters and unsheltered homelessness is currently concentrated. The HOPE team can treat medical needs of unsheltered folks. The HOPE team works with street outreach teams to connect people to services and housing.

The City also partners with Continuum of Care agencies that have street outreach teams that serve the Fort Worth area: John Peter Smith Hospital, My Health My Resources of Tarrant County, Veterans Administration, Endeavors, and Hands of Hope. These outreach teams provide services to unsheltered homeless persons to connect them to stable housing. The outreach teams work individually with clients to conduct HUD and ViSPADT assessments in accordance with the Continuum of Care's Coordinated Assessment System.

Addressing the emergency shelter and transitional housing needs of homeless persons

The City provides ESG Funding for emergency shelters and homeless service agencies to maintain the core safety net. Agencies receiving ESG funding in the 2019-2020 Action Plan to provide these services include the Presbyterian Night Shelter, Safe Haven of Tarrant County, and True Worth Place (day shelter). Currently, the City is funding 100 continusouly open overflow emergency shelter beds. And on extremely cold nights (November – March), when community-based emergency shelters (The Salvation Army, Union Gospel Mission, Presbyterian Night Shelter, and Center for Transforming Lives) are full, the City of Fort Worth is funding an additional 100 cold weather emergency overflow beds.

Through CDBG funding, the City funds case management at Presbyterian Night Shelter as a resource to quickly connect clients with housing.

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: likely to become homeless after being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); and, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs

It is a City goal that any sub-recipient receiving federal funds to benefit homeless persons and persons at risk of homelessness will not discharge any person without conducting a risk assessment and making appropriate referrals to other community resources.

The CoC encourages homeless service agencies and other organizations which serve homeless and at-risk populations to develop and implement discharge plans that comply with the following general guidelines:

- Clients exiting a shelter and/or transitional housing program should be exited to stable housing, meaning to a decent, safe, and sanitary place meant for human habitation with a rent or mortgage that is affordable for the client at the time of exit.
- For clients exiting the shelter and/or program due to program non-compliance, agency staff should make every effort to ensure that the client is not discharged into homelessness; documentation of efforts must be maintained in the HMIS system on a HUD Exit Assessment form or equivalent.
- For clients receiving financial assistance prior to exit, agency staff should complete an assessment based on currently available income data. The purpose of this assessment is to determine whether stable housing will be maintained as a result of an income-producing job and/or other consistent financial resources. Fort Worth's HUD-funded homeless programs make every effort to comply with the above guidelines.

With ESG funding, the City of Fort Worth provides funding for homelessness prevention through The Salvation Army. There is a preference for serving formerly homeless households. This is a best practice acknowledging the only predictor of homelessness is a prior episode of homelessness.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again

This past year, the City launched two new programs to serve the homeless. The first is a rapid exit/employment program which provides 1-3 months of rental assistance and case management to individuals who are employed and need assistance to quickly obtain housing and also individuals who are not employed but want assistance connecting to employment and then housing.

The second program is specifically for families with a minor child. This program can assist families at imminent risk of homelessness through diversion and also offers rapid exit assistance including 1-3 months

of rental assistance.

The City supports development of additional Permanent Supportive Housing (PSH) units at appropriate sites, and gives Consolidated Plan Certifications to affordable housing projects with PSH components. The City, through Directions Home, funds two permanent supportive housing programs and provides mental health services for those clients.

Through ESG funding, the City funds a rapid rehousing program for families at the Center for Transforming Lives. Directions Home also funds two rapid rehousing programs which quickly house mainly families and some individuals and provides short term rental assistance and case management.

The City also provides general fund dollars for administration of the Continuum of Care by Tarrant County Homeless Coalition (HUD lead agency), which works to improve coordination and planning in the local homeless service system. The City has also provided funds for updated reporting software and the development of a landlord engagement initiative and a learning institute for case managers.

The City provides matching funds for navigators to help clients quickly locate units. Directions Home funds the Direct Client Service Fund that assists individuals with deposit, administrative fees and rent to quickly house individuals that have income and need assistance to obtain housing.

The City of Fort Worth has allocated funds specifically to assist different subpopulations including veterans, youth (ages 18-24) and those who are hardest to house.

CR-30 - Public Housing 91.220(h); 91.320(j)

Actions taken to address the needs of public housing

The City will continue to provide certifications of consistency with the Consolidated Plan for FWHS projects and proposals, and will support FWHS efforts to obtain funds for renovations and improvements. Needs of public housing residents are addressed by offering housing counseling or homeownership training to Housing Choice Voucher Homeownership Program clients and homebuyer assistance to qualifying FWHS tenants. The City of Fort Worth continues to support FWHS public housing revitalization efforts proposed for the Cavile Place neighborhood, as well as planning efforts regarding redevelopment of Butler Place. Another City assisted HOME project, The Sphinx at Sierra Vista Senior Villas (272 Units) is currently under construction as well with estimated completion date through the end of 2020. Participation in these projects supports the financial stability of FWHS and also strengthens its housing choice voucher program by providing assisted housing tenants with more options and opportunities to locate affordable rental units in what is currently a highly competitive rental market.

The City of Fort Worth served as a Co-Applicant and the Neighborhood Implementation Entity for the FY2019 Choice Neighborhoods Implementation Grant Program along with Fort Worth Housing Solutions. This includes the City's commitment of both monetary resources and of City staff. The Historic Stop Six Neighborhood is an important community that is poised for transformation into the vibrant, diverse, resource-rich community envisioned by residents and stakeholders in the Cavile Place/Historic Stop Six Transformation Plan. The City has worked diligently with Fort Worth Housing Solutions for six years on this effort to create the civic, community, and philanthropic partnerships needed to transform this historic neighborhood and improve the life of its residents. As of April 2020, Fort Worth Housing Solutions was granted the Choice Neighborhood Initiative Grant.

Actions taken to encourage public housing residents to become more involved in management and participate in homeownership

The City encourages qualifying graduates of the FWHS Housing Choice Voucher Homeownership Assistance program to participate in homeownership by assisting them with Housing Counseling and Homebuyer Assistance under Fort Worth programs.

Actions taken to provide assistance to troubled PHAs

Fort Worth Housing Solutions is not designated as troubled; therefore, this section does not apply.

CR-35 - Other Actions 91.220(j)-(k); 91.320(i)-(j)

Actions taken to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment. 91.220 (j); 91.320 (i)

Fort Worth maintains its commitment to preserve and maintain the existing stock of affordable housing. In addition, the city is committed to increasing the stock of affordable housing. A review of federal regulations and requirements and local building codes did not reveal any obvious issues that would discourage the development of affordable housing. There appears to be no significant barriers to affordable housing with regard to public policy. However, because of rising construction costs, the ability to finance developments that would serve families with incomes of less than 80 percent of AMI is becoming increasingly difficult, which continues to be a challenge currently. Most of these projects require assistance either through federal funds or low income housing tax credits, and the competition for these dollars is becoming more competitive. In addition, the lack of efficient public transportation throughout the city limits the ability to develop affordable housing in all areas of the city without also increasing barriers to employment opportunities for protected classes.

In accordance with commitments made in its Consolidated Plan, the City of Fort Worth continues to implement measures to make housing more affordable and minimize any cost-increasing effects of regulatory policies through maintaining local Neighborhood Empowerment Zones as authorized by Texas state law where incentives including tax abatement and development fee waivers can be offered to developers to promote affordable housing and economic development.

The City Council has adopted an amendment to its incentive policy to require that all developments that contain rental housing have at least 20% affordable units, or the developer can pay \$200 per year for each affordable unit not developed. The City plans to use the funds generated to develop mixed income housing in areas in need of affordable units. This policy affects projects that do not contain federal funds; for federally assisted projects, the city will continue to follow federal regulations.

City staff participated in numerous housing fairs and forums to provide information to the community.

The City also seeks additional funding sources for housing rehabilitation through the state Weatherization Assistance Program, the HUD Lead Hazard Reduction Demonstration Grant Program, and the Low-Income Housing Tax Credit Program.

Actions taken to address obstacles to meeting underserved needs. 91.220(k); 91.320(j)

The primary obstacle to meeting underserved needs is limited federal and local funding. The needs of the community are greater than the available local and federal funds. This challenge is growing as the City grows in population and market forces decrease the availability of affordable housing units. The City has developed partnerships and will continue to seek partnerships with developers in order to apply for more tax credit applications and other grants. The City required sub-recipients of grant funds to leverage funds from other funding sources for their eligible projects and programs in order to help the federal dollars touch

more projects. The City continued to fund the Resource Center on Independent Living (REACH Project Ramp) program which provides ramps and grab bars to low- and moderate-income residents. The City has also utilized its Community Action Partners (CAP) to further reach and inform target populations of all services provided through Federal and State funding. In addition, the City required projects that received funds to have units that are accessible in accordance with federal regulations. The City also addressed residential accessibility concerns through its Reasonable Accommodation Ordinance, which lays out specific procedures by which disabled persons can request reasonable accommodation when seeking land use or development permits.

Actions taken to reduce lead-based paint hazards. 91.220(k); 91.320(j)

In 2020, Fort Worth was awarded a fourth Lead Hazard Reduction Grant from the Office of Healthy Homes and Lead Hazard Control (OHHLHC) in the amount of \$4,700,000 of lead hazard control funds. The purpose of the grant is to identify and control lead-based paint hazards in eligible privately owned and rental housing. The award will be matched with \$750,000 in CDBG funds. The resulting Lead Safe Program (LSP) focuses on prevention and reduction of childhood lead poisoning for low-income families with children under six years of age, living in pre-1978 housing. The City has integrated the LSP into all of its housing rehabilitation activities. The program has set goals to clear lead hazards from 215 housing units (45 units per year). The program has set a goal of 230 inspections of housing units to determine the presence of lead-based paint hazards per year of the grant.

Actions taken to reduce the number of poverty-level families. 91.220(k); 91.320(j)

The City focused efforts to address poverty by supporting employment, transportation, and training programs to improve the academic, basic, and technical skills of low-income persons so that they can find jobs or improve their earning capacity, such as the programs operated by Goodwill, Ladder Alliance, Women's Center, Fort Worth Public Library, the Fort Worth Transportation Authority and various non-profit organizations.

Through the Community Services Division of Neighborhood Services, the City provided emergency utility assistance to income-eligible families in financial stress and referred qualifying families for Weatherization repairs on their homes to increase energy efficiency. The City used HUD grant funds to provide urgently needed home repairs such as water heater replacement, plumbing or gas leak repair, and HVAC repair; and assisted with exterior paint on homes of the elderly, very low-income, and low-income homeowners. Home repair services were provided by the City through construction contractors or through non-profit housing organizations.

Actions taken to develop institutional structure. 91.220(k); 91.320(j)

The Neighborhood Services Department administered grant-based programs aimed at strengthening Fort Worth neighborhoods through community development, affordable housing, and human capital development programs and projects. The City's Housing Finance Corporation continues to participate in the development of affordable housing by partnering with developers on multi-family projects that create more units of affordable workforce housing throughout the city, particularly in neighborhood revitalization or high opportunity areas. In addition, in 2014 the City adopted a policy in which rental housing developers seeking tax abatements or incentives must either ensure that 20 percent of the units produced be affordable or, with council approval, pay \$200 per unit per year for the term of the incentive to a special fund maintained by the City's Housing Finance Corporation. This special fund will be dedicated to the creation of new affordable housing units for low- and moderate-income families.

Certificates of Consistency: During the 2019-2020 reporting period, the City did not approve any Certificates of Consistency with the 2018-2022 Consolidated Plan.

Actions taken to enhance coordination between public and private housing and social service agencies. 91.220(k); 91.320(j)

To enhance coordination between public and private housing and social service agencies, the City provided technical assistance to all public service subrecipients listed in each year's Action Plan projects summary, as well as to CHDOs under contract with the City, and to all existing HOME-funded rental projects throughout their affordability periods. City representatives attend regular meetings of the TCHC and CoC, and worked with the FWHS and affordable housing developers on common projects.

Identify actions taken to overcome the effects of any impediments identified in the jurisdictions analysis of impediments to fair housing choice. 91.520(a)

NSD staff provided support for the City's Race and Culture Task Force Subcommittee geared towards identifying barriers to services offered throughout Fort Worth. The City also contracted with Housing Channel, a Community Housing Development Organization, to help ensure Affirmatively Furthering Fair Housing obligations were met. Housing Channel provided homebuyer education, foreclosure prevention and training, housing and Fair Housing counseling, marketing and training, education and outreach programs, and centralized housing information center. Throughout the year, the City's Human Relations Unit enforced the Fair Housing Ordinance and the Human Relations Commission administered the Fair Housing complaint process. Review of client demographics for the city's housing programs indicates that City programs are effective in conducting outreach to minority populations.

The Fort Worth Race & Culture Task Force provided its final report in November 2018 with twenty-two (22) recommendations addressing disparities identified across six different areas - criminal justice, economic development, education, health, housing, and education. Three recommendations were provided related to housing:

1. increase the affordable housing supply for extremely low income renters inorder to address disparities in cost burden.

2. update the City Homebuyer Assistance Program to increase its ability to assist minority homebuyers and increase homebuyer education and housing counseling activities.

3. increase community outreach efforts to residents making them aware of available Community Assistance Programs (CAP) managed by the City of Fort Worth, including presentations to neighborhood associations, comprehensive neighborhood-based workshops, and creating a centralized database.

CR-40 - Monitoring 91.220 and 91.230

Describe the standards and procedures used to monitor activities carried out in furtherance of the plan and used to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements

During the reporting period, ten initial and follow-up on-site monitoring visits were conducted for public service subrecipients receiving CDBG, ESG, and HOPWA funds. In addition, monthly desk reviews of performance and financial reports were conducted. All regulatory requirements were reviewed including income eligibility, administrative and financial requirements, rents, and Fair Housing compliance. Housing Property Standards inspections were made at all 70 Homebuyer Assistance and all HOME rental housing locations. On-site interviews of construction workers were conducted at least monthly to verify Davis-Bacon wage rates at one project – A.D. Marshall Public Safety and Municipal Courts Building. For Minority Business Outreach, the City follows State of Texas and local ordinance requirements to encourage participation in HUD Grant funded projects by publicizing bid opportunities electronically and by promoting MBE participation through its Business Assistance Center (BAC). Comprehensive Planning Requirements: All HUD funded projects must meet city planning and zoning ordinance requirements in addition to federal standards, and no project is completed without getting appropriate local planning or building official approval.

Citizen Participation Plan 91.105(d); 91.115(d)

Describe the efforts to provide citizens with reasonable notice and an opportunity to comment on performance reports.

A formal Citizen Participation Plan outlines how citizens provide their input on how federal funds are used for each year's CAPER. The Citizen Participation Plan is available on the City of Fort Worth NSD website at http://www.fortworthtexas.gov/neighborhoods/grants. Citizens are able to provide their input at public meetings, public hearings, and during the public comment period. The city provides notice to the public regarding the meeting and hearings through publication in the newspapers. In addition, all public meetings are also posted on the city's website. The following opportunities for public comment were provided for this CAPER.

- Public Hearing regarding the Draft 2018-2019 Consolidated Annual Performance and Evaluation Report (CAPER) of CDBG, HOME, ESG and HOPWA funds: December 9, 2020.
- Publication of Public Notice regarding the 15-day Public Comment Period on CAPER held from December 1, 2020 through December 15, 2020, including listing of all projects and programs performance:
- Fort Worth Star-Telegram: November 29, 2020
- La Vida News The Black Voice: December 3, 2020 through December 9, 2020
- *La Estrella*: November 28, 2020
- *Cleburne Times-Review*: November 28, 2020
- *Weatherford Democrat*: November 28, 2020
- *Glen Rose Reporter*: November 28, 2020
- *Hood County News*: November 28, 2020
- Hard copies of plans were delivered to seven (2) City libraries East Regional, Southwest Regional- and seven (7) community centers Andrew "Doc" Session, Como, Martin Luther King Jr., Northside, North Tri-Ethnic, Southside, and Worth Heights on November 30, 2020.
- The 2019-2020 CAPER is available on the City website at http://www.fortworthtexas.gov/neighborhoods/grants.
- NextDoor website

Copies of public notices and relevant materials are attached to this document.

CR-45 - CDBG 91.520(c)

Specify the nature of, and reasons for, any changes in the jurisdiction's program objectives and indications of how the jurisdiction would change its programs as a result of its experiences.

During this reporting period, the following Substantial Amendments were made:

Quail Trail New Construction Development – Publication Date: 11/20/19

Gwendolyn C. Gragg Child Development Facility Improvement Project - Publication Date: 04/01/20

Capps Park Facility Improvements - Publication Date: 07/26/20

Palladium Fain Street Apartments – Publication Date: 08/23/20

CARES Act (CDBG-CV/ESG-CV/HOPWA-CV) – Publication Date:05/04/20

CARES Act (ESG-CV2) – Publication Date: 09/06/20

Copies of all Public Notices for the amendments has been included in Attachment section of this document.

Does this Jurisdiction have any open Brownfields Economic Development Initiative (BEDI) grants?

No

[BEDI grantees] Describe accomplishments and program outcomes during the last year.

CR-50 - HOME 91.520(d)

Include the results of on-site inspections of affordable rental housing assisted under the program to determine compliance with housing codes and other applicable regulations

Please list those projects that should have been inspected on-site this program year based upon the schedule in §92.504(d). Indicate which of these were inspected and a summary of issues that were detected during the inspection. For those that were not inspected, please indicate the reason and how you will remedy the situation.

The 2019-2020 HOME Property Inspection Report is attached as an uploaded file in this section. It includes a total of twenty-one (21) properties inspected during the program year.

| | 2019- 2020 HOME Property Inspection Report | | | | | |
|----|--------------------------------------------|--------------------------------------------|--------------------------|-------------------------|------|-------------------------------------------------------------|
| | Site | Address | # of HOME Assisted | # of Units Inspected | | Comments |
| 1 | Beaty Street Apartments | 5500 Beaty St | 21 | 5 | HOME | 5 units failed initial inspection; passed on re-inspection |
| 2 | Broadmoor Apartments | 2900 Broadmoor | 7 | 4 | HOME | all units in compliance |
| 3 | Candletree Apartments | 7425 S Hulen | 11 | 4 | HOME | all units in compliance |
| 4 | Columbia at Renaissance | 3801 W. G. Daniels | 9 | 4 | HOME | all units in compliance |
| 5 | Hanratty Place Apartments | 800 S. Jennings | 11 | 4 | HOME | all units in compliance |
| 6 | Harmon Villas | 9300 Harmon Rd | 3 | 3 | HOME | all units in compliance |
| 7 | Hometown @ Matador Ranch | 8500 Crowley Rd | 10 | 4 | HOME | all units in compliance |
| 8 | Hunter Plaza Apartments | 605 W 1th St | 14 | 5 | HOME | all units in compliance |
| 9 | Landings at Marine Creek | 4250 old Decatur Rd | 10 | 4 | HOME | all units in compliance |
| 10 | Lincoln Terrace/ Villas on the Hill | 4700 Horne St | 4 | 4 | HOME | all units in compliance |
| 11 | Pavilion @ Samuels | 1120 Samuel Ave | 4 | 4 | HOME | all units in compliance |
| 12 | Pinnacle Place/Lancaster | 250 W Lancaster | 11 | 4 | HOME | all units in compliance |
| 13 | Reserve at Quebec | 6655 Calgary Ln | 25 | 6 | HOME | all units in compliance |
| 14 | Valley @ Cobb Park (Pilgrim Valley) | 1704 Roberts | 5 | 4 | HOME | all units in compliance |
| 15 | Gardens @ Cobb Park (Prince Hall) | 1800 Roberts | 6 | 6 | HOME | all units in compliance (1 with noted comments) |
| 16 | Race St Lofts | 2901 Race St | 19 | 6 | HOME | all units in compliance |
| 17 | Silversage @ Western Center | 1900 Western Center | 4 | 4 | HOME | all units in compliance(3 with comments) |
| 18 | Terrell Homes | Scattered Sites; office- 1220 E Vickery | 5 | 5 | HOME | all units in compliance (with noted comments on all units) |
| 19 | VOA Tremont | 8017 Calmont | 18 | 6 | HOME | all units in compliance |
| 20 | Willow Bend Creek | 3637 Williams Rd. | 1 | 1 | | all units in compliance |
| 21 | Woodmont Apartments | 1029 Oak Grove Rd | 14 | 5 | | all units in compliance (4 with comments) |

2019-2020 HOME Property Inspection Report

Provide an assessment of the jurisdiction's affirmative marketing actions for HOME units. 92.351(b)

For the 2019-2020 program year, 447 tenants in 232 HOME assisted units in the portfolio of 21 affordable housing projects that had previously received City development assistance were 58% African-American, 16% Hispanic, and 32% White. Household income data showed that 25% of renters had household at or below 30% AMI, 42% at or below 50% AMI, 19% at or below 60% AMI, and none greater than 80% AMI. These results indicate that the affirmative marketing actions by City HOME projects and programs are effective in serving Fort Worth's diverse population.

Refer to IDIS reports to describe the amount and use of program income for projects, including the number of projects and owner and tenant characteristics

A total of \$75,000 in HOME Program Income was spent during the program year on assisting first-time homebuyers through the City Homebuyer Assistance Program. 46% of homebuyers had household incomes at or below 60% of area median income; of these homebuyers 34% were Hispanic, 39% were African American, 43% were White, and 14% were Asian.

Describe other actions taken to foster and maintain affordable housing. 91.220(k) (STATES ONLY: Including the coordination of LIHTC with the development of affordable housing). 91.320(j)

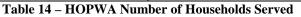
To foster and maintain existing affordable housing, the City actively partners with Fort Worth Housing Solutions and local housing non-profits on projects to increase the Housing Authority's portfolio of affordable and mixed income developments. The City also seeks additional funding sources for housing rehabilitation and housing development through the HUD Lead Hazard Reduction Program and the Low Income Housing Tax Credit Program. In addition, the City sells tax foreclosed properties to CHDOs and to Habitat for Humanity for the lesser of 20% of Tarrant Appraisal District value or the Constable deed value (as authorized by state law) to promote the development of affordable housing.

CR-55 - HOPWA 91.520(e)

Identify the number of individuals assisted and the types of assistance provided

Table for report on the one-year goals for the number of households provided housing through the use of HOPWA activities for: short-term rent, mortgage, and utility assistance payments to prevent homelessness of the individual or family; tenant-based rental assistance; and units provided in housing facilities developed, leased, or operated with HOPWA funds.

| Number of Households Served Through: | One-year Goal | Actual |
|-------------------------------------------|---------------|--------|
| Short-term rent, mortgage, and utility | 74 | 92 |
| assistance payments | | |
| Tenant-based rental assistance | 65 | 53 |
| Units provided in transitional housing | 60 | 60 |
| facilities developed, leased, or operated | | |
| with HOPWA funds | | |
| Units provided in permanent housing | 0 | 0 |
| facilities developed, leased, or operated | | |
| with HOPWA funds | | |
| Total | 199 | 205 |



Narrative

The City contracts with two sponsors to provide HOPWA services.

AIDS Outreach Center (AOC) implements a Short-Term Rent, Mortgage, and Utility Assistance program (STRMU) for persons with AIDS that are at risk of homelessness. All clients receiving STRMU or TBRA are also provided with case management and other supportive services such as meals/nutritional services, mental health services, and transportation.

The second HOPWA project sponsor is Tarrant County Samaritan Housing, Inc. This agency receives HOPWA funds for Supportive Services and for Facility Based Housing Assistance. The agency operates a 60-unit Single Room Occupancy facility for homeless or at-risk persons with HIV/AIDS, and also operates a LIHTC apartment complex on behalf of households with HIV positive family members, as well as administering a variety of Tenant-Based Rental Assistance programs funded from sources other than the City of Fort Worth. All clients in city-assisted housing are provided with HOPWA funded supportive services, including personal assistance, housing counseling, case management, employment assistance and training, life skills management, meals/nutritional services, and transportation. The Facility based housing subsidy program assisted 71 persons and supportive services were provided to 112 persons across all agency programs during the program year.

CR-60 - ESG 91.520(g) (ESG Recipients only) ESG Supplement to the CAPER in *e-snaps* For Paperwork Reduction Act

| 1. Recipient Information—All Recipients | Complete |
|-------------------------------------------|---------------------------------------------|
| Basic Grant Information | |
| Recipient Name | FORT WORTH |
| Organizational DUNS Number | 073170458 |
| EIN/TIN Number | 756000528 |
| Indentify the Field Office | FT WORTH |
| Identify CoC(s) in which the recipient or | |
| subrecipient(s) will provide ESG | |
| assistance | |
| | |
| ESG Contact Name | |
| Prefix | Mr. |
| First Name | Victor |
| Middle Name | Τ. |
| Last Name | Turner |
| Suffix | |
| Title | Director, Neighborhood Services Department |
| | |
| ESG Contact Address | |
| Street Address 1 | 200 Texas Street |
| Street Address 2 | |
| City | Fort Worth |
| State | TX |
| ZIP Code | - |
| Phone Number | 817-392-7540 |
| Extension | |
| Fax Number | 817-392-7328 |
| Email Address | Victor.Turner@fortworthtexas.gov |
| | |
| ESG Secondary Contact | Mar |
| Prefix | Mrs. |
| First Name | Barbara |
| | Asbury |
| Suffix | Compliance & Dispring Manager Naishbort |
| Title | Compliance & Planning Manager, Neighborhood |
| Dhana Numhar | Services Department |
| Phone Number | 817-392-7331 |
| Extension Email Address | Darkara Ashury of articles and and |
| Eman Address | Barbara.Asbury@fortworthtexas.gov |
| | |

2. Reporting Period—All Recipients Complete

| Program Year Start Date | 10/01/2019 |
|-------------------------|------------|
|-------------------------|------------|

3a. Subrecipient Form – Complete one form for each subrecipient

Subrecipient or Contractor Name: PRESBYTERIAN NIGHT SHELTER OF TARRANT COUNTY City: Fort Worth State: TX Zip Code: 76113, 2645 DUNS Number: 021625335 Is subrecipient a victim services provider: N Subrecipient Organization Type: Other Non-Profit Organization ESG Subgrant or Contract Award Amount: 126625

Subrecipient or Contractor Name: SALVATION ARMY-FORT WORTH MABEE CENTER City: Fort Worth State: TX Zip Code: 76103, DUNS Number: 124732699 Is subrecipient a victim services provider: N Subrecipient Organization Type: Faith-Based Organization ESG Subgrant or Contract Award Amount: 183375

Subrecipient or Contractor Name: SafeHaven of Tarrant County City: Arlington State: TX Zip Code: 76004, 4666 DUNS Number: 786103085 Is subrecipient a victim services provider: Y Subrecipient Organization Type: Other Non-Profit Organization ESG Subgrant or Contract Award Amount: 75000

Subrecipient or Contractor Name: Center For Transforming Lives City: Fort Worth State: TX Zip Code: 76102, 3613 DUNS Number: 105902324 Is subrecipient a victim services provider: N Subrecipient Organization Type: Other Non-Profit Organization ESG Subgrant or Contract Award Amount: 90000 Subrecipient or Contractor Name: True Worth Place City: Fort Worth State: TX Zip Code: 76102, 6735 DUNS Number: 104435371 Is subrecipient a victim services provider: N Subrecipient Organization Type: Other Non-Profit Organization ESG Subgrant or Contract Award Amount: 68498

CR-65 - Persons Assisted

4. Persons Served

4a. Complete for Homelessness Prevention Activities

| Number of Persons in | Total |
|--------------------------|-------|
| Households | |
| Adults | |
| Children | |
| Don't Know/Refused/Other | |
| Missing Information | |
| Total | |

 Table 16 – Household Information for Homeless Prevention Activities

4b. Complete for Rapid Re-Housing Activities

| Number of Persons in | Total | |
|--------------------------|-------|--|
| Households | | |
| Adults | | |
| Children | | |
| Don't Know/Refused/Other | | |
| Missing Information | | |
| Total | | |

 Table 17 – Household Information for Rapid Re-Housing Activities

4c. Complete for Shelter

| Total |
|-------|
| |
| |
| |
| |
| |
| |
| |

 Table 18 – Shelter Information

4d. Street Outreach

| Number of Persons in | Total |
|--------------------------|-------|
| Households | |
| Adults | |
| Children | |
| Don't Know/Refused/Other | |
| Missing Information | |
| Total | |

Table 19 – Household Information for Street Outreach

4e. Totals for all Persons Served with ESG

| Number of Persons in | Total | | | |
|--------------------------|-------|--|--|--|
| Households | | | | |
| Adults | | | | |
| Children | | | | |
| Don't Know/Refused/Other | | | | |
| Missing Information | | | | |
| Total | | | | |

Table 20 – Household Information for Persons Served with ESG

5. Gender—Complete for All Activities

| | Total |
|-----------------------------|-------|
| Male | |
| Female | |
| Transgender | |
| Don't Know/Refused/Other | |
| Missing Information | |
| Total | |
| Table 21 Conden Information | |

 Table 21 – Gender Information

6. Age—Complete for All Activities

| | Total |
|--------------------------|-------|
| Under 18 | |
| 18-24 | |
| 25 and over | |
| Don't Know/Refused/Other | |
| Missing Information | |
| Total | |

 Table 22 – Age Information

7. Special Populations Served—Complete for All Activities

| Subpopulation | Total | Total Persons | Total Persons | Total Persons |
|---------------------|---------|------------------------|------------------|------------------------------------|
| | | Served – Prevention | Served – RRH | Served in Emergency Shelters |
| Veterans | | | | |
| Victims of | | | | |
| Domestic | | | | |
| Violence | | | | |
| Elderly | | | | |
| HIV/AIDS | | | | |
| Chronically | | | | |
| Homeless | | | | |
| Persons with Disabi | lities: | | | |
| Severely | | | | |
| Mentally Ill | | | | |
| Chronic | | | | |
| Substance | | | | |
| Abuse | | | | |
| Other | | | | |
| Disability | | | | |
| Total | | | | |
| (unduplicated | | | | |
| if possible) | | | | |

Number of Persons in Households

 Table 23 – Special Population Served

CR-70 – ESG 91.520(g) - Assistance Provided and Outcomes

10. Shelter Utilization

| Number of New Units – Rehabbed | |
|----------------------------------------|--|
| Number of New Units – Conversion | |
| Total Number of bed - nigths available | |
| Total Number of bed - nights provided | |
| Capacity Utilization | |
| | |

Table 24- Shelter Capacity

11. Project Outcomes Data measured under the performance standards developed in consultation with the CoC(s)

CR-75 – Expenditures

11. Expenditures

11a. ESG Expenditures for Homelessness Prevention

| | Dollar Amount of Expenditures in Program Yea | | |
|-----------------------------------------------|----------------------------------------------|------|------|
| | 2017 | 2018 | 2019 |
| Expenditures for Rental Assistance | | | |
| Expenditures for Housing Relocation and | | | |
| Stabilization Services - Financial Assistance | | | |
| Expenditures for Housing Relocation & | | | |
| Stabilization Services - Services | | | |
| Expenditures for Homeless Prevention under | | | |
| Emergency Shelter Grants Program | | | |
| Subtotal Homelessness Prevention | | | |

 Table 25 – ESG Expenditures for Homelessness Prevention

11b. ESG Expenditures for Rapid Re-Housing

| | Dollar Amount of Expenditures in Program Year | | |
|-----------------------------------------------|-----------------------------------------------|------|------|
| | 2017 | 2018 | 2019 |
| Expenditures for Rental Assistance | | | |
| Expenditures for Housing Relocation and | | | |
| Stabilization Services - Financial Assistance | | | |
| Expenditures for Housing Relocation & | | | |
| Stabilization Services - Services | | | |
| Expenditures for Homeless Assistance under | | | |
| Emergency Shelter Grants Program | | | |
| Subtotal Rapid Re-Housing | | | |

 Table 26 – ESG Expenditures for Rapid Re-Housing

11c. ESG Expenditures for Emergency Shelter

| | Dollar Amount of Expenditures in Program Year | | |
|--------------------|-----------------------------------------------|--|--|
| | 2017 2018 | | |
| Essential Services | | | |
| Operations | | | |
| Renovation | | | |
| Major Rehab | | | |
| Conversion | | | |
| Subtotal | | | |

Table 27 – ESG Expenditures for Emergency Shelter

11d. Other Grant Expenditures

| | Dollar Amount of Expenditures in Program Year | | | |
|-----------------|-----------------------------------------------|--|--|--|
| | 2017 2018 2019 | | | |
| Street Outreach | | | | |
| HMIS | | | | |
| Administration | | | | |

 Table 28 - Other Grant Expenditures

11e. Total ESG Grant Funds

| Total ESG Funds Expended | 2017 | 2018 | 2019 |
|-----------------------------|------|------|------|
| | | | |

 Table 29 - Total ESG Funds Expended

11f. Match Source

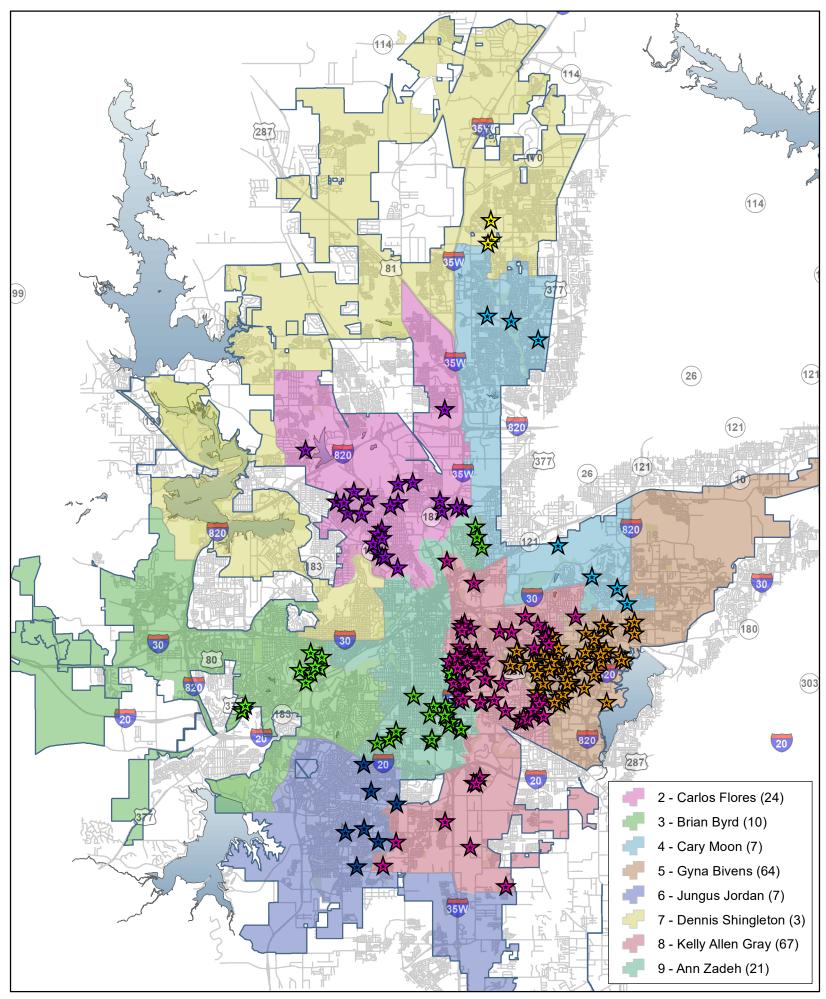
| | 2017 | 2018 | 2019 |
|-------------------------|------|------|------|
| Other Non-ESG HUD Funds | | | |
| Other Federal Funds | | | |
| State Government | | | |
| Local Government | | | |
| Private Funds | | | |
| Other | | | |
| Fees | | | |
| Program Income | | | |
| Total Match Amount | | | |

 Table 30 - Other Funds Expended on Eligible ESG Activities

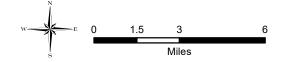
11g. Total

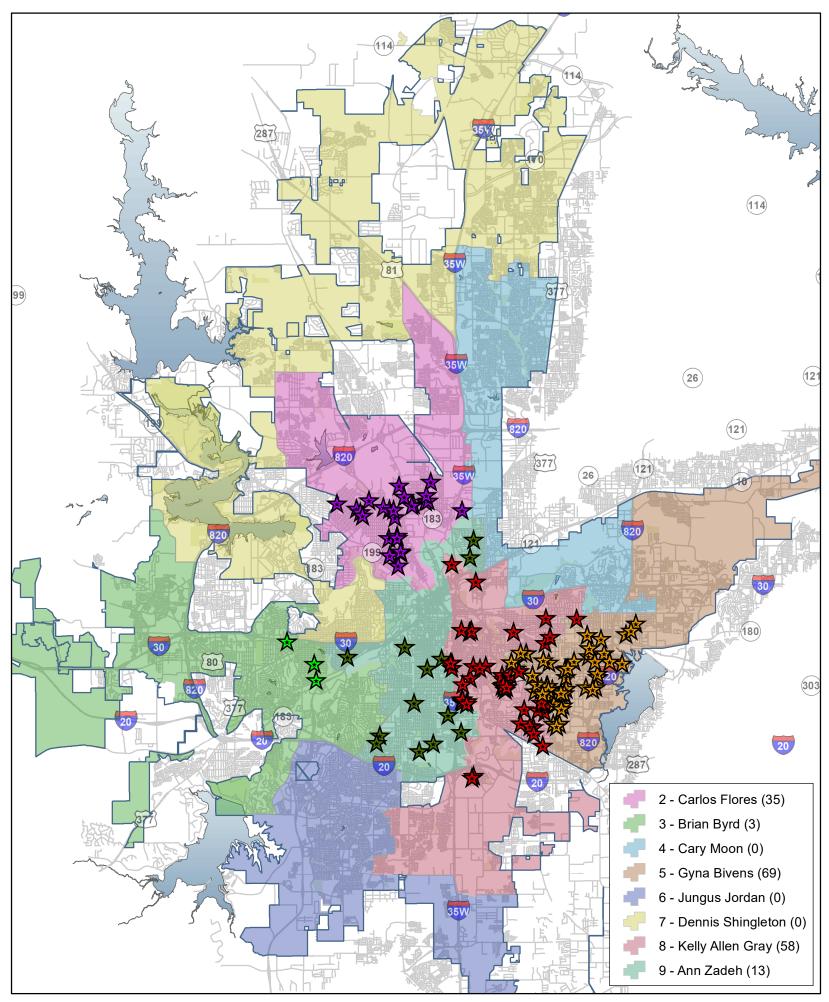
| Total Amount of Funds Expended on ESG Activities | 2017 | 2018 | 2019 |
|--------------------------------------------------------|------|------|------|
| | | | |

Table 31 - Total Amount of Funds Expended on ESG Activities

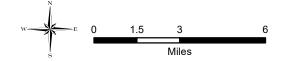


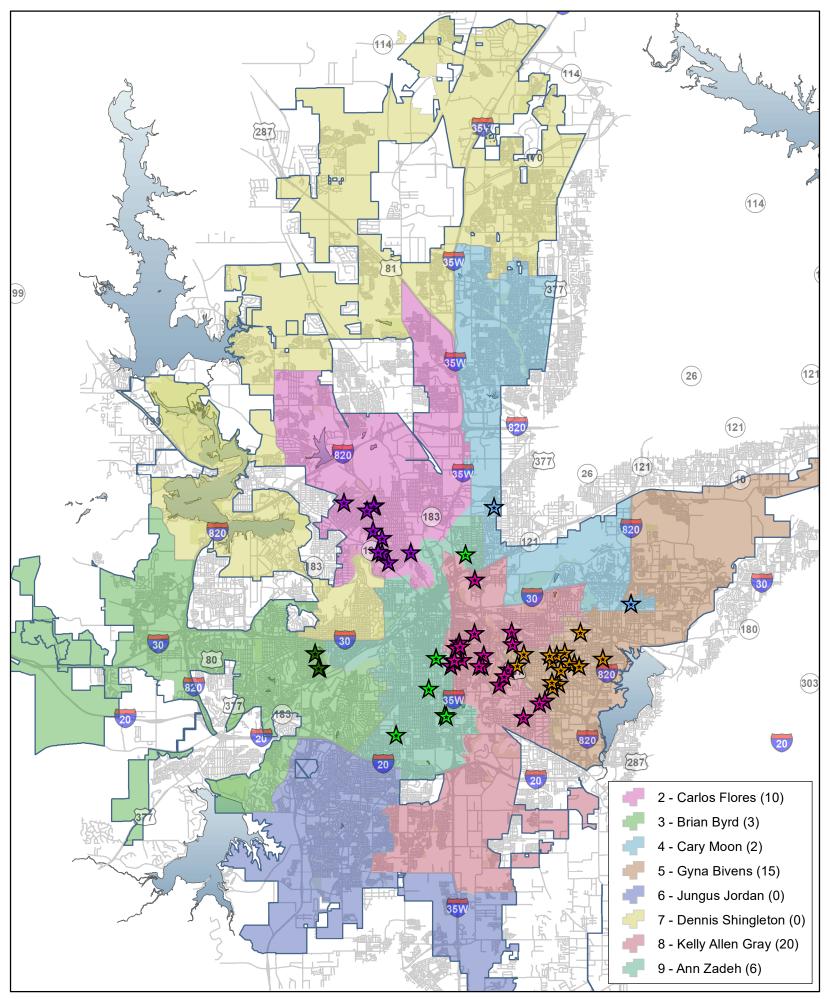
2019 - 2020 PRP Homes By Council District



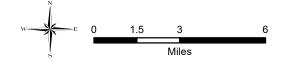


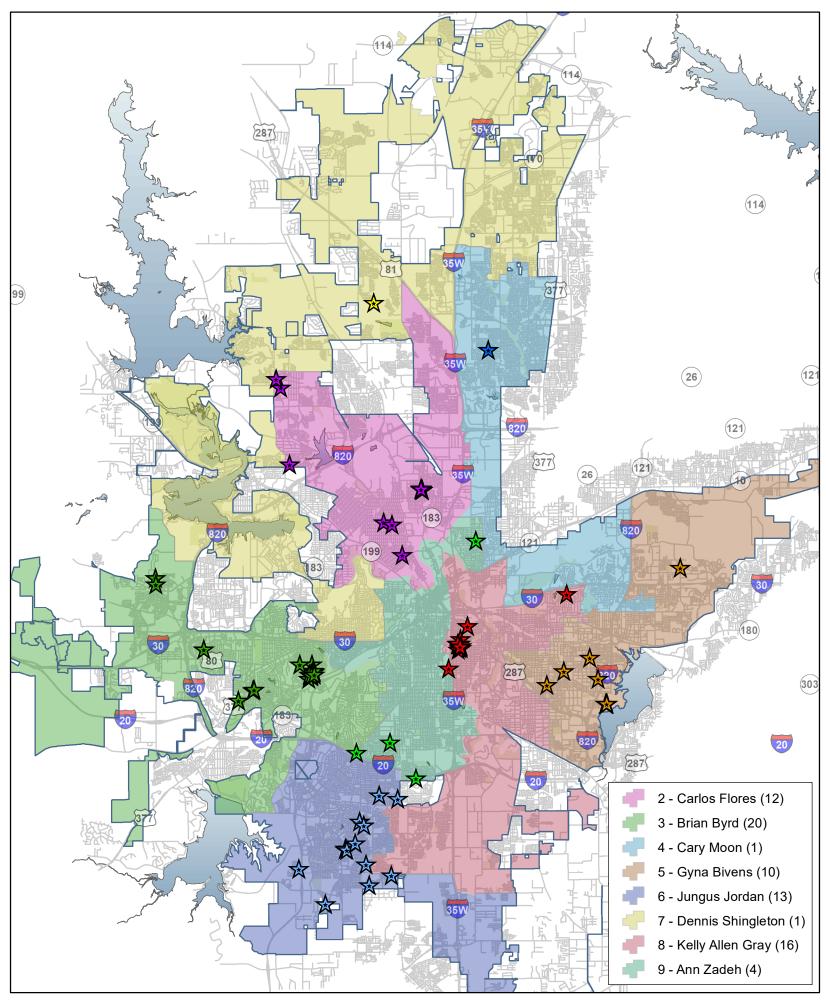
2019 - 2020 CTBU Homes By Council District



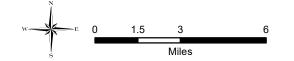


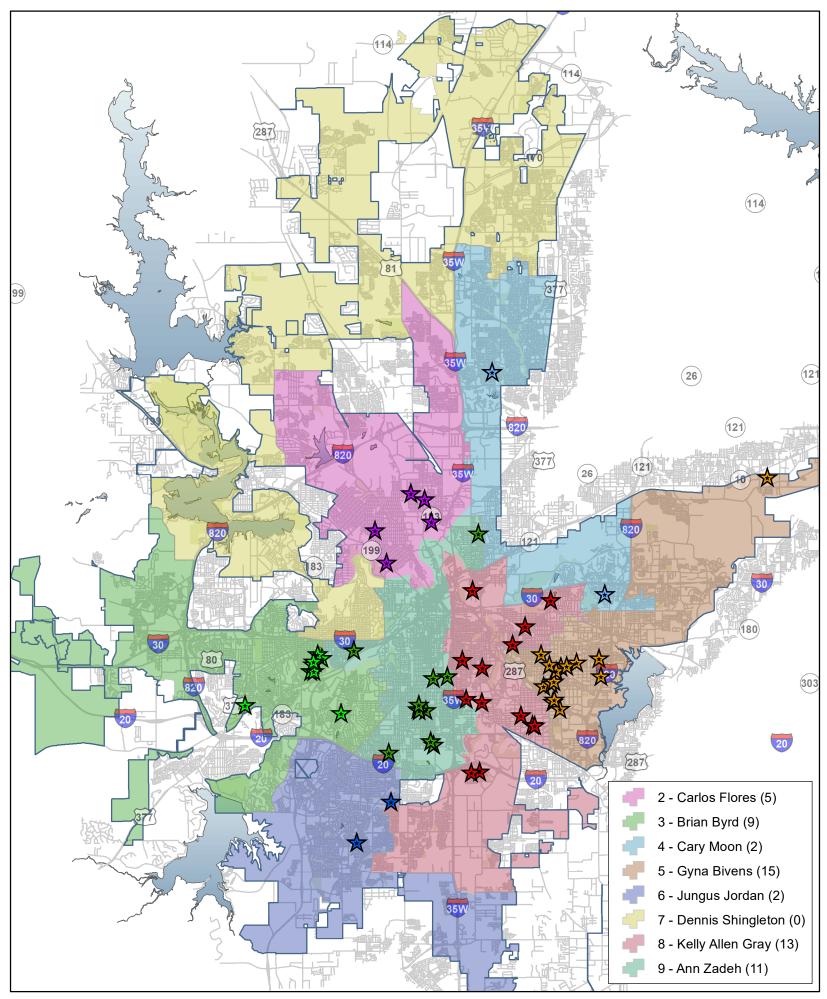
2019 - 2020 LEAD Homes By Council District



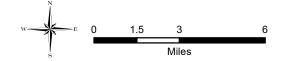


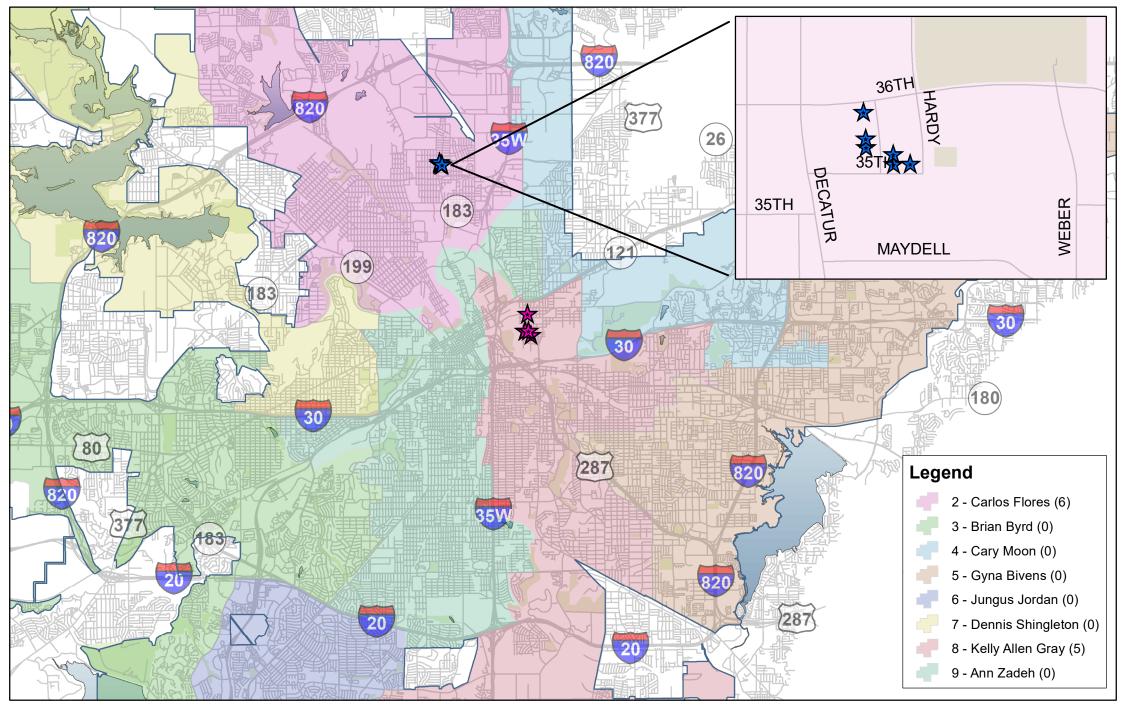
2019 - 2020 HAPS Homes By Council District



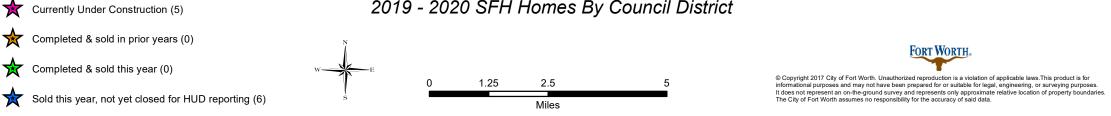


2019 - 2020 RAMP Homes By Council District





2019 - 2020 SFH Homes By Council District



| ATMENT OF | Office of Community Planning and Development | DATE: | 11-24-20 |
|---------------|--------------------------------------------------|-------|----------|
| 49 1 1 h 70 4 | U.S. Department of Housing and Urban Development | TIME: | 21:54 |
| nus 1 | Integrated Disbursement and Information System | PAGE: | 1 |
| AN IN | PR26 - CDBG Financial Summary Report | | |
| CUR CAN | Program Year 2019 | | |
| AN DEVELO | FORT WORTH , TX | | |

| PART I: SUMMARY OF CDBG RESOURCES | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| 01 UNEXPENDED CDBG FUNDS AT END OF PREVIOUS PROGRAM YEAR | 7,070,417.80 |
| 02 ENTITLEMENT GRANT | 7,270,678.00 |
| 03 SURPLUS URBAN RENEWAL | 0.00 |
| 04 SECTION 108 GUARANTEED LOAN FUNDS | 0.00 |
| 05 CURRENT YEAR PROGRAM INCOME | 713,768.04 |
| 05a CURRENT YEAR SECTION 108 PROGRAM INCOME (FOR SI TYPE) | 0.00 |
| 06 FUNDS RETURNED TO THE LINE-OF-CREDIT | 0.00 |
| 06a FUNDS RETURNED TO THE LOCAL CDBG ACCOUNT | 2,169,995.86 |
| 07 ADJUSTMENT TO COMPUTE TOTAL AVAILABLE | 0.00 |
| 08 TOTAL AVAILABLE (SUM, LINES 01-07) | 17,224,859.70 |
| PART II: SUMMARY OF CDBG EXPENDITURES | |
| 09 DISBURSEMENTS OTHER THAN SECTION 108 REPAYMENTS AND PLANNING/ADMINISTRATION | 6,828,742.26 |
| 10 ADJUSTMENT TO COMPUTE TOTAL AMOUNT SUBJECT TO LOW/MOD BENEFIT | 0.00 |
| 11 AMOUNT SUBJECT TO LOW/MOD BENEFIT (LINE 09 + LINE 10) | 6,828,742.26 |
| 12 DISBURSED IN IDIS FOR PLANNING/ADMINISTRATION | 1,165,167.81 |
| 13 DISBURSED IN IDIS FOR SECTION 108 REPAYMENTS | 740,680.20 |
| 14 ADJUSTMENT TO COMPUTE TOTAL EXPENDITURES | 0.00 |
| 15 TOTAL EXPENDITURES (SUM, LINES 11-14) | 8,734,590.27 |
| 16 UNEXPENDED BALANCE (LINE 08 - LINE 15) | 8,490,269.43 |
| PART III: LOWMOD BENEFIT THIS REPORTING PERIOD | |
| 17 EXPENDED FOR LOW/MOD HOUSING IN SPECIAL AREAS | 0.00 |
| 18 EXPENDED FOR LOW/MOD MULTI-UNIT HOUSING | 0.00 |
| 19 DISBURSED FOR OTHER LOW/MOD ACTIVITIES | 6,828,742.26 |
| 20 ADJUSTMENT TO COMPUTE TOTAL LOW/MOD CREDIT | 0.00 |
| 21 TOTAL LOW/MOD CREDIT (SUM, LINES 17-20) | 6,828,742.26 |
| 22 PERCENT LOW/MOD CREDIT (LINE 21/LINE 11) | 100.00% |
| LOW/MOD BENEFIT FOR MULTI-YEAR CERTIFICATIONS | |
| 23 PROGRAM YEARS(PY) COVERED IN CERTIFICATION | PY: PY: PY: |
| 24 CUMULATIVE NET EXPENDITURES SUBJECT TO LOW/MOD BENEFIT CALCULATION | 0.00 |
| 25 CUMULATIVE EXPENDITURES BENEFITING LOW/MOD PERSONS | 0.00 |
| 26 PERCENT BENEFIT TO LOW/MOD PERSONS (LINE 25/LINE 24) | 0.00% |
| PART IV: PUBLIC SERVICE (PS) CAP CALCULATIONS | |
| 27 DISBURSED IN IDIS FOR PUBLIC SERVICES | 1,145,486.24 |
| 28 PS UNLIQUIDATED OBLIGATIONS AT END OF CURRENT PROGRAM YEAR | 0.00 |
| 29 PS UNLIQUIDATED OBLIGATIONS AT END OF PREVIOUS PROGRAM YEAR | 0.00 |
| 30 ADJUSTMENT TO COMPUTE TOTAL PS OBLIGATIONS 31 TOTAL PS OBLIGATIONS (LINE 27 + LINE 28 - LINE 29 + LINE 30) | 0.00 |
| 31 TOTAL PS OBLIGATIONS (LINE 27 + LINE 26 - LINE 29 + LINE 30) 32 ENTITLEMENT GRANT | 1,145,486.24 7,270,678.00 |
| 33 PRIOR YEAR PROGRAM INCOME | 394,706.19 |
| 33 FROM TEACTROOMING TO ALSO AND TO ALSO AND A COMPUTE TO ALSO AND | |
| 35 TOTAL SUBJECT TO PS CAP (SUM, LINES 32-34) | 0.00 7,665,384.19 |
| 36 PERCENT FUNDS OBLIGATED FOR PS ACTIVITIES (LINE 31/LINE 35) | 14.94% |
| PART V: PLANNING AND ADMINISTRATION (PA) CAP | 14.7470 |
| 37 DISBURSED IN IDIS FOR PLANNING/ADMINISTRATION | 1,165,167.81 |
| 38 PA UNLIQUIDATED OBLIGATIONS AT END OF CURRENT PROGRAM YEAR | 0.00 |
| 39 PA UNLIQUIDATED OBLIGATIONS AT END OF PREVIOUS PROGRAM YEAR | 0.00 |
| 40 ADJUSTMENT TO COMPUTE TOTAL PA OBLIGATIONS | 0.00 |
| 41 TOTAL PA OBLIGATIONS (LINE 37 + LINE 38 - LINE 39 +LINE 40) | 1,165,167.81 |
| 42 ENTITLEMENT GRANT | 7,270,678.00 |
| 43 CURRENT YEAR PROGRAM INCOME | 713,768.04 |
| 44 ADJUSTMENT TO COMPUTE TOTAL SUBJECT TO PA CAP | 0.00 |
| 45 TOTAL SUBJECT TO PA CAP (SUM, LINES 42-44) | 7,984,446.04 |
| 46 PERCENT FUNDS OBLIGATED FOR PA ACTIVITIES (LINE 41/LINE 45) | 14.59% |
| | |

| ATMENTOR | Office of Community Planning and Development | DATE: | 11-24-20 |
|---------------|--------------------------------------------------|-------|----------|
| 48 1 1 h 70 4 | U.S. Department of Housing and Urban Development | TIME: | 21:56 |
| | Integrated Disbursement and Information System | PAGE: | 1 |
| A | PR26 - CDBG-CV Financial Summary Report | | |
| CUR CAN | FORT WORTH , TX | | |
| AN DEVEL | | | |

| PART I: SUMMARY OF CDBG-CV RESOURCES | |
|--------------------------------------------------------------------------------|--------------|
| 01 CDBG-CV GRANT | 4,360,291.00 |
| 02 FUNDS RETURNED TO THE LINE-OF-CREDIT | 0.00 |
| 03 FUNDS RETURNED TO THE LOCAL CDBG ACCOUNT | 0.00 |
| 04 TOTAL AVAILABLE (SUM, LINES 01-03) | 4,360,291.00 |
| PART II: SUMMARY OF CDBG-CV EXPENDITURES | |
| 05 DISBURSEMENTS OTHER THAN SECTION 108 REPAYMENTS AND PLANNING/ADMINISTRATION | 48,900.61 |
| 06 DISBURSED IN IDIS FOR PLANNING/ADMINISTRATION | 49,754.62 |
| 07 DISBURSED IN IDIS FOR SECTION 108 REPAYMENTS | 0.00 |
| 08 TOTAL EXPENDITURES (SUM, LINES 05 - 07) | 98,655.23 |
| 09 UNEXPENDED BALANCE (LINE 04 - LINE8) | 4,261,635.77 |
| PART III: LOWMOD BENEFIT FOR THE CDBG-CV GRANT | |
| 10 EXPENDED FOR LOW/MOD HOUSING IN SPECIAL AREAS | 0.00 |
| 11 EXPENDED FOR LOW/MOD MULTI-UNIT HOUSING | 0.00 |
| 12 DISBURSED FOR OTHER LOW/MOD ACTIVITIES | 0.00 |
| 13 TOTAL LOW/MOD CREDIT (SUM, LINES 10 - 12) | 0.00 |
| 14 AMOUNT SUBJECT TO LOW/MOD BENEFIT (LINE 05) | 48,900.61 |
| 15 PERCENT LOW/MOD CREDIT (LINE 13/LINE 14) | 0.00% |
| PART IV: PUBLIC SERVICE (PS) CALCULATIONS | |
| 16 DISBURSED IN IDIS FOR PUBLIC SERVICES | 0.00 |
| 17 CDBG-CV GRANT | 4,360,291.00 |
| 18 PERCENT OF FUNDS DISBURSED FOR PS ACTIVITIES (LINE 16/LINE 17) | 0.00% |
| PART V: PLANNING AND ADMINISTRATION (PA) CAP | |
| 19 DISBURSED IN IDIS FOR PLANNING/ADMINISTRATION | 49,754.62 |
| 20 CDBG-CV GRANT | 4,360,291.00 |
| 21 PERCENT OF FUNDS DISBURSED FOR PA ACTIVITIES (LINE 19/LINE 20) | 1.14% |
| | |

ESG Expenditure Report

| Grantee | City of Fort Worth (21001-102363) | | | | | | | | Grant Amount | \$ 615,216.00 | | | |
|----------------|----------------------------------------|-----------|--------------------|---------------|----------------|------------------------|--------------|------------------|-------------------|----------------|---------------|--------------------------|--------------|
| | E-19-MC-48-0006 | Cumu | ative Expenditures | \$ 560,751.28 | % Essential Se | ervices & SS (60% cap) | 54.5% | | | | | | |
| Report Period | October 01, 2019 - September 30, 2020 | | | | | | | Ur | nexpended Balance | \$ 54,464.72 | % Ad | Iministration (7.5% cap) | 2.1% |
| | | | | | | _ | | | | | | | |
| | Street Outreach HMIS Rapid Rehousing E | | | | | | Emergency | Shelter Services | Homelessne | ess Prevention | Adminis | tration | |
| IDIS Project # | Project Name | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative |
| 7407 | City of Fort Worth Administration | | | | | | | | | | | \$ 12,803.55 | \$ 12,803.55 |
| 7408 | SS-Presbyterian Night Shelter | | | | | | | \$ 144,999.99 | \$ 144,999.99 | | | | |
| 7408 | SS SAFEHAVEN | | | | | | | \$ 68,602.82 | \$ 68,602.82 | | | | |
| 7408 | SS TRUE WORTH PLACE | | | | | | | \$ 121,477.10 | \$ 121,477.10 | | | | |
| 7409 | HP-Salvation Army | | | | | | | | | \$ 125,046.00 | \$ 125,046.00 | | |
| 7410 | RR-Ctr for Transforming Lives | | | | | \$ 87,821.82 | \$ 87,821.82 | | | | | | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| Totals | | \$- | \$- | \$- | \$- | \$ 87,821.82 | \$ 87,821.82 | \$ 335,079.91 | \$ 335,079.91 | \$ 125,046.00 | \$ 125,046.00 | \$ 12,803.55 | \$ 12,803.55 |

Comments: Year 1 Expenditures of Grant Project 21001-102363

ESG Expenditure Report

| Grantee | City of Fort Worth (21001-101787) | | | | | | | | | \$ 587,565.00 | | | T |
|----------------|---------------------------------------|-----------|------------|-----------|------------|-----------|---------------|-------------|---------------------|---------------|----------------|--------------------------|--------------|
| | # E-18-MC-48-0006 | | | | | | | | uative Expenditures | | | ervices & SS (60% cap) |) 53.7% |
| | | | | | | | | | | | | | |
| Report Period | October 01, 2019 - September 30, 2020 | | | | | | | U | nexpended Balance | \$ - | % A | dministration (7.5% cap) |) 7.5% |
| | | Street | Outreach | н | MIS | Rapid F | Rehousing | Emergency | Shelter Services | Homelessne | ess Prevention | Adminis | stration |
| IDIS Project # | Project Name | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative |
| 7270 | City of Fort Worth Administration | | | | | | | | | | | \$ 36,458.70 | \$ 44,067.00 |
| 7271 | SS-Presbyterian Night Shelter | | | | | | | | \$ 126,185.12 | | | | |
| 7271 | SS-SafeHaven | | | | | | | | \$ 75,000.00 | | | | |
| 7271 | SS-True Worth Place | | | | | | | | \$ 68,498.00 | | | | |
| 7271 | ES-Salvation Army | | | | | | | \$ 6,229.55 | \$ 45,926.47 | | | | |
| 7272 | HP-Salvation Army | | | | | | | | | \$ 88,374.99 | \$ 88,374.99 | | |
| 7273 | RR-Ctr for Transforming Lives | | | | | | \$ 89,538.80 | | | | | | |
| 7273 | RR-Salvation Army | | | | | | \$ 49,974.62 | | | | | | |
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| | | | | | | | | | | | | | |
| Totals | | \$- | \$- | \$- | \$- | \$- | \$ 139,513.42 | \$ 6,229.55 | \$ 315,609.59 | \$ 88,374.99 | \$ 88,374.99 | \$ 36,458.70 | \$ 44,067.00 |

Comments: Year 2 Expenditures of Grant Project 21001-101787



HUD ESG CAPER FY2020

Grant: ESG: Fort Worth - TX - Report Type: CAPER

Report Date Range

10/1/2019 to 9/30/2020

Q01a. Contact Information

| First name | Sharon |
|--------------------------------|----------------------------------------------------|
| Middle name | A |
| | |
| Last name | Burkley |
| Suffix | |
| Title | Senior Planner |
| Street Address 1 | 200 Texas Street |
| Street Address 2 | |
| City | Fort Worth |
| State | Texas |
| ZIP Code | 76102 |
| | |
| E-mail Address | Sharon.Burkley@fortworthtexas.gov |
| E-mail Address Phone Number | Sharon.Burkley@fortworthtexas.gov (817)392-5785 |
| | |

Q01b. Grant Information

ESG Information from IDIS

As of 10/9/2020

| Fiscal Year | Grant Number | Current Authorized Amount | Total Drawn | Balance | Obligation Date | Expenditure Deadline |
|----------------|-----------------|------------------------------|----------------|--------------|--------------------|-------------------------|
| 2020 | | | | | | |
| 2019 | E19MC480010 | \$616,266.00 | \$453,679.55 | \$162,586.45 | 8/27/2019 | 8/27/2021 |
| 2018 | E18MC480010 | \$587,565.00 | \$580,863.61 | \$6,701.39 | 10/3/2018 | 10/3/2020 |
| 2017 | E17MC480010 | \$577,437.00 | \$577,437.00 | \$0 | 10/19/2017 | 10/19/2019 |
| 2016 | E16MC480010 | \$570,031.00 | \$570,031.00 | \$0 | 10/11/2016 | 10/11/2018 |
| 2015 | E15MC480010 | \$552,108.00 | \$552,108.00 | \$0 | 11/17/2015 | 11/17/2017 |
| 2014 | E14MC480006 | \$493,901.00 | \$493,901.00 | \$0 | 11/3/2014 | 11/3/2016 |
| 2013 | E13MC480006 | \$425,325.00 | \$425,325.00 | \$0 | 10/2/2013 | 10/2/2015 |
| 2012 | | | | | | |
| 2011 | | | | | | |
| Total | | \$3,822,633.00 | \$3,653,345.16 | \$169,287.84 | | |

CAPER reporting includes funds used from fiscal year:

| | 2018, 2019 |
|----------------------------------------------------------------------------------------|------------|
| Project types carried out during the program year | |
| Enter the number of each type of projects funded through ESG during this program year. | |
| Street Outreach | 0 |
| Emergency Shelter | 3 |
| Transitional Housing (grandfathered under ES) | 0 |
| Day Shelter (funded under ES) | 1 |
| Rapid Re-Housing | 1 |
| Homelessness Prevention | 1 |

Q01c. Additional Information

HMIS

Comparable Database

| Are 100% of the project(s) funded through ESG, which are allowed to use HMIS, entering data into HMIS? | Yes |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----|
| Have all of the projects entered data into Sage via a CSV - CAPER Report upload? | Yes |
| Are 100% of the project(s) funded through ESG, which are allowed to use a comparable database, entering data into the comparable database? | Yes |
| Have all of the projects entered data into Sage via a CSV - CAPER Report upload? | Yes |

Q04a: Project Identifiers in HMIS

| Q04a: Project lo | dentifiers in HMIS | 6 | | | | | | | | | | | | | |
|------------------------------------------|--------------------|---------------------------------------------|---------------|-------------------------|---------------------------------|------------------------------------------------|-----------------------------------|---------------|---------|-------------------------------|-------------------------------|-------------------------|-----------------------|-------------------|------------------------------------------|
| Organization Name | Organization ID | Project Name | Project ID | HMIS Project Type | Method for Tracking ES | Affiliated with a residential project | Project IDs of affiliations | CoC Number | Geocode | Victim Service Provider | HMIS Software Name | Report Start Date | Report End Date | CSV Exception? | Uploaded via emailed hyperlink? |
| Presbyterian Night Shelter | 84 | True Worth | 1212 | 11 | 3 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| The Salvation Army Mabee Center | 116 | TSA ESG Homeless Prevention CFW | 1101 | 12 | | | | TX-601 | 480222 | 0 | ETO | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Center for Transforming Lives | 124 | Rapid Rehousing Combined | 1162 | 13 | | | | TX-601 | 481896 | 0 | ETO | 2019- 10-01 | 2020- 09-30 | No | Yes |
| The Salvation Army Mabee Center | 84 | Salvation Army | 941 | 1 | 3 | | | TX-601 | 481896 | 0 | ETO | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Presbyterian Night Shelter | 108 | Family Service Program | 835 | 1 | 0 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Presbyterian Night Shelter | 108 | Shelter- Based Rapid Exit Services | 1216 | 1 | 0 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Presbyterian Night Shelter | 108 | Moving Home Men's Shelter | 1032 | 1 | 0 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Presbyterian Night Shelter | 108 | Moving Home Women's Program | 1213 | 1 | 0 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Presbyterian Night Shelter | 108 | Veteran's Voice Shelter Based | 838 | 1 | 0 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| Presbyterian Night Shelter | 84 | Presbyterian Night Shelter | 942 | 1 | 3 | 0 | | TX-601 | 481896 | 0 | OpenPath HMIS Warehouse | 2019- 10-01 | 2020- 09-30 | No | Yes |
| SafeHaven of Tarrant County | 1170 | Emergency Shelter Program | 1170 | 1 | 0 | | | TX-601 | 489439 | 1 | CRMS | 2019- 10-01 | 2020- 09-30 | No | Yes |
| SafeHaven of Tarrant County | 1170 | Emergency Shelter Program | 1170 | 1 | 0 | | | TX-601 | 489439 | 1 | CRMS | 2019- 10-01 | 2020- 09-30 | No | Yes |

Q05a: Report Validations Table

| Total Number of Persons Served | 30682 |
|-----------------------------------------------------------------------|-------|
| Number of Adults (Age 18 or Over) | 25303 |
| Number of Children (Under Age 18) | 3379 |
| Number of Persons with Unknown Age | 2000 |
| Number of Leavers | 1892 |
| Number of Adult Leavers | 845 |
| Number of Adult and Head of Household Leavers | 846 |
| Number of Stayers | 28790 |
| Number of Adult Stayers | 24458 |
| Number of Veterans | 2350 |
| Number of Chronically Homeless Persons | 2140 |
| Number of Youth Under Age 25 | 1633 |
| Number of Parenting Youth Under Age 25 with Children | 107 |
| Number of Adult Heads of Household | 16931 |
| Number of Child and Unknown-Age Heads of Household | 196 |
| Heads of Households and Adult Stayers in the Project 365 Days or More | 13957 |
| | |

Q06a: Data Quality: Personally Identifying Information (PII)

| Data Element | Client Doesn't Know/Refused | Information Missing | Data Issues | Total | % of Error Rate |
|--------------|-----------------------------|---------------------|-------------|-------|--------------------|
| Name | 3 | 1 | 20 | 24 | 0.08 % |

| Social Security Number | 1642 | 196 | 4102 | 4730 | 19.36 % |
|------------------------|------|------|------|------|---------|
| Date of Birth | 50 | 2004 | 243 | 2294 | 7.49 % |
| Race | 55 | 2262 | | 2317 | 7.55 % |
| Ethnicity | 112 | 62 | | 174 | 0.57 % |
| Gender | 21 | 51 | | 72 | 0.23 % |
| Overall Score | | | | 5247 | 17.10 % |

Q06b: Data Quality: Universal Data Elements

| | Error Count | % of Error Rate |
|-----------------------------------|-------------|--------------------|
| Veteran Status | 51 | 0.20 % |
| Project Start Date | 392 | 1.28 % |
| Relationship to Head of Household | 12384 | 40.36 % |
| Client Location | 312 | 1.82 % |
| Disabling Condition | 1338 | 4.36 % |

Q06c: Data Quality: Income and Housing Data Quality

| | Error Count | % of Error Rate |
|-----------------------------------------|-------------|--------------------|
| Destination | 66 | 3.49 % |
| Income and Sources at Start | 8503 | 49.65 % |
| Income and Sources at Annual Assessment | 307 | 2.20 % |
| Income and Sources at Exit | 122 | 14.42 % |

Q06d: Data Quality: Chronic Homelessness

| | Count of Total Records | Missing Time in Institution | Missing Time in Housing | Approximate Date Started DK/R/missing | Number of Times DK/R/missing | Number of Months DK/R/missing | % of Records Unable to Calculate |
|----------------------------|---------------------------|-----------------------------------|-------------------------------|---------------------------------------------|---------------------------------|----------------------------------|----------------------------------------|
| ES, SH, Street Outreach | 11906 | | | 4698 | 531 | 558 | 40.06 % |
| ТН | 0 | 0 | 0 | 0 | 0 | 0 | |
| PH (All) | 111 | 0 | 1 | 0 | 0 | 0 | 0.90 % |
| Total | 23574 | | | | | | 20.24 % |

Q06e: Data Quality: Timeliness

| Number of Project | Number of Project |
|-------------------|-------------------|
| Start Records | Exit Records |

| 0 days | 23863 | 1127 |
|-----------|-------|------|
| 1-3 Days | 932 | 0 |
| 4-6 Days | 100 | 0 |
| 7-10 Days | 175 | 0 |
| 11+ Days | 4498 | 62 |

Q06f: Data Quality: Inactive Records: Street Outreach & Emergency Shelter

| | # of Records | # of Inactive Records | % of Inactive Records |
|------------------------------------------------------------------------|--------------|--------------------------|--------------------------|
| Contact (Adults and Heads of Household in Street Outreach or ES - NBN) | 12757 | 12359 | 96.88 % |
| Bed Night (All Clients in ES - NBN) | 13084 | 12979 | 99.20 % |

Q07a: Number of Persons Served

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-----------------------------------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| | | | | | |
| Adults | 25303 | 18103 | 7197 | 0 | 3 |
| Children | 3379 | 0 | 2632 | 719 | 28 |
| Client Doesn't Know/ Client Refused | 50 | 31 | 13 | 6 | 0 |
| Data Not Collected | 2455 | 213 | 2134 | 31 | 77 |
| Total | 30682 | 18103 | 11749 | 719 | 111 |
| For PSH & RRH – the total persons served who moved into housing | 327 | 4 | 323 | 0 | 0 |

Q08a: Households Served

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--------------------------------------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| Total Households | 17127 | 12575 | 4506 | 28 | 18 |
| For PSH & RRH – the total households served who moved into housing | 99 | 4 | 95 | 0 | 0 |

Q08b: Point-in-Time Count of Households on the Last Wednesday

Total Without Children With Children and Adults With Only Children Unknown Household Type

| January | 7925 | 5627 | 2265 | 25 | 8 |
|---------|------|------|------|----|---|
| April | 7923 | 5623 | 2267 | 25 | 8 |
| July | 7971 | 5662 | 2275 | 25 | 9 |
| October | 7903 | 5622 | 2248 | 25 | 8 |

0

Q09a: Number of Persons Contacted

Once

| All Persons Contacted | First contact – NOT staying on the Streets, ES, or SH |
|--------------------------|-------------------------------------------------------|
| | , , <i>, , , ,</i> |

0

First contact – WAS staying on Streets, ES, or SH

First contact – Worker unable to determine

0

| 2-5 Times | 0 | 0 | 0 | 0 |
|----------------------------|---|---|---|---|
| 6-9 Times | 0 | 0 | 0 | 0 |
| 10+ Times | 0 | 0 | 0 | 0 |
| Total Persons Contacted | 0 | 0 | 0 | 0 |

Q09b: Number of Persons Engaged

| All Persons Contacted | First contact – NOT staying on the Streets, ES, or SH | First contact – WAS staying on Streets, ES, or SH | First contact – Worker unable to determine |
|-----------------------|-------------------------------------------------------|---------------------------------------------------|--------------------------------------------|
|-----------------------|-------------------------------------------------------|---------------------------------------------------|--------------------------------------------|

| Once | 0 | 0 | 0 | 0 |
|-----------------------|------|------|------|------|
| 2-5 Contacts | 0 | 0 | 0 | 0 |
| 6-9 Contacts | 0 | 0 | 0 | 0 |
| 10+ Contacts | 0 | 0 | 0 | 0 |
| Total Persons Engaged | 0 | 0 | 0 | 0 |
| Rate of Engagement | 0.00 | 0.00 | 0.00 | 0.00 |

Q10a: Gender of Adults

| | Total | Without Children | With Children and Adults | Unknown Household Type |
|-------------------------------------------------------------|-------|------------------|--------------------------|------------------------|
| Male | 15294 | 11513 | 3781 | 0 |
| Female | 9800 | 6512 | 3285 | 3 |
| Trans Female (MTF or Male to Female) | 38 | 29 | 9 | 0 |
| Trans Male (FTM or Female to Male) | 13 | 12 | 1 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 2 | 2 | 0 | 0 |
| Client Doesn't Know/Client Refused | 14 | 7 | 7 | 0 |
| Data Not Collected | 142 | 28 | 114 | 0 |
| Subtotal | 25303 | 18103 | 7197 | 3 |

Q10b: Gender of Children

| | Total | With Children and Adults | With Only Children | Unknown Household Type |
|-------------------------------------------------------------|-------|--------------------------|--------------------|------------------------|
| | | | | |
| Male | 1661 | 1311 | 336 | 14 |
| Female | 1693 | 1298 | 381 | 14 |
| Trans Female (MTF or Male to Female) | 0 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 2 | 2 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 6 | 6 | 0 | 0 |
| Data Not Collected | 17 | 15 | 2 | 0 |
| Subtotal | 3379 | 2632 | 719 | 28 |

Q10c: Gender of Persons Missing Age Information

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------------------------------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| Male | 7 | 0 | 5 | 0 | 2 |
| Female | 5 | 0 | 1 | 0 | 4 |
| Trans Female (MTF or Male to Female) | 0 | 0 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 0 | 0 | 0 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 0 | 0 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 1 | 0 | 1 | 0 | 0 |
| Data Not Collected | 1987 | 0 | 1912 | 0 | 75 |
| Subtotal | 2000 | 0 | 1919 | 0 | 81 |

Q10d: Gender by Age Ranges

| | Total | Under Age 18 | Age 18-24 | Age 25-61 | Age 62 and over | Client Doesn't Know/ Client Refused | Data Not Collected |
|-------------------------------------------------------------|-------|--------------|-----------|-----------|-----------------|-------------------------------------|--------------------|
| Male | 16963 | 1621 | 900 | 12232 | 1962 | 27 | 221 |
| Female | 11499 | 1645 | 860 | 8156 | 653 | 22 | 163 |
| Trans Female (MTF or Male to Female) | 38 | 0 | 12 | 26 | 0 | 0 | 0 |
| Trans Male (FTM or Female to Male) | 15 | 2 | 1 | 11 | 1 | 0 | 0 |
| Gender Non-Conforming (i.e. not exclusively male or female) | 2 | 0 | 0 | 2 | 0 | 0 | 0 |
| Client Doesn't Know/Client Refused | 21 | 6 | 0 | 10 | 1 | 1 | 3 |
| Data Not Collected | 2144 | 9 | 0 | 62 | 0 | 0 | 2073 |
| Subtotal | 30682 | 3283 | 1773 | 20499 | 2626 | 50 | 2460 |

Q11: Age

Total Without Children With Children and Adults With Only Children Unknown Household Type

| Under 5 | 1054 | 0 | 872 | 166 | 16 |
|------------------------------------|------|------|------|-----|----|
| 5 - 12 | 1618 | 0 | 1213 | 393 | 12 |
| 13 - 17 | 611 | 0 | 488 | 123 | 0 |
| 18 - 24 | 1773 | 1227 | 545 | 0 | 1 |
| 25 - 34 | 5068 | 3607 | 1460 | 0 | 1 |
| 35 - 44 | 5415 | 3892 | 1522 | 0 | 1 |
| 45 - 54 | 5758 | 4235 | 1523 | 0 | 0 |
| 55 - 61 | 4258 | 3077 | 1181 | 0 | 0 |
| 62+ | 2617 | 1821 | 796 | 0 | 0 |
| Client Doesn't Know/Client Refused | 50 | 31 | 13 | 6 | 0 |

| Data Not Collected | 2460 | 213 | 2136 | 31 | 80 |
|--------------------|-------|-------|-------|-----|-----|
| Total | 30682 | 18103 | 11749 | 719 | 111 |

Q12a: Race

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| White | 706 | 214 | 483 | 9 | 0 |
| Black or African American | 1632 | 324 | 1227 | 81 | 0 |
| Asian | 13135 | 8210 | 4435 | 462 | 28 |
| American Indian or Alaska Native | 90 | 50 | 43 | 3 | 0 |
| Native Hawaiian or Other Pacific Islander | 12367 | 9004 | 3213 | 142 | 8 |
| Multiple Races | 435 | 199 | 217 | 17 | 2 |
| Client Doesn't Know/Client Refused | 55 | 31 | 21 | 3 | 0 |
| Data Not Collected | 2262 | 77 | 2110 | 2 | 73 |
| Total | 30682 | 18103 | 11749 | 719 | 111 |

Q12b: Ethnicity

Without Children With Children and Adults With Only Children Unknown Household Type Total

| Non-Hispanic/Non-Latino | 24910 | 15769 | 8472 | 633 | 36 |
|------------------------------------|-------|-------|-------|-----|-----|
| Hispanic/Latino | 3354 | 2141 | 1136 | 77 | 0 |
| Client Doesn't Know/Client Refused | 112 | 72 | 38 | 2 | 0 |
| Data Not Collected | 2306 | 121 | 2103 | 7 | 75 |
| Total | 30682 | 18103 | 11749 | 719 | 111 |

Q13a1: Physical and Mental Health Conditions at Start

| | Total Persons | Without Children | Adults in HH with Children & Adults | Children in HH with Children & Adults | With Children and Adults & | With Only Children | Unknown Household Type |
|--------------------------------|------------------|---------------------|-------------------------------------|---------------------------------------|-------------------------------|-----------------------|---------------------------|
| Mental Health Problem | 7724 | 5705 | 1892 | 86 | | 29 | 10 |
| Alcohol Abuse | 833 | 626 | 206 | 0 | | 1 | 0 |
| Drug Abuse | 1262 | 929 | 324 | 2 | | 5 | 2 |
| Both Alcohol and Drug Abuse | 1114 | 871 | 241 | 0 | | 2 | 0 |
| Chronic Health Condition | 6730 | 5015 | 1574 | 105 | | 29 | 5 |
| HIV/AIDS | 355 | 256 | 98 | 1 | | 0 | 0 |
| Developmental Disability | 808 | 518 | 190 | 89 | | 10 | 1 |
| Physical Disability | 5081 | 3856 | 1191 | 25 | | 4 | 3 |

C The "With Children and Adults" column is retired as of 10/1/2019 and replaced with the columns "Adults in HH with Children & Adults" and "Children in HH with Children & Adults".

Q13b1: Physical and Mental Health Conditions at Exit

| | Total Persons | Without Children | Adults in HH with Children & Adults | Children in HH with Children & Adults | With Children and Adults & | With Only Children | Unknown Household Type |
|--------------------------------|------------------|---------------------|-------------------------------------|---------------------------------------|-------------------------------|-----------------------|---------------------------|
| Mental Health Problem | 273 | 100 | 138 | 29 | | 4 | 2 |
| Alcohol Abuse | 10 | 5 | 5 | 0 | | 0 | 0 |
| Drug Abuse | 46 | 13 | 33 | 0 | | 0 | 0 |
| Both Alcohol and Drug Abuse | 18 | 18 | 0 | 0 | | 0 | 0 |
| Chronic Health Condition | 195 | 88 | 67 | 39 | | 1 | 0 |
| HIV/AIDS | 9 | 4 | 5 | 0 | | 0 | 0 |
| Developmental Disability | 64 | 13 | 12 | 38 | | 1 | 0 |
| Physical Disability | 108 | 62 | 37 | 9 | | 0 | 0 |

C The "With Children and Adults" column is retired as of 10/1/2019 and replaced with the columns "Adults in HH with Children & Adults" and "Children in HH with Children & Adults".

Q13c1: Physical and Mental Health Conditions for Stayers

| | Total Persons | Without Children | Adults in HH with Children & Adults | Children in HH with Children & Adults | With Children and Adults & | With Only Children | Unknown Household Type |
|--------------------------------|------------------|---------------------|-------------------------------------|---------------------------------------|----------------------------|-----------------------|---------------------------|
| Mental Health Problem | 8074 | 6031 | 1942 | 59 | | 30 | 9 |
| Alcohol Abuse | 890 | 659 | 230 | 0 | | 1 | 0 |
| Drug Abuse | 1309 | 980 | 320 | 2 | | 5 | 2 |
| Both Alcohol and Drug Abuse | 1228 | 954 | 272 | 0 | | 2 | 0 |
| Chronic Health Condition | 7025 | 5266 | 1650 | 73 | | 28 | 5 |
| HIV/AIDS | 361 | 265 | 95 | 1 | | 0 | 0 |
| Developmental Disability | 917 | 620 | 225 | 60 | | 11 | 1 |
| Physical Disability | 5398 | 4079 | 1292 | 17 | | 4 | 3 |

C The "With Children and Adults" column is retired as of 10/1/2019 and replaced with the columns "Adults in HH with Children & Adults" and "Children in HH with Children & Adults".

Q14a: Domestic Violence History

| • | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| Yes | 3361 | 2168 | 1181 | 8 | 4 |
| No | 14284 | 10657 | 3594 | 20 | 13 |
| Client Doesn't Know/Client Refused | 16 | 11 | 5 | 0 | 0 |
| Data Not Collected | 7838 | 5267 | 2568 | 0 | 3 |
| Total | 25499 | 18103 | 7348 | 28 | 20 |

Q14b: Persons Fleeing Domestic Violence

Without Children With Children and Adults With Only Children Unknown Household Type

lotal

| Yes | 1010 | 468 | 541 | 0 | 1 |
|------------------------------------|------|-----|-----|---|---|
| No | 83 | 36 | 47 | 0 | 0 |
| Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| Total | 1093 | 504 | 588 | 0 | 1 |

Q15: Living Situation

| Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------|------------------|--------------------------|--------------------|------------------------|
| | | | ·····, ····, | |

| Homeless Situations | 0 | 0 | 0 | 0 | 0 |
|-------------------------------------------------------------------------------------|-------|-------|------|----|----|
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 6956 | 4913 | 2024 | 8 | 11 |
| Transitional housing for homeless persons (including homeless youth) | 20 | 18 | 2 | 0 | 0 |
| Place not meant for habitation | 6849 | 5295 | 1538 | 9 | 7 |
| Safe Haven | 72 | 39 | 33 | 0 | 0 |
| Host Home (non-crisis) | 0 | 0 | 0 | 0 | 0 |
| Interim Housing C | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 13897 | 10265 | 3597 | 17 | 18 |
| Institutional Settings | 0 | 0 | 0 | 0 | 0 |
| Psychiatric hospital or other psychiatric facility | 37 | 29 | 7 | 1 | 0 |
| Substance abuse treatment facility or detox center | 68 | 49 | 19 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 322 | 253 | 68 | 1 | 0 |
| Jail, prison or juvenile detention facility | 169 | 123 | 46 | 0 | 0 |
| Foster care home or foster care group home | 21 | 11 | 10 | 0 | 0 |
| Long-term care facility or nursing home | 6 | 5 | 1 | 0 | 0 |
| Residential project or halfway house with no homeless criteria | 38 | 29 | 9 | 0 | 0 |
| Subtotal | 661 | 499 | 160 | 2 | 0 |
| Other Locations | 0 | 0 | 0 | 0 | 0 |
| Permanent housing (other than RRH) for formerly homeless persons | 4 | 2 | 2 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 14 | 8 | 6 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 3 | 3 | 0 | 0 | 0 |
| Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| Rental by client, with HCV voucher (tenant or project based) | 1 | 1 | 0 | 0 | 0 |
| Rental by client in a public housing unit | 0 | 0 | 0 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 110 | 56 | 54 | 0 | 0 |
| Rental by client, with VASH subsidy | 3 | 2 | 1 | 0 | 0 |
| Rental by client with GPD TIP subsidy | 2 | 2 | 0 | 0 | 0 |
| Rental by client, with other housing subsidy | 11 | 9 | 2 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 358 | 269 | 84 | 5 | 0 |
| Staying or living in a friend's room, apartment or house | 779 | 608 | 169 | 2 | 0 |
| Staying or living in a family member's room, apartment or house | 1040 | 808 | 231 | 1 | 0 |
| Client Doesn't Know/Client Refused | 8 | 7 | 1 | 0 | 0 |
| Data Not Collected | 8608 | 5564 | 3041 | 1 | 2 |
| Subtotal | 10941 | 7339 | 3591 | 9 | 2 |
| Total | 25499 | 18103 | 7348 | 28 | 20 |
| | | | | | |

C Interim housing is retired as of 10/1/2019.

Q16: Cash Income - Ranges

| uro. Cash filonie - Ranges | Income at Start | Income at Latest Annual Assessment for Stayers | Income at Exit for Leavers |
|-----------------------------------------------------------------------|-----------------|---------------------------------------------------|----------------------------|
| No income | 12325 | 19 | 400 |
| \$1 - \$150 | 96 | 1 | 9 |
| \$151 - \$250 | 105 | 0 | 13 |
| \$251 - \$500 | 465 | 3 | 42 |
| \$501 - \$1000 | 3310 | 6 | 130 |
| \$1,001 - \$1,500 | 899 | 1 | 91 |
| \$1,501 - \$2,000 | 354 | 0 | 49 |
| \$2,001+ | 169 | 1 | 43 |
| Client Doesn't Know/Client Refused | 11 | 0 | 0 |
| Data Not Collected | 7569 | 23808 | 68 |
| Number of Adult Stayers Not Yet Required to Have an Annual Assessment | | 10886 | |
| Number of Adult Stayers Without Required Annual Assessment | | 13543 | |
| Total Adults | 25303 | 24444 | 845 |

Q17: Cash Income - Sources

| | Income at Start | Income at Latest Annual Assessment for Stayers | Income at Exit for Leavers |
|--------------------------------------------------------------------|-----------------|---------------------------------------------------|----------------------------|
| Earned Income | 1369 | 4 | 185 |
| Unemployment Insurance | 42 | 0 | 8 |
| SSI | 2006 | 2 | 70 |
| SSDI | 1594 | 3 | 34 |
| VA Service-Connected Disability Compensation | 180 | 0 | 5 |
| VA Non-Service Connected Disability Pension | 91 | 0 | 3 |
| Private Disability Insurance | 2 | 0 | 2 |
| Worker's Compensation | 9 | 1 | 1 |
| TANF or Equivalent | 87 | 0 | 52 |
| General Assistance | 3 | 0 | 0 |
| Retirement (Social Security) | 248 | 0 | 2 |
| Pension from Former Job | 33 | 1 | 0 |
| Child Support | 123 | 0 | 30 |
| Alimony (Spousal Support) | 6 | 0 | 0 |
| Other Source | 119 | 2 | 9 |
| Adults with Income Information at Start and Annual Assessment/Exit | | 21 | 481 |

Q19b: Disabling Conditions and Income for Adults at Exit

| | AO: Adult with Disabling Condition | AO: Adult without Disabling Condition | AO: Total Adults | AO: % with Disabling Condition by Source | AC: Adult with Disabling Condition | AC: Adult without Disabling Condition | AC: Total Adults | AC: % with Disabling Condition by Source | UK: Adult with Disabling Condition | UK: Adult without Disabling Condition | UK: Total Adults | UK: % with Disabling Condition by Source |
|---------------------------------------------------------|---------------------------------------------|------------------------------------------------|------------------------|---------------------------------------------------|---------------------------------------------|------------------------------------------------|------------------------|---------------------------------------------------|---------------------------------------------|------------------------------------------------|------------------------|---------------------------------------------------|
| Earned Income | 4 | 34 | 38 | 10.53 % | 8 | 65 | 73 | 10.96 % | 0 | 0 | 0 | |
| Supplemental Security Income (SSI) | 16 | 10 | 26 | 61.54 % | 9 | 11 | 20 | 45.00 % | 0 | 0 | 0 | |
| Social Security Disability Insurance (SSDI) | 14 | 4 | 18 | 77.78 % | 3 | 8 | 11 | 27.27 % | 0 | 0 | 0 | |
| VA Service- Connected Disability Compensation | 2 | 3 | 5 | 40.00 % | 0 | 0 | 0 | | 0 | 0 | 0 | |
| Private Disability Insurance | 1 | 0 | 1 | 100.00 % | 1 | 0 | 1 | 100.00 % | 0 | 0 | 0 | |
| Worker's Compensation | 0 | 0 | 0 | | 1 | 0 | 1 | 100.00 % | 0 | 0 | 0 | |
| Temporary Assistance for Needy Families (TANF) | 0 | 2 | 2 | 0.00 % | 4 | 14 | 18 | 22.23 % | 0 | 0 | 0 | |
| Retirement Income from Social Security | 2 | 0 | 2 | 100.00 % | 0 | 0 | 0 | | 0 | 0 | 0 | |
| Pension or retirement income from a former job | 0 | 0 | 0 | | 0 | 0 | 0 | | 0 | 0 | 0 | |
| Child Support | 1 | 2 | 3 | 33.33 % | 6 | 14 | 20 | 30.00 % | 0 | 0 | 0 | |
| Other source | 0 | 2 | 2 | 0.00 % | 1 | 10 | 11 | 9.09 % | 0 | 0 | 0 | |
| No Sources | 37 | 98 | 135 | 27.41 % | 16 | 107 | 123 | 13.01 % | 0 | 1 | 1 | 0.00 % |
| Unduplicated Total Adults | 73 | 150 | 223 | | 43 | 209 | 252 | | 0 | 1 | 1 | |

Q20a: Type of Non-Cash Benefit Sources

| | Benefit at Start | Benefit at Latest Annual Assessment for Stayers | Benefit at Exit for Leavers |
|---------------------------------------------|------------------|----------------------------------------------------|-----------------------------|
| Supplemental Nutritional Assistance Program | 4635 | 4 | 356 |
| WIC | 83 | 0 | 22 |
| TANF Child Care Services | 12 | 0 | 4 |
| TANF Transportation Services | 2 | 0 | 1 |
| Other TANF-Funded Services | 20 | 0 | 33 |
| Other Source | 12 | 0 | 0 |

Q21: Health Insurance

| | At Start | At Annual Assessment for Stayers | At Exit for Leavers |
|-----------------------------------------------------------------|----------|-------------------------------------|---------------------|
| Medicaid | 2780 | 2 | 476 |
| Medicare | 1462 | 1 | 28 |
| State Children's Health Insurance Program | 326 | 0 | 104 |
| VA Medical Services | 652 | 0 | 24 |
| Employer Provided Health Insurance | 132 | 0 | 18 |
| Health Insurance Through COBRA | 9 | 0 | 0 |
| Private Pay Health Insurance | 99 | 0 | 4 |
| State Health Insurance for Adults | 174 | 0 | 34 |
| Indian Health Services Program | 25 | 0 | 0 |
| Other | 71 | 2 | 8 |
| No Health Insurance | 323 | 0 | 135 |
| Client Doesn't Know/Client Refused | 25 | 0 | 2 |
| Data Not Collected | 804 | 43 | 628 |
| Number of Stayers Not Yet Required to Have an Annual Assessment | 0 | 11420 | 0 |
| 1 Source of Health Insurance | 2575 | 3 | 302 |
| More than 1 Source of Health Insurance | 1520 | 1 | 144 |

Q22a2: Length of Participation – ESG Projects

| | Total | Leavers | Stayers |
|--------------------------------|-------|---------|---------|
| 0 to 7 days | 1335 | 524 | 811 |
| 8 to 14 days | 399 | 171 | 228 |
| 15 to 21 days | 305 | 122 | 183 |
| 22 to 30 days | 338 | 133 | 205 |
| 31 to 60 days | 911 | 360 | 551 |
| 61 to 90 days | 700 | 163 | 537 |
| 91 to 180 days | 1286 | 236 | 1050 |
| 181 to 365 days | 4545 | 161 | 4384 |
| 366 to 730 days (1-2 Yrs) | 9403 | 14 | 9389 |
| 731 to 1,095 days (2-3 Yrs) | 6590 | 6 | 6584 |
| 1,096 to 1,460 days (3-4 Yrs) | 2798 | 2 | 2796 |
| 1,461 to 1,825 days (4-5 Yrs) | 994 | 0 | 994 |
| More than 1,825 days (> 5 Yrs) | 1078 | 0 | 1078 |
| Data Not Collected | 0 | 0 | 0 |
| Total | 30682 | 1892 | 28790 |

Q22c: Length of Time between Project Start Date and Housing Move-in Date

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-----------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| 7 days or less | 42 | 1 | 41 | 0 | 0 |
| 8 to 14 days | 53 | 1 | 52 | 0 | 0 |
| 15 to 21 days | 56 | 1 | 55 | 0 | 0 |
| 22 to 30 days | 63 | 1 | 62 | 0 | 0 |
| 31 to 60 days | 0 | 0 | 0 | 0 | 0 |
| 61 to 180 days | 3 | 0 | 3 | 0 | 0 |
| 181 to 365 days | 0 | 0 | 0 | 0 | 0 |
| 366 to 730 days (1-2 Yrs) | 4 | 0 | 4 | 0 | 0 |
| Total (persons moved into housing) | 221 | 4 | 217 | 0 | 0 |
| Average length of time to housing | 9.00 | 14.00 | 24.00 | | |
| Persons who were exited without move-in | 0 | 0 | 0 | 0 | 0 |
| Total persons | 221 | 4 | 217 | 0 | 0 |

Q22d: Length of Participation by Household Type

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type | | | | |
|----------------|-------|------------------|--------------------------|--------------------|------------------------|--|--|--|--|
| 7 days or less | 1333 | 389 | 857 | 44 | 43 | | | | |
| 8 to 14 days | 399 | 108 | 275 | 12 | 4 | | | | |

| 8 to 14 days | 399 | 108 | 275 | 12 | 4 |
|--------------------------------|-------|-------|-------|-----|-----|
| 15 to 21 days | 305 | 122 | 169 | 8 | 6 |
| 22 to 30 days | 338 | 114 | 210 | 11 | 3 |
| 31 to 60 days | 911 | 291 | 594 | 22 | 4 |
| 61 to 90 days | 700 | 317 | 363 | 13 | 7 |
| 91 to 180 days | 1286 | 629 | 644 | 12 | 1 |
| 181 to 365 days | 4545 | 2564 | 1944 | 26 | 11 |
| 366 to 730 days (1-2 Yrs) | 9403 | 6537 | 2800 | 51 | 15 |
| 731 to 1,095 days (2-3 Yrs) | 6590 | 4687 | 1858 | 37 | 8 |
| 1,096 to 1,460 days (3-4 Yrs) | 2798 | 1388 | 1220 | 184 | 6 |
| 1,461 to 1,825 days (4-5 Yrs) | 994 | 396 | 383 | 215 | 0 |
| More than 1,825 days (> 5 Yrs) | 1078 | 561 | 431 | 83 | 3 |
| Data Not Collected | 2 | 0 | 1 | 1 | 0 |
| Total | 30682 | 18103 | 11749 | 719 | 111 |

Q22e: Length of Time Prior to Housing - based on 3.917 Date Homelessness Started

Without Children With Children and Adults With Only Children Unknown Household Type Total 7 days or less 8 to 14 days 15 to 21 days 22 to 30 days 31 to 60 days 61 to 180 days 181 to 365 days 366 to 730 days (1-2 Yrs) 731 days or more Total (persons moved into housing) Not yet moved into housing Data not collected Total persons

Q23c: Exit Destination – All persons

| Q23C: Exit Destination – All persons | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------------------------------------------------------------------------------------------------------------------------------|-------|---------------------|-----------------------------|-----------------------|---------------------------|
| Permanent Destinctions | 0 | 0 | 0 | 0 | 0 |
| Permanent Destinations Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| Owned by client, no ongoing housing subsidy | 32 | 2 | 30 | 0 | 0 |
| Owned by client, with ongoing housing subsidy | 32 | 0 | 3 | 0 | 0 |
| Rental by client, no ongoing housing subsidy | 274 | 47 | 218 | 6 | 3 |
| Rental by client, no ongoing housing subsidy | 13 | 1 | 12 | 0 | 0 |
| Rental by client, with VASH housing subsidy | 7 | 0 | 7 | 0 | 0 |
| Rental by client, with other ongoing housing subsidy | , 106 | 1 | 103 | 2 | 0 |
| Permanent housing (other than RRH) for formerly homeless persons | 18 | 1 | 17 | 0 | 0 |
| Staying or living with family, permanent tenure | 350 | 55 | 290 | 3 | 2 |
| Staying or living with friends, permanent tenure | 29 | 11 | 17 | 1 | 0 |
| Rental by client, with RRH or equivalent subsidy | 29 | 15 | 259 | 6 | 7 |
| | | | | | |
| Rental by client, with HCV voucher (tenant or project based) | 1 | 0 | 1 | 0 | 0 |
| Rental by client in a public housing unit | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 1120 | 133 | 957 | 18 | 12 |
| Temporary Destinations | 0 | 0 | 0 | 0 | 0 |
| Emergency shelter, including hotel or motel paid for with emergency shelter voucher | 285 | 54 | 201 | 25 | 5 |
| Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| Transitional housing for homeless persons (including homeless youth) | 27 | 3 | 24 | 0 | 0 |
| Staying or living with family, temporary tenure (e.g. room, apartment or house) | 123 | 12 | 111 | 0 | 0 |
| Staying or living with friends, temporary tenure (e.g. room, apartment or house) | 49 | 1 | 47 | 1 | 0 |
| Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) | 27 | 7 | 20 | 0 | 0 |
| Safe Haven | 0 | 0 | 0 | 0 | 0 |
| Hotel or motel paid for without emergency shelter voucher | 24 | 0 | 24 | 0 | 0 |
| Host Home (non-crisis) | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 535 | 77 | 427 | 26 | 5 |
| Institutional Settings | 0 | 0 | 0 | 0 | 0 |
| Foster care home or group foster care home | 0 | 0 | 0 | 0 | 0 |
| Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| Hospital or other residential non-psychiatric medical facility | 3 | 2 | 1 | 0 | 0 |
| Jail, prison, or juvenile detention facility | 1 | 1 | 0 | 0 | 0 |
| Long-term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| Subtotal | 4 | 3 | 1 | 0 | 0 |
| Other Destinations | 0 | 0 | 0 | 0 | 0 |
| Residential project or halfway house with no homeless criteria | 2 | 2 | 0 | 0 | 0 |
| Deceased | 1 | 1 | 0 | 0 | 0 |
| Other | 21 | 16 | 5 | 0 | 0 |
| Client Doesn't Know/Client Refused | 1 | 1 | 0 | 0 | 0 |
| Data Not Collected (no exit interview completed) | 191 | 60 | 120 | 8 | 3 |
| Subtotal | 216 | 80 | 125 | 8 | 3 |
| Total | 1892 | 311 | 125 | 55 | 21 |
| Total persons exiting to positive housing destinations | 1266 | 118 | 1118 | 18 | 12 |
| Total persons whose destinations excluded them from the calculation | 4 | 3 | 1 | 0 | 0 |
| | 67.06 | | | | |
| Percentage | % | 38.31 % | 74.34 % | 32.73 % | 57.14 % |

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|-------------------------------------------------------------------------------------------------------------|-------|---------------------|--------------------------|-----------------------|---------------------------|
| Able to maintain the housing they had at project startWithout a subsidy | 57 | 15 | 42 | 0 | 0 |
| Able to maintain the housing they had at project startWith the subsidy they had at project start | 0 | 0 | 0 | 0 | 0 |
| Able to maintain the housing they had at project startWith an on-going subsidy acquired since project start | 0 | 0 | 0 | 0 | 0 |
| Able to maintain the housing they had at project startOnly with financial assistance other than a subsidy | 0 | 0 | 0 | 0 | 0 |
| Moved to new housing unitWith on-going subsidy | 0 | 0 | 0 | 0 | 0 |
| Moved to new housing unitWithout an on-going subsidy | 0 | 0 | 0 | 0 | 0 |
| Moved in with family/friends on a temporary basis | 0 | 0 | 0 | 0 | 0 |
| Moved in with family/friends on a permanent basis | 0 | 0 | 0 | 0 | 0 |
| Moved to a transitional or temporary housing facility or program | 0 | 0 | 0 | 0 | 0 |
| Client became homeless – moving to a shelter or other place unfit for human habitation | 0 | 0 | 0 | 0 | 0 |
| Client went to jail/prison | 0 | 0 | 0 | 0 | 0 |
| Client died | 0 | 0 | 0 | 0 | 0 |
| Client doesn't know/Client refused | 0 | 0 | 0 | 0 | 0 |
| Data not collected (no exit interview completed) | 1 | 1 | 0 | 0 | 0 |
| Total | 58 | 16 | 42 | 0 | 0 |

Q25a: Number of Veterans

| | Total | Without Children | With Children and Adults | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|------------------------|
| Chronically Homeless Veteran | 206 | 156 | 50 | 0 |
| Non-Chronically Homeless Veteran | 2144 | 1471 | 670 | 0 |
| Not a Veteran | 24316 | 16261 | 7415 | 35 |
| Client Doesn't Know/Client Refused | 36 | 21 | 14 | 0 |
| Data Not Collected | 2426 | 194 | 2182 | 28 |
| Total | 29128 | 18103 | 10331 | 63 |

Q26b: Number of Chronically Homeless Persons by Household

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| Chronically Homeless | 2140 | 1520 | 613 | 6 | 1 |
| Not Chronically Homeless | 27425 | 16265 | 10337 | 713 | 110 |
| Client Doesn't Know/Client Refused | 8 | 7 | 1 | 0 | 0 |
| Data Not Collected | 634 | 420 | 214 | 0 | 0 |
| Total | 30067 | 18103 | 11134 | 719 | 111 |



Housing Opportunities for Persons With AIDS (HOPWA) Program

Consolidated Annual Performance and Evaluation Report (CAPER) Measuring Performance Outcomes

OMB Number 2506-0133 (Expiration Date: 01/31/2021)

The CAPER report for HOPWA formula grantees provides annual information on program accomplishments that supports program evaluation and the ability to measure program beneficiary outcomes as related to: maintain housing stability; prevent homelessness; and improve access to care and support. This information is also covered under the Consolidated Plan Management Process (CPMP) report and includes Narrative Responses and Performance Charts required under the Consolidated Planning regulations. Reporting is required for all HOPWA formula grantees. The public reporting burden for the collection of information is estimated to average 41 hours per manual response, or less if an automated data collection and retrieval system is in use, along with 60 hours for record keeping, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Grantees are required to report on the activities undertaken only, thus there may be components of these reporting requirements that may not be applicable. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a valid OMB control number.

Overview. The Consolidated Annual Performance and Evaluation Report (CAPER) provides annual performance reporting on client outputs and outcomes that enables an assessment of grantee performance in achieving the housing stability outcome measure. The CAPER fulfills statutory and regulatory program reporting requirements and provides the grantee and HUD with the necessary information to assess the overall program performance and accomplishments against planned goals and objectives.

HOPWA formula grantees are required to submit a CAPER demonstrating coordination with other Consolidated Plan resources. HUD uses the CAPER data to obtain essential information on grant activities, project sponsors,, housing sites, units and households, and beneficiaries (which includes racial and ethnic data on program participants). The Consolidated Plan Management Process tool (CPMP) provides an optional tool to integrate the reporting of HOPWA specific activities with other planning and reporting on Consolidated Plan activities.

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Continued Use Periods. Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation of a building or structure are required to operate the building or structure for HOPWA-eligible beneficiaries for a ten (10) years period. If no further HOPWA funds are used to support the facility, in place of completing Section 7B of the CAPER, the grantee must submit an Annual Report of Continued Project Operation throughout the required use periods. This report is included in Part 6 in CAPER. The required use period is three (3) years if the rehabilitation is non-substantial.

Record Keeping. Names and other individual information must be kept confidential, as required by 24 CFR 574.440. However, HUD reserves the right to review the information used to complete this report for grants management oversight purposes, except for recording any names and other identifying information. In the case that HUD must review client-level data, no client names or identifying information will be retained or recorded. Information is reported in aggregate to HUD without personal identification. Do not submit client or personal information in data systems to HUD.

In connection with the development of the Department's standards for Homeless Management Information Systems (HMIS), universal data elements are being collected for clients of <u>HOPWA-funded homeless</u> <u>assistance projects</u>. These project sponsor records would include: Name, Social Security Number, Date of Birth, Ethnicity and Race, Gender, Veteran Status, Disabling Conditions, Residence Prior to Program Entry, Zip Code of Last Permanent Address, Housing Status, Program Entry Date, Program Exit Date, Personal Identification Number, and Household Identification Number. These are intended to match the elements under HMIS. The HOPWA program-level data elements include: Income and Sources, Non-Cash Benefits, HIV/AIDS Status, Services Provided, Housing Status or Destination at the end of the operating year, Physical Disability, Developmental Disability, Chronic Health Condition, Mental Health, Substance Abuse, Domestic Violence, Medical Assistance, and Tcell Count. Other HOPWA projects sponsors may also benefit from collecting these data elements. HMIS local data systems must maintain client confidentiality by using a closed system in which medical information and HIV status are only shared with providers that have a direct involvement in the client's case management, treatment and care, in line with the signed release of information from the client.

Operating Year. HOPWA formula grants are annually awarded for a three-year period of performance with three operating years. The information contained in this CAPER must represent a one-year period of HOPWA program operation that coincides with the grantee's program year; this is the operating year. More than one HOPWA formula grant awarded to the same grantee may be used during an operating year and the CAPER must capture all formula grant funding used during the operating year. Project sponsor accomplishment information must also coincide with the operating year this CAPER covers. Any change to the period of performance requires the approval of HUD by amendment, such as an extension for an additional operating year.

Final Assembly of Report. After the entire report is assembled, number each page sequentially.

Filing Requirements. Within 90 days of the completion of each program year, grantees must submit their completed CAPER to the CPD Director in the grantee's State or Local HUD Field Office, and to the HOPWA Program Office: at <u>HOPWA@hud.gov</u>. Electronic submission to HOPWA Program office is preferred; however, if electronic submission is not possible, hard copies can be mailed to: Office of HIV/AIDS Housing, Room 7248, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, D.C., 20410.

Definitions

Adjustment for Duplication: Enables the calculation of unduplicated output totals by accounting for the total number of households or units that received more than one type of HOPWA assistance in a given service category such as HOPWA Subsidy Assistance or Supportive Services. For example, if a client household received both TBRA and STRMU during the operating year, report that household in the category of HOPWA Housing Subsidy Assistance in Part 3, Chart 1, Column [1b] in the following manner:

| Н | OPWA Housing Subsidy Assistance | [1] Outputs: Number of Households |
|-----|---------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| 1. | Tenant-Based Rental Assistance | 1 |
| 2a. | Permanent Housing Facilities: Received Operating Subsidies/Leased units | |
| 2b. | Transitional/Short-term Facilities: Received Operating Subsidies | |
| 3a. | Permanent Housing Facilities: Capital Development Projects placed in service during the operating year | |
| 3b. | Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year | |
| 4. | Short-term Rent, Mortgage, and Utility Assistance | 1 |
| 5. | Adjustment for duplication (subtract) | 1 |
| 6. | TOTAL Housing Subsidy Assistance (Sum of Rows 1-4 minus Row 5) | 1 |

Administrative Costs: Costs for general management, oversight, coordination, evaluation, and reporting. By statute, grantee administrative costs are limited to 3% of total grant award, to be expended over the life of the grant. Project sponsor administrative costs are limited to 7% of the portion of the grant amount they receive.

Beneficiary(ies): All members of a household who received HOPWA assistance during the operating year including the one individual who qualified the household for HOPWA assistance as well as any other members of the household (with or without HIV) who benefitted from the assistance.

Chronically Homeless Person: An individual or family who : (i) is homeless and lives or resides individual or family who: (i) Is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter; (ii) has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and (iii) has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions. Additionally, the statutory definition includes as chronically homeless a person who currently lives or resides in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, and has resided there for fewer than 90 days if such person met the other criteria for homeless prior to entering that facility. (See 42 U.S.C. 11360(2)) This does not include doubled-up or overcrowding situations.

Disabling Condition: Evidencing a diagnosable substance use disorder, serious mental illness, developmental disability, chronic physical illness, or disability, including the co-occurrence of two or more of these conditions. In addition, a disabling condition may limit an individual's ability to work or perform one or more activities of daily living. An HIV/AIDS diagnosis is considered a disabling condition.

Facility-Based Housing Assistance: All eligible HOPWA Housing expenditures for or associated with supporting facilities including community residences, SRO dwellings, short-term facilities, project-based rental units, master leased units, and other housing facilities approved by HUD.

Faith-Based Organization: Religious organizations of three types: (1) congregations; (2) national networks, which include national denominations, their social service arms (for example, Catholic Charities, Lutheran Social Services), and networks of related organizations (such as YMCA and YWCA); and (3) freestanding religious organizations, which are incorporated separately from congregations and national networks.

Grassroots Organization: An organization headquartered in the local community where it provides services; has a social services budget of \$300,000 or less annually, and six or fewer full-time equivalent employees. Local affiliates of national organizations are not considered "grassroots."

HOPWA Eligible Individual: The one (1) low-income person with HIV/AIDS who qualifies a household for HOPWA assistance. This person may be considered "Head of Household." When the CAPER asks for information on eligible individuals, report on this individual person only. Where there is more than one person with HIV/AIDS in the household, the additional PWH/A(s), would be considered a beneficiary(s).

HOPWA Housing Information Services: Services dedicated to helping persons living with HIV/AIDS and their families to identify, locate, and acquire housing. This may also include fair housing counseling for eligible persons who may encounter discrimination based on race, color, religion, sex, age, national origin, familial status, or handicap/disability.

HOPWA Housing Subsidy Assistance Total: The unduplicated number of households receiving housing subsidies (TBRA, STRMU, Permanent Housing Placement services and Master Leasing) and/or residing in units of facilities dedicated to persons living with HIV/AIDS and their families and supported with HOPWA funds during the operating year.

Household: A single individual or a family composed of two or more persons for which household incomes are used to determine eligibility and for calculation of the resident rent payment. The term is used for collecting data on changes in income, changes in access to services, receipt of housing information services, and outcomes on achieving housing stability. Live-In Aides (see definition for Live-In Aide) and nonbeneficiaries (e.g. a shared housing arrangement with a roommate) who resided in the unit are not reported on in the CAPER.

Housing Stability: The degree to which the HOPWA project assisted beneficiaries to remain in stable housing during the operating year. See *Part 5: Determining Housing Stability Outcomes* for definitions of stable and unstable housing situations.

In-kind Leveraged Resources: These are additional types of support provided to assist HOPWA beneficiaries such as volunteer services, materials, use of equipment and building space. The actual value of the support can be the contribution of professional services, based on customary rates for this specialized support, or actual costs contributed from other leveraged resources. In determining a rate for the contribution of volunteer time and services, use the criteria described in 2 CFR 200. The value of any donated material, equipment, building, or lease should be based on the fair market value at time of donation. Related documentation can be from recent bills of sales, advertised prices, appraisals, or other information for comparable property similarly situated.

Leveraged Funds: The amount of funds expended during the operating year from non-HOPWA federal, state, local, and private sources by grantees or sponsors in dedicating assistance to this client population. Leveraged funds or other assistance are used directly in or in support of HOPWA program delivery.

Live-In Aide: A person who resides with the HOPWA Eligible Individual and who meets the following criteria: (1) is essential to the care and wellbeing of the person; (2) is not obligated for the support of the person; and (3) would not be living in the unit except to provide the necessary supportive services. *See t24 CFR 5.403 and the HOPWA Grantee Oversight Resource Guide for additional reference.*

Master Leasing: Applies to a nonprofit or public agency that leases units of housing (scattered-sites or entire buildings) from a landlord, and subleases the units to homeless or low-income tenants. By assuming the tenancy burden, the agency facilitates housing of clients who may not be able to maintain a lease on their own due to poor credit, evictions, or lack of sufficient income.

Operating Costs: Applies to facility-based housing only, for facilities that are currently open. Operating costs can include day-to-day housing function and operation costs like utilities, maintenance, equipment, insurance, security, furnishings, supplies and salary for staff costs directly related to the housing project but not staff costs for delivering services.

Outcome: The degree to which the HOPWA assisted household has been enabled to establish or maintain a stable living environment in housing that is safe, decent, and sanitary, (per the regulations at 24 CFR 574.310(b)) and to reduce the risks of homelessness, and improve access to HIV treatment and other health care and support.

Output: The number of units of housing or households that receive HOPWA assistance during the operating year.

Permanent Housing Placement: A supportive housing service that helps establish the household in the housing unit, including but not limited to reasonable costs for security deposits not to exceed two months of rent costs.

Program Income: Gross income directly generated from the use of HOPWA funds, including repayments. See grant administration

requirements on program income at 2 CFR 200.307.

Project-Based Rental Assistance (PBRA): A rental subsidy program that is tied to specific facilities or units owned or controlled by a project sponsor. Assistance is tied directly to the properties and is not portable or transferable.

Project Sponsor Organizations: Per HOPWA regulations at 24 CFR 574.3, any nonprofit organization or governmental housing agency that receives funds under a contract with the grantee to provide eligible housing and other support services or administrative services as defined in 24 CFR 574.300. Project Sponsor organizations are required to provide performance data on households served and funds expended.

SAM: All organizations applying for a Federal award must have a valid registration active at sam.gov. SAM (System for Award Management) registration includes maintaining current information and providing a valid DUNS number.

Short-Term Rent, Mortgage, and Utility (STRMU) Assistance: A time-limited, housing subsidy assistance designed to prevent homelessness and increase housing stability. Grantees may provide assistance for up to 21 weeks in any 52-week period. The amount of assistance varies per client depending on funds available, tenant need and program guidelines.

Stewardship Units: Units developed with HOPWA, where HOPWA funds were used for acquisition, new construction and rehabilitation that no longer receive operating subsidies from HOPWA. Report information for the units is subject to the three-year use agreement if rehabilitation is non-substantial and to the ten-year use agreement if rehabilitation is substantial.

Tenant-Based Rental Assistance (TBRA): TBRA is a rental subsidy program similar to the Housing Choice Voucher program that grantees can provide to help low-income households access affordable housing. The TBRA voucher is not tied to a specific unit, so tenants may move to a different unit without losing their assistance, subject to individual program rules. The subsidy amount is determined in part based on household income and rental costs associated with the tenant's lease.

Transgender: Transgender is defined as a person who identifies with, or presents as, a gender that is different from his/her gender at birth.

Veteran: A veteran is someone who has served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

OMB Number 2506-0133 (Expiration Date: 01/31/2021)

Part 1: Grantee Executive Summary

As applicable, complete the charts below to provide more detailed information about the agencies and organizations responsible for the administration and implementation of the HOPWA program. Chart 1 requests general Grantee Information and Chart 2 is to be completed for each organization selected or designated as a project sponsor, as defined by 24 CFR 574.3.

Note: If any information does not apply to your organization, please enter N/A. Do not leave any section blank.

1. Grantee Information

| HUD Grant Number | | | Operating Year for this report | | | |
|----------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------|-----------------|--|
| TX-H-19-F002 | | From (mm/do | d/yy) 10/01/19 | to (mm/dd/yy) | 09/30/20 | |
| Grantee Name | | | | | | |
| City of Fort Worth | | | | | | |
| Business Address | 200 Texas Street | | | | | |
| City, County, State, Zip | Fort Worth | Tarrant | | TX | 76102 | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 75-6000528 | | | · | | |
| DUN & Bradstreet Number (DUNs): | 07-317-0458 | | System for Awa Is the grantee's ⊠ Yes □ N If yes, provide S | s SAM status cu lo | rrently active? | |
| Congressional District of Grantee's Business Address | 26 | | | | | |
| *Congressional District of Primary Service Area(s) | N/A | | | | | |
| *City(ies) <u>and</u> County(ies) of Primary Service Area(s) | Cities: N/A | | Counties: N/A | | | |
| Service www.fortworthtexas.gov If yes, o | | Is there a waiting list(s) Services in the Grantee If yes, explain in the na list and how this list is a | Service Area? rrative section wh | \boxtimes Yes \Box N | 0 | |

* Service delivery area information only needed for program activities being directly carried out by the grantee.

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by 24 CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. *Note: If any information does not apply to your organization, please enter N/A.*

| Project Sponsor Agency Name | Parent Company Name, if applicable | | | | |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------|----------------------------------------------------------|--|
| Community Action Partners | City of Fort Worth | | | | |
| Name and Title of Contact at Project | Sonia Singleton, Executive Director or | | | | |
| Sponsor Agency | Marie Francis, Human Services Manager | | | | |
| Email Address | Sonia.Singleton@fortworthtexas Marie.Francis@fortworthtexas | Sonia.Singleton@fortworthtexas.gov | | | |
| | | <u>s.gov</u> | | | |
| Business Address | 200 Texas Street | | | | |
| City, County, State, Zip, | Fort Worth, Texas, 76102 | | | | |
| Phone Number (with area code) | 817-392-7540 | 817-392-5798 | 817-392-8634 | | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 75-6000528 | | Fax Number (with area code) | | |
| DUN & Bradstreet Number (DUNs): | 07-317-0458 | | | | |
| Congressional District of Project Sponsor's Business Address | 12 | | | | |
| Congressional District(s) of Primary Service Area(s) | N/A | | | | |
| City(ies) <u>and</u> County(ies) of Primary Service Area(s) | Cities: N/A | | Counties: N/A | | |
| Total HOPWA contract amount for this Organization for the operating year | \$602,966.00 | | | | |
| Organization's Website Address | www.fortworthtexas.gov/cap | | | | |
| Is the sponsor a nonprofit organization? | Image: West state Does your organization maintain a waiting list? Image: West state Image: No | | | $\mathbf{t?} \boxtimes \mathbf{Yes} \square \mathbf{No}$ | |
| Please check if yes and a faith-based organization. \Box Please check if yes and a grassroots organization. \Box | | If yes, explain in the 1 | narrative section how this | s list is administered. | |

5. Grantee Narrative and Performance Assessment

a. Grantee and Community Overview

Provide a one to three page narrative summarizing major achievements and highlights that were proposed and completed during the program year. Include a brief description of the grant organization, area of service, the name(s) of the program contact(s), and an overview of the range/type of housing activities provided. This overview may be used for public information, including posting on HUD's website. *Note: Text fields are expandable.*

HOPWA funds received provided tenant-based rental assistance, and administrative support for City of Fort Worth Neighborhood Services, Community Action Partners. Through the course of the grant year (October 2019 – September 2020), grant funds supported 43 households.

City of Fort Worth Neighborhood Services, Community Action Partners established itself in the community in 2019 as a major achievement as a new program, addressing the housing needs of people living with HIV/AIDS. The agency provides housing assistance to individuals and families residing in scatter-site units throughout the City of Fort Worth and surrounding counties. The wait list is managed by housing staff. Applicants are called on a first come order and placed on the waitlist. As funding becomes available, applicants are contacted for basic screen. Once screened, an application is completed. The individual is then further accessed for eligibility and then selected if eligibility is met based on identified criteria. People interested in housing program and services offered by City of Fort Worth Neighborhood Services, Community Action Partners may contact Ms. Liza Bethea at 817-392-8634 (office) or via email at Liza.bethea@fortworthtexas.gov

b. Annual Performance under the Action Plan

Provide a narrative addressing each of the following four items:

1. Outputs Reported. Describe significant accomplishments or challenges in achieving the number of housing units supported and the number households assisted with HOPWA funds during this operating year compared to plans for this assistance, as approved in the Consolidated Plan/Action Plan. Describe how HOPWA funds were distributed during your operating year among different categories of housing and geographic areas to address needs throughout the grant service area, consistent with approved plans.

One significant barriers to obtaining housing, was issues around availability of decent, safe affordable housing options. Neighborhood Services has worked diligently to provide a positive approach to the barrier. The housing staff have worked to identify new landlords, maintain a professional collaborative effort with current landlords. By using this approach, the goal of clients assessing greater options will be increased. HOPWA funds were distributed among different categories and geographic areas reaching from identifying new clients and landlords from Hurst to Arlington, Texas. Serving Fort Worth and surrounding counties are consistent with approved plans.

2. Outcomes Assessed. Assess your program's success in enabling HOPWA beneficiaries to establish and/or better maintain a stable living environment in housing that is safe, decent, and sanitary, and improve access to care. Compare current year results to baseline results for clients. Describe how program activities/projects contributed to meeting stated goals. If program did not achieve expected targets, please describe how your program plans to address challenges in program implementation and the steps currently being taken to achieve goals in next operating year. If your program exceeded program targets, please describe strategies the program utilized and how those contributed to program successes.

City of Fort Worth Neighborhood Services, Community Action Partners, works with residents to improve their health and manage their HIV/AIDS by ensuring each client becomes and remains stably housed. The organization focuses on fostering independence and developing skills that enable client to become vital contributing members of the community. This is valuable to the community because permanent supportive housing has shown to be more cost-effective than temporary shelters, jails, and other homeless situations. Of those who exited 4 transitioned to stable housing situations, 1 resident moved into permanent housing without subsidy, 1 moved into unstable housing situation, 1 resident was jailed and 1 resident passed away.

3. Coordination. Report on program coordination with other mainstream housing and supportive services resources, including the use of committed leveraging from other public and private sources that helped to address needs for eligible persons identified in the Consolidated Plan/Strategic Plan.

City of Fort Worth Neighborhood Services, Community Action Partners served 9 clients total, one of whom received CSBG emergency funds and CEAP. The other eight received CSBG Emergency only. This source of funds were used to leverage and support the services provided to persons living with HIV/AIDS.

4. Technical Assistance. Describe any program technical assistance needs and how they would benefit program beneficiaries.

Additional training on CAPER reporting measures and implementing a database that is linked with outside agencies that use track Ryan White and HOPWA clients would help the agency to better evaluate program future needs and results. With program evaluations, the agency is able to improve service delivery and positively impact participants of our programs.

c. Barriers and Trends Overview

Provide a narrative addressing items 1 through 3. Explain how barriers and trends affected your program's ability to achieve the objectives and outcomes discussed in the previous section.

1. Describe any barriers (including regulatory and non-regulatory) encountered in the administration or implementation of the HOPWA program, how they affected your program's ability to achieve the objectives and outcomes discussed, and, actions taken in response to barriers, and recommendations for program improvement. Provide an explanation for each barrier selected.

Barriers would include housing affordability, poor previous landlord relationships the need for database for accurate client tracking such as Provide Enterprise (PE). These barriers affected the program by using case management hours assist clients identify units and provide training to landlords and property owners.

2. Describe any trends in the community that may affect the way in which the needs of persons living with HIV/AIDS are being addressed, and provide any other information important to the future provision of services to this population.

Trends that affect the community remains as underemployment, and unemployment for persons living with HIV/AIDS who are accessing these funds. Clients identified who training to increase income need have been offered training options from vocational training to administrative options. The COVID-19 Pandemic has greatly impact the way in which Neighborhood Services has been able to provide services to clients in order to reduce potential exposure of the virus to both our staff and our clients.

| □ HOPWA/HUD Regulations | □ Planning | □ Housing Availability | □ Rent Determination and Fair Market Rents |
|----------------------------------|------------------------|---------------------------------|--------------------------------------------|
| □ Discrimination/Confidentiality | □ Multiple Diagnoses | □ Eligibility | □ Technical Assistance or Training |
| □ Supportive Services | □ Credit History | □ Rental History | Criminal Justice History |
| □ Housing Affordability | Geography/Rural Access | □ Other, please explain further | |

3. Identify any evaluations, studies, or other assessments of the HOPWA program that are available to the public. Not Applicable

End of PART 1

PART 2: Sources of Leveraging and Program Income

1. Sources of Leveraging

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in the Consolidated or Annual Plan and used in the delivery of the HOPWA program and the amount of leveraged dollars. In Column [1], identify the type of leveraging. Some common sources of leveraged funds have been provided as a reference point. You may add Rows as necessary to report all sources of leveraged funds. Include Resident Rent payments paid by clients directly to private landlords. Do NOT include rents paid directly to a HOPWA program as this will be reported in the next section. In Column [2] report the amount of leveraged funds expended during the operating year. Use Column [3] to provide some detail about the type of leveraged contribution (e.g., case management services or clothing donations). In Column [4], check the appropriate box to indicate whether the leveraged contribution was a housing subsidy assistance or another form of support. *Note: Be sure to report on the number of households supported with these leveraged funds in Part 3, Chart 1, Column d.*

| | [2] Amount of | | [4] Housing Subsidy |
|--------------------------|---------------|------------------|--------------------------------------------------------|
| | Leveraged | [3] Type of | Assistance or Other |
| [1] Source of Leveraging | Funds | Contribution | Support |
| Public Funding | | | |
| | | | ⊠ Housing Subsidy Assistance |
| CEAP | 1,449.78 | Utilities | □ Other Support |
| | | Emergency | ⊠ Housing Subsidy Assistance |
| | | Rental | □ Other Support |
| | | deposits/1st mo. | |
| CSBG | 22,849.00 | rent | |
| | | | □ Housing Subsidy Assistance |
| | | | Other Support |
| | | | \Box Housing Subsidy Assistance |
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| | | | □ Other Support |
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A. Source of Leveraging Chart

2. Program Income and Resident Rent Payments

In Section 2, Chart A, report the total amount of program income and resident rent payments directly generated from the use of HOPWA funds, including repayments. Include resident rent payments collected or paid directly to the HOPWA program. Do NOT include payments made directly from a client household to a private landlord.

Note: Please see report directions section for definition of <u>program income</u>. (Additional information on program income is available in the HOPWA Grantee Oversight Resource Guide).

A. Total Amount Program Income and Resident Rent Payment Collected During the Operating Year

| | Program Income and Resident Rent Payments Collected | Total Amount of Program Income (for this operating year) |
|----|-----------------------------------------------------------------------|----------------------------------------------------------------|
| 1. | Program income (e.g. repayments) | |
| 2. | Resident Rent Payments made directly to HOPWA Program | |
| 3. | Total Program Income and Resident Rent Payments (Sum of Rows 1 and 2) | |

B. Program Income and Resident Rent Payments Expended To Assist HOPWA Households

In Chart B, report on the total program income and resident rent payments (as reported above in Chart A) expended during the operating year. Use Row 1 to report Program Income and Resident Rent Payments expended on Housing Subsidy Assistance Programs (i.e., TBRA, STRMU, PHP, Master Leased Units, and Facility-Based Housing). Use Row 2 to report on the Program Income and Resident Rent Payment expended on Supportive Services and other non-direct Housing Costs.

| | Program Income and Resident Rent Payment Expended on HOPWA programs | Total Amount of Program Income Expended (for this operating year) |
|----|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| 1. | Program Income and Resident Rent Payment Expended on Housing Subsidy Assistance costs | |
| 2. | Program Income and Resident Rent Payment Expended on Supportive Services and other non- direct housing costs | |
| 3. | Total Program Income Expended (Sum of Rows 1 and 2) | |

End of PART 2

PART 3: Accomplishment Data Planned Goal and Actual Outputs

In Chart 1, enter performance information (goals and actual outputs) for all activities undertaken during the operating year supported with HOPWA funds. Performance is measured by the number of households and units of housing that were supported with HOPWA or other federal, state, local, or private funds for the purposes of providing housing assistance and support to persons living with HIV/AIDS and their families.

| | HOF WA Fertormance Flanned Goar and Actual Outputs | | [1] Output: Households | | | [2] Outpu | t: Funding |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------|----------|---------------------|-----------|-------------|
| | HOPWA Performance | | PWA stance | | veraged useholds | HOPW | A Funds |
| | Planned Goal | a. | b. | с. | d. | e. | f. |
| | and Actual | Goal | L L | | Actual | AWPWA | |
| | | Ŭ | Ac | Goal | Ac | 0H | HO Act |
| | HOPWA Housing Subsidy Assistance | ſ | 1] Outpu | ıt: Hous | seholds | [2] Outpu | t: Funding |
| | Tenant-Based Rental Assistance | 50 | 43 | | | 602,966 | 492,966 |
| | Permanent Housing Facilities: Received Operating Subsidies/Leased units (Households Served) | | | | | | |
| | Transitional/Short-term Facilities: Received Operating Subsidies/Leased units (Households Served) (Households Served) | | | | | | |
| 3a. | Permanent Housing Facilities: Capital Development Projects placed in service during the operating year (Households Served) | | | | | | |
| 3b. | Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year (Households Served) | | | | | | |
| | Short-Term Rent, Mortgage and Utility Assistance | | | | | | |
| - | Permanent Housing Placement Services | | | | | | |
| | Adjustments for duplication (subtract) | | | | | | |
| '. | Total HOPWA Housing Subsidy Assistance (Columns a – d equal the sum of Rows 1-5 minus Row 6; Columns e and f equal the sum of Rows 1-5) | | | | | | |
| | Housing Development (Construction and Stewardship of facility based housing) | [1] | Output: | Housi | ng Units | [2] Outpu | t: Funding |
| | Facility-based units; Capital Development Projects not yet opened (Housing Units) | | | | 0 | | |
| | Stewardship Units subject to 3- or 10- year use agreements | | | | | | |
| | Total Housing Developed (Sum of Rows 8 & 9) | | | | | | |
| | Supportive Services | [| 1] Outpu | t: Hous | eholds | [2] Outpu | t: Funding |
| | Supportive Services provided by project sponsors that also delivered <u>HOPWA</u> housing subsidy assistance | | | | | | |
| | Supportive Services provided by project sponsors that only provided supportive services. | | | | | | |
| 2. | Adjustment for duplication (subtract) | | | | | | |
| | Total Supportive Services (Columns a – d equals the sum of Rows 11 a & b minus Row 12; Columns e and f equal the sum of Rows 11a & 11b) | | | | | | |
| | Housing Information Services | | [1] Outpu | it: Hous | seholds | [2] Outpu | ıt: Funding |
| | Housing Information Services | | | | | | |
| 5. | Total Housing Information Services | | | | | | |

1. HOPWA Performance Planned Goal and Actual Outputs

| | Grant Administration and Other Activities | | [1] Output: Households | | | [2] Output: Funding | |
|-----|-------------------------------------------------------------------------------------------|--|------------------------|--|--|---------------------|----------------------|
| 16. | Resource Identification to establish, coordinate and develop housing assistance resources | | | | | | |
| 17. | Technical Assistance (if approved in grant agreement) | | | | | | |
| 18. | Grantee Administration (maximum 3% of total HOPWA grant) | | | | | | |
| 19. | Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded) | | | | | | |
| 20. | Total Grant Administration and Other Activities (Sum of Rows 16 – 19) | | | | | | |
| | | | | | | | |
| | Total Expended | | | | | | HOPWA Funds ended |
| 21 | Total Expenditures for operating year (Sum of Rows 7, 10, 13, 15, and 20) | | | | | Budget | Actual |
| 21. | 1 otar Experimentes for operating year (Sull of Rows 7, 10, 15, 15, and 20) | | | | | | |

2. Listing of Supportive Services

Report on the households served and use of HOPWA funds for all supportive services. Do NOT report on supportive services leveraged with non-HOPWA funds.

Data check: Total unduplicated households and expenditures reported in Row 17 equal totals reported in Part 3, Chart 1, Row 13.

| | Supportive Services | [1] Output: Number of <u>Households</u> | [2] Output: Amount of HOPWA Funds Expended |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------|
| 1. | Adult day care and personal assistance | | |
| 2. | Alcohol and drug abuse services | | |
| 3. | Case management | | |
| 4. | Child care and other child services | | |
| 5. | Education | | |
| 6. | Employment assistance and training | | |
| | Health/medical/intensive care services, if approved | | |
| 7. | Note: Client records must conform with 24 CFR §574.310 | | |
| 8. | Legal services | | |
| 9. | Life skills management (outside of case management) | | |
| 10. | Meals/nutritional services | | |
| 11. | Mental health services | | |
| 12. | Outreach | | |
| 13. | Transportation | | |
| 14. | Other Activity (if approved in grant agreement). Specify : | | |
| 15. | Sub-Total Households receiving Supportive Services (Sum of Rows 1-14) | 10 | |
| 16. | Adjustment for Duplication (subtract) | | |
| 17. | TOTAL Unduplicated Households receiving Supportive Services (Column [1] equals Row 15 minus Row 16; Column [2] equals sum of Rows 1-14) | | |

3. Short-Term Rent, Mortgage and Utility Assistance (STRMU) Summary

In Row a, enter the total number of households served and the amount of HOPWA funds expended on Short-Term Rent, Mortgage and Utility (STRMU) Assistance. In Row b, enter the total number of STRMU-assisted households that received assistance with mortgage costs only (no utility costs) and the amount expended assisting these households. In Row c, enter the total number of STRMU-assisted households that received assistance with both mortgage and utility costs and the amount expended assisting these households. In Row d, enter the total number of STRMU-assisted households that received assistance with rental costs only (no utility costs) and the amount expended assisting these households. In Row e, enter the total number of STRMU-assisted households that received assistance with both rental and utility costs and the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households. In Row e, enter the total number of stream of stream of stream of stream of stream of stream of the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households that received assisting these households. In Row f, enter the total number of STRMU-assisted households that received assisting these households. In Row f, enter the total number of STRMU-assisted households that received assistance with utility costs only (not including rent or mortgage costs) and the amount expended assisting these households. In row g, report the amount of STRMU funds expended to support direct program costs such as program operation staff.

Data Check: The total households reported as served with STRMU in Row a, column [1] and the total amount of HOPWA funds reported as expended in Row a, column [2] equals the household and expenditure total reported for STRMU in Part 3, Chart 1, Row 4, Columns b and f, respectively.

Data Check: The total number of households reported in Column [1], Rows b, c, d, e, and f equal the total number of STRMU households reported in Column [1], Row a. The total amount reported as expended in Column [2], Rows b, c, d, e, f, and g. equal the total amount of STRMU expenditures reported in Column [2], Row a.

| н | ousing Subsidy Assistance Categories (STRMU) | [1] Output: Number of <u>Households</u> Served | [2] Output: Total HOPWA Funds Expended on STRMU during Operating Year |
|----|------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------|
| a. | Total Short-term mortgage, rent and/or utility (STRMU) assistance | | |
| b. | Of the total STRMU reported on Row a, total who received assistance with mortgage costs ONLY. | | |
| c. | Of the total STRMU reported on Row a, total who received assistance with mortgage and utility costs. | | |
| d. | Of the total STRMU reported on Row a, total who received assistance with rental costs ONLY. | | |
| e. | Of the total STRMU reported on Row a, total who received assistance with rental and utility costs. | | |
| f. | Of the total STRMU reported on Row a, total who received assistance with utility costs ONLY. | | |
| g. | Direct program delivery costs (e.g., program operations staff time) | | |

Part 4: Summary of Performance Outcomes

In Column [1], report the total number of eligible households that received HOPWA housing subsidy assistance, by type. In Column [2], enter the number of households that continued to access each type of housing subsidy assistance into next operating year. In Column [3], report the housing status of all households that exited the program.

Data Check: The sum of Columns [2] (Number of Households Continuing) and [3] (Exited Households) equals the total reported in Column[1]. **Note**: Refer to the housing stability codes that appear in Part 5: Worksheet - Determining Housing Stability Outcomes.

Section 1. Housing Stability: Assessment of Client Outcomes on Maintaining Housing Stability (Permanent Housing and Related Facilities) A. Permanent Housing Subsidy Assistance

| | [1] Output: Total Number of Households Served | [2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year | [3] Assessment: M Households that HOPWA Program; t Status after H | exited this their Housing | [4] HOPWA Client Outcomes |
|-----------------------------|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------|
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable, with Reduced Risk of Homelessness |
| | | | 3 Private Housing | 01 | |
| Tenant-Based Rental | 43 | 39 | 4 Other HOPWA | | Stable/Derman and Housing (DH) |
| Assistance | | | 5 Other Subsidy | | Stable/Permanent Housing (PH) |
| | | | 6 Institution | | |
| | | | 7 Jail/Prison | 01 | Unstable Americanista |
| | | | 8 Disconnected/Unknown | 01 | Unstable Arrangements |
| | | | 9 Death | 01 | Life Event |
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable, with Reduced Risk of Homelessness |
| | | | 3 Private Housing | | |
| Permanent Supportive | | | 4 Other HOPWA | | |
| Housing | | | 5 Other Subsidy | | Stable/Permanent Housing (PH) |
| Facilities/ Units | | | 6 Institution | | |
| | | | 7 Jail/Prison | | |
| | | | 8 Disconnected/Unknown | | Unstable Arrangements |
| | | | 9 Death | | Life Event |
| B. Transitional | Housing Assistance | | | | |
| | [1] Output: Total Number of Households Served | [2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year | [3] Assessment: Nur Households that exi HOPWA Program Housing Status after | ted this ; their | [4] HOPWA Client Outcomes |
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable with Reduced Risk of Homelessness |
| Transitional/ Short-Term | | | 3 Private Housing | | |
| Housing | | | 4 Other HOPWA | | Stable/Permanent Housing (PH) |
| Facilities/ Units | | | 5 Other Subsidy | | Survey I ermanent Housing (111) |
| | | | 6 Institution | | |
| | | | 7 Jail/Prison | | Unstable Arrangements |
| | | | 8 Disconnected/unknown | | Sustaine in rangements |
| | | | 9 Death | | Life Event |

Section 2. Prevention of Homelessness: Assessment of Client Outcomes on Reduced Risks of Homelessness (Short-Term Housing Subsidy Assistance)

Report the total number of households that received STRMU assistance in Column [1].

In Column [2], identify the outcomes of the households reported in Column [1] either at the time that they were known to have left the STRMU program or through the project sponsor's best assessment for stability at the end of the operating year. Information in Column [3] provides a description of housing outcomes; therefore, data is not required. At the bottom of the chart:

- In Row 1a, report those households that received STRMU assistance during the operating year of this report, and the prior operating year.
- In Row 1b, report those households that received STRMU assistance during the operating year of this report, and the two prior operating years.

Data Check: The total households reported as served with STRMU in Column [1] equals the total reported in Part 3, Chart 1, Row 4, Column b.

Data Check: The sum of Column [2] should equal the number of households reported in Column [1].

| [1] Output: Total number of households | [2] Assessment of Housing Status | [3] HOPWA Client Outcomes |
|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| | Maintain Private Housing without subsidy (e.g. Assistance provided/completed and client is stable, not likely to seek additional support) | |
| | Other Private Housing without subsidy | |
| | (e.g. client switched housing units and is now stable, not likely to seek additional support) | Stable/Permanent Housing (PH) |
| | Other HOPWA Housing Subsidy Assistance | |
| | Other Housing Subsidy (PH) | |
| | Institution (e.g. residential and long-term care) | |
| | Likely that additional STRMU is needed to maintain current housing arrangements | |
| | Transitional Facilities/Short-term | Temporarily Stable, with |
| | (e.g. temporary or transitional arrangement) | Reduced Risk of Homelessness |
| | Temporary/Non-Permanent Housing arrangement | |
| | (e.g. gave up lease, and moved in with family or friends but expects to live there less than 90 days) | |
| | Emergency Shelter/street | |
| | Jail/Prison | Unstable Arrangements |
| | Disconnected | |
| Death | | Life Event |
| | ouseholds that received STRMU Assistance in the operating year of this re- ior operating year (e.g. households that received STRMU assistance in tw | |
| | ouseholds that received STRMU Assistance in the operating year of this re operating years (e.g. households that received STRMU assistance | |

Assessment of Households that Received STRMU Assistance

Section 3. HOPWA Outcomes on Access to Care and Support

1a. Total Number of Households

Line [1]: For project sponsors that provided HOPWA housing subsidy assistance during the operating year identify in the appropriate row the number of households that received HOPWA housing subsidy assistance (TBRA, STRMU, Facility-Based, PHP and Master Leasing) and HOPWA funded case management services. Use Row c to adjust for duplication among the service categories and Row d to provide an unduplicated household total.

Line [2]: For project sponsors that did <u>NOT</u> provide HOPWA housing subsidy assistance identify in the appropriate row the number of households that received HOPWA funded case management services.

Note: These numbers will help you to determine which clients to report Access to Care and Support Outcomes for and will be used by HUD as a basis for analyzing the percentage of households who demonstrated or maintained connections to care and support as identified in Chart 1b below.

| Total Number of | of Households | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| For Project Sponsors that provided HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following <u>HOPWA-funded</u> services: | | | | | |
| a. | Housing Subsidy Assistance (duplicated)-TBRA, STRMU, PHP, Facility-Based Housing, and Master Leasing | | | | |
| b. | Case Management | | | | |
| с. | Adjustment for duplication (subtraction) | | | | |
| d. | Total Households Served by Project Sponsors with Housing Subsidy Assistance (Sum of Rows a and b minus Row c) | | | | |
| | 2. For Project Sponsors did NOT provide HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following HOPWA-funded service: | | | | |
| a. | HOPWA Case Management | | | | |
| b. | Total Households Served by Project Sponsors without Housing Subsidy Assistance | | | | |

1b. Status of Households Accessing Care and Support

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report the number of households that demonstrated access or maintained connections to care and support within the operating year.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report the number of households that demonstrated improved access or maintained connections to care and support within the operating year.

Note: For information on types and sources of income and medical insurance/assistance, refer to Charts below.

| Categories of Services Accessed | [1] For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following: | [2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following: | Outcome Indicator |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| 1. Has a housing plan for maintaining or establishing stable on- going housing | | | Support for Stable Housing |
| 2. Had contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan (may include leveraged services such as Ryan White Medical Case Management) | | | Access to Support |
| 3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan | | | Access to Health Care |
| 4. Accessed and maintained medical insurance/assistance | | | Access to Health Care |
| 5. Successfully accessed or maintained qualification for sources of income | | | Sources of Income |

Chart 1b, Line 4: Sources of Medical Insurance and Assistance include, but are not limited to the following (Reference only)

| • | MEDICAID Health Insurance Program, or use local program name MEDICARE Health Insurance Program, or use local program name | Veterans Affairs Medical Services AIDS Drug Assistance Program (ADAP) State Children's Health Insurance Program (SCHIP), or use local program name | Ryan White-funded Medical or Dental Assistance |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| | use local program name | | |

Chart 1b, Row 5: Sources of Income include, but are not limited to the following (Reference only) Child Support

•

- Earned Income
- Veteran's Pension
- Unemployment Insurance
- Pension from Former Job
- Supplemental Security Income (SSI)
- Social Security Disability Income (SSDI)
- Alimony or other Spousal Support
- Veteran's Disability Payment
- Retirement Income from Social Security
- Worker's Compensation
- General Assistance (GA), or use local program name
- Private Disability Insurance
- Temporary Assistance for Needy
- Families (TANF)
- Other Income Sources

1c. Households that Obtained Employment

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or related case management/counseling services.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or case management/counseling services.

Note: This includes jobs created by this project sponsor or obtained outside this agency.

Note: Do not include jobs that resulted from leveraged job training, employment assistance, education or case management/counseling services.

| Categories of Services Accessed | [1 For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following: | [2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following: |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Total number of households that | | |
| obtained an income-producing job | | |

PART 5: Worksheet - Determining Housing Stability Outcomes (optional)

1. This chart is designed to assess program results based on the information reported in Part 4 and to help Grantees determine overall program performance. Completion of this worksheet is optional.

| Permanent | Stable Housing | Temporary Housing | Unstable | Life Event |
|---------------------|----------------------|------------------------------------------|--------------|-------------|
| Housing Subsidy | (# of households | (2) | Arrangements | (9) |
| Assistance | remaining in program | | (1+7+8) | |
| | plus 3+4+5+6) | | | |
| Tenant-Based | | | | |
| Rental Assistance | | | | |
| (TBRA) | | | | |
| Permanent Facility- | | | | |
| based Housing | | | | |
| Assistance/Units | | | | |
| Transitional/Short- | | | | |
| Term Facility-based | | | | |
| Housing | | | | |
| Assistance/Units | | | | |
| Total Permanent | | | | |
| HOPWA Housing | | | | |
| Subsidy Assistance | | | | |
| Reduced Risk of | Stable/Permanent | Temporarily Stable, with Reduced Risk of | Unstable | Life Events |
| Homelessness: | Housing | Homelessness | Arrangements | Life Events |
| Short-Term | Housing | Homeressness | Arrangements | |
| Assistance | | | | |
| Short-Term Rent. | | | | |
| Mortgage, and | | | | |
| Utility Assistance | | | | |
| (STRMU) | | | | |
| Total HOPWA | | | 1 | |
| Housing Subsidy | | | | |
| | | | | |
| Assistance | | | | |

Background on HOPWA Housing Stability Codes Stable Permanent Housing/Ongoing Participation

3 = Private Housing in the private rental or home ownership market (without known subsidy, including permanent placement with families or other self-sufficient arrangements) with reasonable expectation that additional support is not needed.

- 4 = Other HOPWA-funded housing subsidy assistance (not STRMU), e.g. TBRA or Facility-Based Assistance.
- 5 = Other subsidized house or apartment (non-HOPWA sources, e.g., Section 8, HOME, public housing).
- 6 = Institutional setting with greater support and continued residence expected (e.g., residential or long-term care facility).

Temporary Housing

2 = Temporary housing - moved in with family/friends or other short-term arrangement, such as Ryan White subsidy, transitional housing for homeless, or temporary placement in institution (e.g., hospital, psychiatric hospital or other psychiatric facility, substance abuse treatment facility or detox center).

Unstable Arrangements

1 = Emergency shelter or no housing destination such as places not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station, or anywhere outside).

7 = Jail /prison.

8 = Disconnected or disappeared from project support, unknown destination or no assessments of housing needs were undertaken.

Life Event

9 = Death, i.e., remained in housing until death. This characteristic is not factored into the housing stability equation.

Tenant-based Rental Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as reported under: 3, 4, 5, and 6. <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item: 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Permanent Facility-Based Housing Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Temporary <u>Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Transitional/Short-Term Facility-Based Housing Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) continue in the residences (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Other <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Tenure Assessment. A baseline of households in transitional/short-term facilities for assessment purposes, indicate the number of households whose tenure exceeded 24 months.

STRMU Assistance: <u>Stable Housing</u> is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period and there is reasonable expectation that additional support is not needed in order to maintain permanent housing living situation (as this is a time-limited form of housing support) as reported under housing status: Maintain Private Housing with subsidy; Other Private with Subsidy; Other HOPWA support; Other Housing Subsidy; and Institution. <u>Temporarily Stable</u>, with Reduced Risk of Homelessness is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period or left their current housing arrangement for a transitional facility or other temporary/non-permanent housing arrangement and there is reasonable expectation additional support will be needed to maintain housing arrangements in the next year, as reported under housing status: Likely to maintain current housing arrangements, with additional STRMU assistance; Transitional Facilities/Short-term; and Temporary/Non-Permanent Housing arrangements <u>Unstable Situation</u> is the sum of number of households reported under housing status: Emergency Shelter; Jail/Prison; and Disconnected.

PART 6: Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY)

The Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units is to be used in place of Part 7B of the CAPER if the facility was originally acquired, rehabilitated or constructed/developed in part with HOPWA funds but no HOPWA funds were expended during the operating year. Scattered site units may be grouped together on one page.

Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation are required to operate their facilities for HOPWA eligible individuals for at least ten (10) years. If non-substantial rehabilitation funds were used, they are required to operate for at least three (3) years. Stewardship begins once the facility is put into operation.

Note: See definition of Stewardship Units.

1. General information

| HUD Grant Number(s) | Operating Year for this report From (mm/dd/yy) To (mm/dd/yy) | □ Final Yr |
|---------------------|-----------------------------------------------------------------|-----------------|
| | $\Box Yr 1; \Box Yr 2; \Box Yr 3; \Box Yr 4;$ | □ Yr 5; □ Yr 6; |
| | □ Yr 7; □ Yr 8; □ Yr 9; □ Yr 10 | |
| Grantee Name | Date Facility Began Operations (mm/dd/y | y) |
| | | |

2. Number of Units and Non-HOPWA Expenditures

| Facility Name: | Number of Stewardship Units Developed with HOPWA funds | Amount of Non-HOPWA Funds Expended in Support of the Stewardship Units during the Operating Year |
|-----------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Total Stewardship Units | | |
| (subject to 3- or 10- year use periods) | | |

3. Details of Project Site

| Project Sites: Name of HOPWA-funded project | |
|--------------------------------------------------|---------------------------------------------------------------------|
| Site Information: Project Zip Code(s) | |
| Site Information: Congressional District(s) | |
| Is the address of the project site confidential? | □ Yes, protect information; do not list |
| | □ Not confidential; information can be made available to the public |
| If the site is not confidential: | |
| Please provide the contact information, phone, | |
| email address/location, if business address is | |
| different from facility address | |

Part 7: Summary Overview of Grant Activities A. Information on Individuals, Beneficiaries, and Households Receiving HOPWA Housing Subsidy Assistance (TBRA, STRMU, Facility-Based Units, Permanent Housing Placement and Master Leased Units ONLY)

Note: Reporting for this section should include ONLY those individuals, beneficiaries, or households that received and/or resided in a household that received HOPWA Housing Subsidy Assistance as reported in Part 3, Chart 1, Row 7, Column b. (e.g., do not include households that received HOPWA supportive services ONLY).

Section 1. HOPWA-Eligible Individuals Who Received HOPWA Housing Subsidy Assistance

a. Total HOPWA Eligible Individuals Living with HIV/AIDS

In Chart a., provide the total number of eligible (and unduplicated) <u>low-income individuals living with HIV/AIDS</u> who qualified their household to receive HOPWA housing subsidy assistance during the operating year. This total should include only the individual who qualified the household for HOPWA assistance, NOT all HIV positive individuals in the household.

| Individuals Served with Housing Subsidy Assistance | Total |
|----------------------------------------------------------------------------------------------------------------|-------|
| Number of individuals with HIV/AIDS who qualified their household to receive HOPWA housing subsidy assistance. | |

Chart b. Prior Living Situation

In Chart b, report the prior living situations for all Eligible Individuals reported in Chart a. In Row 1, report the total number of individuals who continued to receive HOPWA housing subsidy assistance from the prior operating year into this operating year. In Rows 2 through 17, indicate the prior living arrangements for all new HOPWA housing subsidy assistance recipients during the operating year.

Data Check: The total number of eligible individuals served in Row 18 equals the total number of individuals served through housing subsidy assistance reported in Chart a above.

| | Category | Total HOPWA Eligible Individuals Receiving Housing Subsidy Assistance |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 1. | Continuing to receive HOPWA support from the prior operating year | |
| New | Individuals who received HOPWA Housing Subsidy Assistance support during Operating Year | |
| 2. | Place not meant for human habitation (such as a vehicle, abandoned building, bus/train/subway station/airport, or outside) | |
| 3. | Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher) | |
| 4. | Transitional housing for homeless persons | |
| 5. | Total number of new Eligible Individuals who received HOPWA Housing Subsidy Assistance with a Prior Living Situation that meets HUD definition of homelessness (Sum of Rows 2 – 4) | |
| 6. | Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod Rehab) | |
| 7. | Psychiatric hospital or other psychiatric facility | |
| 8. | Substance abuse treatment facility or detox center | |
| 9. | Hospital (non-psychiatric facility) | |
| 10. | Foster care home or foster care group home | |
| 11. | Jail, prison or juvenile detention facility | |
| 12. | Rented room, apartment, or house | |
| 13. | House you own | |
| 14. | Staying or living in someone else's (family and friends) room, apartment, or house | |
| 15. | Hotel or motel paid for without emergency shelter voucher | |
| 16. | Other | |
| 17. | Don't Know or Refused | |
| 18. | TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17) | |

c. Homeless Individual Summary

In Chart c, indicate the number of eligible individuals reported in Chart b, Row 5 as homeless who also are homeless Veterans and/or meet the definition for Chronically Homeless (See Definition section of CAPER). The totals in Chart c do <u>not</u> need to equal the total in Chart b, Row 5.

| Category | Number of Homeless Veteran(s) | Number of Chronically Homeless |
|----------------------------------------------------------------------------|-------------------------------------|-----------------------------------|
| HOPWA eligible individuals served with HOPWA Housing Subsidy Assistance | 0 | |

Section 2. Beneficiaries

In Chart a, report the total number of HOPWA eligible individuals living with HIV/AIDS who received HOPWA housing subsidy assistance (*as reported in Part 7A, Section 1, Chart a*), and all associated members of their household who benefitted from receiving HOPWA housing subsidy assistance (resided with HOPWA eligible individuals).

Note: See definition of <u>HOPWA Eligible Individual</u>

Note: See definition of <u>Transgender</u>.

Note: See definition of <u>Beneficiaries</u>.

Data Check: The sum of <u>each</u> of the Charts b & c on the following two pages equals the total number of beneficiaries served with HOPWA housing subsidy assistance as determined in Chart a, Row 4 below.

a. Total Number of Beneficiaries Served with HOPWA Housing Subsidy Assistance

| Individuals and Families Served with HOPWA Housing Subsidy Assistance | Total Number |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1. Number of individuals with HIV/AIDS who qualified the household to receive HOPWA housing subsidy assistance (equals the number of HOPWA Eligible Individuals reported in Part 7A, Section 1, Chart a) | 43 |
| 2. Number of ALL other persons diagnosed as HIV positive who reside with the HOPWA eligible individuals identified in Row 1 and who benefitted from the HOPWA housing subsidy assistance | 0 |
| 3. Number of ALL other persons NOT diagnosed as HIV positive who reside with the HOPWA eligible individual identified in Row 1 and who benefited from the HOPWA housing subsidy | 32 |
| 4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1, 2, & 3) | 75 |

b. Age and Gender

In Chart b, indicate the Age and Gender of all beneficiaries as reported in Chart a directly above. Report the Age and Gender of all HOPWA Eligible Individuals (those reported in Chart a, Row 1) using Rows 1-5 below and the Age and Gender of all other beneficiaries (those reported in Chart a, Rows 2 and 3) using Rows 6-10 below. The number of individuals reported in Row 11, Column E. equals the total number of beneficiaries reported in Part 7, Section 2, Chart a, Row 4.

| | HOPWA Eligible Individuals (Chart a, Row 1) | | | | | | |
|-----|---------------------------------------------|------|--------------------|-------------------------|--------------------|-------------------------------|--|
| | | А. | B. | C. | D. | Е. | |
| | T | Male | Female | Transgender M to F | Transgender F to M | TOTAL (Sum of Columns A-D) | |
| 1. | Under 18 | | | | | | |
| 2. | 18 to 30 years | | | | | | |
| 3. | 31 to 50 years | 10 | 23 | 1 | | 36 | |
| 4. | 51 years and Older | 5 | 3 | | | 8 | |
| 5. | Subtotal (Sum of Rows 1-4) | 15 | 26 | 1 | | | |
| | | Α | ll Other Beneficia | aries (Chart a, Rows 2 | and 3) | | |
| ļ | | A. | B. | С. | D. | Е. | |
| | | Male | Female | Transgender M to F | Transgender F to M | TOTAL (Sum of Columns A-D) | |
| 6. | Under 18 | 2 | 13 | | | | |
| 7. | 18 to 30 years | 4 | 2 | | | | |
| 8. | 31 to 50 years | | 2 | | | | |
| 9. | 51 years and Older | | | | | | |
| 10. | Subtotal (Sum of Rows 6-9) | 11 | 17 | | | | |
| | | 1 | Total Benefic | ciaries (Chart a, Row 4 |) | | |
| 11. | TOTAL (Sum of Rows 5 & 10) | 26 | 43 | | | | |

c. Race and Ethnicity*

In Chart c, indicate the Race and Ethnicity of all beneficiaries receiving HOPWA Housing Subsidy Assistance as reported in Section 2, Chart a, Row 4. Report the <u>race</u> of all HOPWA eligible individuals in Column [A]. Report the <u>ethnicity</u> of all HOPWA eligible individuals in column [B]. Report the <u>race</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [C]. Report the <u>ethnicity</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [D]. The summed total of columns [A] and [C] equals the total number of beneficiaries reported above in Section 2, Chart a, Row 4.

| Category | | HOPWA Eligi | ble Individuals | All Other Beneficiaries | | |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------|--|
| | | [A] Race [all individuals reported in Section 2, Chart a, Row 1] | [B] Ethnicity [Also identified as Hispanic or Latino] | [C] Race [total of individuals reported in Section 2, Chart a, Rows 2 & 3] | [D] Ethnicity [Also identified as Hispanic or Latino] | |
| 1. | American Indian/Alaskan Native | | | | | |
| 2. | Asian | | | | | |
| 3. | Black/African American | 32 | | | | |
| 4. | Native Hawaiian/Other Pacific Islander | | | | | |
| 5. | White | 3 | 8 | 6 | 15 | |
| 6. | American Indian/Alaskan Native & White | | | | | |
| 7. | Asian & White | | | | | |
| 8. | Black/African American & White | | | | | |
| 9. | American Indian/Alaskan Native & Black/African American | | | | | |
| 10. | Other Multi-Racial | | | | | |
| 11. | Column Totals (Sum of Rows 1-10) | | | | | |
| Data Chart | Column Totals (Sum of Rows 1-10) Check: Sum of Row 11 Column A and Row 11 Column A and Row 11 Column A and Row 12 Column A an | • | · | iciaries reported in Par | t 3A, Section 2, | |

*Reference (data requested consistent with Form HUD-27061 Race and Ethnic Data Reporting Form)

Section 3. Households

Household Area Median Income

Report the income(s) for all households served with HOPWA housing subsidy assistance.

Data Check: The total number of households served with HOPWA housing subsidy assistance should equal Part 3C, Row 7, Column b and Part 7A, Section 1, Chart a. (Total HOPWA Eligible Individuals Served with HOPWA Housing Subsidy Assistance).

Note: Refer to <u>*https://www.huduser.gov/portal/datasets/il.html</u> for information on area median income in your community.*</u>

| | Percentage of Area Median Income | Households Served with HOPWA Housing Subsidy Assistance |
|----|---------------------------------------------|------------------------------------------------------------|
| 1. | 0-30% of area median income (extremely low) | 36 |
| 2. | 31-50% of area median income (very low) | 7 |
| 3. | 51-80% of area median income (low) | 0 |
| 4. | Total (Sum of Rows 1-3) | 43 |

Part 7: Summary Overview of Grant Activities B. Facility-Based Housing Assistance

Complete one Part 7B for each facility developed or supported through HOPWA funds.

Do not complete this Section for programs originally developed with HOPWA funds but no longer supported with

HOPWA funds. If a facility was developed with HOPWA funds (subject to ten years of operation for acquisition, new construction and substantial rehabilitation costs of stewardship units, or three years for non-substantial rehabilitation costs), but HOPWA funds are no longer used to support the facility, the project sponsor should complete Part 6: Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY).

Complete Charts 2a, Project Site Information, and 2b, Type of HOPWA Capital Development Project Units, for all Development Projects, including facilities that were past development projects, but continued to receive HOPWA operating dollars this reporting year.

1. Project Sponsor Agency Name (Required)

2. Capital Development

2a. Project Site Information for HOPWA Capital Development of Projects (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this reporting year)

Note: If units are scattered-sites, report on them as a group and under type of Facility write "Scattered Sites."

| Type ofFuDevelopmentExpectivethis operatingthis opyearyear | | HOPWA Funds Expended this operating year (<i>if applicable</i>) | Non-HOPWA funds Expended (if applicable) | Name of Facility: | |
|------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--|
| □ Ne | w construction | \$ | \$ | Type of Facility [Check <u>only one</u> box.] | |
| □ Rehabilitation | | \$ | \$ | Permanent housing Short-term Shelter or Transitional housing | |
| □ Acquisition □ Operating | | \$ | \$ | □ Supportive services only facility | |
| | | \$ | \$ | | |
| a. | Purchase/lease of property: | | | Date (mm/dd/yy): | |
| b. | Rehabilitation/Construction Dates: | | | Date started: Date Completed: | |
| с. | Operation dates: | | | Date residents began to occupy: | |
| d. | d. Date supportive services began: | | | Date started: | |
| e. | Number of units | in the facility: | | HOPWA-funded units = Total Units = | |
| f. | f. Is a waiting list maintained for the facility? | | ? | ☐ Yes ☐ No If yes, number of participants on the list at the end of operating year | |
| g. | g. What is the address of the facility (if different from business address)? | | ent from business address)? | | |
| h. | Is the address of | the project site confidenti | al? | Yes, protect information; do not publish list No, can be made available to the public | |

2b. Number and Type of HOPWA Capital Development Project Units (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this Reporting Year)

For units entered above in 2a, please list the number of HOPWA units that fulfill the following criteria:

| | Number Designated for the Chronically Homeless | Number Designated to Assist the Homeless | Number Energy- Star Compliant | Number 504 Accessible |
|---------------------------|------------------------------------------------------|---------------------------------------------------|----------------------------------|-----------------------|
| Rental units constructed | | | | |
| (new) and/or acquired | | | | |
| with or without rehab | | | | |
| | | | | |
| Rental units rehabbed | | | | |
| | | | | |
| Homeownership units | | | | |
| constructed (if approved) | | | | |
| | | | | |

3. Units Assisted in Types of Housing Facility/Units Leased by Project Sponsor

<u>Charts 3a, 3b, and 4 are required for each facility</u>. In Charts 3a and 3b, indicate the type and number of housing units in the facility, including master leased units, project-based or other scattered site units leased by the organization, categorized by the number of bedrooms per unit.

Note: The number units may not equal the total number of households served.

Please complete separate charts for each housing facility assisted. Scattered site units may be grouped together.

3a. Check one only

Permanent Supportive Housing Facility/Units

Short-term Shelter or Transitional Supportive Housing Facility/Units

3b. Type of Facility

Complete the following Chart for all facilities leased, master leased, project-based, or operated with HOPWA funds during the reporting year.

Name of Project Sponsor/Agency Operating the Facility/Leased Units:

| Type of housing facility operated by the project sponsor | | Total Number of <u>Units</u> in use during the Operating Year Categorized by the Number of Bedrooms per Units | | | | | | |
|----------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------|--------|--------|--------|--------|--|
| | | SRO/Studio/0 bdrm | 1 bdrm | 2 bdrm | 3 bdrm | 4 bdrm | 5+bdrm | |
| a. | Single room occupancy dwelling | | | | | | | |
| b. | Community residence | | | | | | | |
| c. | Project-based rental assistance units or leased units | | | | | | | |
| d. | Other housing facility Specify: | | | | | | | |

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor on subsidies for housing involving the use of facilities, master leased units, project based or other scattered site units leased by the organization.

| H | ousing Assistance Category: Facility Based Housing | Output: Number of Households | Output: Total HOPWA Funds Expended during Operating Year by Project Sponsor |
|----|-------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------|
| a. | Leasing Costs | | |
| b. | Operating Costs | | |
| c. | Project-Based Rental Assistance (PBRA) or other leased units | | |
| d. | Other Activity (if approved in grant agreement) Specify: | | |
| e. | Adjustment to eliminate duplication (subtract) | | |
| f. | TOTAL Facility-Based Housing Assistance (Sum Rows a through d minus Row e) | | |

OMB Number 2506-0133 (Expiration Date: 01/31/2021)

Part 1: Grantee Executive Summary

As applicable, complete the charts below to provide more detailed information about the agencies and organizations responsible for the administration and implementation of the HOPWA program. Chart 1 requests general Grantee Information and Chart 2 is to be completed for each organization selected or designated as a project sponsor, as defined by 24 CFR 574.3.

Note: If any information does not apply to your organization, please enter N/A. Do not leave any section blank.

1. Grantee Information

| HUD Grant Number | | Operating Year for this rep From (mm/dd/yy) | | eport To (mm/dd/yy) | | |
|----------------------------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|------------------------|--|--|
| Grantee Name | | · | | | | |
| Business Address | | | | | | |
| City, County, State, Zip | | | | | | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | | | | - | | |
| DUN & Bradstreet Number (DUNs): | | | System for Award M Is the grantee's SAN Ves No If yes, provide SAM | M status curr | | |
| Congressional District of Grantee's Business Address | | | | | | |
| *Congressional District of Primary Service Area(s) | | | | | | |
| *City(ies) <u>and</u> County(ies) of Primary Service Area(s) | Cities: | | Counties: | | | |
| Organization's Website Address | | Is there a waiting list(s) Services in the Grantee If yes, explain in the na- list and how this list is a | Service Area? | es □No | | |

* Service delivery area information only needed for program activities being directly carried out by the grantee.

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by 24 CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. *Note: If any information does not apply to your organization, please enter N/A.*

| Project Sponsor Agency Name | | Parent Company Na | ne, if applicable | | | |
|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------|--|--|
| AIDS Outreach Center | | | | | | |
| Name and Title of Contact at Project Sponsor Agency | Patrice Williams, CEO –or- Jessica Garza, Financial Servio | ces Manager | | | | |
| Email Address | patricew@aoc.org or jgarza@aoc.org | | | | | |
| Business Address | 400 N. Beach Street Ste. 100 | | | | | |
| City, County, State, Zip, | Fort Worth, Tarrant County, T | Fort Worth, Tarrant County, Texas 76111 | | | | |
| Phone Number (with area code) | 817-916-5207 | 817-916-5228 | 817-916- 5206 | | | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 75-2139336 | | Fax Number (with 817-916-4664 | x Number (with area code) | | |
| DUN & Bradstreet Number (DUNs): | 781414842 | | | | | |
| Congressional District of Project Sponsor's Business Address | Congressional District 33 | | | | | |
| Congressional District(s) of Primary Service Area(s) | Congressional District 33 | | | | | |
| City(ies) <u>and</u> County(ies) of Primary Service Area(s) | Bedford, Hurst, Grapevine, An Cleburne, Weatherford, Burley | Bedford, Hurst, Grapevine, Arlington, Grand Prairie, Cleburne, Weatherford, Burleson, Haltom City, Willow Park, Lake Worth, Watauga, Forest Hill, Rhome, | | s: Tarrant, Johnson, Parker, Wise, Il | | |
| Total HOPWA contract amount for this Organization for the operating year | \$215,000 | | | | | |
| Organization's Website Address | www.aoc.org | | | | | |
| Is the sponsor a nonprofit organization? XY | es 🗆 No | Does your organizati | on maintain a waiti | ng list? X Yes 🗌 No | | |
| Please check if yes and a faith-based organization Please check if yes and a grassroots organization. | | If yes, explain in the | narrative section ho | ow this list is administered. | | |

5. Grantee Narrative and Performance Assessment

a. Grantee and Community Overview

Provide a one to three page narrative summarizing major achievements and highlights that were proposed and completed during the program year. Include a brief description of the grant organization, area of service, the name(s) of the program contact(s), and an overview of the range/type of housing activities provided. This overview may be used for public information, including posting on HUD's website. *Note: Text fields are expandable*.

AIDS Outreach Center of Fort Worth provides a wide variety of services to clients living with HIV/AIDS and their families in Tarrant County and in seven rural counties surrounding Tarrant County. Our housing services are limited to that which we can provide through our City of Fort Worth HOPWA contract, although we provide other services such as dental services, insurance assistance, medical and non-medical case management, outreach and prevention services, nutrition center services-equipped with a full-time dietician, mental health services and transportation, to name the primary ones. We provide Short Term Rental Mortgage and Utility (STRMU) help to low income families in the counties that we serve through our City of Fort Worth HOPWA contract. Thus far we have provided HOPWA services to 92 households from October 1, 2019 to September 30, 2020. This is 103% of our goal of 89 households for the grant year.

b. Annual Performance under the Action Plan

Provide a narrative addressing each of the following four items:

1. Outputs Reported. Describe significant accomplishments or challenges in achieving the number of housing units supported and the number households assisted with HOPWA funds during this operating year compared to plans for this assistance, as approved in the Consolidated Plan/Action Plan. Describe how HOPWA funds were distributed during your operating year among different categories of housing and geographic areas to address needs throughout the grant service area, consistent with approved plans.

We have at this point in the grant provided HOPWA services to 92 households from October 1, 2019-September 30, 2020. This is 103% of our goal of 89 households for the grant year. Our strategy for this year was to predominately focus on increasing our STRMU assistance. Through STRMU, we are able to help clients threatened with homelessness, because of short term issues, such as illness, job loss, and loss of hours worked. The HOPWA program is providing continued assistance and housing stabilization to those facing many challenges with COVID-19. We continue to have a long-term housing wait list, and coordinate with CAP affiliate of City of Fort Worth to refer those individuals for permanent housing assistance.

2. Outcomes Assessed. Assess your program's success in enabling HOPWA beneficiaries to establish and/or better maintain a stable living environment in housing that is safe, decent, and sanitary, and improve access to care. Compare current year results to baseline results for clients. Describe how program activities/projects contributed to meeting stated goals. If program did not achieve expected targets, please describe how your program plans to address challenges in program implementation and the steps currently being taken to achieve goals in next operating year. If your program exceeded program targets, please describe strategies the program utilized and how those contributed to program successes.

Our STRMU assistance helps clients bounce back from a difficult financial situation to ensure that they are able to remain in a safe and stable living environment. The assistance provided by STRMU is often times the last resort of our clients before they experience homelessness. If the HOPWA Coordinator determines that a client's situation will continue after the allotted amount of assistance, the client will be referred to CAP HOPWA TBRA assistance for possible transition, if there is available funding

3. Coordination. Report on program coordination with other mainstream housing and supportive services resources, including the use of committed leveraging from other public and private sources that helped to address needs for eligible persons identified in the Consolidated Plan/Strategic Plan.

We continue to coordinate our HOPWA program with the several housing programs operated out of Samaritan House, a local agency, and with programs operated by the Arlington, Fort Worth and Tarrant County Housing authorities. We have a case manager attend monthly meetings with the Arlington Housing Authority to act as a liaison between our clients and their array of housing programs. We also have representatives from Samaritan Housing and the housing authorities periodically speak with our case management staff about housing assistance opportunities for our clients. AOC is also an active participant within the Tarrant County Continuum of Care providing Rapid Re-housing housing services to those directly affected by homelessness. Without the use of HOPWA funds, AOC provides an array of supportive services to our HOPWA clients through Ryan White funds. Some of these services include nutritional therapy, food pantry, mental health services, advocacy, legal assistance, transportation, risk reduction, and outreach.

4. Technical Assistance. Describe any program technical assistance needs and how they would benefit program beneficiaries. N/A

c. Barriers and Trends Overview

Provide a narrative addressing items 1 through 3. Explain how barriers and trends affected your program's ability to achieve the objectives and outcomes discussed in the previous section.

1. Describe any barriers (including regulatory and non-regulatory) encountered in the administration or implementation of the HOPWA program, how they affected your program's ability to achieve the objectives and outcomes discussed, and, actions taken in response to barriers, and recommendations for program improvement. Provide an explanation for each barrier selected.

Most housing authorities have closed their waitlists, making transition to a more stable program very difficult. Thus, because of this barrier our HOPWA coordinator has developed many relationships with private landlords and community partners to increase our ability to house eligible participants in a market that can be difficult with finding availability and affordable housing.

2. Describe any trends in the community that may affect the way in which the needs of persons living with HIV/AIDS are being addressed, and provide any other information important to the future provision of services to this population.

Our community continues to experience the worst economic downturn in many years and recent economic burdens due to COVID-19. The demand for HOPWA and other forms of financial assistance grows. This unfortunately comes at a time when charitable giving and other funds for use at our agency decreased.

3. Identify any evaluations, studies, or other assessments of the HOPWA program that are available to the public.

| □ HOPWA/HUD Regulations | □ Planning | □X Housing Availability | □ Rent Determination and Fair Market Rents |
|----------------------------------|---------------------------|--------------------------------------|--------------------------------------------|
| □ Discrimination/Confidentiality | □ Multiple Diagnoses | □X Eligibility | □ Technical Assistance or Training |
| □ Supportive Services | □ Credit History | \Box X Rental History | Criminal Justice History |
| \Box X Housing Affordability | □X Geography/Rural Access | \Box Other, please explain further | |

We are not aware of any studies or evaluations of our HOPWA program which are available to the public. We assume that there are national or city-wide data which may be available.

PART 2: Sources of Leveraging and Program Income

1. Sources of Leveraging

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in the Consolidated or Annual Plan and used in the delivery of the HOPWA program and the amount of leveraged dollars. In Column [1], identify the type of leveraging. Some common sources of leveraged funds have been provided as a reference point. You may add Rows as necessary to report all sources of leveraged funds. Include Resident Rent payments paid by clients directly to private landlords. Do NOT include rents paid directly to a HOPWA program as this will be reported in the next section. In Column [2] report the amount of leveraged funds expended during the operating year. Use Column [3] to provide some detail about the type of leveraged contribution (e.g., case management services or clothing donations). In Column [4], check the appropriate box to indicate whether the leveraged contribution was a housing subsidy assistance or another form of support. *Note: Be sure to report on the number of households supported with these leveraged funds in Part 3, Chart 1, Column d.*

| [1] Source of Leveraging Funds Contribution Support Public Funding | | [2] Amount of | | [4] Housing Subsidy |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------|--------------|-----------------------------|
| Public Funding Image: Control of the support Ryan White-Housing Assistance Image: Context Support Ryan White-Other S12,624.00 Housing Choice Voucher Program Image: Context Support Housing Choice Voucher Program Image: Context Support Housing Choice Voucher Program Image: Context Support Low Income Housing Tax Credit Image: Context Support HOME Image: Context Support Continuum of Care Image: Context Support Continuum of Care Image: Context Support Conter Support Image: Context Support Conter Support Image: Context Support Conter Public: Image: Context Support Other Support Image: Context Support Other Public: Image: Context Support Other Support Image: Context Support Image: Context Support Image: Context Support Other Support I | | Leveraged | [3] Type of | Assistance or Other |
| Ryan White-Housing Assistance □ Housing Subsidy Assistance Ryan White-Other S12,624.00 Management \(\) (Dotsing Subsidy Assistance) Housing Choice Voucher Program □ Housing Subsidy Assistance □ Other Support Housing Choice Voucher Program □ Housing Subsidy Assistance □ Other Support Low Income Housing Tax Credit □ Housing Subsidy Assistance □ Other Support HOME □ Housing Subsidy Assistance □ Other Support Continuum of Care □ Other Support □ Housing Subsidy Assistance Continuum of Care □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance Other Public: □ Other Support □ Housing Subsidy Assistance | | Funds | Contribution | Support |
| Ryan White-Housing Assistance Other Support Ryan White-Other \$12,624.00 Ryan White-Other S12,624.00 Housing Choice Voucher Program Other Support Housing Choice Voucher Program Other Support Low Income Housing Tax Credit Other Support HOME Other Support Continuum of Care Other Support Continuum of Care Other Support Continuum of Care Other Support Emergency Solutions Grant Other Support Other Public: Other Support Other Support Other Support Subsidy Assistance Other Support Other Support Other Support Othe | Public Funding | | | |
| Ryan White-Other \$12,624.00 Ryan White-Case Housing Subsidy Assistance Housing Choice Voucher Program Other Support Housing Subsidy Assistance Low Income Housing Tax Credit Housing Subsidy Assistance Other Support HOME Housing Subsidy Assistance HOME Housing Subsidy Assistance HOME Housing Subsidy Assistance Continuum of Care Housing Subsidy Assistance Emergency Solutions Grant Housing Subsidy Assistance Other Public: Housing Subsidy Assistance Other Support Housing Subsidy Assistance Other Public: Housing Subsidy Assistance | | | | |
| Ryan White-Other \$12,624.00 Management X □ Other Support Housing Choice Voucher Program □ Housing Subsidy Assistance □ Other Support Low Income Housing Tax Credit □ Housing Subsidy Assistance □ Other Support HOME □ Housing Subsidy Assistance □ Other Support HOME □ Housing Subsidy Assistance □ Other Support Continuum of Care □ Housing Subsidy Assistance □ Other Support Emergency Solutions Grant □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Other Public: □ Housing Subsidy Assistance □ Other Support Oth | Ryan White-Housing Assistance | | | |
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| Resident Rent Payments by Client to Private Landlord | Crontos/Droigst Snongor (Acar) Carl | | | |
| | Graniee/Project Sponsor (Agency) Cash | | | U Otner Support |
| TOTAL (Sum of all Rows) \$12.624.00 | Resident Rent Payments by Client to Private Landlord | | | |
| | TOTAL (Sum of all Rows) | \$12,624.00 | | |

A. Source of Leveraging Chart

2. Program Income and Resident Rent Payments

In Section 2, Chart A, report the total amount of program income and resident rent payments directly generated from the use of HOPWA funds, including repayments. Include resident rent payments collected or paid directly to the HOPWA program. Do NOT include payments made directly from a client household to a private landlord.

Note: Please see report directions section for definition of <u>program income</u>. (Additional information on program income is available in the HOPWA Grantee Oversight Resource Guide).

A. Total Amount Program Income and Resident Rent Payment Collected During the Operating Year

| | Program Income and Resident Rent Payments Collected | Total Amount of Program Income (for this operating year) |
|----|-----------------------------------------------------------------------|----------------------------------------------------------------|
| 1. | Program income (e.g. repayments) | 0 |
| 2. | Resident Rent Payments made directly to HOPWA Program | 0 |
| 3. | Total Program Income and Resident Rent Payments (Sum of Rows 1 and 2) | 0 |

B. Program Income and Resident Rent Payments Expended To Assist HOPWA Households

In Chart B, report on the total program income and resident rent payments (as reported above in Chart A) expended during the operating year. Use Row 1 to report Program Income and Resident Rent Payments expended on Housing Subsidy Assistance Programs (i.e., TBRA, STRMU, PHP, Master Leased Units, and Facility-Based Housing). Use Row 2 to report on the Program Income and Resident Rent Payment expended on Supportive Services and other non-direct Housing Costs.

| | Program Income and Resident Rent Payment Expended on HOPWA programs | Total Amount of Program Income Expended (for this operating year) |
|----|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| 1. | Program Income and Resident Rent Payment Expended on Housing Subsidy Assistance costs | 0 |
| 2. | Program Income and Resident Rent Payment Expended on Supportive Services and other non- direct housing costs | 0 |
| 3. | Total Program Income Expended (Sum of Rows 1 and 2) | 0 |

PART 3: Accomplishment Data Planned Goal and Actual Outputs

In Chart 1, enter performance information (goals and actual outputs) for all activities undertaken during the operating year supported with HOPWA funds. Performance is measured by the number of households and units of housing that were supported with HOPWA or other federal, state, local, or private funds for the purposes of providing housing assistance and support to persons living with HIV/AIDS and their families.

| 1. 1. | OPWA Performance Planned Goal and Actual Outputs | | | | | | | |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------|---------|----------|---------|-----------|---------------------|-----------------|--|
| | | | Outpu | t: Ho | useholds | [2] Output: Funding | | |
| | | HO | PWA | L | everaged | | | |
| | HOPWA Performance | Assis | tance | He | ouseholds | HOPW | A Funds | |
| | | | 1 | _ | Ŀ | | £ | |
| | Planned Goal | a. | b. | с. | d. | e. | f. | |
| | and Actual | Goal | Actual | Goal | Actual | HOPWA | HOPWA Actual | |
| | HOPWA Housing Subsidy Assistance | ſ | 1] Outp | ut: Hou | seholds | [2] Outpu | t: Funding | |
| | Tenant-Based Rental Assistance | 0 | 0 | 0 | 0 | [] | | |
| 2a. | Permanent Housing Facilities: | 0 | 0 | Ŭ | 0 | | | |
| | Received Operating Subsidies/Leased units (Households Served) | 0 | 0 | 0 | 0 | | | |
| | Transitional/Short-term Facilities: Received Operating Subsidies/Leased units (Households Served) (Households Served) | 0 | 0 | 0 | 0 | | | |
| 3a. | Permanent Housing Facilities: | 0 | 0 | | 0 | | | |
| | Capital Development Projects placed in service during the operating year (Households Served) | 0 | 0 | 0 | 0 | | | |
| 3b. | Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year (Households Served) | 0 | 0 | 0 | 0 | | | |
| 4. | Short-Term Rent, Mortgage and Utility Assistance | 74 | 92 | 74 | 92 | 149,000.00 | 140,698.14 | |
| 5. | Permanent Housing Placement Services | | 92 | /4 | 92 | 149,000.00 | 140,098.14 | |
| 6. | Adjustments for duplication (subtract) | 0 | 0 | 0 | 0 | | | |
| | Total HOPWA Housing Subsidy Assistance (Columns a – d equal the sum of Rows 1-5 minus Row 6; Columns e and f equal the sum of Rows 1-5) | 0 74 | 92 | 0 74 | 92 | 149,000.00 | 140,698.14 | |
| | Housing Development (Construction and Stewardship of facility based housing) | [1] | Output | · Hous | ing Units | [2] Outpu | t: Funding | |
| 8. | Facility-based units; Capital Development Projects not yet opened (Housing Units) | 0 | 0 | 0 | | | t. Funding | |
| 9. | Stewardship Units subject to 3- or 10- year use agreements | 0 | 0 | | | | | |
| 10. | Total Housing Developed (Sum of Rows 8 & 9) | | - | | | | | |
| | Supportive Services | ſ | 1] Outpi | ıt: Hou | seholds | [2] Outpu | t: Funding | |
| | Supportive Services provided by project sponsors that also delivered <u>HOPWA</u> housing subsidy assistance | 74 | 92 | | | | 55,178.40 | |
| | Supportive Services provided by project sponsors that only provided supportive services. | 0 | 0 | | | | | |
| 12. | Adjustment for duplication (subtract) | 0 | 0 | | | | | |
| 13. | Total Supportive Services (Columns a – d equals the sum of Rows 11 a & b minus Row 12; Columns e and f equal the sum of Rows 11a & 11b) | - 74 | 92 | | | 60,500 | 55,178.40 | |
| | Housing Information Services | [| [1] Outp | ut: Hou | seholds | [2] Outpu | t: Funding | |
| 14. | Housing Information Services | 0 | 0 | | | | | |
| 15. | Total Housing Information Services | | | | | | | |
| | | 0 | 0 | | | | | |

1. HOPWA Performance Planned Goal and Actual Outputs

| | Grant Administration and Other Activities | | | [1] Output: Households | | | [2] Output: Funding | |
|-----|-------------------------------------------------------------------------------------------|--|--|------------------------|--|----------------------|-----------------------|--|
| 16. | Resource Identification to establish, coordinate and develop housing assistance resources | | | | | 0 | 0 | |
| 17. | Technical Assistance (if approved in grant agreement) | | | | | 0 | 0 | |
| 18. | Grantee Administration (maximum 3% of total HOPWA grant) | | | | | 0 | 0 | |
| 19. | Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded) | | | | | 5,500.00 | 3,208.75 | |
| 20. | Total Grant Administration and Other Activities (Sum of Rows 16 – 19) | | | | | | | |
| | Total Expended | | | | | | HOPWA Funds bended | |
| 21. | Total Expenditures for operating year (Sum of Rows 7, 10, 13, 15, and 20) | | | | | Budget 215,000.00 | Actual 199,085.29 | |

2. Listing of Supportive Services

Report on the households served and use of HOPWA funds for all supportive services. Do NOT report on supportive services leveraged with non-HOPWA funds.

Data check: Total unduplicated households and expenditures reported in Row 17 equal totals reported in Part 3, Chart 1, Row 13.

| | Supportive Services | [1] Output: Number of <u>Households</u> | [2] Output: Amount of HOPWA Funds Expended |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------|
| 1. | Adult day care and personal assistance | | |
| 2. | Alcohol and drug abuse services | | |
| 3. | Case management | 92 | 55,178.40 |
| 4. | Child care and other child services | | |
| 5. | Education | | |
| 6. | Employment assistance and training | | |
| | Health/medical/intensive care services, if approved | | |
| 7. | Note: Client records must conform with 24 CFR §574.310 | | |
| 8. | Legal services | | |
| 9. | Life skills management (outside of case management) | | |
| 10. | Meals/nutritional services | | |
| 11. | Mental health services | | |
| 12. | Outreach | | |
| 13. | Transportation | | |
| 14. | Other Activity (if approved in grant agreement). Specify : | | |
| 15. | Sub-Total Households receiving Supportive Services (Sum of Rows 1-14) | | |
| 16. | Adjustment for Duplication (subtract) | | |
| 17. | TOTAL Unduplicated Households receiving Supportive Services (Column [1] equals Row 15 minus Row 16; Column [2] equals sum of Rows 1-14) | 92 | 55,178.40 |

3. Short-Term Rent, Mortgage and Utility Assistance (STRMU) Summary

In Row a, enter the total number of households served and the amount of HOPWA funds expended on Short-Term Rent, Mortgage and Utility (STRMU) Assistance. In Row b, enter the total number of STRMU-assisted households that received assistance with mortgage costs only (no utility costs) and the amount expended assisting these households. In Row c, enter the total number of STRMU-assisted households that received assistance with both mortgage and utility costs and the amount expended assisting these households. In Row d, enter the total number of STRMU-assisted households that received assistance with rental costs only (no utility costs) and the amount expended assisting these households. In Row e, enter the total number of STRMU-assisted households that received assistance with both rental and utility costs and the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households. In Row e, enter the total number of stream of stream of stream of stream of stream of stream of the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households that received assisting these households. In Row f, enter the total number of STRMU-assisted households that received assisting these households. In Row f, enter the total number of STRMU-assisted households that received assistance with utility costs only (not including rent or mortgage costs) and the amount expended assisting these households. In row g, report the amount of STRMU funds expended to support direct program costs such as program operation staff.

Data Check: The total households reported as served with STRMU in Row a, column [1] and the total amount of HOPWA funds reported as expended in Row a, column [2] equals the household and expenditure total reported for STRMU in Part 3, Chart 1, Row 4, Columns b and f, respectively.

Data Check: The total number of households reported in Column [1], Rows b, c, d, e, and f equal the total number of STRMU households reported in Column [1], Row a. The total amount reported as expended in Column [2], Rows b, c, d, e, f, and g. equal the total amount of STRMU expenditures reported in Column [2], Row a.

| н | ousing Subsidy Assistance Categories (STRMU) | [1] Output: Number of <u>Households</u> Served | [2] Output: Total HOPWA Funds Expended on STRMU during Operating Year |
|----|------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------|
| a. | Total Short-term mortgage, rent and/or utility (STRMU) assistance | 92 | 140,698.14 |
| b. | Of the total STRMU reported on Row a, total who received assistance with mortgage costs ONLY. | 3 | 4,495.16 |
| c. | Of the total STRMU reported on Row a, total who received assistance with mortgage and utility costs. | 5 | 12,206.89 |
| d. | Of the total STRMU reported on Row a, total who received assistance with rental costs ONLY. | 42 | 60,035.65 |
| e. | Of the total STRMU reported on Row a, total who received assistance with rental and utility costs. | 31 | 60,657.72 |
| f. | Of the total STRMU reported on Row a, total who received assistance with utility costs ONLY. | 11 | 3,302.72 |
| g. | Direct program delivery costs (e.g., program operations staff time) | | 0 |

Part 4: Summary of Performance Outcomes

In Column [1], report the total number of eligible households that received HOPWA housing subsidy assistance, by type. In Column [2], enter the number of households that continued to access each type of housing subsidy assistance into next operating year. In Column [3], report the housing status of all households that exited the program.

Data Check: The sum of Columns [2] (Number of Households Continuing) and [3] (Exited Households) equals the total reported in Column[1]. Note: Refer to the housing stability codes that appear in Part 5: Worksheet - Determining Housing Stability Outcomes.

Section 1. Housing Stability: Assessment of Client Outcomes on Maintaining Housing Stability (Permanent Housing and Related Facilities) A. Permanent Housing Subsidy Assistance

| | [1] Output: Total Number of Households Served | [2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year | [3] Assessment: Households that HOPWA Program; t Status after | exited this their Housin | g [4] HOPWA Client Outcomes |
|-----------------------------|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------|
| | | | 1 Emergency Shelter/Street | ts | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable, with Reduced Risk of Homelessness |
| | | | 3 Private Housing | | |
| Tenant-Based Rental | 0 | 0 | 4 Other HOPWA | | |
| Assistance | | | 5 Other Subsidy | | Stable/Permanent Housing (PH) |
| | | | 6 Institution | | |
| | | | 7 Jail/Prison | | |
| | | | 8 Disconnected/Unknown | | Unstable Arrangements |
| | | | 9 Death | | Life Event |
| | | | 1 Emergency Shelter/Street | ts | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable, with Reduced Risk of Homelessness |
| | | | 3 Private Housing | | |
| Permanent Supportive | 0 | 0 | 4 Other HOPWA | | |
| Housing | 0 | | 5 Other Subsidy | | Stable/Permanent Housing (PH) |
| Facilities/ Units | | | 6 Institution | | |
| | | | 7 Jail/Prison | | |
| | | | 8 Disconnected/Unknown | | Unstable Arrangements |
| | | | 9 Death | | Life Event |
| B. Transitional | Housing Assistance |) | | | |
| | [1] Output: Total Number of Households Served | [2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year | [3] Assessment: Nu Households that ex HOPWA Progran Housing Status after | ited this 1; their | [4] HOPWA Client Outcomes |
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | 0 | 2 Temporary Housing | | Temporarily Stable with Reduced Risk of Homelessness |
| Transitional/ Short-Term | | | 3 Private Housing | | |
| Housing | 0 | | 4 Other HOPWA | | Stable/Permanent Housing (PH) |
| Facilities/ Units | | | 5 Other Subsidy | | Suble I ermanent Housing (PII) |
| | | | 6 Institution | | |
| | | | 7 Jail/Prison | | Unstable Arrangements |
| | | L | | | |
| | | | 8 Disconnected/unknown | | Onsidole Arrangements |

Section 2. Prevention of Homelessness: Assessment of Client Outcomes on Reduced Risks of Homelessness (Short-Term Housing Subsidy Assistance)

Report the total number of households that received STRMU assistance in Column [1].

In Column [2], identify the outcomes of the households reported in Column [1] either at the time that they were known to have left the STRMU program or through the project sponsor's best assessment for stability at the end of the operating year. Information in Column [3] provides a description of housing outcomes; therefore, data is not required. At the bottom of the chart:

- In Row 1a, report those households that received STRMU assistance during the operating year of this report, and the prior operating year.
- In Row 1b, report those households that received STRMU assistance during the operating year of this report, and the two prior operating years.

Data Check: The total households reported as served with STRMU in Column [1] equals the total reported in Part 3, Chart 1, Row 4, Column b.

Data Check: The sum of Column [2] should equal the number of households reported in Column [1].

| [1] Output: Total number of households | [2] Assessment of Housing Status | | [3] HOPW | A Client Outcomes | |
|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------------------------------|----------------------------------------------------------|--|
| | Maintain Private Housing <u>without</u> subsidy (e.g. Assistance provided/completed and client is stable, not likely to seek additional support) | 36 | Stable/Permanent Housing (PH | | |
| | Other Private Housing without subsidy | | | | |
| | (e.g. client switched housing units and is now stable, not likely to seek additional support) | | | | |
| | Other HOPWA Housing Subsidy Assistance | | 510010/1 0111 | | |
| | Other Housing Subsidy (PH) | | | | |
| 02 | Institution (e.g. residential and long-term care) | | | | |
| 92 | Likely that additional STRMU is needed to maintain current housing arrangements | 56 | | | |
| | Transitional Facilities/Short-term | | | Temporarily Stable, with Reduced Risk of Homelessness | |
| | (e.g. temporary or transitional arrangement) | | Reduced Ri | | |
| | Temporary/Non-Permanent Housing arrangement (e.g. gave up lease, and moved in with family or friends but expects to live there less than 90 days) | | | | |
| | Emergency Shelter/street | | | | |
| | Jail/Prison | | Unstabl | e Arrangements | |
| | Disconnected | | | | |
| | Death | | Life Event | | |
| | buseholds that received STRMU Assistance in the operating year o ior operating year (e.g. households that received STRMU assistanc | | | 19 | |
| | buseholds that received STRMU Assistance in the operating year o to prior operating years (e.g. households that received STRMU ass | | | 7 | |

Assessment of Households that Received STRMU Assistance

Section 3. HOPWA Outcomes on Access to Care and Support

1a. Total Number of Households

Line [1]: For project sponsors that provided HOPWA housing subsidy assistance during the operating year identify in the appropriate row the number of households that received HOPWA housing subsidy assistance (TBRA, STRMU, Facility-Based, PHP and Master Leasing) and HOPWA funded case management services. Use Row c to adjust for duplication among the service categories and Row d to provide an unduplicated household total.

Line [2]: For project sponsors that did <u>NOT</u> provide HOPWA housing subsidy assistance identify in the appropriate row the number of households that received HOPWA funded case management services.

Note: These numbers will help you to determine which clients to report Access to Care and Support Outcomes for and will be used by HUD as a basis for analyzing the percentage of households who demonstrated or maintained connections to care and support as identified in Chart 1b below.

| Total Number of | Total Number of Households | | | |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|--|
| | For Project Sponsors that provided HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following HOPWA-funded services: | | | |
| a. | Housing Subsidy Assistance (duplicated)-TBRA, STRMU, PHP, Facility-Based Housing, and Master Leasing | 92 | | |
| b. | Case Management | 92 | | |
| с. | Adjustment for duplication (subtraction) | 0 | | |
| d. | Total Households Served by Project Sponsors with Housing Subsidy Assistance (Sum of Rows a and b minus Row c) | 92 | | |
| | 2. For Project Sponsors did NOT provide HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following HOPWA-funded service: | | | |
| a. | HOPWA Case Management | 0 | | |
| b. | Total Households Served by Project Sponsors without Housing Subsidy Assistance | 0 | | |

1b. Status of Households Accessing Care and Support

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report the number of households that demonstrated access or maintained connections to care and support within the operating year.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report the number of households that demonstrated improved access or maintained connections to care and support within the operating year.

Note: For information on types and sources of income and medical insurance/assistance, refer to Charts below.

| Categories of Services Accessed | [1] For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following: | [2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following: | Outcome Indicator |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| 1. Has a housing plan for maintaining or establishing stable on- going housing | 92 | N/A | Support for Stable Housing |
| 2. Had contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan (may include leveraged services such as Ryan White Medical Case Management) | 92 | N/A | Access to Support |
| 3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan | 92 | N/A | Access to Health Care |
| 4. Accessed and maintained medical insurance/assistance | 92 | N/A | Access to Health Care |
| 5. Successfully accessed or maintained qualification for sources of income | 92 | N/A | Sources of Income |

Chart 1b, Line 4: Sources of Medical Insurance and Assistance include, but are not limited to the following (Reference only)

| MEDICAID Health Insurance Program, or | Veterans Affairs Medical Services | |
|---------------------------------------|---------------------------------------------------------|---------------------------------------------------------|
| use local program | AIDS Drug Assistance Program (ADAP) | Ryan White-funded Medical or Dental |
| name | State Children's Health Insurance Program | Assistance |
| MEDICARE Health Insurance Program, or | (SCHIP), or use local program name | |
| use local program name | | |

Chart 1b, Row 5: Sources of Income include, but are not limited to the following (Reference only)

Child Support

•

- Earned Income
- Veteran's Pension
- Unemployment Insurance
- Pension from Former Job
- Supplemental Security Income (SSI)
- Social Security Disability Income (SSDI)
- Alimony or other Spousal Support
- Veteran's Disability Payment
- Retirement Income from Social Security
- Worker's Compensation
- General Assistance (GA), or use local program name
- Private Disability Insurance
- Temporary Assistance for Needy
- Families (TANF)
- Other Income Sources

1c. Households that Obtained Employment

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or related case management/counseling services.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or case management/counseling services.

Note: This includes jobs created by this project sponsor or obtained outside this agency.

Note: Do not include jobs that resulted from leveraged job training, employment assistance, education or case management/counseling services.

| Categories of Services Accessed | [1 For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following: | [2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following: |
|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Total number of households that obtained an income-producing job | 31 | N/A |

PART 5: Worksheet - Determining Housing Stability Outcomes (optional)

1. This chart is designed to assess program results based on the information reported in Part 4 and to help Grantees determine overall program performance. Completion of this worksheet is optional.

| Permanent | Stable Housing | Temporary Housing | Unstable | Life Event |
|---------------------|----------------------|------------------------------------------|--------------|-------------|
| Housing Subsidy | (# of households | (2) | Arrangements | (9) |
| Assistance | remaining in program | | (1+7+8) | |
| | plus 3+4+5+6) | | | |
| Tenant-Based | | | | |
| Rental Assistance | | | | |
| (TBRA) | | | | |
| Permanent Facility- | | | | |
| based Housing | | | | |
| Assistance/Units | | | | |
| Transitional/Short- | | | | |
| Term Facility-based | | | | |
| Housing | | | | |
| Assistance/Units | | | | |
| Total Permanent | | | | |
| HOPWA Housing | | | | |
| Subsidy Assistance | | | | |
| Reduced Risk of | Stable/Permanent | Temporarily Stable, with Reduced Risk of | Unstable | Life Events |
| Homelessness: | Housing | Homelessness | Arrangements | Life Events |
| Short-Term | Housing | Homeressness | Arrangements | |
| Assistance | | | | |
| Short-Term Rent. | | | | |
| Mortgage, and | | | | |
| Utility Assistance | | | | |
| (STRMU) | | | | |
| Total HOPWA | | | 1 | |
| Housing Subsidy | | | | |
| | | | | |
| Assistance | | | | |

Background on HOPWA Housing Stability Codes Stable Permanent Housing/Ongoing Participation

3 = Private Housing in the private rental or home ownership market (without known subsidy, including permanent placement with families or other self-sufficient arrangements) with reasonable expectation that additional support is not needed.

- 4 = Other HOPWA-funded housing subsidy assistance (not STRMU), e.g. TBRA or Facility-Based Assistance.
- 5 = Other subsidized house or apartment (non-HOPWA sources, e.g., Section 8, HOME, public housing).
- 6 = Institutional setting with greater support and continued residence expected (e.g., residential or long-term care facility).

Temporary Housing

2 = Temporary housing - moved in with family/friends or other short-term arrangement, such as Ryan White subsidy, transitional housing for homeless, or temporary placement in institution (e.g., hospital, psychiatric hospital or other psychiatric facility, substance abuse treatment facility or detox center).

Unstable Arrangements

1 = Emergency shelter or no housing destination such as places not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station, or anywhere outside).

7 = Jail /prison.

8 = Disconnected or disappeared from project support, unknown destination or no assessments of housing needs were undertaken.

Life Event

9 = Death, i.e., remained in housing until death. This characteristic is not factored into the housing stability equation.

Tenant-based Rental Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as reported under: 3, 4, 5, and 6. <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item: 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Permanent Facility-Based Housing Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Temporary <u>Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Transitional/Short-Term Facility-Based Housing Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) continue in the residences (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Other <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Tenure Assessment. A baseline of households in transitional/short-term facilities for assessment purposes, indicate the number of households whose tenure exceeded 24 months.

STRMU Assistance: <u>Stable Housing</u> is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period and there is reasonable expectation that additional support is not needed in order to maintain permanent housing living situation (as this is a time-limited form of housing support) as reported under housing status: Maintain Private Housing with subsidy; Other Private with Subsidy; Other HOPWA support; Other Housing Subsidy; and Institution. <u>Temporarily Stable</u>, with Reduced Risk of Homelessness is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period or left their current housing arrangement for a transitional facility or other temporary/non-permanent housing arrangement and there is reasonable expectation additional support will be needed to maintain housing arrangements in the next year, as reported under housing status: Likely to maintain current housing arrangements, with additional STRMU assistance; Transitional Facilities/Short-term; and Temporary/Non-Permanent Housing arrangements <u>Unstable Situation</u> is the sum of number of households reported under housing status: Emergency Shelter; Jail/Prison; and Disconnected.

PART 6: Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY)

The Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units is to be used in place of Part 7B of the CAPER if the facility was originally acquired, rehabilitated or constructed/developed in part with HOPWA funds but no HOPWA funds were expended during the operating year. Scattered site units may be grouped together on one page.

Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation are required to operate their facilities for HOPWA eligible individuals for at least ten (10) years. If non-substantial rehabilitation funds were used, they are required to operate for at least three (3) years. Stewardship begins once the facility is put into operation.

Note: See definition of Stewardship Units.

1. General information

| HUD Grant Number(s) | Operating Year for this report From (mm/dd/yy) To (mm/dd/yy) | □ Final Yr |
|---------------------|-----------------------------------------------------------------|-----------------|
| | $\Box Yr 1; \Box Yr 2; \Box Yr 3; \Box Yr 4;$ | □ Yr 5; □ Yr 6; |
| | □ Yr 7; □ Yr 8; □ Yr 9; □ Yr 10 | |
| Grantee Name | Date Facility Began Operations (mm/dd/y | y) |
| | | |

2. Number of Units and Non-HOPWA Expenditures

| Facility Name: | Number of Stewardship Units Developed with HOPWA funds | Amount of Non-HOPWA Funds Expended in Support of the Stewardship Units during the Operating Year |
|-----------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Total Stewardship Units | | |
| (subject to 3- or 10- year use periods) | | |

3. Details of Project Site

| Project Sites: Name of HOPWA-funded project | |
|--------------------------------------------------|---------------------------------------------------------------------|
| Site Information: Project Zip Code(s) | |
| Site Information: Congressional District(s) | |
| Is the address of the project site confidential? | □ Yes, protect information; do not list |
| | □ Not confidential; information can be made available to the public |
| If the site is not confidential: | |
| Please provide the contact information, phone, | |
| email address/location, if business address is | |
| different from facility address | |

Part 7: Summary Overview of Grant Activities A. Information on Individuals, Beneficiaries, and Households Receiving HOPWA Housing Subsidy Assistance (TBRA, STRMU, Facility-Based Units, Permanent Housing Placement and Master Leased Units ONLY)

Note: Reporting for this section should include ONLY those individuals, beneficiaries, or households that received and/or resided in a household that received HOPWA Housing Subsidy Assistance as reported in Part 3, Chart 1, Row 7, Column b. (e.g., do not include households that received HOPWA supportive services ONLY).

Section 1. HOPWA-Eligible Individuals Who Received HOPWA Housing Subsidy Assistance

a. Total HOPWA Eligible Individuals Living with HIV/AIDS

In Chart a., provide the total number of eligible (and unduplicated) <u>low-income individuals living with HIV/AIDS</u> who qualified their household to receive HOPWA housing subsidy assistance during the operating year. This total should include only the individual who qualified the household for HOPWA assistance, NOT all HIV positive individuals in the household.

| Individuals Served with Housing Subsidy Assistance | Total |
|----------------------------------------------------------------------------------------------------------------|-------|
| Number of individuals with HIV/AIDS who qualified their household to receive HOPWA housing subsidy assistance. | 92 |

Chart b. Prior Living Situation

In Chart b, report the prior living situations for all Eligible Individuals reported in Chart a. In Row 1, report the total number of individuals who continued to receive HOPWA housing subsidy assistance from the prior operating year into this operating year. In Rows 2 through 17, indicate the prior living arrangements for all new HOPWA housing subsidy assistance recipients during the operating year.

Data Check: The total number of eligible individuals served in Row 18 equals the total number of individuals served through housing subsidy assistance reported in Chart a above.

| | Category | Total HOPWA Eligible Individuals Receiving Housing Subsidy Assistance |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 1. | Continuing to receive HOPWA support from the prior operating year | |
| New | Individuals who received HOPWA Housing Subsidy Assistance support during Operating Year | |
| 2. | Place not meant for human habitation (such as a vehicle, abandoned building, bus/train/subway station/airport, or outside) | |
| 3. | Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher) | |
| 4. | Transitional housing for homeless persons | |
| 5. | Total number of new Eligible Individuals who received HOPWA Housing Subsidy Assistance with a Prior Living Situation that meets HUD definition of homelessness (Sum of Rows 2 – 4) | |
| 6. | Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod Rehab) | |
| 7. | Psychiatric hospital or other psychiatric facility | |
| 8. | Substance abuse treatment facility or detox center | |
| 9. | Hospital (non-psychiatric facility) | |
| 10. | Foster care home or foster care group home | |
| 11. | Jail, prison or juvenile detention facility | |
| 12. | Rented room, apartment, or house | 83 |
| 13. | House you own | 9 |
| 14. | Staying or living in someone else's (family and friends) room, apartment, or house | |
| 15. | Hotel or motel paid for without emergency shelter voucher | |
| 16. | Other | |
| 17. | Don't Know or Refused | |
| 18. | TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17) | 92 |

c. Homeless Individual Summary

In Chart c, indicate the number of eligible individuals reported in Chart b, Row 5 as homeless who also are homeless Veterans and/or meet the definition for Chronically Homeless (See Definition section of CAPER). The totals in Chart c do <u>not</u> need to equal the total in Chart b, Row 5.

| Category | Number of Homeless Veteran(s) | Number of Chronically Homeless |
|----------------------------------------|-------------------------------------|-----------------------------------|
| HOPWA eligible individuals served with | 0 | 0 |
| HOPWA Housing Subsidy Assistance | 0 | 0 |

Section 2. Beneficiaries

In Chart a, report the total number of HOPWA eligible individuals living with HIV/AIDS who received HOPWA housing subsidy assistance (*as reported in Part 7A, Section 1, Chart a*), and all associated members of their household who benefitted from receiving HOPWA housing subsidy assistance (resided with HOPWA eligible individuals).

Note: See definition of <u>HOPWA Eligible Individual</u>

Note: See definition of <u>Transgender</u>.

Note: See definition of <u>Beneficiaries</u>.

Data Check: The sum of <u>each</u> of the Charts b & c on the following two pages equals the total number of beneficiaries served with HOPWA housing subsidy assistance as determined in Chart a, Row 4 below.

a. Total Number of Beneficiaries Served with HOPWA Housing Subsidy Assistance

| Individuals and Families Served with HOPWA Housing Subsidy Assistance | Total Number |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1. Number of individuals with HIV/AIDS who qualified the household to receive HOPWA housing subsidy assistance (equals the number of HOPWA Eligible Individuals reported in Part 7A, Section 1, Chart a) | 92 |
| 2. Number of ALL other persons diagnosed as HIV positive who reside with the HOPWA eligible individuals identified in Row 1 and who benefitted from the HOPWA housing subsidy assistance | 4 |
| 3. Number of ALL other persons NOT diagnosed as HIV positive who reside with the HOPWA eligible individual identified in Row 1 and who benefited from the HOPWA housing subsidy | 37 |
| 4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1, 2, & 3) | 133 |

b. Age and Gender

In Chart b, indicate the Age and Gender of all beneficiaries as reported in Chart a directly above. Report the Age and Gender of all HOPWA Eligible Individuals (those reported in Chart a, Row 1) using Rows 1-5 below and the Age and Gender of all other beneficiaries (those reported in Chart a, Rows 2 and 3) using Rows 6-10 below. The number of individuals reported in Row 11, Column E. equals the total number of beneficiaries reported in Part 7, Section 2, Chart a, Row 4.

| HOPWA Eligible Individuals (Chart a, Row 1) | | | | | | | | |
|-------------------------------------------------|-------------------------------|------|--------|--------------------|--------------------|-------------------------------|--|--|
| | | А. | В. | C. | D. | Е. | | |
| | | Male | Female | Transgender M to F | Transgender F to M | TOTAL (Sum of Columns A-D) | | |
| 1. | Under 18 | 0 | 0 | | | 0 | | |
| 2. | 18 to 30 years | 25 | 2 | 2 | | 29 | | |
| 3. | 31 to 50 years | 27 | 14 | | | 41 | | |
| 4. | 51 years and Older | 17 | 5 | | | 22 | | |
| 5. | Subtotal (Sum of Rows 1-4) | 69 | 21 | 2 | | 92 | | |
| All Other Beneficiaries (Chart a, Rows 2 and 3) | | | | | | | | |
| | | А. | В. | С. | D. | Е. | | |
| | | Male | Female | Transgender M to F | Transgender F to M | TOTAL (Sum of Columns A-D) | | |
| 6. | Under 18 | 18 | 9 | | | 27 | | |
| 7. | 18 to 30 years | 2 | 0 | | | 2 | | |
| 8. | 31 to 50 years | 3 | 4 | | | 7 | | |
| 9. | 51 years and Older | 1 | 4 | | | 5 | | |
| 10. | Subtotal (Sum of Rows 6-9) | 24 | 17 | | | 41 | | |
| Total Beneficiaries (Chart a, Row 4) | | | | | | | | |
| 11. | TOTAL (Sum of Rows 5 & 10) | 93 | 38 | 2 | | 133 | | |

c. Race and Ethnicity*

In Chart c, indicate the Race and Ethnicity of all beneficiaries receiving HOPWA Housing Subsidy Assistance as reported in Section 2, Chart a, Row 4. Report the <u>race</u> of all HOPWA eligible individuals in Column [A]. Report the <u>ethnicity</u> of all HOPWA eligible individuals in column [B]. Report the <u>race</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [C]. Report the <u>ethnicity</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [D]. The summed total of columns [A] and [C] equals the total number of beneficiaries reported above in Section 2, Chart a, Row 4.

| Category ndian/Alaskan Native | [A] Race [all individuals reported in Section 2, Chart a, Row 1] | [B] Ethnicity [Also identified as Hispanic or Latino] | [C] Race [total of individuals reported in Section 2, Chart a, Rows 2 & 3] | [D] Ethnicity [Also identified as Hispanic or Latino] |
|---------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| an American | 59 | | | |
| | 59 | | | |
| | 59 | | | |
| | 39 | 0 | 30 | 0 |
| aiian/Other Pacific Islander | | | | |
| | 32 | 9 | 11 | 8 |
| ndian/Alaskan Native & White | | | | |
| nite | | | | |
| an American & White | 1 | | | |
| ndian/Alaskan Native & an American | | | | |
| -Racial | | | | |
| als (Sum of Rows 1-10) | 92 | 9 | 41 | 8 |
| | ite an American & White dian/Alaskan Native & an American Racial als (Sum of Rows 1-10) | ite 1 an American & White 1 dian/Alaskan Native & 1 American Racial 2 als (Sum of Rows 1-10) 92 | ite 1 in American & White 1 dian/Alaskan Native & 1 Racial Alaskan Oracle Alaskan Native & 1 Racial Alaskan Oracle Alaskan Native & 1 Racial Alaskan Oracle Alaskan Or | ite 1 dian/Alaskan Native & 1 an American & White 1 an American & White 1 an American & I an A |

*Reference (data requested consistent with Form HUD-27061 Race and Ethnic Data Reporting Form)

Section 3. Households

Household Area Median Income

Report the income(s) for all households served with HOPWA housing subsidy assistance.

Data Check: The total number of households served with HOPWA housing subsidy assistance should equal Part 3C, Row 7, Column b and Part 7A, Section 1, Chart a. (Total HOPWA Eligible Individuals Served with HOPWA Housing Subsidy Assistance).

Note: Refer to <u>*https://www.huduser.gov/portal/datasets/il.html</u> for information on area median income in your community.*</u>

| | Percentage of Area Median Income | Households Served with HOPWA Housing Subsidy Assistance |
|----|---------------------------------------------|------------------------------------------------------------|
| 1. | 0-30% of area median income (extremely low) | 77 |
| 2. | 31-50% of area median income (very low) | 8 |
| 3. | 51-80% of area median income (low) | 7 |
| 4. | Total (Sum of Rows 1-3) | 92 |

Part 7: Summary Overview of Grant Activities B. Facility-Based Housing Assistance

Complete one Part 7B for each facility developed or supported through HOPWA funds.

Do not complete this Section for programs originally developed with HOPWA funds but no longer supported with

HOPWA funds. If a facility was developed with HOPWA funds (subject to ten years of operation for acquisition, new construction and substantial rehabilitation costs of stewardship units, or three years for non-substantial rehabilitation costs), but HOPWA funds are no longer used to support the facility, the project sponsor should complete Part 6: Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY).

Complete Charts 2a, Project Site Information, and 2b, Type of HOPWA Capital Development Project Units, for all Development Projects, including facilities that were past development projects, but continued to receive HOPWA operating dollars this reporting year.

1. Project Sponsor Agency Name (Required)

2. Capital Development

2a. Project Site Information for HOPWA Capital Development of Projects (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this reporting year)

Note: If units are scattered-sites, report on them as a group and under type of Facility write "Scattered Sites."

| De | Type of velopment s operating year | HOPWA Funds Expended this operating year (<i>if applicable</i>) | Non-HOPWA funds Expended (if applicable) | Name of Facility: | | |
|---------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--|--|
| □ Ne | w construction | \$ | \$ | Type of Facility [Check <u>only one</u> box.] | | |
| | habilitation | \$ | \$ | Permanent housing Short-term Shelter or Transitional housing | | |
| □ Ac | quisition | \$ | \$ | □ Supportive services only facility | | |
| □Ор | erating | \$ | \$ | | | |
| a. | Purchase/lease of | f property: | | Date (mm/dd/yy): | | |
| b. | b. Rehabilitation/Construction Dates: | | | Date started: Date Completed: | | |
| с. | c. Operation dates: | | | Date residents began to occupy: | | |
| d. Date supportive services began: | | | Date started: | | | |
| e. | e. Number of units in the facility: | | | HOPWA-funded units = Total Units = | | |
| f. Is a waiting list maintained for the facility? | | ? | ☐ Yes ☐ No If yes, number of participants on the list at the end of operating year | | | |
| g. | What is the addre | ess of the facility (if differ | ent from business address)? | | | |
| h. | Is the address of | the project site confidenti | al? | Yes, protect information; do not publish list No, can be made available to the public | | |

2b. Number and Type of HOPWA Capital Development Project Units (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this Reporting Year)

For units entered above in 2a, please list the number of HOPWA units that fulfill the following criteria:

| | Number Designated for the Chronically Homeless | Number Designated to Assist the Homeless | Number Energy- Star Compliant | Number 504 Accessible |
|---------------------------|------------------------------------------------------|---------------------------------------------------|----------------------------------|-----------------------|
| Rental units constructed | | | | |
| (new) and/or acquired | | | | |
| with or without rehab | | | | |
| | | | | |
| Rental units rehabbed | | | | |
| | | | | |
| Homeownership units | | | | |
| constructed (if approved) | | | | |
| | | | | |

3. Units Assisted in Types of Housing Facility/Units Leased by Project Sponsor

<u>Charts 3a, 3b, and 4 are required for each facility</u>. In Charts 3a and 3b, indicate the type and number of housing units in the facility, including master leased units, project-based or other scattered site units leased by the organization, categorized by the number of bedrooms per unit.

Note: The number units may not equal the total number of households served.

Please complete separate charts for each housing facility assisted. Scattered site units may be grouped together.

3a. Check one only

Permanent Supportive Housing Facility/Units

Short-term Shelter or Transitional Supportive Housing Facility/Units

3b. Type of Facility

Complete the following Chart for all facilities leased, master leased, project-based, or operated with HOPWA funds during the reporting year.

Name of Project Sponsor/Agency Operating the Facility/Leased Units:

| Type of housing facility operated by the | | Total Number of <u>Units</u> in use during the Operating Year Categorized by the Number of Bedrooms per Units | | | | | |
|------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------|--------|--------|--------|--------|
| | project sponsor | SRO/Studio/0 bdrm | 1 bdrm | 2 bdrm | 3 bdrm | 4 bdrm | 5+bdrm |
| a. | Single room occupancy dwelling | | | | | | |
| b. | Community residence | | | | | | |
| c. | Project-based rental assistance units or leased units | | | | | | |
| d. | Other housing facility Specify: | | | | | | |

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor on subsidies for housing involving the use of facilities, master leased units, project based or other scattered site units leased by the organization.

| | Housing Assistance Category: Facility Based Housing | Output: Number of Households | Output: Total HOPWA Funds Expended during Operating Year by Project Sponsor |
|---|-------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------|
| a | Leasing Costs | | |
| b | Operating Costs | | |
| с | Project-Based Rental Assistance (PBRA) or other leased units | | |
| d | Other Activity (if approved in grant agreement) Specify: | | |
| e | Adjustment to eliminate duplication (subtract) | | |
| f | TOTAL Facility-Based Housing Assistance (Sum Rows a through d minus Row e) | | |

OMB Number 2506-0133 (Expiration Date: 01/31/2021)

Part 1: Grantee Executive Summary

As applicable, complete the charts below to provide more detailed information about the agencies and organizations responsible for the administration and implementation of the HOPWA program. Chart 1 requests general Grantee Information and Chart 2 is to be completed for each organization selected or designated as a project sponsor, as defined by 24 CFR 574.3.

Note: If any information does not apply to your organization, please enter N/A. Do not leave any section blank.

1. Grantee Information

| HUD Grant Number | | Operating Yo From (mm/do | ear for this report 1/yy) 7 | To (mm/dd/yy) |) |
|----------------------------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------|---|
| Grantee Name | | · | | | |
| Business Address | | | | | |
| City, County, State, Zip | | | | | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | | | | - | |
| DUN & Bradstreet Number (DUNs): | | | System for Award M Is the grantee's SAN Ves No If yes, provide SAM | M status curr | |
| Congressional District of Grantee's Business Address | | | | | |
| *Congressional District of Primary Service Area(s) | | | | | |
| *City(ies) <u>and</u> County(ies) of Primary Service Area(s) | Cities: | | Counties: | | |
| Organization's Website Address | | Is there a waiting list(s) Services in the Grantee If yes, explain in the na- list and how this list is a | Service Area? | es □No | |

* Service delivery area information only needed for program activities being directly carried out by the grantee.

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by 24 CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. *Note: If any information does not apply to your organization, please enter N/A.*

| Project Sponsor Agency Name | | Parent Company Nan | ne, <i>if applicable</i> | |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------|------------------------|------------------------------|--------------------|
| Tarrant County Samaritan Housing, Inc. | | | | |
| Name and Title of Contact at Project Sponsor Agency | Norbert White, President and | CEO | | |
| Email Address | nwhite@samaritanhouse.org | | | |
| Business Address | 929 Hemphill Street | | | |
| City, County, State, Zip, | Fort Worth, Tarrant County, Texas 76104 | | | |
| Phone Number (with area code) | 817 | 332 | 6410 | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 75-2401109 Fax Number (with area co 817-332-6409 | | | area code) |
| DUN & Bradstreet Number (DUNs): | 836575245 | | | |
| Congressional District of Project Sponsor's Business Address | 26 | | | |
| Congressional District(s) of Primary Service Area(s) | 26 | | | |
| City(ies) <u>and</u> County(ies) of Primary Service Area(s) | Cities: Fort Worth | | Counties: Tarrant Co | bunty |
| Total HOPWA contract amount for this Organization for the operating year | \$671,499 | | | |
| Organization's Website Address | www.samaritanhouse.org | 5 | | |
| Is the sponsor a nonprofit organization? | Yes 🗆 No | Does your organization | on maintain a waiting | g list? 🛛 Yes 🗌 No |
| Please check if yes and a faith-based organization Please check if yes and a grassroots organization | If yes, explain in the r | narrative section how | v this list is administered. | |

5. Grantee Narrative and Performance Assessment

a. Grantee and Community Overview

Provide a one to three page narrative summarizing major achievements and highlights that were proposed and completed during the program year. Include a brief description of the grant organization, area of service, the name(s) of the program contact(s), and an overview of the range/type of housing activities provided. This overview may be used for public information, including posting on HUD's website. *Note: Text fields are expandable.*

HOPWA funds received provided supportive service, facility-based operations, tenant-based rental assistance, and administrative support for Tarrant County Samaritan Housing, Inc. (Samaritan House). Through the course of the grant year (October 2019 – September 2020), grant funds supported 112 households.

Samaritan House was established in 1991 to provide permanent supportive housing to individuals living with HIV/AIDS. Along with housing services, Samaritan House resident may receive case management services, substance abuse counseling, medical transportation services, patient navigation, nutritional counseling and education, life skills training, and up to three meals daily. Today Samaritan House operated a 60-unit single-room occupancy building and a 66-unit apartment complex in the medical district of Fort Worth. The agency also provides housing assistance and supportive services to individuals and families residing in scatter-site units throughout the City of Fort Worth. Individuals interested in housing programs and services offered by Samaritan House may contact Norbert White, President and Chief Executive Officer at 817-332-6410 extension 177 or via email at <u>nwhite@samaritanhouse.org</u>.

The waitlist for housing services at Samaritan House's property is maintained by the Intake Coordinator. Once a unit becomes available Samaritan House contacts individuals to determine if they are still in need of housing. Individuals interested in housing programs and services offered by Samaritan House may contact Crystal Daniel at 817-332-6410 extension 170 or via email at <u>cdaniel@samaritanhouse.org</u>.

b. Annual Performance under the Action Plan

Provide a narrative addressing each of the following four items:

1. Outputs Reported. Describe significant accomplishments or challenges in achieving the number of housing units supported and the number households assisted with HOPWA funds during this operating year compared to plans for this assistance, as approved in the Consolidated Plan/Action Plan. Describe how HOPWA funds were distributed during your operating year among different categories of housing and geographic areas to address needs throughout the grant service area, consistent with approved plans.

Over the course of the grant year, Samaritan House supported 112 households (124 people) versus a plan of 110 households. At minimum, all households received case management services and had the option of participating in other supportive services including substance abuse counseling, medical transportation services, patient navigation, nutritional counseling and education, life skills training, and up to three meals daily. Of the 112 households, 71 (versus a plan of 60) also received housing assistance through facility-based operations of our 60-unit single room occupancy building and 10 (versus a plan of 5) also received tenant-based rental assistance. Funds received were distributed according to the project budget. A majority (63 percent) of funds supported a portion of salaries and fringe benefits related to direct services provided to program participants. These services are vital in assisting program participants to navigate everyday life and encourage medical adherence and housing stability. Twenty-one percent of funds received supported a portion of salary and benefits facility-based operations staff which include personnel in maintenance and property leasing. Twelve percent of funds supported tenant-based rental assistance and fringe of administrative staff as well as the City of Fort Worth required fidelity bond. All services were provided in Fort Worth, Texas with a majority of services being provided at the

agency's physical location at 929 Hemphill Street, Fort Worth, Texas 76104. For households in scatteredsite location, Samaritan House case management staff provided services most services in the participants' homes/apartments.

2. Outcomes Assessed. Assess your program's success in enabling HOPWA beneficiaries to establish and/or better maintain a stable living environment in housing that is safe, decent, and sanitary, and improve access to care. Compare current year results to baseline results for clients. Describe how program activities/projects contributed to meeting stated goals. If program did not achieve expected targets, please describe how your program plans to address challenges in program implementation and the steps currently being taken to achieve goals in next operating year. If your program exceeded program targets, please describe strategies the program utilized and how those contributed to program successes.

Samaritan House works with residents to improve their health and manage their HIV/AIDS. The organization focuses on fostering independence and developing skills that enable client to become vital contributing members of the community. This is valuable to the community because permanent supportive housing has shown to be more cost-effective than temporary shelters, jails, and other homeless situations. Studies have demonstrated that affordable housing models such as Samaritan House are important factors in improving housing stability, reducing new HIV infections, establishing and maintaining more positive outcomes, and provide significant savings to communities by reducing the need of emergency community interventions.

Samaritan House operates a stable supportive environment where people living with HIV/AIDS can improve their health, housing stability, and overall quality of life. Of those who exited, 9 out of 15 (60 percent) transitioned to stable housing situations, 3 out of 15 (20 percent) moved into unstable housing situations, and 3 out 15 (20 percent) of residents passed away.

3. Coordination. Report on program coordination with other mainstream housing and supportive services resources, including the use of committed leveraging from other public and private sources that helped to address needs for eligible persons identified in the Consolidated Plan/Strategic Plan.

Samaritan House utilizes several sources of funds to leverage and support the services provided to persons living with HIV/AIDS including the Tarrant County Continuum of Care and Ryan White grants.

4. Technical Assistance. Describe any program technical assistance needs and how they would benefit program beneficiaries. Additional training on annual performance reviews, CAPERS, and the HMIS database would help the agency to better evaluate program results. With program evaluations, the agency is able to improve service delivery and positively impact participants of our programs.

c. Barriers and Trends Overview

Provide a narrative addressing items 1 through 3. Explain how barriers and trends affected your program's ability to achieve the objectives and outcomes discussed in the previous section.

1. Describe any barriers (including regulatory and non-regulatory) encountered in the administration or implementation of the HOPWA program, how they affected your program's ability to achieve the objectives and outcomes discussed, and, actions taken in response to barriers, and recommendations for program improvement. Provide an explanation for each barrier selected.

One of the most significant barriers to maintaining housing is chemical dependency issues. Samaritan House has a multi-disciplined care team who work diligently to provide a positive approach to the barrier. The care team assist program participants to access individual and group substance abuse

counseling and referrals to inpatient and outpatient treatment when deemed necessary. By using a multi-pronged approach, the occurrence of relapse is significantly reduced.

| □ HOPWA/HUD Regulations | □ Planning | □ Housing Availability | □ Rent Determination and Fair Market Rents |
|----------------------------------|------------------------|---------------------------------|--------------------------------------------|
| □ Discrimination/Confidentiality | □ Multiple Diagnoses | Eligibility | □ Technical Assistance or Training |
| □ Supportive Services | □ Credit History | ⊠ Rental History | Criminal Justice History |
| □ Housing Affordability | Geography/Rural Access | □ Other, please explain further | |

Another barrier that poses significant challenges to our residents is maintaining a positive rental history. Lease violations can lead to eviction. These lease violations are hurdles within the population at Samaritan House. Many issues arise that may put the resident's housing in jeopardy. Samaritan House utilizes an Eviction Prevention Planning process which employs a teaching model allowing residents to gain knowledge of new skills that will help them to make appropriate changes in their lives and maintain housing, resulting in a more positive rental history. Examples include budget counseling, housekeeping skills and tips. Disturbance management, chemical dependency counseling, and referrals for inpatient and outpatient treatment, and anger management. Residents are allowed opportunities for behavior modification before they are asked to leave for non-compliance. In the more difficult cases, it may take more than one Eviction Prevention Plan to achieve its goal. Each resident issue is handled on a case by case basis. Since the planning process has been implemented occupancy rates have increased and evictions have decreased, and residents gain new skills and the opportunity for termination from the program is much lower.

2. Describe any trends in the community that may affect the way in which the needs of persons living with HIV/AIDS are being addressed, and provide any other information important to the future provision of services to this population. The COVID-19 Pandemic has greatly impact the way in which Samaritan House has provided services to our clients. We have purchased both DocuSign and Zoom Health subscriptions so that we are able to provide some our services (namely case management and patient navigation remotely) in order to reduce potential exposure of the virus to both our staff and our clients.

3. Identify any evaluations, studies, or other assessments of the HOPWA program that are available to the public. Not Applicable

End of PART 1

PART 2: Sources of Leveraging and Program Income

1. Sources of Leveraging

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in the Consolidated or Annual Plan and used in the delivery of the HOPWA program and the amount of leveraged dollars. In Column [1], identify the type of leveraging. Some common sources of leveraged funds have been provided as a reference point. You may add Rows as necessary to report all sources of leveraged funds. Include Resident Rent payments paid by clients directly to private landlords. Do NOT include rents paid directly to a HOPWA program as this will be reported in the next section. In Column [2] report the amount of leveraged funds expended during the operating year. Use Column [3] to provide some detail about the type of leveraged contribution (e.g., case management services or clothing donations). In Column [4], check the appropriate box to indicate whether the leveraged contribution was a housing subsidy assistance or another form of support. *Note: Be sure to report on the number of households supported with these leveraged funds in Part 3, Chart 1, Column d.*

| | [2] Amount of | | [4] Housing Subsidy |
|------------------------------------------------------|---------------|--------------|-------------------------------------------------|
| | Leveraged | [3] Type of | Assistance or Other |
| [1] Source of Leveraging | Funds | Contribution | Support |
| Public Funding | | | |
| | | | □ Housing Subsidy Assistance |
| Ryan White-Housing Assistance | | | □ Other Support |
| | | | □ Housing Subsidy Assistance |
| Ryan White-Other | 97,870.78 | | □ Other Support |
| | | | □ Housing Subsidy Assistance |
| Housing Choice Voucher Program | | | Other Support |
| | | | □ Housing Subsidy Assistance |
| Low Income Housing Tax Credit | | | Other Support |
| | | | □ Housing Subsidy Assistance |
| HOME | | | Other Support |
| | | | \Box Housing Subsidy Assistance |
| Continuum of Care | | | Other Support |
| | | | \Box Housing Subsidy Assistance |
| Emergency Solutions Grant | | | Other Support |
| | 07 140 07 | | \Box Housing Subsidy Assistance |
| Other Public: State Services | 87,140.87 | | Other Support |
| Od DIF | | | \Box Housing Subsidy Assistance |
| Other Public: | | | Other Support |
| | | | \Box Housing Subsidy Assistance |
| Other Public: | | | Other Support |
| | | | \Box Housing Subsidy Assistance |
| Other Public: | | | Other Support |
| | | | □ Housing Subsidy Assistance □ Other Support |
| Other Public: | | | |
| Private Funding | | | |
| | | | □ Housing Subsidy Assistance |
| Grants | | | □ Other Support |
| | | | □ Housing Subsidy Assistance |
| In-kind Resources | | | □ Other Support |
| | | | □ Housing Subsidy Assistance |
| Other Private: | | | □ Other Support |
| | | | □ Housing Subsidy Assistance |
| Other Private: | | | □ Other Support |
| Other Funding | | | |
| | | | □ Housing Subsidy Assistance |
| Grantee/Project Sponsor (Agency) Cash | | | □ Other Support |
| Resident Rent Payments by Client to Private Landlord | | | |
| TOTAL (Sum of all Rows) | 185,011.65 | | |
| | 105,011.05 | | |

A. Source of Leveraging Chart

2. Program Income and Resident Rent Payments

In Section 2, Chart A, report the total amount of program income and resident rent payments directly generated from the use of HOPWA funds, including repayments. Include resident rent payments collected or paid directly to the HOPWA program. Do NOT include payments made directly from a client household to a private landlord.

Note: Please see report directions section for definition of <u>program income</u>. (Additional information on program income is available in the HOPWA Grantee Oversight Resource Guide).

A. Total Amount Program Income and Resident Rent Payment Collected During the Operating Year

| | Program Income and Resident Rent Payments Collected | Total Amount of Program Income (for this operating year) |
|----|-----------------------------------------------------------------------|----------------------------------------------------------------|
| 1. | Program income (e.g. repayments) | |
| 2. | Resident Rent Payments made directly to HOPWA Program | |
| 3. | Total Program Income and Resident Rent Payments (Sum of Rows 1 and 2) | |

B. Program Income and Resident Rent Payments Expended To Assist HOPWA Households

In Chart B, report on the total program income and resident rent payments (as reported above in Chart A) expended during the operating year. Use Row 1 to report Program Income and Resident Rent Payments expended on Housing Subsidy Assistance Programs (i.e., TBRA, STRMU, PHP, Master Leased Units, and Facility-Based Housing). Use Row 2 to report on the Program Income and Resident Rent Payment expended on Supportive Services and other non-direct Housing Costs.

| | Program Income and Resident Rent Payment Expended on HOPWA programs | Total Amount of Program Income Expended (for this operating year) |
|----|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| 1. | Program Income and Resident Rent Payment Expended on Housing Subsidy Assistance costs | |
| 2. | Program Income and Resident Rent Payment Expended on Supportive Services and other non- direct housing costs | |
| 3. | Total Program Income Expended (Sum of Rows 1 and 2) | |

End of PART 2

PART 3: Accomplishment Data Planned Goal and Actual Outputs

In Chart 1, enter performance information (goals and actual outputs) for all activities undertaken during the operating year supported with HOPWA funds. Performance is measured by the number of households and units of housing that were supported with HOPWA or other federal, state, local, or private funds for the purposes of providing housing assistance and support to persons living with HIV/AIDS and their families.

| | Or wA renormance rianned Goar and Actual Outputs | [1] Output: Households | | [2] Outpu | ıt: Funding | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------|--------------|-------------|---------------------|------------|---------------------------|
| | HOPWA Performance | | | PWA tance | | veraged useholds | НОРЖ | A Funds |
| | Planned Goal | a | 1. | b. | с. | d. | e. | f. |
| | | | | | | | | |
| | and Actual | | Goal | Actual | Goal | Actual | AWAOH | Budget HOPWA Actual |
| | HOPWA Housing Subsidy Assistance | | [1 |] Outpu | ıt: Hou | seholds | [2] Outpu | ıt: Funding |
| | Tenant-Based Rental Assistance | 5 | | 10 | | | | 57,904.83 |
| 2a. | Permanent Housing Facilities: | 5 | | 10 | | | 101,197.00 | 57,501.05 |
| | Received Operating Subsidies/Leased units (Households Served) | 60 | | 71 | | | 136,003.00 | 103,784.01 |
| | Transitional/Short-term Facilities: | | | | | | | |
| | Received Operating Subsidies/Leased units (Households Served) (Households Served) | | | | | | | |
| 3a. | Permanent Housing Facilities: | | | | | | | |
| | Capital Development Projects placed in service during the operating year | | | | | | | |
| | (Households Served) Transitional/Short-term Facilities: | | | | | | | |
| | Capital Development Projects placed in service during the operating year | | | | | | | |
| | (Households Served) | | | | | | | |
| 4. | Short-Term Rent, Mortgage and Utility Assistance | | | | | | | |
| 5. | Permanent Housing Placement Services | | | | | | | |
| 6. | Adjustments for duplication (subtract) | | | | | | | |
| | Total HOPWA Housing Subsidy Assistance (Columns a – d equal the sum of Rows 1-5 minus Row 6; Columns e and f equal the sum of Rows 1-5) | 65 | | 81 | | | 237,500 | 161,688.84 |
| | Housing Development (Construction and Stewardship of facility based housing) | | [1] | Output | Housi | ng Units | [2] Outpu | ıt: Funding |
| 8. | Facility-based units; | | [1] | Output. | nousi | ng Omts | [2] Outpu | tt. Funding |
| | Capital Development Projects not yet opened (Housing Units) | | | | | | | |
| 9. | Stewardship Units subject to 3- or 10- year use agreements | | | | | | | |
| | Total Housing Developed (Sum of Rows 8 & 9) | | | | | | | |
| | Supportive Services | | [1 | l] Outpu | t. Hous | abolde | [2] Outru | ıt: Funding |
| | Supportive Services provided by project sponsors that also delivered HOPWA housing | | | | . Hous | senorus | | |
| | subsidy assistance Supportive Services provided by project sponsors that only provided supportive | 65 | | 81 | | | 232,462.36 | 222,148.74 |
| | supportive services provided by project sponsors that only provided supportive services. | 50 | | 31 | | | 161,541.64 | 86,391.18 |
| | Adjustment for duplication (subtract) | | | | | | | |
| | Total Supportive Services | | | | | | | |
| | (Columns a – d equals the sum of Rows 11 a & b minus Row 12; Columns e and f | | | | | | | |
| | equal the sum of Rows 11a & 11b) | 110 | | 112 | | | | 308,539.92 |
| | Housing Information Services | | [1 | 1] Outpu | it: Hou | seholds | [2] Outpu | it: Funding |
| 14. | Housing Information Services | | | | | | | |
| 15. | Total Housing Information Services | | | | | | | |
| | | | | | | | | |

1. HOPWA Performance Planned Goal and Actual Outputs

| | ant Administration and Other Activities [1] Output: Households | | iseholds | [2] Output: Funding | | | |
|-----|-------------------------------------------------------------------------------------------|------------------------------------|----------|---------------------|--|-----------|------------|
| 16. | Resource Identification to establish, coordinate and develop housing assistance resources | | | | | | |
| 17. | Technical Assistance (if approved in grant agreement) | | | | | | |
| 18. | Grantee Administration (maximum 3% of total HOPWA grant) | | | | | | |
| 19. | Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded) | | | | | 39,995.00 | 21,005.65 |
| 20. | Total Grant Administration and Other Activities (Sum of Rows 16 – 19) | | | | | 39,995.00 | 21,005.65 |
| | Total Expended | [2] Outputs: HOPWA Fun Expended | | | | | |
| | | | | | | Budget | Actual |
| 21. | Total Expenditures for operating year (Sum of Rows 7, 10, 13, 15, and 20) | | | | | 671,499 | 491,234.41 |

2. Listing of Supportive Services

Report on the households served and use of HOPWA funds for all supportive services. Do NOT report on supportive services leveraged with non-HOPWA funds.

Data check: Total unduplicated households and expenditures reported in Row 17 equal totals reported in Part 3, Chart 1, Row 13.

| | Supportive Services | [1] Output: Number of <u>Households</u> | [2] Output: Amount of HOPWA Funds Expended |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------|
| 1. | Adult day care and personal assistance | 71 | 51,183.19 |
| 2. | Alcohol and drug abuse services | 41 | 29,556.49 |
| 3. | Case management | 112 | 80,739.68 |
| 4. | Child care and other child services | | |
| 5. | Education | | |
| 6. | Employment assistance and training | | |
| 7. | Health/medical/intensive care services, if approved Note: Client records must conform with 24 CFR §574.310 | | |
| 8. | Legal services | | |
| 9. | Life skills management (outside of case management) | 71 | 51,183.19 |
| 10. | Meals/nutritional services | 84 | 60,554.76 |
| 11. | Mental health services | | |
| 12. | Outreach | | |
| 13. | Transportation | 49 | 35,322.61 |
| 14. | Other Activity (if approved in grant agreement). Specify : | | |
| 15. | Sub-Total Households receiving Supportive Services (Sum of Rows 1-14) | 428 | |
| 16. | Adjustment for Duplication (subtract) | 316 | |
| 17. | TOTAL Unduplicated Households receiving Supportive Services (Column [1] equals Row 15 minus Row 16; Column [2] equals sum of Rows 1-14) | 112 | 308,539.92 |

3. Short-Term Rent, Mortgage and Utility Assistance (STRMU) Summary

In Row a, enter the total number of households served and the amount of HOPWA funds expended on Short-Term Rent, Mortgage and Utility (STRMU) Assistance. In Row b, enter the total number of STRMU-assisted households that received assistance with mortgage costs only (no utility costs) and the amount expended assisting these households. In Row c, enter the total number of STRMU-assisted households that received assistance with both mortgage and utility costs and the amount expended assisting these households. In Row d, enter the total number of STRMU-assisted households that received assistance with rental costs only (no utility costs) and the amount expended assisting these households. In Row e, enter the total number of STRMU-assisted households that received assistance with both rental and utility costs and the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households. In Row e, enter the total number of stream of stream of stream of stream of stream of stream of the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households that received assisting these households. In Row f, enter the total number of STRMU-assisted households that received assisting these households. In Row f, enter the total number of STRMU-assisted households that received assistance with utility costs only (not including rent or mortgage costs) and the amount expended assisting these households. In row g, report the amount of STRMU funds expended to support direct program costs such as program operation staff.

Data Check: The total households reported as served with STRMU in Row a, column [1] and the total amount of HOPWA funds reported as expended in Row a, column [2] equals the household and expenditure total reported for STRMU in Part 3, Chart 1, Row 4, Columns b and f, respectively.

Data Check: The total number of households reported in Column [1], Rows b, c, d, e, and f equal the total number of STRMU households reported in Column [1], Row a. The total amount reported as expended in Column [2], Rows b, c, d, e, f, and g. equal the total amount of STRMU expenditures reported in Column [2], Row a.

| Н | ousing Subsidy Assistance Categories (STRMU) | [1] Output: Number of <u>Households</u> Served | [2] Output: Total HOPWA Funds Expended on STRMU during Operating Year |
|----|------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------|
| a. | Total Short-term mortgage, rent and/or utility (STRMU) assistance | | |
| b. | Of the total STRMU reported on Row a, total who received assistance with mortgage costs ONLY. | | |
| с. | Of the total STRMU reported on Row a, total who received assistance with mortgage and utility costs. | | |
| d. | Of the total STRMU reported on Row a, total who received assistance with rental costs ONLY. | | |
| e. | Of the total STRMU reported on Row a, total who received assistance with rental and utility costs. | | |
| f. | Of the total STRMU reported on Row a, total who received assistance with utility costs ONLY. | | |
| g. | Direct program delivery costs (e.g., program operations staff time) | | |

End of PART 3

Part 4: Summary of Performance Outcomes

In Column [1], report the total number of eligible households that received HOPWA housing subsidy assistance, by type. In Column [2], enter the number of households that continued to access each type of housing subsidy assistance into next operating year. In Column [3], report the housing status of all households that exited the program.

Data Check: The sum of Columns [2] (Number of Households Continuing) and [3] (Exited Households) equals the total reported in Column[1]. Note: Refer to the housing stability codes that appear in Part 5: Worksheet - Determining Housing Stability Outcomes.

Section 1. Housing Stability: Assessment of Client Outcomes on Maintaining Housing Stability (Permanent Housing and Related Facilities) A. Permanent Housing Subsidy Assistance

| | [1] Output: Total Number of Households Served | [2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year | [3] Assessment: N Households that e HOPWA Program; ti Status after E | xited this 1eir Housin | g [4] HOPWA Client Outcomes |
|-----------------------------|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------|----------------------------------------------------------|
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable, with Reduced Risk of Homelessness |
| | | | 3 Private Housing | | |
| Tenant-Based Rental | 10 | 10 | 4 Other HOPWA | | |
| Assistance | | | 5 Other Subsidy | | Stable/Permanent Housing (PH) |
| | | | 6 Institution | | |
| | | | 7 Jail/Prison | | |
| | | | 8 Disconnected/Unknown | | Unstable Arrangements |
| | | | 9 Death | | Life Event |
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable, with Reduced Risk of Homelessness |
| | | | 3 Private Housing | 5 | |
| Permanent Supportive | 71 | 56 | 4 Other HOPWA | 3 | |
| Housing | /1 | 50 | 5 Other Subsidy | 1 | Stable/Permanent Housing (PH) |
| Facilities/ Units | | | 6 Institution | | |
| | | | 7 Jail/Prison | | |
| | | | 8 Disconnected/Unknown | 3 | Unstable Arrangements |
| | | | 9 Death | 3 | Life Event |
| B. Transitional | Housing Assistance | 2 | | | |
| | [1] Output: Total Number of Households Served | [2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year | [3] Assessment: Nun Households that exit HOPWA Program; Housing Status after | ed this their | [4] HOPWA Client Outcomes |
| | | | 1 Emergency Shelter/Streets | | Unstable Arrangements |
| | | | 2 Temporary Housing | | Temporarily Stable with Reduced Risk of Homelessness |
| Transitional/ Short-Term | | | 3 Private Housing | | |
| Housing | | | 4 Other HOPWA | | |
| Facilities/ Units | | | 5 Other Subsidy | | Stable/Permanent Housing (PH) |
| | | | 6 Institution | | |
| | | | | | |
| | | | 7 Jail/Prison | | Unstable Arrangements |
| | | | 7 Jail/Prison 8 Disconnected/unknown | | Unstable Arrangements |

Section 2. Prevention of Homelessness: Assessment of Client Outcomes on Reduced Risks of Homelessness (Short-Term Housing Subsidy Assistance)

Report the total number of households that received STRMU assistance in Column [1].

In Column [2], identify the outcomes of the households reported in Column [1] either at the time that they were known to have left the STRMU program or through the project sponsor's best assessment for stability at the end of the operating year. Information in Column [3] provides a description of housing outcomes; therefore, data is not required. At the bottom of the chart:

- In Row 1a, report those households that received STRMU assistance during the operating year of this report, and the prior operating year.
- In Row 1b, report those households that received STRMU assistance during the operating year of this report, and the two prior operating years.

Data Check: The total households reported as served with STRMU in Column [1] equals the total reported in Part 3, Chart 1, Row 4, Column b.

Data Check: The sum of Column [2] should equal the number of households reported in Column [1].

| [1] Output: Total number of households | [2] Assessment of Housing Status | [3] HOPWA Client Outcomes |
|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| | Maintain Private Housing without subsidy (e.g. Assistance provided/completed and client is stable, not likely to seek additional support) | |
| | Other Private Housing without subsidy | |
| | (e.g. client switched housing units and is now stable, not likely to seek additional support) | Stable/Permanent Housing (PH) |
| | Other HOPWA Housing Subsidy Assistance | |
| | Other Housing Subsidy (PH) | |
| | Institution (e.g. residential and long-term care) | |
| | Likely that additional STRMU is needed to maintain current housing arrangements | |
| | Transitional Facilities/Short-term | Temporarily Stable, with |
| | (e.g. temporary or transitional arrangement) | Reduced Risk of Homelessness |
| | Temporary/Non-Permanent Housing arrangement | |
| | (e.g. gave up lease, and moved in with family or friends but expects to live there less than 90 days) | |
| | Emergency Shelter/street | |
| | Jail/Prison | Unstable Arrangements |
| | Disconnected | |
| | Death | Life Event |
| | ouseholds that received STRMU Assistance in the operating year of this re- ior operating year (e.g. households that received STRMU assistance in tw | |
| | ouseholds that received STRMU Assistance in the operating year of this re operating years (e.g. households that received STRMU assistance | |

Assessment of Households that Received STRMU Assistance

Section 3. HOPWA Outcomes on Access to Care and Support

1a. Total Number of Households

Line [1]: For project sponsors that provided HOPWA housing subsidy assistance during the operating year identify in the appropriate row the number of households that received HOPWA housing subsidy assistance (TBRA, STRMU, Facility-Based, PHP and Master Leasing) and HOPWA funded case management services. Use Row c to adjust for duplication among the service categories and Row d to provide an unduplicated household total.

Line [2]: For project sponsors that did <u>NOT</u> provide HOPWA housing subsidy assistance identify in the appropriate row the number of households that received HOPWA funded case management services.

Note: These numbers will help you to determine which clients to report Access to Care and Support Outcomes for and will be used by HUD as a basis for analyzing the percentage of households who demonstrated or maintained connections to care and support as identified in Chart 1b below.

| Total Number of | of Households | | | | |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|--|--|
| | 1. For Project Sponsors that provided HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following <u>HOPWA-funded</u> services: | | | | |
| a. | Housing Subsidy Assistance (duplicated)-TBRA, STRMU, PHP, Facility-Based Housing, and Master Leasing | 81 | | | |
| b. | Case Management | 81 | | | |
| с. | Adjustment for duplication (subtraction) | 81 | | | |
| d. | Total Households Served by Project Sponsors with Housing Subsidy Assistance (Sum of Rows a and b minus Row c) | 81 | | | |
| | For Project Sponsors did NOT provide HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following HOPWA-funded service: | | | | |
| a. | HOPWA Case Management | 31 | | | |
| b. | Total Households Served by Project Sponsors without Housing Subsidy Assistance | 31 | | | |

1b. Status of Households Accessing Care and Support

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report the number of households that demonstrated access or maintained connections to care and support within the operating year.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report the number of households that demonstrated improved access or maintained connections to care and support within the operating year.

Note: For information on types and sources of income and medical insurance/assistance, refer to Charts below.

| Categories of Services Accessed | [1] For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following: | [2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following: | Outcome Indicator |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| 1. Has a housing plan for maintaining or establishing stable on- going housing | 81 | 31 | Support for Stable Housing |
| 2. Had contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan (may include leveraged services such as Ryan White Medical Case Management) | 81 | 31 | Access to Support |
| 3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan | 81 | 31 | Access to Health Care |
| 4. Accessed and maintained medical insurance/assistance | 81 | 31 | Access to Health Care |
| 5. Successfully accessed or maintained qualification for sources of income | 81 | 31 | Sources of Income |

Chart 1b, Line 4: Sources of Medical Insurance and Assistance include, but are not limited to the following (Reference only)

| MEDICAID Health Insurance Program, or | Veterans Affairs Medical Services | |
|---------------------------------------|---------------------------------------------------------|---------------------------------------------------------|
| use local program | AIDS Drug Assistance Program (ADAP) | Ryan White-funded Medical or Dental |
| name | State Children's Health Insurance Program | Assistance |
| MEDICARE Health Insurance Program, or | (SCHIP), or use local program name | |
| use local program name | | |

Chart 1b, Row 5: Sources of Income include, but are not limited to the following (Reference only)

Child Support

•

- Earned Income
- Veteran's Pension
- Unemployment Insurance
- Pension from Former Job
- Supplemental Security Income (SSI)
- Social Security Disability Income (SSDI)
- Alimony or other Spousal Support
- Veteran's Disability Payment
- Retirement Income from Social Security
- Worker's Compensation
- General Assistance (GA), or use local program name
- Private Disability Insurance
- Temporary Assistance for Needy
- Families (TANF)
- Other Income Sources

1c. Households that Obtained Employment

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or related case management/counseling services.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or case management/counseling services.

Note: This includes jobs created by this project sponsor or obtained outside this agency.

Note: Do not include jobs that resulted from leveraged job training, employment assistance, education or case management/counseling services.

| Categories of Services Accessed | [1 For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following: | [2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following: |
|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Total number of households that obtained an income-producing job | 2 | 0 |

End of PART 4

PART 5: Worksheet - Determining Housing Stability Outcomes (optional)

1. This chart is designed to assess program results based on the information reported in Part 4 and to help Grantees determine overall program performance. Completion of this worksheet is optional.

| Permanent | Stable Housing | Temporary Housing | Unstable | Life Event |
|---------------------|----------------------|------------------------------------------|--------------|-------------|
| Housing Subsidy | (# of households | (2) | Arrangements | (9) |
| Assistance | remaining in program | | (1+7+8) | |
| | plus 3+4+5+6) | | | |
| Tenant-Based | | | | |
| Rental Assistance | | | | |
| (TBRA) | | | | |
| Permanent Facility- | | | | |
| based Housing | | | | |
| Assistance/Units | | | | |
| Transitional/Short- | | | | |
| Term Facility-based | | | | |
| Housing | | | | |
| Assistance/Units | | | | |
| Total Permanent | | | | |
| HOPWA Housing | | | | |
| Subsidy Assistance | | | | |
| Reduced Risk of | Stable/Permanent | Temporarily Stable, with Reduced Risk of | Unstable | Life Events |
| Homelessness: | Housing | Homelessness | Arrangements | Life Events |
| Short-Term | Housing | Homeressness | Arrangements | |
| Assistance | | | | |
| Short-Term Rent. | | | | |
| Mortgage, and | | | | |
| Utility Assistance | | | | |
| (STRMU) | | | | |
| Total HOPWA | | | 1 | |
| Housing Subsidy | | | | |
| | | | | |
| Assistance | | | | |

Background on HOPWA Housing Stability Codes Stable Permanent Housing/Ongoing Participation

3 = Private Housing in the private rental or home ownership market (without known subsidy, including permanent placement with families or other self-sufficient arrangements) with reasonable expectation that additional support is not needed.

- 4 = Other HOPWA-funded housing subsidy assistance (not STRMU), e.g. TBRA or Facility-Based Assistance.
- 5 = Other subsidized house or apartment (non-HOPWA sources, e.g., Section 8, HOME, public housing).
- 6 = Institutional setting with greater support and continued residence expected (e.g., residential or long-term care facility).

Temporary Housing

2 = Temporary housing - moved in with family/friends or other short-term arrangement, such as Ryan White subsidy, transitional housing for homeless, or temporary placement in institution (e.g., hospital, psychiatric hospital or other psychiatric facility, substance abuse treatment facility or detox center).

Unstable Arrangements

1 = Emergency shelter or no housing destination such as places not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station, or anywhere outside).

7 = Jail /prison.

8 = Disconnected or disappeared from project support, unknown destination or no assessments of housing needs were undertaken.

Life Event

9 = Death, i.e., remained in housing until death. This characteristic is not factored into the housing stability equation.

Tenant-based Rental Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as reported under: 3, 4, 5, and 6. <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item: 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Permanent Facility-Based Housing Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Temporary <u>Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Transitional/Short-Term Facility-Based Housing Assistance: <u>Stable Housing</u> is the sum of the number of households that (i) continue in the residences (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Other <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

Tenure Assessment. A baseline of households in transitional/short-term facilities for assessment purposes, indicate the number of households whose tenure exceeded 24 months.

STRMU Assistance: <u>Stable Housing</u> is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period and there is reasonable expectation that additional support is not needed in order to maintain permanent housing living situation (as this is a time-limited form of housing support) as reported under housing status: Maintain Private Housing with subsidy; Other Private with Subsidy; Other HOPWA support; Other Housing Subsidy; and Institution. <u>Temporarily Stable</u>, with Reduced Risk of Homelessness is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period or left their current housing arrangement for a transitional facility or other temporary/non-permanent housing arrangement and there is reasonable expectation additional support will be needed to maintain housing arrangements in the next year, as reported under housing status: Likely to maintain current housing arrangements, with additional STRMU assistance; Transitional Facilities/Short-term; and Temporary/Non-Permanent Housing arrangements <u>Unstable Situation</u> is the sum of number of households reported under housing status: Emergency Shelter; Jail/Prison; and Disconnected.

End of PART 5

PART 6: Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY)

The Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units is to be used in place of Part 7B of the CAPER if the facility was originally acquired, rehabilitated or constructed/developed in part with HOPWA funds but no HOPWA funds were expended during the operating year. Scattered site units may be grouped together on one page.

Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation are required to operate their facilities for HOPWA eligible individuals for at least ten (10) years. If non-substantial rehabilitation funds were used, they are required to operate for at least three (3) years. Stewardship begins once the facility is put into operation.

Note: See definition of Stewardship Units.

1. General information

| HUD Grant Number(s) | Operating Year for this reportFrom (mm/dd/yy) To (mm/dd/yy)□ Final | | |
|---------------------|--------------------------------------------------------------------|-----------------|--|
| | $\Box Yr 1; \Box Yr 2; \Box Yr 3; \Box Yr 4;$ | □ Yr 5; □ Yr 6; | |
| | □ Yr 7; □ Yr 8; □ Yr 9; □ Yr 10 | | |
| Grantee Name | Date Facility Began Operations (mm/dd/y | y) | |
| | | | |

2. Number of Units and Non-HOPWA Expenditures

| Facility Name: | Number of Stewardship Units Developed with HOPWA funds | Amount of Non-HOPWA Funds Expended in Support of the Stewardship Units during the Operating Year |
|-----------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Total Stewardship Units | | |
| (subject to 3- or 10- year use periods) | | |

3. Details of Project Site

| Project Sites: Name of HOPWA-funded project | |
|--------------------------------------------------|---------------------------------------------------------------------|
| Site Information: Project Zip Code(s) | |
| Site Information: Congressional District(s) | |
| Is the address of the project site confidential? | □ Yes, protect information; do not list |
| | □ Not confidential; information can be made available to the public |
| If the site is not confidential: | |
| Please provide the contact information, phone, | |
| email address/location, if business address is | |
| different from facility address | |

End of PART 6

Part 7: Summary Overview of Grant Activities A. Information on Individuals, Beneficiaries, and Households Receiving HOPWA Housing Subsidy Assistance (TBRA, STRMU, Facility-Based Units, Permanent Housing Placement and Master Leased Units ONLY)

Note: Reporting for this section should include ONLY those individuals, beneficiaries, or households that received and/or resided in a household that received HOPWA Housing Subsidy Assistance as reported in Part 3, Chart 1, Row 7, Column b. (e.g., do not include households that received HOPWA supportive services ONLY).

Section 1. HOPWA-Eligible Individuals Who Received HOPWA Housing Subsidy Assistance

a. Total HOPWA Eligible Individuals Living with HIV/AIDS

In Chart a., provide the total number of eligible (and unduplicated) <u>low-income individuals living with HIV/AIDS</u> who qualified their household to receive HOPWA housing subsidy assistance during the operating year. This total should include only the individual who qualified the household for HOPWA assistance, NOT all HIV positive individuals in the household.

| Individuals Served with Housing Subsidy Assistance | Total |
|----------------------------------------------------------------------------------------------------------------|-------|
| Number of individuals with HIV/AIDS who qualified their household to receive HOPWA housing subsidy assistance. | 81 |

Chart b. Prior Living Situation

In Chart b, report the prior living situations for all Eligible Individuals reported in Chart a. In Row 1, report the total number of individuals who continued to receive HOPWA housing subsidy assistance from the prior operating year into this operating year. In Rows 2 through 17, indicate the prior living arrangements for all new HOPWA housing subsidy assistance recipients during the operating year.

Data Check: The total number of eligible individuals served in Row 18 equals the total number of individuals served through housing subsidy assistance reported in Chart a above.

| | Category | Total HOPWA Eligible Individuals Receiving Housing Subsidy Assistance |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 1. | Continuing to receive HOPWA support from the prior operating year | 52 |
| New | Individuals who received HOPWA Housing Subsidy Assistance support during Operating Year | 1 |
| 2. | Place not meant for human habitation (such as a vehicle, abandoned building, bus/train/subway station/airport, or outside) | 8 |
| 3. | Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher) | 7 |
| 4. | Transitional housing for homeless persons | 1 |
| 5. | Total number of new Eligible Individuals who received HOPWA Housing Subsidy Assistance with a Prior Living Situation that meets HUD definition of homelessness (Sum of Rows 2 – 4) | 16 |
| 6. | Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod Rehab) | 3 |
| 7. | Psychiatric hospital or other psychiatric facility | |
| 8. | Substance abuse treatment facility or detox center | |
| 9. | Hospital (non-psychiatric facility) | |
| 10. | Foster care home or foster care group home | |
| 11. | Jail, prison or juvenile detention facility | |
| 12. | Rented room, apartment, or house | 3 |
| 13. | House you own | |
| 14. | Staying or living in someone else's (family and friends) room, apartment, or house | 7 |
| 15. | Hotel or motel paid for without emergency shelter voucher | |
| 16. | Other | |
| 17. | Don't Know or Refused | |
| 18. | TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17) | 62 |

c. Homeless Individual Summary

In Chart c, indicate the number of eligible individuals reported in Chart b, Row 5 as homeless who also are homeless Veterans and/or meet the definition for Chronically Homeless (See Definition section of CAPER). The totals in Chart c do <u>not</u> need to equal the total in Chart b, Row 5.

| Category | Number of Homeless Veteran(s) | Number of Chronically Homeless |
|----------------------------------------------------------------------------|-------------------------------------|-----------------------------------|
| HOPWA eligible individuals served with HOPWA Housing Subsidy Assistance | 2 | 14 |

Section 2. Beneficiaries

In Chart a, report the total number of HOPWA eligible individuals living with HIV/AIDS who received HOPWA housing subsidy assistance (*as reported in Part 7A, Section 1, Chart a*), and all associated members of their household who benefitted from receiving HOPWA housing subsidy assistance (resided with HOPWA eligible individuals).

Note: See definition of <u>HOPWA Eligible Individual</u>

Note: See definition of <u>Transgender</u>.

Note: See definition of <u>Beneficiaries</u>.

Data Check: The sum of <u>each</u> of the Charts b & c on the following two pages equals the total number of beneficiaries served with HOPWA housing subsidy assistance as determined in Chart a, Row 4 below.

a. Total Number of Beneficiaries Served with HOPWA Housing Subsidy Assistance

| Individuals and Families Served with HOPWA Housing Subsidy Assistance | Total Number |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1. Number of individuals with HIV/AIDS who qualified the household to receive HOPWA housing subsidy assistance (equals the number of HOPWA Eligible Individuals reported in Part 7A, Section 1, Chart a) | 81 |
| 2. Number of ALL other persons diagnosed as HIV positive who reside with the HOPWA eligible individuals identified in Row 1 and who benefitted from the HOPWA housing subsidy assistance | |
| 3. Number of ALL other persons NOT diagnosed as HIV positive who reside with the HOPWA eligible individual identified in Row 1 and who benefited from the HOPWA housing subsidy | 4 |
| 4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1, 2, & 3) | 85 |

b. Age and Gender

In Chart b, indicate the Age and Gender of all beneficiaries as reported in Chart a directly above. Report the Age and Gender of all HOPWA Eligible Individuals (those reported in Chart a, Row 1) using Rows 1-5 below and the Age and Gender of all other beneficiaries (those reported in Chart a, Rows 2 and 3) using Rows 6-10 below. The number of individuals reported in Row 11, Column E. equals the total number of beneficiaries reported in Part 7, Section 2, Chart a, Row 4.

| | HOPWA Eligible Individuals (Chart a, Row 1) | | | | | | | |
|-----|---------------------------------------------|------|-------------------|-------------------------|--------------------|-------------------------------|--|--|
| | | А. | B. | С. | D. | Е. | | |
| | | Male | Female | Transgender M to F | Transgender F to M | TOTAL (Sum of Columns A-D) | | |
| 1. | Under 18 | 0 | 0 | | | Ο | | |
| 2. | 18 to 30 years | 9 | 0 | | | 9 | | |
| 3. | 31 to 50 years | 26 | 7 | | | 33 | | |
| 4. | 51 years and Older | 34 | 5 | | | 39 | | |
| 5. | Subtotal (Sum of Rows 1-4) | 69 | 12 | | | 81 | | |
| | | A | ll Other Benefici | aries (Chart a, Rows 2 | and 3) | | | |
| | | А. | В. | С. | D. | Е. | | |
| | | Male | Female | Transgender M to F | Transgender F to M | TOTAL (Sum of Columns A-D) | | |
| 6. | Under 18 | 0 | 1 | | | 1 | | |
| 7. | 18 to 30 years | 0 | 0 | | | | | |
| 8. | 31 to 50 years | 1 | 1 | | | 2 | | |
| 9. | 51 years and Older | 1 | Ø | | | 1 | | |
| 10. | Subtotal (Sum of Rows 6-9) | 2 | 2 | | | 4 | | |
| | 1 | | Total Benefic | ciaries (Chart a, Row 4 |) | | | |
| 11. | TOTAL (Sum of Rows 5 & 10) | 71 | 14 | | | 85 | | |

c. Race and Ethnicity*

In Chart c, indicate the Race and Ethnicity of all beneficiaries receiving HOPWA Housing Subsidy Assistance as reported in Section 2, Chart a, Row 4. Report the <u>race</u> of all HOPWA eligible individuals in Column [A]. Report the <u>ethnicity</u> of all HOPWA eligible individuals in column [B]. Report the <u>race</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [C]. Report the <u>ethnicity</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [D]. The summed total of columns [A] and [C] equals the total number of beneficiaries reported above in Section 2, Chart a, Row 4.

| Category | | HOPWA Eligi | ble Individuals | All Other Beneficiaries | | |
|----------|------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------|--|
| | | [A] Race [all individuals reported in Section 2, Chart a, Row 1] | [B] Ethnicity [Also identified as Hispanic or Latino] | [C] Race [total of individuals reported in Section 2, Chart a, Rows 2 & 3] | [D] Ethnicity [Also identified as Hispanic or Latino] | |
| 1. | American Indian/Alaskan Native | | | | | |
| 2. | Asian | | | | | |
| 3. | Black/African American | 40 | | 4 | | |
| 4. | Native Hawaiian/Other Pacific Islander | | | | | |
| 5. | White | 40 | 2 | | | |
| 6. | American Indian/Alaskan Native & White | | | | | |
| 7. | Asian & White | | | | | |
| 8. | Black/African American & White | | | | | |
| 9. | American Indian/Alaskan Native & Black/African American | | | | | |
| 10. | Other Multi-Racial | 1 | | | | |
| 11. | Column Totals (Sum of Rows 1-10) | 81 | 2 | 4 | 0 | |
| Chart | Check: Sum of Row 11 Column A and Row 11 Co t a, Row 4. | - | - | iciaries reported in Par | t 3A, Section 2, | |

*Reference (data requested consistent with Form HUD-27061 Race and Ethnic Data Reporting Form)

Section 3. Households

Household Area Median Income

Report the income(s) for all households served with HOPWA housing subsidy assistance.

Data Check: The total number of households served with HOPWA housing subsidy assistance should equal Part 3C, Row 7, Column b and Part 7A, Section 1, Chart a. (Total HOPWA Eligible Individuals Served with HOPWA Housing Subsidy Assistance).

Note: Refer to <u>*https://www.huduser.gov/portal/datasets/il.html</u> for information on area median income in your community.*</u>

| | Percentage of Area Median Income | Households Served with HOPWA Housing Subsidy Assistance |
|----|---------------------------------------------|------------------------------------------------------------|
| 1. | 0-30% of area median income (extremely low) | 72 |
| 2. | 31-50% of area median income (very low) | 8 |
| 3. | 51-80% of area median income (low) | 1 |
| 4. | Total (Sum of Rows 1-3) | 81 |

Part 7: Summary Overview of Grant Activities B. Facility-Based Housing Assistance

Complete one Part 7B for each facility developed or supported through HOPWA funds.

Do not complete this Section for programs originally developed with HOPWA funds but no longer supported with

HOPWA funds. If a facility was developed with HOPWA funds (subject to ten years of operation for acquisition, new construction and substantial rehabilitation costs of stewardship units, or three years for non-substantial rehabilitation costs), but HOPWA funds are no longer used to support the facility, the project sponsor should complete Part 6: Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY).

Complete Charts 2a, Project Site Information, and 2b, Type of HOPWA Capital Development Project Units, for all Development Projects, including facilities that were past development projects, but continued to receive HOPWA operating dollars this reporting year.

1. Project Sponsor Agency Name (Required)

2. Capital Development

2a. Project Site Information for HOPWA Capital Development of Projects (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this reporting year)

Note: If units are scattered-sites, report on them as a group and under type of Facility write "Scattered Sites."

| Type of Development this operating year | | HOPWA Funds Expended this operating year (<i>if applicable</i>) | Non-HOPWA funds Expended (if applicable) | Name of Facility: | |
|--------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--|
| □ Ne | w construction | \$ | \$ | Type of Facility [Check <u>only one</u> box.] | |
| □ Rehabilitation | | \$ | \$ | Permanent housing Short-term Shelter or Transitional housing | |
| | | \$ | \$ | □ Supportive services only facility | |
| □ Operating | | \$ | \$ | | |
| a. | Purchase/lease of property: | | | Date (mm/dd/yy): | |
| b. | Rehabilitation/Construction Dates: | | | Date started: Date Completed: | |
| с. | Operation dates: | | | Date residents began to occupy: | |
| d. | Date supportive services began: | | | Date started: | |
| e. | Number of units | in the facility: | | HOPWA-funded units = Total Units = | |
| f. | f. Is a waiting list maintained for the facility? | | ? | ☐ Yes ☐ No If yes, number of participants on the list at the end of operating year | |
| g. | g. What is the address of the facility (if different from business address)? | | ent from business address)? | | |
| h. | Is the address of | the project site confidenti | al? | Yes, protect information; do not publish list No, can be made available to the public | |

2b. Number and Type of HOPWA Capital Development Project Units (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this Reporting Year)

For units entered above in 2a, please list the number of HOPWA units that fulfill the following criteria:

| | Number Designated for the Chronically Homeless | Number Designated to Assist the Homeless | Number Energy- Star Compliant | Number 504 Accessible |
|---------------------------|------------------------------------------------------|---------------------------------------------------|----------------------------------|-----------------------|
| Rental units constructed | | | | |
| (new) and/or acquired | | | | |
| with or without rehab | | | | |
| | | | | |
| Rental units rehabbed | | | | |
| | | | | |
| Homeownership units | | | | |
| constructed (if approved) | | | | |
| | | | | |

3. Units Assisted in Types of Housing Facility/Units Leased by Project Sponsor

<u>Charts 3a, 3b, and 4 are required for each facility</u>. In Charts 3a and 3b, indicate the type and number of housing units in the facility, including master leased units, project-based or other scattered site units leased by the organization, categorized by the number of bedrooms per unit.

Note: The number units may not equal the total number of households served.

Please complete separate charts for each housing facility assisted. Scattered site units may be grouped together.

3a. Check one only

Permanent Supportive Housing Facility/Units

Short-term Shelter or Transitional Supportive Housing Facility/Units

3b. Type of Facility

Complete the following Chart for all facilities leased, master leased, project-based, or operated with HOPWA funds during the reporting year.

Name of Project Sponsor/Agency Operating the Facility/Leased Units:

| Type of housing facility operated by the | | Total Number of <u>Units</u> in use during the Operating Year Categorized by the Number of Bedrooms per Units | | | | | | |
|------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------|--------|--------|--------|--------|--|
| project sponsor | | SRO/Studio/0 bdrm | 1 bdrm | 2 bdrm | 3 bdrm | 4 bdrm | 5+bdrm | |
| a. | Single room occupancy dwelling | | | | | | | |
| b. | Community residence | | | | | | | |
| c. | Project-based rental assistance units or leased units | | | | | | | |
| d. | Other housing facility Specify: | | | | | | | |

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor on subsidies for housing involving the use of facilities, master leased units, project based or other scattered site units leased by the organization.

| | Housing Assistance Category: Facility Based Housing | Output: Number of Households | Output: Total HOPWA Funds Expended during Operating Year by Project Sponsor |
|---|-------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------|
| a | Leasing Costs | | |
| b | Operating Costs | | |
| с | Project-Based Rental Assistance (PBRA) or other leased units | | |
| d | Other Activity (if approved in grant agreement) Specify: | | |
| e | Adjustment to eliminate duplication (subtract) | | |
| f | TOTAL Facility-Based Housing Assistance (Sum Rows a through d minus Row e) | | |

City of Fort Worth Section 108 Financial Report for 19-20 CAPER Financial

Grant #: B-97-MC-48-0010

| Activity Title | 3 rd Party Borrower, if applicable | Loan Amount | Payments Rec | d from Borrower | Balance Owed | Status | | | Sources of Pa | ayments to HUD | | | Outstanding Balance - HUD |
|-------------------------|--------------------------------------------------|----------------|---------------------|----------------------|--------------|--------------------------------|-----------|------------|---------------|----------------|------------|--------------|------------------------------|
| | | | This Year Principal | Cumulative Principal | | (e.g., on-time; late; default) | CE | DBG | Payments f | rom Borrower | Other Sour | ce (specify) | |
| | | | | | | | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | |
| Mercado de Fort Worth | Casa Jose | \$178,556.00 | \$0.00 | \$178,556.00 | \$0.00 | Paid in Full | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |
| Mercado de Fort Worth | Hispanic Chamber | \$270,110.00 | \$0.00 | \$270,110.00 | \$0.00 | Paid in Full | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |
| Mercado de Fort Worth | Muholland | \$1,000,000.00 | \$0.00 | \$1,000,000.00 | \$0.00 | Paid in Full | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |
| Mercado de Fort Worth | FW SER | \$208,000.00 | \$0.00 | \$208,000.00 | \$0.00 | Paid in Full | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |
| Mercado de Fort Worth | Cordova | \$211,037.00 | \$0.00 | \$211,037.00 | \$0.00 | Paid in Full | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |
| Mercado de Fort Worth | *Mercado, Inc. (Deyla Guadiana) | \$3,132,297.00 | \$0.00 | \$2,501,000.00 | \$631,297.00 | Default | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |
| **Mercado de Fort Worth | | \$700,000.00 | \$0.00 | \$700,000.00 | \$0.00 | Paid in Full | \$0 | \$0 | \$0 |) \$(| \$0 | \$0 | \$0 |

*Loan closed October 28, 2002. Developer lost financing and contract has been assigned to City to complete the project.

**City requested \$700K from Mercado Section 108 Loan Repayment Account for specifically approved project purposes during past reporting period. This total is not in the \$5,000,000 total.

Grant #:

B-97-MC-48-0010

| Activity Title | 3rd Party Borrower, if | Loan Amount | Payments Rec'd from Borrower | | Balance Owed | Status | Sources of Principal Payments to HUD | | | | | | | | |
|-----------------------|------------------------|-------------|------------------------------|-------------------|--------------|--------------------------------|--------------------------------------|--------------|---------------------------------------------------|------------|-----------------------------|----------------|--------------|---------------|--|
| | applicable | | This Year | Cumulative | | (e.g., on-time; late; default) | CDBG | | default) CDBG Payments from Borrower Other Source | | CDBG Payments from Borrower | | ce (specify) | Balance - HUD | |
| | | | | | | | | | | | Loan repaym | nent account | | | |
| | | | | | | | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | | | |
| Mercado de Fort Worth | | \$5,000,000 | \$0.00 | ***\$4,368,703.00 | \$631,297.00 | See above | \$0 | 1,695,000.00 | \$0 | \$0 | \$0.00 | \$3,305,000.00 | \$- | | |

*** \$2.5 million from the sale of facility (Mercado) was deposited in the loan repayment account (Wells Fargo) on 1-26-2006. The account also includes accumulative payments from borrowers. Loan has been paid off. Loan amounts in first table equal \$5,000,000

Grant #: B-99-MC-48-0010

| Activity Title | 3rd Party Borrower, if | Loan Amount | Payments Rec'o | d from Borrower | Balance Owed | Status | Sour | | ources of Principa | | Outstanding | | |
|------------------------|------------------------|-------------|----------------|-----------------|--------------|--------------------------------|--------------|----------------|--------------------|-------------|-------------|--------------|---------------|
| | applicable | | This Year | Cumulative | | (e.g., on-time; late; default) | CDBG | | Payments fr | om Borrower | Other Sour | ce (specify) | Balance - HUD |
| | | | | | | | | | | | | | |
| | | | | | | | This Year | Cumulative | This Year | Cumulative | This Year | Cumulative | 4 |
| | | | | | | | TTII3 TEdi | Cumulative | 11113 1 641 | Cumulative | | Cumulative | |
| Evans/Rosedale Project | | \$7,500,000 | ¢0 | ¢0 | ¢ | Paid in Full | \$702.000.00 | \$7 E00 000 00 | ¢o | ¢o | ¢o | ¢ | ¢0.00 |
| Evans/Rosedale Project | | \$7,500,000 | \$0 | \$0 | \$U | Paid in Full | \$702,000.00 | \$7,500,000.00 | \$0 | \$0 | \$U | \$U | \$0.00 |

Section 108 Accomplishments Report

Program Year: 2018-2019

| | | PROJECT DES | CRIPTION | | | CDBG \$ | | | ELIGIBLE ACTIVITY | | IONAL ECTIVE | | J | OBS | | | | HOUSING | G | LMA | LMC | SBA | SBS |
|-----------------------|---------|-----------------------|-------------------------------------------------------------------|--------------------|-----------------|---------------|----------------------|--------------------------------|------------------------------------------------|-----------------------------------|------------------------------------------------------------|---------------------------------------------|----------------------------------------|-----------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------------|------|--------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------|----------|----------------|----------------------------------|
| Grantee Name | ST | Project Number | Project Name | 108 Loan Amount | EDI AMT | BEDI AMT | Other CDBG \$s | Total CDBG \$ Assistance | HUD Matrix Code for Eligible Activity | HUD N.O. Matri x Code | Indicate if N.O. Has Been Met Y=Yes N=No | FTE Jobs Propose d in 108 Appl. | Total Actual FTE Jobs Created | Number Held by/ Made Available to Low/ Mod | Percent Held by/ Made Available to Low/ Mod | Presumed Low/ Mod Benefit (P) or Rev. Strategy Area (RSA) | | Number of Units Occupied by Low/ Mod Household s | Percent of Units Occupied by Low/Mod Household s | Percent Low/ Mod in Service Area | Clientel | Blight Area | Slum/ Blight Spot Y=Yes |
| City of Fort | | | (Fort Worth Mercado I) Mercado | | | | | | | | | | | 3 reported in | | | | | | | | | |
| Worth | ТХ | B-97-MC-48-0010 | de Fort Worth (Fort Worth Mercado I) Mercado | \$ 3,132,297 | | | | \$ 3,132,297 | 18A | LMJ | N | 109 | n/a ** | prior PY | 100% | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a |
| City of Fort Worth | тх | B-97-MC-48-0010 | de Fort Worth Mercado I) Mercado | | \$ 1,000,000 | | | \$ 1,000,000 | 17C | ТМА | v | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a | 74% | n/a | n/a | n/a |
| City of Fort | 17 | D 37 WO 40 0010 | (Fort Worth Mercado I) Mercado | | \$ 1,000,000 | | | \$ 1,000,000 | 1/0 | LINIA | | Π¢ά | Ind | 174 | n/a | Π/a | Π/a | Π/a | 174 | 7470 | TI/ Ci | 174 | Π/G |
| Worth | ΤX | B-97-MC-48-0010 | de Fort Worth-Hispanic Chamber | \$ 270,110 | L | | | \$ 270,110 | 03 | LMA | Y | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a | 74% | n/a | n/a | n/a |
| City of Fort | TV | D 07 MO 40 0010 | (Fort Worth Mercado I) Mercado | \$ 208.000 | | | | \$ 208.000 | 03 | I MA | v | - /- | | - (- | - (- | - (- | - /- | - (- | - (- | 74% | n/a | - 1- | - (- |
| Worth City of Fort | IX | B-97-MC-48-0010 | de Fort Worth-Fort Worth SER (Fort Worth Mercado I) Mercado | \$ 208,000 | | | | \$ 208,000 | 03 | LMA | Ŷ | n/a | n/a | n/a 114.5 | n/a | n/a | n/a | n/a | n/a | /4% | n/a | n/a | n/a |
| Worth | тх | B-97-MC-48-0010 | de Fort Worth-Mulholland | \$ 1.000.000 | | | | \$ 1,000,000 | 18A | LMJ | Y | 75 | n/a | reported in | 100% | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a |
| City of Fort | 17 | B 01 10 10 0010 | (Fort Worth Mercado I) Mercado | • 1,000,000 | | | | • 1,000,000 | 10/1 | Line | | 10 | Tir Ca | 5.5 re;orted in | 10070 | n/d | 100 | Tir Ci | 170 | n/ d | TIV CA | TV CA | 1.70 |
| Worth | TX | B-97-MC-48-0010 | de Fort Worth-Cordova | \$ 211,037 | | | | \$ 211,037 | 18A | LMJ | Y | 5.5 | n/a | prior PY | 100% | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a |
| City of Fort | | | (Fort Worth Mercado I) Mercado | | | | | | | | | | | 5 reported in | | | | | | | | | |
| Worth City of Fort | TX | B-97-MC-48-0010 | de Fort Worth-Casa Jose Evans/Rosedale Project - | \$ 178,556 | | | | \$ 178,556 | 18A | LMJ | Y | 5 | na | prior PY | 100% | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a |
| Worth | тх | B-99-MC-48-0010 | Shamblee Library | \$ 4,969,131 | | | | \$ 4 969 131 | 03E | ТМА | v | n/a* | n/a | n/a | n/a | n/a | n/a | n/a | n/a | 69% | n/a | n/a | n/a |
| City of Fort | 10 | D-33-INC-48-0010 | Evans/Rosedale Project - | \$ 4,505,151 | | | | 9 4,303,131 | 032 | LINIA | | 11/a | 1va | Iva | 11/d | 11/d | Π¢α | 11/d | n/a | 0378 | n/a | IVa | 11/a |
| Worth | ТХ | B-99-MC-48-0010 | UCC Bethlehem | \$ 2,530,869 | \$ 1,500,000 | | | \$ 4,030,869 | 03E | LMA | Y | n/a* | n/a | n/a | n/a | n/a | n/a | n/a | n/a | 69% | n/a | n/a | n/a |
| *An Amended Se | ection | 108 Application was s | ubmitted by the City on 3/23/11. The | e amended appl | ication does no | t require any | | | | | | | | | | | | | | | | | |
| jobs for the spec | ified a | ctivities. HUD approv | ed the amended document in their le arrative for Low/Mod Jobs. | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| ** Loan is being | paid fr | om Non-CDBG source | es since loan did not meet National C | Objective | | | | | | | | | | | | | | | | | | | $\vdash \neg$ |
| | | | | 1 | 1 | | | | | | | | | | | | | | | | <u> </u> | | ├── ┦ |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | ļ | ļ | | | | | | | | | | | ļ | | | ļ | | ļ | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| TOTALS | | | | \$ 12,500,000 | \$ 2,500,000 | \$- | \$- | \$ 15,000,000 | | | | 195 | 0 | 128 | | | 0 | 0 | N/A | N/A | | | |
| Notes: See Attac | ched G | luidance | (1) & (2) | | | | | | (3) | (4) | | (5) | (6) | (7) | (8) | (8) | (9) | | | (8) | | | |

HOME MATCH LOG FY 2019 - 2020

| Project Number (1) | Date Project Committed (2) | Project Address (3) | Project Type (4) | HOME Funds Expended (5) | Date HOME \$ Expended (6) | Amount of Match Liability Incurred (7) | Value of Match Contribution (8) | Type of Match (9) | Date Match Recognized (10) | Balar | nce After MATCH Applied |
|--------------------------|----------------------------------|--------------------------------------------------------------|------------------------|-------------------------------|---------------------------------|----------------------------------------------|---------------------------------------|------------------------------------|----------------------------------|---------|----------------------------|
| | | Balance from L/Y | | | | | | | | | 566,435.6 |
| | | , | | | | - | 30,220.00 | Cash - General Fund-Beaty | 1/8/2020 | ¢ | 596,655.6 |
| | | | | | | | 447,353.00 | Cash - GF-For HAPs | VARIOUS | \$ ¢ | 1,044,008.6 |
| | | | | | | | 1,165,949.75 | PV of Yield forgone -Habitat Loans | VARIOUS | \$ ¢ | 2,209,958.4 |
| 6007 | 08/09/11 | Beaty Street project | | \$3,605.00 | 01/29/2020 | ¢001.25 | 1,105,949.75 | PV of Tield forgone -Habitat Loans | | \$ | 2,209,958.2 |
| 7212 | 06/27/18 | | | \$3,603.00 | 07/28/2020 | \$901.25 \$625.00 | | | | \$ | 2,209,037.1 |
| 7212 | 10/04/18 | Sphinx at Sierra Vista Mistletoe-1916 Mistletoe Boulevard | | \$2,500.00 | 10/24/2019 | \$7,000.00 | | | | \$ | 2,208,432. |
| 7221 | 10/04/18 | Mistletoe-1916 Mistletoe Boulevard | | \$100,000.00 | 05/13/2020 | \$7,000.00 | | | | \$ | 2,201,432. |
| 7221 | 10/04/18 | 3600 Eagle Nest St | | \$100,000.00 | 10/24/2019 | \$13,986.79 | | | | \$ | 2,162,445. |
| 7223 | 10/03/18 | | | \$2,807.62 | 10/24/2019 | \$13,980.79 | | | | - D | 2,161,743. |
| 7223 | 10/03/18 | 3600 Eagle Nest St | | \$2,807.62 | 10/24/2019 | \$2,775.88 | | | | \$ | 2,158,967. |
| 7224 | | 3608 Eagle Nest St | | \$48,300.69 | 10/24/2019 | | | | | \$ | |
| 7225 | 10/03/18 | 3617 Eagle Nest St | | \$16,056.39 | 10/23/2019 | \$12,075.17 | | | | \$ | 2,146,892. 2,142,878. |
| 7225 | 10/03/18 10/03/18 | 3617 Eagle Nest St | | \$10,036.39 | 10/23/2019 | \$4,014.10 \$312.07 | | | | \$ | 2,142,878. |
| 7225 | 10/03/18 | 3617 Eagle Nest St | | \$1,248.28 | 10/31/2019 | \$353.97 | | | | \$ | |
| 7225 | | 3617 Eagle Nest St | | \$1,413.88 | 10/31/2019 | | | | | \$ | 2,142,212 |
| 7226 | 10/03/18 | 3625 Eagle Nest St | | | 10/31/2019 | \$6,390.71 | | | | \$ | 2,135,821 |
| 7226 | 10/03/18 | 3625 Eagle Nest St | | \$23,971.96 \$19,619.00 | 10/31/2019 | \$5,992.99 | | | | \$ | 2,129,828 |
| | 10/03/18 | 3625 Eagle Nest St | | | | \$4,904.75 | | | | \$ | 2,124,923 |
| 7227 | 10/03/18 | 3649 Eagle Nest St | | \$48,020.92 | 10/24/2019 | \$12,005.23 | | | | \$ | 2,112,918 |
| 7227 | 10/03/18 | 3649 Eagle Nest St | | \$1,529.80 | 10/31/2019 | \$382.45 | | | | \$ | 2,112,536 |
| 7227 | 10/03/18 | 3649 Eagle Nest St | | \$1,115.43 | 10/31/2019 | \$278.86 | | | | \$ | 2,112,257 |
| 7227 | 10/03/18 | 3649 Eagle Nest St | | \$1,000.00 | 10/11/2019 | \$250.00 | | | | \$ | 2,112,007 |
| 7228 | 10/03/18 | 3601 Hardy St | | \$47,881.34 | 10/24/2019 | \$11,970.34 | | | | \$ | 2,100,036 |
| 7228 | 10/03/18 | 3601 Hardy St | | \$3,662.04 | 10/24/2019 | \$915.51 | | | | \$ | 2,099,121 |
| 7228 | 10/03/18 | 3601 Hardy St | | \$2,276.71 | 01/09/2020 | \$569.18 | | | | \$ | 2,098,552 |
| 7334 | 08/07/19 | 1313 New York Ave | | \$20,000.00 | 10/31/2019 | \$5,000.00 | | | | \$ | 2,093,552 |
| 7336 | 08/07/19 | 1320 New York Ave | | \$1,000.00 | 10/11/2019 | \$250.00 | | | | \$ | 2,093,302 |
| 7337 | 08/08/19 | 1401 New York Ave | | \$1,000.00 | 10/11/2019 | \$250.00 | | | | \$ | 2,093,052 |
| 7338 | 08/08/19 | 616 NW 26th St | | \$19,750.00 | 10/31/2019 | \$4,937.50 | | | | \$ | 2,088,114 |
| 7345 | 09/17/19 | 3501 Cayman Dr | | \$19,959.00 | 10/31/2019 | \$4,989.75 | | | | \$ | 2,083,125 |
| 7346 | 09/17/19 | 1420 Driess St | | \$20,000.00 | 11/16/2019 | \$5,000.00 | | | | \$ | 2,078,125 |
| 7347 | 09/17/19 | 1428 Driess St | | \$20,000.00 | 11/16/2019 | \$5,000.00 | | | | \$ | 2,073,125 |
| 7348 | 09/18/19 | 1418 Driess St | | \$20,000.00 | 11/16/2019 | \$5,000.00 | | | | \$ | 2,068,125 |
| 7350 | 09/18/19 | 9301 Castorian Dr | | \$19,995.00 | 10/31/2019 | \$4,998.75 | | | | \$ | 2,063,126 |
| 7354 | 09/26/19 | Columbia II at 3801 W Daniels Dr | | \$550,000.00 | 09/09/2020 | \$137,500.00 | | | | \$ | 1,925,626 |
| 7355 | 09/26/19 | 217 Paradise Street | | \$17,543.69 | 12/10/2019 | \$4,385.92 | | | | \$ | 1,921,240 |
| 7355 | 09/26/19 | 217 Paradise Street | | \$16,286.31 | 12/10/2019 | \$4,071.58 | | | | \$ | 1,917,168 |
| 7355 | 09/26/19 | 217 Paradise Street | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,916,918 |
| 7356 | 09/26/19 | 1003 Baurline Street | | \$34,670.00 | 12/11/2019 | \$8,667.50 | | | | \$ | 1,908,251 |
| 7356 | 09/26/19 | 1003 Baurline Street | | \$4,808.71 | 09/30/2020 | \$1,202.18 | | | | \$ | 1,907,049 |
| 7357 | 09/26/19 | 2612 LaSalle Street | | \$34,160.00 | 12/11/2019 | \$8,540.00 | | | | \$ | 1,898,509 |
| 7357 | 09/26/19 | 2612 LaSalle Street | | \$5,621.86 | 09/30/2020 | \$1,405.47 | | | | \$ | 1,897,103 |
| 7357 | 09/26/19 | 2612 LaSalle Street | | \$13,906.32 | 09/30/2020 | \$3,476.58 | | | | \$ | 1,893,627 |
| 7358 | 09/26/19 | 2614 LaSalle Street | | \$34,820.00 | 12/11/2019 | \$8,705.00 | | | | \$ | 1,884,922 |
| 7358 | 09/26/19 | 2614 LaSalle Street | | \$4,703.49 | 09/30/2020 | \$1,175.87 | | | | \$ | 1,883,746 |
| 7358 | 09/26/19 | 2614 LaSalle Street | | \$1,000.00 | 06/16/2020 | \$250.00 | | | | \$ | 1,883,496 |
| 7359 | 09/26/19 | 2712 LaSalle Street | | \$34,160.00 | 12/11/2019 | \$8,540.00 | | | | \$ | 1,874,956 |
| 7359 | 09/26/19 | 2712 LaSalle Street | | \$5,778.63 | 09/30/2020 | \$1,444.66 | | | | \$ | 1,873,511 |
| 7360 | 09/26/19 | 10429 Pleasant Mound Dr | | \$11,240.00 | 11/16/2019 | \$2,810.00 | | | | \$ | 1,870,701 |
| 7361 | 09/26/19 | 9913 Hunterville Trail | | \$14,516.00 | 10/31/2019 | \$3,629.00 | | | | \$ | 1,867,072 |
| 7364 | 10/02/19 | 7617 Whirlwind Dr | | \$14,930.00 | 10/31/2019 | \$3,732.50 | | | | \$ | 1,863,340 |

| Project | Date Project | Project Address | Project | HOME Funds | Date HOME \$ | Amount of Match | Value of Match | Type of Match | Date Match | Bala | nce After MATCH |
|---------|--------------|------------------------------|------------|-----------------|--------------|--------------------|-----------------|---------------|------------|---------|-----------------|
| Number | Committed | (3) | Туре | Expended | Expended | Liability Incurred | Contribution | (9) | Recognized | | Applied |
| (1) | (2) | | (4) | (5) | (6) | (7) | (8) | | (10) | | |
| 7365 | 10/09/19 | 3129 Guyana Rd | | \$1,000.00 | 12/17/2019 | \$250.00 | | | | \$ | 1,863,090.00 |
| 7366 | 10/17/19 | 5504 Van Natta | | \$1,000.00 | 12/17/2019 | \$250.00 | | | | \$ | 1.862.840.00 |
| 7367 | 10/17/19 | 1326 New York Ave | | \$2,053.18 | 01/09/2020 | \$513.30 | | | | \$ | 1,862,326.71 |
| 7368 | 10/18/19 | 10437 Phantom Hill Rd | | \$14,999.00 | 01/03/2020 | \$3,749.75 | | | | \$ | 1,858,576.96 |
| 7371 | 10/29/19 | 3305 Tobago | | \$14,982.00 | 01/03/2020 | \$3,745.50 | | | | \$ | 1,854,831.46 |
| 7396 | 11/08/19 | 5420 E. Roselane St | | \$13,999.00 | 02/04/2020 | \$3,499.75 | | | | \$ | 1,851,331.71 |
| 7424 | 12/23/19 | 1320 Linerick Dr | | \$4,001.00 | 02/04/2020 | \$1.000.25 | | | | \$ | 1,850,331.46 |
| 7429 | 01/31/20 | 5733 Whiteley Rd | | \$1,000.00 | 03/18/2020 | \$250.00 | | | | \$ | 1,850,081.46 |
| 7429 | 03/06/20 | 4405 Erath St | | \$13,690.00 | 06/06/2020 | \$3,422.50 | | | | \$ | 1,846,658.96 |
| 7434 | 03/17/20 | 5421 Wellesley Ave | | \$13,090.00 | 04/22/2020 | \$250.00 | | | | э \$ | / / |
| | 03/23/20 | | | | | | | | | Ŧ | 1,846,408.96 |
| 7436 | | 5332 Humbert Ave | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,846,158.96 |
| 7438 | 03/30/20 | 5429 Helmick Ave | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,845,908.96 |
| 7439 | 04/02/20 | 4413 Fairfax Dr | | \$1,000.00 | 05/30/2020 | \$250.00 | | | - | \$ | 1,845,658.96 |
| 7443 | 04/13/20 | 4613 Emerson | | \$1,000.00 | 05/30/2020 | \$250.00 | | | | \$ | 1,845,408.96 |
| 7444 | 04/14/20 | 3140 Montego Bay | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,845,158.96 |
| 7445 | 04/20/20 | 3838 6th ave | | \$1,000.00 | 06/20/2020 | \$250.00 | | | _ | \$ | 1,844,908.96 |
| 7446 | 04/23/20 | 5520 Humbert Ave | | \$1,000.00 | 06/06/2020 | \$250.00 | | | - | \$ | 1,844,658.96 |
| 7447 | 04/23/20 | 5337 Humbert Ave | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,844,408.96 |
| 7448 | 04/23/20 | 2605 Woodlark Dr | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,844,158.96 |
| 7449 | 04/24/20 | 9204 Castorian Dr | | \$1,000.00 | 06/20/2020 | \$250.00 | | | | \$ | 1,843,908.96 |
| 7450 | 04/13/20 | 5325 Humbert | | \$1,000.00 | 06/06/2020 | \$250.00 | | | | \$ | 1,843,658.96 |
| 7451 | 05/11/20 | 5415 Helmick Ave | | \$1,000.00 | 07/11/2020 | \$250.00 | | | | \$ | 1,843,408.96 |
| 7452 | 05/12/20 | 5832 Japonica | | \$1,000.00 | 09/24/2020 | \$250.00 | | | | \$ | 1,843,158.96 |
| 7453 | 04/07/20 | 1210 E. Arlington Ave | | \$1,000.00 | 06/20/2020 | \$250.00 | | | | \$ | 1,842,908.96 |
| 7454 | 05/14/20 | 2808 NW 16th st | | \$1,000.00 | 08/20/2020 | \$250.00 | | | | \$ | 1,842,658.96 |
| 7455 | 05/14/20 | 6528 Trident Trl | | \$1,000.00 | 07/28/2020 | \$250.00 | | | | \$ | 1,842,408.96 |
| 7456 | 05/14/20 | 5411 Helmick Ave | | \$1,000.00 | 07/11/2020 | \$250.00 | | | | \$ | 1,842,158.96 |
| 7457 | 05/14/20 | 5420 Blackmoore Ave | | \$1,000.00 | 07/11/2020 | \$250.00 | | | | \$ | 1,841,908.96 |
| 7459 | 05/21/20 | 2805 Sadler Ave. | | \$1,000.00 | 07/24/2020 | \$250.00 | | | | \$ | 1,841,658.96 |
| 7459 | 05/28/20 | 5400 Blackmore Ave | | \$1,000.00 | 07/11/2020 | | | | | \$ | 1.841.408.96 |
| | | | | . , | | \$250.00 | | | | \$ | ,- , |
| 7461 | 05/28/20 | 9025 Sycamore Leaf Ln | | \$1,000.00 | 06/20/2020 | \$250.00 | | | | Ψ | 1,841,158.96 |
| 7462 | 06/09/20 | 5413 Blackmore | | \$9,313.24 | 07/28/2020 | \$2,328.31 | | | | \$ | 1,838,830.65 |
| 7464 | 06/15/20 | 2821 Lee Ave | | \$14,999.00 | 08/20/2020 | \$3,749.75 | | | | \$ | 1,835,080.90 |
| 7465 | 06/19/20 | 5629 Como Dr | | \$14,999.00 | 07/28/2020 | \$3,749.75 | | | | \$ | 1,831,331.15 |
| 7466 | 06/27/20 | 1801 8th Avenue-Everly Plaza | | \$900,000.00 | 07/01/2020 | \$225,000.00 | | | | \$ | 1,606,331.15 |
| 7467 | 07/01/20 | 2513 Tar Heel Dr | | \$3,028.51 | 08/20/2020 | \$757.13 | | | - | \$ | 1,605,574.02 |
| 7471 | 07/20/20 | 14033 Firebush Ln | | \$14,999.00 | 09/09/2020 | \$3,749.75 | | | | \$ | 1,601,824.27 |
| 7472 | 07/20/20 | 5904 Asbury Ave. | | \$14,999.00 | 09/30/2020 | \$3,749.75 | | | | \$ | 1,598,074.52 |
| 7475 | 07/31/20 | 1429 Stewart St | | \$20,000.00 | 09/24/2020 | \$5,000.00 | | | | \$ | 1,593,074.52 |
| 7483 | 07/29/20 | 2204 Blythwood Trail | | \$18,682.00 | 09/09/2020 | \$4,670.50 | | | | \$ | 1,588,404.02 |
| 7486 | 08/06/20 | 1419 Stewart St | | \$20,000.00 | 09/30/2020 | \$5,000.00 | | | | \$ | 1,583,404.02 |
| 7501 | 08/20/20 | 6124 Fall Creek Ln | | \$18,643.00 | 09/24/2020 | \$4,660.75 | | | | \$ | 1,578,743.27 |
| | | | | | | | | | | \$ | 1,578,743.27 |
| | | 1 | | | | | | | | | ,,, |
| | | | | | | | | | | | |
| | | | Subtotal | \$2,524,860.52 | | \$ 631,215.13 | \$ 1,643,522.75 | | | 1 | |
| | | D L | | | | φ 051,215,15 | | | | | |
| | | Balanc | ce Forward | | | ъ - | \$ 566,435.65 | | | | |
| | | | Total | \$ 2,524,860.52 | | \$ 631,215.13 | \$ 2,209,958.40 | | | | |
| | | Balance as of 10/01/20 | | | | | \$ 1,578,743.27 | | | | |

Public reporting burden for this collection of information is estimated to average 2.5 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. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

The HOME statute imposes a significant number of data collection and reporting requirements. This includes information on assisted properties, on the owners or tenants of the properties, and on other programmatic areas. The information will be used: 1) to assist HOME participants in managing their programs; 2) to track performance of participants in meeting fund commitment and expenditure deadlines; 3) to permit HUD to determine whether each participant meets the HOME statutory income targeting and affordability requirements; and 4) to permit HUD to determine compliance with other statutory and regulatory program requirements. This data collection is authorized under Title II of the Cranston-Gonzalez National Affordable Housing Act or related authorities. Access to Federal grant funds is contingent on the reporting of certain project-specific data elements. Records of information collected will be maintained by the recipients of the assistance. Information on activities and expenditures of grant funds is public information and is generally available for disclosure. Recipients are responsible for ensuring confidentiality when public disclosure is not required.

This form is intended to collect numeric data to be aggregated nationally as a complement to data collected through the Cash and Management Information (C/MI) System. Participants should enter the reporting period in the first block. The reporting period is October 1 to September 30. Instructions are included for each section if further explanation is needed.

| Submit this form on or before December 31. | This report is for period (| mm/dd/yyyy) | Date Submitted (mm/dd/yyyy) |
|--------------------------------------------------------------------|-----------------------------|-------------|-----------------------------|
| Send one copy to the appropriate HUD Field Office and one copy to: | Starting | Ending | |
| HOME Program, Rm 7176, 451 7th Street, S.W., Washington D.C. 20410 | | | |

Part I Participant Identification

1. Participant Number

2. Participant Name

3. Name of Person completing this report

4. Phone Number (Include Area Code)

8. Zip Code

7. State

5. Address

Part II Program Income

Enter the following program income amounts for the reporting period: in block 1, enter the balance on hand at the beginning; in block 2, enter the amount generated; in block 3, enter the amount expended; and in block 4, enter the amount for Tenant-Based rental Assistance.

6. City

| 1. | Balance on hand at Beginning of Reporting Period | 2. Amount received during Reporting Period | 3. | Total amount expended during Reporting Period | 4. | Amount expended for Tenant- Based Rental Assistance | 5. | Balance on hand at end of Reporting Period $(1 + 2 - 3) = 5$ |
|----|-----------------------------------------------------|-----------------------------------------------|----|--------------------------------------------------|----|--------------------------------------------------------|----|-----------------------------------------------------------------|
| | | | | | | | | |

Part III Minority Business Enterprises (MBE) and Women Business Enterprises (WBE)

In the table below, indicate the number and dollar value of contracts for HOME projects completed during the reporting period.

| | | | Minority Business | Enterprises (MBE) | | |
|-------------------|----------|-----------------------------------------|---------------------------------|--------------------------|-------------|--------------------------|
| | a. Total | b. Alaskan Native or American Indian | c. Asian or Pacific Islander | d. Black Non-Hispanic | e. Hispanic | f. White Non-Hispanic |
| A. Contracts | | | | | | |
| 1. Number | | | | | | |
| 2. Dollar Amount | | | | | | |
| B. Sub-Contracts | | | | | | |
| 1. Number | | | | | | |
| 2. Dollar Amount | | | | | | |
| | a. Total | b. Women Business Enterprises (WBE) | c. Male | | | |
| C. Contracts | | | | | | |
| 1. Number | | | | | | |
| 2. Dollar Amount | | | | | | |
| D. Sub-Contracts | | | | - | | |
| 1. Number | | | | | | |
| 2. Dollar Amounts | | | | | | |

Part IV Minority Owners of Rental Property

In the table below, indicate the number of HOME assisted rental property owners and the total dollar amount of HOME funds in these rental properties assisted during the reporting period.

| | | | Minority Property Owners | | | | | | | | |
|------------------|----------|-----------------------------------------|---------------------------------|--------------------------|-------------|--------------------------|--|--|--|--|--|
| | a. Total | b. Alaskan Native or American Indian | c. Asian or Pacific Islander | d. Black Non-Hispanic | e. Hispanic | f. White Non-Hispanic | | | | | |
| 1. Number | | | | | | | | | | | |
| 2. Dollar Amount | | | | | | | | | | | |

Part V Relocation and Real Property Acquisition

6. Households Displaced - Cost

Indicate the number of persons displaced, the cost of relocation payments, the number of parcels acquired, and the cost of acquisition. The data provided should reflect only displacements and acquisitions occurring during the reporting period.

| | | a. Number | b. Cost | | | |
|-------------------------------------|-------------------|-----------------------------------------|---------------------------------|--------------------------|-------------|--------------------------|
| 1. Parcels Acquired | | | | | | |
| 2. Businesses Displaced | | | | | | |
| 3. Nonprofit Organizations Displace | d | | | • | | |
| 4. Households Temporarily Relocate | ed, not Displaced | | | | | |
| | | | Minority Business | Enterprises (MBE) | | |
| Households Displaced | a. Total | b. Alaskan Native or American Indian | c. Asian or Pacific Islander | d. Black Non-Hispanic | e. Hispanic | f. White Non-Hispanic |
| 5. Households Displaced - Number | | | | | | |



CITY OF FORT WORTH NEIGHBORHOOD SERVICES DEPARTMENT

NOTICE OF PUBLIC HEARING AND NOTICE OF PUBLIC COMMENT PERIOD REGARDING THE 2019-2020 CONSOLIDATED ANNUAL PERFORMANCE AND EVALUATION REPORT (CAPER)

FOR USE OF FEDERAL FUNDS UNDER THE FOLLOWING PROGRAMS:

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) HOME INVESTMENT PARTNERSHIPS (HOME) EMERGENCY SOLUTIONS GRANT (ESG) HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA)

Publication Date: November 29, 2020

Public Hearing Date: December 9, 2020

Public Comment Period: December 1, 2020 through December 15, 2020

Each year the City of Fort Worth receives federal grant funds from the U.S. Department of Housing and Urban Development (HUD) to promote affordable housing, suitable living environments, and to expand economic opportunities for persons with low and moderate incomes. The City reports on the use of these funds through the annual submission of the Consolidated Annual Performance and Evaluation Report (CAPER). This Report's primary purpose is to inform the citizens of Fort Worth and HUD where and how federal dollars are being spent, by whom, and how the citizens are served with these funds.

In accordance with federal regulations at 24 CFR 91, the City of Fort Worth will be soliciting comments and public review of the 2019-2020 CAPER, covering investment and expenditure of CDBG, HOME, ESG and HOPWA funds for the period from October 1, 2019 to September 30, 2020. A description of each activity, along with the accomplishments achieved, will be provided in the CAPER.

The Fort Worth Community Development Council will conduct a public hearing on the CAPER on December 9, 2020 to solicit public comment on this Report prior to its submission to HUD. This hearing is proposed to be held at 6:30 p.m. via WebEx. Beginning November 30, 2020, the draft CAPER will be available on the City's website at http://www.fortworthtexas.gov/neighborhoods/grants/. Copies will also be available for public review at the following locations:

Neighborhood Services Department City Hall Annex, 3rd Floor 908 Monroe Street Fort Worth, Texas 76102

Como Community Center 4660 Horne Street Fort Worth, Texas 76107 Andrew 'Doc' Session Community Center 201 South Sylvania Avenue Fort Worth, Texas 76111

Martin Luther King Jr. Community Center 5565 Truman Drive Fort Worth, Texas 76112 **North Tri-Ethnic Community Center** 2950 Roosevelt Avenue Fort Worth, Texas 76106

Southside Community Center 959 East Rosedale Street Fort Worth, Texas 76104

East Regional Library 6301 Bridge Street Fort Worth, Texas 76112 Northside Community Center

1100 Northwest 18th Street Fort Worth, Texas 76164

Worth Heights Community Center 3551 New York Avenue Fort Worth, Texas 76110

Southwest Regional Library 4001 Library Lane Fort Worth, Texas 76109

A fifteen-day public review and comment period will commence on Tuesday, December 1, 2020. All comments must be received no later than 5:00 pm on Tuesday, December 15, 2020. To submit comments or request additional information, please contact Sharon A. Burkley, Senior Planner, City of Fort Worth Neighborhood Services Department, 908 Monroe Street, Fort Worth, Texas 76102; or call Ms. Burkley at (817) 392-5785 or email at Sharon.Burkley@fortworthtexas.gov. Written comments may also be faxed to Ms. Burkley at (817) 392-7328.

Asistencia En Español: para que le interpreten la solicitud en Español, llame al (817) 392-7540.



CIUDAD DE FORT WORTH DEPARTAMENTO DE SERVICIOS PARA VECINDAD

AVISO DE AUDICIÓN PÚBLICA Y ANUNCIO DE PERIODO DE COMENTARIO PÚBLICO CON RESPECTO AL 2019-2020 REPORTE CONSOLIDADO DE EVALUACIÓN Y RENDIMIENTO ANUAL (CAPER)

PARA EL USO DE FONDOS FEDERALES BAJO LOS SIGUIENTES PROGRAMAS:

SUBSIDIOS GLOBALES PARA EL DESAROLLO COMUNITARIO (CDBG) ASOCIACIÓN PARA INVERSIONES EN VIVIENDA HOME (HOME) SUBSIDIOS DE SOLUCIONES DE EMERGENCIA (ESG) OPORTUNIDADES DE VIVIENDA PARA PERSONAS CON SIDA (HOPWA)

Fecha de Publicación: 29 de Noviembre de 2020

Fecha de Audición Pública: 9 de Diciembre de 2020

Periodo de Comentario Público: 1 de Diciembre de 2020 hasta el 15 de Diciembre de 2020

Cada año la Ciudad de Fort Worth recibe fondos federales del Departamento de Vivienda y Desarrollo Urbano de EE.UU. (HUD) para promover el costo de vivienda razonable, ambientes convenientes de vida y para promover oportunidades económicas para personas con ingresos bajos y moderados. La Ciudad quiere informarle sobre el uso de estos fondos por medio de una sumisión anual del Reporte Consolidado de Evaluación Y Rendimiento Anual (CAPER). El propósito primario del documento es de informar a los ciudadanos de Fort Worth y a HUD en donde y en que se gastaron los dólares federales, y como son servidos los ciudadanos con estos fondos.

De acuerdo con regulaciones federales en 24 CFR 91, la Ciudad de Fort Worth estará solicitando comentarios del 2019-202- CAPER, que cubre gastos sobre los programas de CDBG, HOME, ESG y fondos de HOPWA sobre el período del 1 de Octubre de 2019 al 30 de Septiembre de 2020. Una descripción de cada actividad, junto con los logros, será proporcionada en el CAPER.

El Concilio del Desarrollo de la Comunidad (CDC) de Fort Worth realizará una audición pública sobre el CAPER el 9 de Diciembre de 2020, antes de entregar este Reporte a HUD. Esta audición se llevara a cabo a las 6:15 de la tarde, via WebEx. Empezando el 30 de Noviembre de 2020, la versión preliminar del CAPER estará disponible en el sitio web de la Ciudad en http://www.fortworthtexas.gov/neighborhoods/grants/. Copias también estarán disponibles para examen público en las siguientes ubicaciones:

Departamento de Servicios para Vecindad

El Anexo de la Municipalidad, Piso #3 908 Monroe Street Fort Worth, TX 76102

Centro de Comunidad de Como 4900 Horne Street Fort Worth, TX 76107

Centro de Comunidad de North Tri-Ethnic 2950 Roosevelt Avenue Fort Worth, TX 76106

Centro de Comunidad de Southside 959 East Rosedale Street Fort Worth, TX 76104

Biblioteca Regional Este 6301 Bridge Street Fort Worth, TX 76112 **Centro de Comunidad de Andrew 'Doc' Session** 201 South Sylvania Avenue Fort Worth, TX 76111

Centro de Comunidad de Martin Luther King, Jr. 5565 Truman Drive Fort Worth, TX 76112

Centro de Comunidad de Northside 1100 Northwest 18th Street Fort Worth, TX 76164

Centro de Comunidad de Worth Heights 3551 New York Avenue Fort Worth, TX 76110

Biblioteca Regional Sudoeste 4001 Library Lane Fort Worth, TX 76109

Períodos de la revisión pública y del comentario de quince días comenzarán el Martes, 1 de Deciembre de 2020. Todos los comentarios se deben recibir no más tarde que las 5:00 P.M. el Martes, 15 de Diciembre de 2020. Para someter comentarios, solicitar información adicional, o pedir una copia, escriba por favor a Sharon Burkley, Planificador Señorial, City of Fort Worth, Departamento de Servicios para Vecindad, 908 Monroe Street, Fort Worth, Texas 76102. O llame a Srta. Burkley al (817) 392-5785 o por correo electrónico a Sharon.Burkley@fortworthtexas.gov. Comentarios por escrito se pueden enviar al Srta. por fax al (817) 392-7328.

Asistencia En Español: para mas información en Español, llame al (817) 392-7540.