

CITY OF CHICAGO

2016 Comprehensive Annual Performance and
Evaluation Report (CAPER)

Period of January 1st 2016 to December 31st 2016

Community Development Block Grant (CDBG)

HOME Investment Partnerships (HOME)

Housing Opportunities for Persons with AIDS (HOPWA)

Emergency Solutions Grant (ESG)

Community Development Block Grant-Disaster Recovery



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Budget Director

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Introduction

As a recipient of federal entitlement grant funds from the U.S. Department of Housing and Urban Development (HUD), the City of Chicago is required to submit a Consolidated Annual Performance and Evaluation Report (CAPER). The 2016 CAPER reports on the City's progress in achieving priorities and goals set forth in the second year of the 2015-2019 Consolidated Plan. The Consolidated Plan is a five-year strategic planning guide that identifies the City's affordable housing and community development needs, and each annual Action Plan describes planned activities and how funds will be used for a given year of the Consolidated Plan.

In May 2012, HUD introduced the Econ-Planning Suite, a new electronic template for producing the Consolidated Plan, Action Plan and CAPER, directly within HUD's Integrated Disbursement and Information System (IDIS). As required by HUD, the City has developed the 2016 CAPER using HUD's template. The CAPER is submitted each year to HUD for review and approval.

CR-05 - Goals and Outcomes

Progress the jurisdiction has made in carrying out its strategic plan and its action plan.

91.520(a)

In its 2015-2019 Consolidated Plan, the City identified the following priorities:

- Developing, rehabilitating, and preserving affordable housing;
- Providing public services, including mental health services; HIV/AIDS prevention; workforce development; domestic violence resources; disability resources; senior and homeless services, to low- and moderate-income residents;
- Expanding economic opportunities for low- and moderate-income residents; and
- Demolishing or clearing homes or buildings that are hazardous and uninhabitable.

The City was successful in meeting many of the goals of the 2016 Action Plan and made gains in addressing the housing and community development needs of individuals in low- and moderate-income community areas of Chicago. Below are programmatic highlights by priority area:

Developing, rehabilitating, and preserving affordable housing

In 2016, the Department of Planning and Development's (DPD) Emergency Heating Repairs Program enabled emergency repairs to 128 units, exceeding the projected number of 100 units. Also, through the Small Accessible Repairs for Seniors program (SARFS), DPD furnished enabling devices and other improvements to 562 senior-owned residences, higher than the projected number of 525 households.

DPD, in partnership with the Neighborhood Housing Services Redevelopment Corporation, administers a housing preservation program known as the Single-Family Troubled Buildings Initiative (TBI) that works to preserve at-risk households through the designation of receivers to take over and cure troubled or deteriorating properties. Under this program, 94 units were repaired and stabilized, rehabilitated, or placed in receivership, exceeding the projected number of 75 units.

Providing public services for at-risk populations

The Chicago Department of Public Health (CDPH) CDBG-funded HIV/AIDS Housing program provides funding for agencies operating community-based programs that provide residential care, supportive services, and advocacy to individuals and families impacted by HIV/AIDS who are homeless or at risk of becoming homeless. In partnership with four community-based organizations, CDPH provided housing assistance to 59 households, exceeding its goal of 45 households. In addition to the housing assistance, program recipients also received access to supportive services such as case management, psychological counseling, substance abuse recovery support, and recreational activities.

CDPH's Mental Health Program is a safety net for Chicago residents who have few or no resources to pay for outpatient mental health services. CDPH mental health services are provided to adults who are seriously mentally ill, who may be discharged from the State inpatient psychiatric hospital, are homeless, are undocumented, are referred by a family or friend, or walk in to a center for services. CDBG-funded mental health centers include Englewood, North River, Greater Lawn, Lawndale, Greater Grand, and Roseland. In 2016, these centers served 2,710 residents, exceeding the projected number of 2,300 residents.

The Department of Family and Support Services (DFSS) funds a shelter system that consists of emergency Overnight Shelter programs and Transitional Housing (Interim Housing) programs. Overnight Shelter programs provide shelter to single males and females age 18 and over on a nightly basis for up to 12 consecutive hours. Interim Housing is the living space and services offered to single individuals and families with children as they move from homelessness to permanent housing, delivered within a client-centered, individualized, and community-based approach. In 2016, the Overnight Shelter and Interim Housing Programs funded by DFSS served 14,008 persons, exceeding the anticipated number of 7,100 persons.

DFSS funded delegate agencies to provide various services to survivors of domestic violence, including case management, counseling, court legal advocacy, legal services, economic support and stability, supervised child visitation and safe exchange. During 2016, CDBG-funded domestic violence programs served 14,886 individuals, exceeding the projected number of 10,451 individuals.

Expanding economic opportunities for low- and moderate-income residents

The Workforce Services Division of DFSS utilized CDBG funding to provide employment services to underserved Chicago residents. The target populations included the homeless, ex-offenders, CHA residents, immigrants, veterans, victims of domestic violence, and people with disabilities. Workforce Services funded four program designs in 2016: 1) Employment Preparation and Placement Services for Underserved Populations (Job Readiness Training); 2) Industry Specific Training and Placement Services; 3) Transitional Jobs Program (Subsidized Employment); and 4) Community Reentry Support Centers. Services included comprehensive assessment, case management, job readiness training, customized skills training, supportive services, placement assistance, and retention services. In 2016, Workforce Services provided Job Readiness Training

to 2,647 individuals and Industry-Specific Training to 379 individuals, exceeding the projected number of 1,506 individuals.

Several programs did not reach the projected targets. DPD's Heat Receiver Program, which restores heat and utility services to renter households living under 80% of Area Median Income (AMI), served 306 households, less than the targeted 600 households. As was the case in 2015, DPD attributes the lower volume to the mildness of the winter season.

DPD's Roof and Porch Repairs Program provided funds for roof and porch repairs that helped preserve 198 units of low-income, owner-occupied housing. This total was lower than the projected 400 units due to a contractual issue which resulted in the suspension of work for much of the busiest part of the construction season.

The HomeMod program, administered by the Mayor's Office for People with Disabilities (MOPD), allows people with disabilities who are of low- to moderate-income to receive home modifications that make their living environment more accessible. In 2016, the number of home modifications fell short of the targeted 75 households. The shortfall was caused by an increase in the average cost of the construction jobs and lead remediation efforts. MOPD was able to successfully complete 61 household modifications.

DFSS funds the Human Services Mobile Outreach program (formerly the Emergency Services Division) that provides residents with round-the-clock emergency assistance. Calls to the City's non-emergency 311 system are referred electronically 24 hours a day, seven days a week, to the Human Services Mobile Outreach Center managed by a delegate agency. As crisis calls are received, the Human Services Mobile Outreach teams are dispatched to provide crisis intervention, transport clients to shelters, relocate clients among various shelters or locate alternative locations for hard-to-place clients, conduct wellness checks, and provide food and clothing. Human Services Mobile Outreach workers also refer clients to DFSS Community Service Centers when those individuals need longer-term assistance. Through cooperative agreements, homeless persons are able to report to any police station or hospital emergency room to request shelter and wait for Human Services Mobile Outreach teams to provide shelter transport. In 2016, 7,643 people received services through Human Services Mobile Outreach. This number decreased from 2015 because food box delivery, which previously was a large portion of the outreach scope, was no longer provided.

City of Chicago, 2016 Program Year CAPER

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
Assist the Homeless	Homeless Services	CDBG: \$5,532,856 ESG: \$779,152	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	211830	44336	20.93%	15072	22378	1.48%
Assist the Homeless	Homeless Services	ESG: \$1,330,256	Tenant-based rental assistance / Rapid Rehousing	Households Assisted	6410	632	9.80%	1200	166	13.80%
Assist the Homeless	Homeless Services	CDBG: \$4,533,993 ESG: \$3,894,291	Homeless Person Overnight Shelter	Persons Assisted	65870	14117	21.43%	13671	6777	49.57%
Elimination of Detrimental Conditions	Affordable Housing Elimination of Detrimental Conditions	CDBG: \$3,723,252	Buildings Demolished	Buildings	3750	1506	40.16%	750	750	100%

City of Chicago, 2016 Program Year CAPER

Elimination of Detrimental Conditions	Affordable Housing Elimination of Detrimental Conditions	CDBG: \$3,015,149	Housing Code Enforcement/Foreclosed Property Care	Household Housing Unit	45738	5496	12.11%	9350	2748	81.35%
Enable Persons To Live in Dignity & Independence	Affordable Housing Non-Homeless Special Needs	CDBG: \$1,520,233	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	148103	48236	32.60%	29525	23067	78.13%
Enable Persons To Live in Dignity & Independence	Affordable Housing Non-Homeless Special Needs	CDBG: \$3,117,012	Homeowner Housing Rehabilitated	Household Housing Unit	1752	743	42.41%	600	678	1.13%
Expand Nonprofits Capacity to Develop and Manage	Affordable Housing	HOME: \$2,580,271	Other	Other	110	24	20.00%	22	12	54.55%
Increase Access to Quality Public Services	Non-Homeless Special Needs	CDBG: \$14,782,837	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	972504	115231	11.84%	160305	227182	1.42%

City of Chicago, 2016 Program Year CAPER

Expand Opportunities for Homeownership	Affordable Housing	CDBG: \$600,000	Homeowner Housing Rehabilitated	Household Housing Unit	500	38	7.6%	100	28	28%
Expand Opportunities for Homeownership	Affordable Housing	CDBG: \$3,603,696	Direct Financial Assistance to Homebuyers	Households Assisted	818	256	31.10%	146	110	75.24%
Improve Safety and Livability of Neighborhoods	Affordable Housing	CDBG: \$5,755,000	Housing Code Enforcement/Foreclosed Property Care	Household Housing Unit	7650	1437	18.78%	1530	713	46.60%
Increase Units of Permanent Affordable Housing	Affordable Housing	CDBG: \$1,571,952 HOME: \$15,000,000	Rental units rehabilitated	Household Housing Unit	9520	TBD	TBD	1904	TBD	TBD
Increase Units of Permanent Affordable Housing	Affordable Housing	CDBG: \$7,525,215	Homeowner Housing Rehabilitated	Household Housing Unit	2500	TBD	TBD	500	TBD	TBD
Meet the Needs of Persons With HIV/AIDS	Persons With HIV/AIDS	HOPWA: \$1,072,590	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	5000	934	18.68%	1000	934	93.40%
Meet the Needs of Persons With HIV/AIDS	Persons With HIV/AIDS	HOPWA: \$2,495,965	Tenant-based rental assistance / Rapid Rehousing	Households Assisted	1000	538	53.80%	200	256	1.28%
Meet the Needs of Persons With HIV/AIDS	Persons With HIV/AIDS	HOPWA: \$4,060,659	HIV/AIDS Housing Operations	Household Housing Unit	2625	995	37.90%	519	511	98.46%

City of Chicago, 2016 Program Year CAPER

Mitigate Lead Based Paint Hazards	Elimination of Detrimental Conditions	CDBG: \$3,974,252	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	10000	3613	36.13%	2000	2003	1.00%
Promote Diversity	Fair Housing	CDBG: \$788,623	Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit	Persons Assisted	500	127	25.40%	100	62	62.0%
Promote Diversity	Non-Housing Community Development	CDBG: \$368,908	Public service activities other than Low/Moderate Income Housing Benefit	Other	1625/8750	TBD	TBD	65/350	TBD	TBD
Provide Public Services Concerned With Employment	Non-Housing Community Development	CDBG: \$6,650,764	Public service activities other than Low/Moderate Income Housing Benefit	Persons Assisted	11510	TBD	TBD	2302	TBD	TBD
Address Disaster Related Needs	Affordable Housing Non-Housing Community Development	CDBG-DR: 10,000,000	Homeowner Housing Rehabilitated	Household Housing Unit	757	0	0%	0	56	0%
Address Disaster Related Needs	Non-Housing Community Development	CDBG-DR: \$46,000,000	Other	Other	17610	0	0%	0	0	0%

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

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

Affordable Housing Development

In 2016, the City completed the third year of the City's current Five-Year Affordable Housing Plan, *Bouncing Back*, covering the years 2014-2018. This plan explicitly links Chicago's housing submarkets to economic development, jobs, neighborhood amenities, land use patterns and other non-housing factors. Nine guiding principles drive the City's affordable housing initiatives in the plan:

- People of all income levels, in all neighborhoods, should have a range of housing options. All residents should have access to quality affordable housing, including the homeless, the elderly, people with disabilities, and those with other special needs. A commitment to diverse communities and affirmatively furthering fair housing is essential to a healthy, vibrant Chicago.
- Chicago's population must grow to drive sustained demand for housing across different types of neighborhoods. Public and private resources will be needed to encourage current residents to stay and invest, previous residents to return, and new residents to move here.
- Rebuilding vitality across Chicago's housing markets will require creative and flexible approaches advanced by a diverse set of partners.
- One size does not fit all. City neighborhoods have vastly different market conditions. Strategies will be tailored to each community.
- Private-sector investment and involvement is a critical component of building the market and providing affordable housing in all types of neighborhoods.
- Public investments in housing should be strategically focused to achieve particular goals and to attract the maximum amount of private investment.
- The growth of housing in strong markets is of critical importance to the entire city's long-term prospects and to the supply of affordable housing.
- Housing strategies should be coordinated with broader efforts to create safe neighborhoods, good schools, thriving businesses, employment opportunities, transportation choices and a sustainable environment.
- Communication and coordination among City departments, private-sector partners, community-based organizations and agencies that connect residents to affordable and supportive housing is essential to a successful housing strategy.

In 2016, the City committed a total of \$265 million to support the creation, preservation or improvement of 6,902 units of affordable housing. The funding sources included federal grants, tax credits, tax increment financing (TIF) revenues, mortgage revenue bond proceeds and other local funds.

Housing Unit Commitments Under City of Chicago Programs, 2016

Income Level (% of AMI)	Less than 15%	Less than 30%	Less than 50%	Less than 60%	Less than 80%	TOTAL, 0-80%	TOTAL, All Income Levels
Multi-Family	1,575	1,532	649	676	321	4,753	4,873
Single-Family	119	411	522	330	392	1,774	2,029
ALL UNITS	1,694	1,943	1,171	1,006	713	6,527	6,902

***Please Note:** Unit counts provided in this section are based on funding commitments and project approvals during the year 2016 and may differ from the numbers recorded in HUD's Integrated Disbursement and Information System (IDIS) or the Summary of Specific Annual Objectives at the time of this report.*

Public Services for the Homeless

The Department of Family and Support Services (DFSS) uses CDBG, as well as Community Services Block Grant (CSBG) and other funding sources, to support a Human Services System that addresses the critical and emergency human services needs of low-income persons and families. The goal of the human services system is to provide or help individuals and households access services that support positive outcomes that promote and help maintain self-sufficiency. Service programs are tailored to meet immediate, short-term, or long-term needs.

In coordination with Human Services Mobile Outreach, DFSS's Homeless Outreach and Prevention (HOP) team reaches the homeless living on the street and individuals who might not actively seek out services on their own. The HOP team conducts patrols around the city and in areas of known homeless encampments. The HOP Team shares the goals of DFSS's Homeless Outreach and Engagement Program, which is overseen by the Homeless Division and delivered through not-for-profit delegate agencies. The Outreach Program focuses on engaging and building relationships with homeless persons, with the goal of placing them into services including shelter and supportive housing. In 2016, the HOP Division served 5,120 clients.

DFSS, along with its delegate agencies, has developed an integrated homeless service system. This consists of prevention services, outreach and assessment, emergency shelter and transitional housing, permanent housing for formerly homeless persons, and supportive services. DFSS utilizes CDBG funding to support this system, and combines CDBG dollars with a variety of other funding sources. In 2016, the projects that received CDBG Homeless Services funding served 17,258 persons.

DFSS also operates a mobile outreach health unit in a collaborative effort with CDPH. The mobile unit is a customized van that is used to provide health and social services to the city's homeless population. Services include outreach, intake, mental health and substance abuse screenings, physical examinations, health referrals, and shelter placement. A DFSS staff member, a public health nurse, and a driver staff the mobile unit. In 2016, the mobile unit provided medical and social service assistance to 335 homeless individuals. DFSS will evaluate current mobile unit outreach locations against updated hot spots and work towards establishing a new schedule that increases engagement with mobile unit services.

Public Services for Special Needs Populations

In 2016, DFSS' Intensive Case Advocacy and Support (ICAS) Program provided services through delegate agencies to 1,209 at-risk and isolated seniors, aged 60 and over, who exhibited signs of isolation, declining capacity and difficulty managing daily life activities and their environment. The Home Delivered Meals Program provided nutritious meals to 1,812 older adults (60 years and older) who were frail and/or homebound because of illness, incapacitating disability, and/or are otherwise isolated.

The Mental Health Services for Children and Adolescent Victims of Sexual Assault program funded by the Chicago Public Health Department (CDPH) is designed to increase the availability of mental health services for children and adolescents (ages 17 and under) who are victims of sexual assault. The program provides therapy services to children and adolescents with the goal of reducing the amount of time it takes to receive mental health services including minimizing waiting lists for families that require Spanish language fluency.

The Chicago Children's Advocacy Center (CCAC) serves as the city's hub for co-located forensic investigation for suspected child sexual assault. This CDBG-funded program has a goal of servicing 75 children, which allows CCAC's mental health program to leverage funding to expand services to upwards of 170-180 child sexual assault victims and their families. Child victims of sexual assault face known risk factors for involvement in violence in adulthood and family/community destabilization. The mental health services include multi-modal (individual, family, and group) talk therapy; play therapy for children; case management support; and other supportive services that promote engagement in care such as transportation support and waiting room monitoring for other children in the family who are unable to be left at home but are not involved in clinical services. All mental health services are evidence and trauma-informed and use validated instruments to track client and family progress overtime.

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)

	CDBG	HOME	HOPWA	ESG
White	82,217	67	263	3,733
Black or African American	305,649	360	1,147	23,168
Asian	8,737	50	9	147
American Indian or American Native	809	1	19	401
Native Hawaiian or Other Pacific Islander	360	0	0	101
Other Multi-Racial	54,566	0	153	377
Total	452,338	478	1,591	7,077
Hispanic	50,146	1	56	2,578
Not Hispanic	230,236	477	1,535	4,499

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

CR-15 - Resources and Investments 91.520(a)

Identify the resources made available

Source of Funds	Source	Resources Made Available	Amount Expended During Program Year
Federal	Community Development Block Grant (CDBG)	85,565,000	69,995,080
Federal	Home Investment Partnerships (HOME)	39,924,967	7,972,176
Federal	Housing Opportunities for People with AIDS (HOPWA)	12,758,454	8,064,389
Federal	Emergency Solutions Grant (ESG)	7,681,094	6,397,998
Federal	Community Development Block Grant –Disaster Recovery (CDBG-DR)	8,583,000	4,500,000
Federal	Area Plan on Aging - Older Americans Act	13,534,000	12,318,273
State	Area Plan on Aging - Older Americans Act	5,251,000	3,915,000
Federal	CHA Family Supportive Services	1,582,000	1,411,981
Federal	Chicago Family Case Management	1,309,000	521,463
State	Childhood Lead Poisoning Prevention	322,000	223,353
Federal	Community Services Block Grant (CSBG)	12,145,000	12,145,000
Other	Elder Abuse and Neglect	2,853,000	46,017
State	Emergency and Transitional Housing	4,714,000	4,655,000
Federal	HIV/AIDS Prevention	10,366,000	5,978,425
Federal	HIV/AIDS Surveillance and Seroprevalence	1,386,000	773,272
Other	HOPWA Housing and Health Study Program	486,000	479,000
Public	IHDA Foreclosure Prevention Program	1,230,741	183,575
State	Lead Based Paint Hazard Control	400,000	0
Federal	Local Health Protection	2,541,000	2,541,000
Local	Neighborhood Stabilization Program (NSP)	6,807,000	1,959,866
Other	Older American Act Nutrition Program	663,000	663,000
Federal	Resident Services Coordination and Case Management	1,727,000	150,000
State	Safe Havens Supervised Visitation	699,000	699,000
Federal	Senior Health Assistance Program	302,000	210,000
Federal	Services for Victims of Domestic Violence	1,431,025	956,527
Federal	Title XX Donated Fund	1,101,000	1,060,000

Table 3 – Resources Made Available

Identify the geographic distribution and location of investments

Target Area	Planned Percentage of Allocation	Actual Percentage of Allocation	Narrative Description
Low and Moderate Income Census Tracts	70%	80%	Citywide

Table 4 – Identify the geographic distribution and location of investments

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.

In addition to CDBG funding, the City's public service programming depends on multiple funding sources. These include various federal, state and local funds. DFSS' Domestic Violence programming leverages Department of Justice funding, state and city local funds to support its programs. Senior Services relies on multiple funding streams to support senior services including state and Older Americans Act - Area Agency on Aging/Area Plan funding. Intensive Case Advocacy and Support (ICAS) services is supported solely by CDBG, while Home Delivered Meals leverages federal Older Americans Act funding that is passed through the state. Workforce Services' program models including Employment Preparations and Placement, Industry Specific Training and Placement, Transitional Jobs, and Community Re-Entry Support Centers all rely on CDBG funding. In addition, Community Services Block Grant (CSBG) funding is also leveraged to support the Employment Preparation and Placement and the Transitional Jobs programs. Several funding streams support the City's current plan to address homelessness, Plan 2.0, including but not limited to CDBG, HUD Emergency Solutions Grant Program, CSBG, Illinois Department of Human Services' Emergency and Transitional Housing Program, and local funding.

ESG matching requirements were satisfied through an Emergency and Transitional Housing Program grant provided by the Illinois Department of Human Services and with corporate funding.

While there are no matching requirements for HOPWA, sub-recipients leveraged other federal, state, local, and private sources that are used to support program delivery. The majority of HOPWA sub-recipients use their leveraged funds to provide supportive services to HOPWA clients and their households.

Matching requirements for HOME were satisfied with local resources including Tax Increment Financing (TIF) revenue funds and write-downs on City-owned vacant land and/or real estate property.

One of the City's housing priorities is leveraging public resources to maximize private investments. For most projects that receive HOME dollars, significant portions of the development costs are funded by private mortgages from financial institutions, equity investments from owners, and tax credit syndications and participation from other government funding sources.

In most multi-family development projects, 30 to 60% of the development costs are covered through private debt equity. Greater public investment is generally needed when the rent

levels in a development are targeted to serve a very low-income population. Higher per-unit HOME investment levels are also related to heightened demand for Low-Income Housing Tax Credits. Fewer tax credits available to each project decrease the amount of private equity that can be raised to fund the development, thus increasing the level of HOME subsidy required.

The City, in partnership with Neighborhood Housing Services of Chicago (NHS), funds a joint public/private home ownership initiative designed to leverage private lending to homebuyers and homeowners through a consortium of approximately 20 local financial institutions. The Neighborhood Lending Program (NLP) in 2016 provided \$1.6 million in public funding for interim financing, including approximately \$1.5 million in CDBG funds, directly leveraging approximately \$6 million in private loan dollars.

Fiscal Year Summary – HOME Match	
1. Excess match from prior Federal fiscal year	\$61,243,194
2. Match contributed during current Federal fiscal year	\$4,176,070
3 .Total match available for current Federal fiscal year (Line 1 plus Line 2)	\$65,419,264
4. Match liability for current Federal fiscal year	\$1,281,914
5. Excess match carried over to next Federal fiscal year (Line 3 minus Line 4)	\$64,137,350

Table 5 – Fiscal Year Summary - HOME Match Report

City of Chicago, 2016 Program Year CAPER

Match Contribution for the Federal Fiscal Year								
Project No. or Other ID	Date of Contribution	Cash (non-Federal sources)	Foregone Taxes, Fees, Charges	Appraised Land/Real Property	Required Infrastructure	Site Preparation, Construction Materials, Donated labor	Bond Financing	Total Match
12968	08/24/2016	\$63,360						\$63,360
12827	04/26/2016	\$125,631						\$125,631
12827	06/23/2016	\$304,134						\$304,134
12827	07/27/2016	\$848,130						\$848,130
12820	02/04/2016	\$1,051,047						\$1,051,047
12820	04/06/2016	\$1,031,253						\$1,031,253
12820	06/21/2016	\$503,079						\$503,079
0791 TIF	05/18/2016	\$54,967						\$54,967
0180 TIF	09/15/2016	\$40,233						\$40,233
0621 TIF	03/02/2016	\$43,899						\$43,899
098 TIF	03/02/2016	\$60,182						\$60,182
0971 TIF	05/25/2016	\$50,155						\$50,155
TOTAL								\$4,176,070

Table 6 – Match Contribution for the Federal Fiscal Year

HOME MBE/WBE report

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
\$	\$	\$	\$	\$
\$518,043	\$1,323,015	\$666,271	-	\$1,174,787

Table 7 – Program Income

Minority Business Enterprises and Women Business Enterprises – Indicate the number and dollar value of contracts for HOME projects completed during the reporting period						
	Total	Minority Business Enterprises				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Contracts						
Number	0	0	0	0	0	0
Dollar Amount	0	0	0	0	0	0
Sub-Contracts						
Number	381	1	3	44	32	301
Dollar Amount	91,706,830	33,287	648,377	11,221,779	13,126,163	66,677,224
	Total	Women Business Enterprises	Male			
Contracts						
Number	0	0	0			
Dollar Amount	0	0	0			
Sub-Contracts						
Number	381	51	330			
Dollar Amount	91,706,830	7,777,195	83,929,635			

Table 8 – Minority Business and Women Business Enterprises

Minority Owners of Rental Property – Indicate the number of HOME assisted rental property owners and the total amount of HOME funds in these rental properties assisted						
	Total	Minority Property Owners				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Number	N/A					
Dollar Amount						

Table 9 – Minority Owners of Rental Property

City of Chicago, 2016 Program Year CAPER

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						
Businesses Displaced						
Nonprofit Organizations Displaced						
Households Temporarily Relocated, not Displaced						
Households Displaced	Total	Minority Property Enterprises				White Non-Hispanic
		Alaskan Native or American Indian	Asian or Pacific Islander	Black Non-Hispanic	Hispanic	
Number						
Cost						

Table 10 – Relocation and Real Property Acquisition

There were no relocations in 2016.

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	600	600
Number of non-homeless households to be provided affordable housing units	7,376	6,527
Number of special-needs households to be provided affordable housing units	519	511
Total	8,495	7,638

Table 11 – Number of Households

	One-Year Goal	Actual
Number of households supported through rental assistance	2,960	2,839*
Number of households supported through the production of new units	660	655
Number of households supported through the rehab of existing units	3,850	3,506
Number of households supported through the acquisition of existing units	--	--
Total	7,470	7,000

Table 12 – Number of Households Supported

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

*The number of households receiving rental assistance fluctuates over the course of the year as individual landlords enter or exit the Rental Subsidy Program. The total unit count is reported at the end of the year; for 2016 this figure was actually lower than counts at other points during the year. This should not be considered indicative of any long-term trends in the program.

Discuss how these outcomes will impact future annual action plans.

The City's construction rehab and home improvement programs continued to experience cost pressures in 2016 as rehab costs increased. The Department of Planning and Development has worked to make up the difference through alternative sources of funding when available, such as tax credits, TIF funds and in-lieu payments under the Affordable Requirements Ordinance, however, this issue is expected to continue to depress unit production levels in the near

term. Regarding the creation of new units, the total was lower than anticipated because an unusually high proportion of projects approved under the Multi-family Construction and Rehab Program were rehab rather than new construction.

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 Persons Served	CDBG Actual	HOME Actual
Extremely Low-income	343	212
Low-income	502	118
Moderate-income	221	1
Total	1,066	331

Table 13 – Number of Persons 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

Outreach and Engagement Mobile Outreach

DFSS provides targeted outreach and engagement that is delivered 24 hours a day, seven days a week, 365 days a year through mobile outreach teams that are dispatched to respond to non-life threatening requests for assistance through 311. These include requests for shelter placement and transportation, well-being checks, delivery of emergency food provisions, crisis assistance for victims of fire and other disasters, and extreme weather response, such as transportation of clients to City-operated Warming and Cooling Centers. In 2016, 7,643 individuals were served.

Outreach and Engagement Programs

These services include assessment of individuals, including youth, chronically homeless, and veterans living on the street, who do not typically access either shelter or other homeless services. Providers of this program model utilize the Vulnerability Index (a standardized tool for identifying and prioritizing the street homeless population for housing according to the fragility of their health) and to receive referrals through Chicago's Central Referral System (CRS) for permanent supportive housing.

The program has three subcategories: Daytime Supportive Service Centers which are drop-in centers where services include physical, psychological and housing needs assessments; Mobile Outreach Engagement which focuses on street-based outreach; and Airport Outreach Engagement which is targeted outreach with homeless individuals identified at Chicago's airports and on mass transit systems. In 2016, 4,366 individuals were served.

Addressing the emergency shelter and transitional housing needs of homeless persons

In coordination with the Chicago Continuum of Care (CoC), DFSS is the primary funder of emergency and interim housing for homeless individuals and families in Chicago. Both types of temporary housing options focus on assessing the service needs of residents and either making appropriate referrals to other providers or offering supportive services at the residential program. Additionally, DFSS funds supportive services that move persons who are currently homeless toward housing stability and self-sufficiency. Following are activities that address the shelter and transitional housing needs of persons experiencing homelessness:

Emergency Shelter (Adult)

This program model provides shelter to single men and women aged 18 and over on a nightly basis for up to twelve consecutive hours. Adult Overnight Shelter may be appropriate for

persons who do not want to participate in case management or the more intensive services and goals associated with interim housing. However, Adult Overnight Shelter programs are expected to engage clients in accessing supportive services and to assess clients for rapid re-housing options.

Low Threshold Youth Overnight Shelter

This program model provides age-appropriate shelter to single male and female youth ages 18 to 24, on a nightly basis for up to twelve consecutive hours. Youth Overnight Shelter programs are also expected to engage clients in accessing supportive services and to assess clients for rapid re-housing options. In 2016, 2,324 individuals were served.

Interim Housing (Adult)

Adopting the “housing first” model, Interim Housing focuses on rapidly re-housing those who are experiencing homelessness while working to progressively reduce the amount of time people spend experiencing homelessness. Permanent housing placements are emphasized and must be supplemented with services that focus on client stabilization, assessment, and referrals to community resources. In 2016, 11,684 individuals were served.

Clinical Services

Specialized Services are designed to address a client’s specific barriers to achieving housing stability that are not immediately addressed by existing community supports and are provided by experts in a particular field of knowledge. The program can be specialized to focus on a particular homeless population (e.g., those with a substance use disorder, etc.). Specialized Services funded by DFSS includes substance use disorder. In 2016, 607 individuals were served.

Homeless Shelter Food Supply

As part of its emergency food program, DFSS provides fresh fruits and vegetables to shelters throughout the city to feed people who are experiencing homelessness. Approximately 60 shelters located within the city received 721,911 pounds of produce. In 2016, DFSS-funded agencies provided 1,804,646 pounds of emergency food to 125,848 at-risk individuals distributed through 152 locations.

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

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

Building on successful coordination of homeless prevention resources with its Homeless Prevention Call Center (HPCC), Chicago has taken steps towards expanding coordinated access and improving access to permanent housing and independent living. DFSS-funded outreach, engagement and shelter providers complete applications for permanent supportive housing through the Coordinated Entry System (CES).

Tenant-based rental assistance will be used to help households who have already fallen into homelessness be re-housed as quickly as possible by providing a security deposit and/or short-term rental assistance until sufficient income or a permanent tenant-based subsidy is in place. In 2016, 457 households were served.

The Chicago Low-Income Housing Trust Fund has committed \$8 million annually in rental assistance to prevent homelessness for more than 1,300 families and individuals. Of that total, nearly 600 units are targeted toward individuals and families experiencing long-term homelessness. Plan 2.0 identifies strategies to create access to affordable housing units through development and subsidy options including: working within to increase the priority and access to housing for those in need of supportive housing and working with public and community partners to develop new affordable housing opportunities.

Finally, DFSS offers several programs for individuals and families experiencing homelessness seeking a permanent and stable housing situation. DFSS uses local funding sources to provide homeless services that include those funded by CDBG as well as others endorsed by the Plan to End Homelessness. Supported activities include:

Permanent Supportive Housing Services

These services are designed to help clients maintain residential stability in permanent supportive housing. Permanent Supportive Housing programs provide long-term subsidized housing for individuals and families who are experiencing homelessness. Clients may have serious and persistent disabilities such as mental illness, substance use disorders, or HIV/AIDS, which often contribute to chronic homelessness. In 2016, 1,602 individuals were served.

Long-Term Rental Assistance

DFSS also offers rental subsidies paired with a range of supportive services to disabled individuals or families experiencing homelessness or chronic homelessness. Services include case management, employment assistance and counseling and substance use services. In 2016, 2,291 individuals were served.

Pursuant to the 2016 Consolidated Appropriations Act regulations, DFSS requested the transfer of all Long Term Rental Assistance (LTRA) grants to the subrecipient of record. DFSS administered 45 LTRA projects by 20 nonprofit agencies. Many of these agencies have been administering the projects through DFSS contracting for nearly two decades. These projects

have participated in annual competitive ranking for several years by the Chicago Continuum of Care. Thoughtful consideration by DFSS, other City departments and the Mayor's Office, has determined that transferring the grants administered by nonprofits directly to them is in the best interest of preserving these permanent supportive housing units that over 1,300 households rely upon to avoid returning back into homelessness.

These homeless service agencies would be allowed the utmost control and flexibility in managing the projects to the fullest. Autonomy of the project will enable grant funds to be expended in their entirety since agencies will have direct access to expenditure rates and control over budget lines, enable participating landlords to be paid timely, and elimination of a dual monitoring process by both the City and the Continuum. Agencies will no longer have a third party submit funding applications and reports for a project that they operate. Many of the project subrecipients receive other HUD funding through direct grants, giving the agency the experience to manage the LTRA grant directly.

HUD approved the request in 2016; therefore all grants beginning in 2016 were transferred to the agency effective on the grant start date. Further, this transfer included the four projects that DFSS administered services directly. These grants were transferred to an agency approved by local HUD.

Permanent Housing with Short-Term Supports

This program model targets households that need short- to medium-term assistance (up to 24 months) with housing and supportive services. Individuals and families experiencing homelessness are housed in scattered housing and provided rental assistance and supportive services with the goal of assuming the lease at market rate after services transition out. In 2016, 166 individuals were served.

Safe Havens

This program is an open-stay, on-demand, and service-enriched housing program for persons with mental illness or dual disorders (mental illness and substance use disorder) who are difficult to engage in services. Safe Havens are safe, non-intrusive living environments in which skilled staff members work to engage persons in housing and needed services. In Chicago, Safe Haven beds are considered permanent housing. In 2016, 30 individuals were served.

Youth Intentional Permanent Housing with Short-Term Supports, Scattered Site Transitional Housing and Project-Based Transitional Housing

This program model serves youth experiencing homelessness ages 18 through 25 that are not wards of the state. Services may be delivered in a shared living arrangement or in clustered apartments with on-site supportive services and community-based linkages and include 24-hour access to staff, age-appropriate services and crisis intervention. In 2016, 371 individuals were served.

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

Throughout 2016, CHA continued to pursue and/or plan for future implementation of the following d initiatives.

Actions taken to address the needs of public housing

In 2016, CHA completed 740 housing units, including 115 public housing units in mixed-income sites, 218 rehabilitated public housing units at Altgeld Gardens, 397 project-based vouchers in multiple PRA sites, and 10 units through the Real Estate Acquisition Program (REAP). In 2016, CHA continued to pursue unit delivery strategies including mixed-income redevelopment, the Property Rental Assistance (PRA) Program, the Real Estate Acquisition Program (REAP), and other initiatives to respond to local housing preferences and market opportunities.

CHA is continues to provide affordable units through its public housing stock and project-based voucher units. In addition, CHA's HCV program enables low-income households to choose their place of residence in the private market, further increasing housing opportunities for program participants by subsidizing a portion of the monthly rental obligation through the allocation of a Housing Assistance Payment (HAP) made directly to the landlord. In 2016, CHA served more than 62,000 households through public housing and HCV programs. This includes approximately 18,000 families in public housing and more than 44,000 through the HCV program.

In 2016, CHA pursued the following affordable housing programs in order to provide new and alternative housing options for low-income housing:

Rental Assistance Demonstration (RAD) Program: In October 2013, CHA submitted a portfolio application to HUD to convert nearly 11,000 public housing units to project-based voucher units through RAD. CHA is utilizing RAD to refinance some properties and to support new initiatives that will expand affordable housing opportunities. In June 2015, CHA received a RAD award for its portfolio application. CHA closed its first RAD financial transaction for Fannie Emanuel Senior Apartments in December 2015. CHA is converting approximately 50 percent of its portfolio application which began in 2016 with the rest to follow in 2017 (with multi-phase developments extending into 2018) in accordance with HUD's RAD requirements.

Sponsor Based Voucher: In 2016, CHA withdrew the sponsor-based voucher program. In 2017, pursuant to CHA's HUD-approved 2017 MTW Annual Plan, CHA will implement an activity to provide funding assistance to City of Chicago programs that address homelessness. This assistance will help families access and remain stably housed.

CHA continues to promote activities such as the Choose to Own Home Ownership Program, Family Self-sufficiency Program, as well as the Public Housing Work Requirement to increase self-sufficiency and expand housing options and to keep residents engaged in employment, education, job training, and community services.

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

CHA participates in HUD's homeownership voucher program with a program called Choose to Own (CTO). CTO provides qualified public housing and Housing Choice Voucher (HCV) families with the opportunity to own a home. It has helped more than 400 CHA families make the transition from renting to owning. Most CTO families utilize the voucher to pay a portion of their mortgage for up to 15 years. In addition to financial assistance toward the mortgage payment, the program provides pre- and post-purchase homebuyer education, credit counseling and other services to help families navigate the home-buying process and increase their chances of success. In 2016, 36 households purchased a home through CTO.

Actions taken to provide assistance to troubled PHAs

This section is not applicable to CHA.

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)

The City of Chicago has implemented a number of programs, policies, and procedures that remove barriers to affordable housing and support the goals of the City's Five-Year Affordable Housing Plan and the Consolidated Plan. The following programs all encourage the creation of new affordable housing units.

- **The Affordable Requirements Ordinance (ARO)** – Under ARO, residential developments using City land or requesting zoning changes to increase density in planned developments of 10 or more units must ensure that at least 10 percent of units be affordable. In 2015 Chicago enacted a strengthened ordinance that is expected to generate 1,200 units and \$90 million in additional resources for affordable housing over a five year period.
- **City Lots for City Living** – Under this program the City sells vacant, City-owned property for \$1 per lot to be used for the creation of affordable housing .
- **Large-Lot Residential Program** – The City owns more than 8,000 residential parcels of land zoned for low-density use. This inventory has grown in recent years because of foreclosures and abandonments, with holding costs exceeding \$800,000 per year. Previous efforts to sell individual parcels have met with limited success. To return these properties to productive use in Chicago's residential neighborhoods the City established the Large-Lots Program enabling building owners to acquire adjacent City-owned lots at \$1 apiece for use as gardens or side yards. The program was started in 2014 in the pilot communities of Englewood, Woodlawn, East Garfield Park, and Austin. To date, more than 500 lots have been sold. Under a major program expansion in Fall 2016, DPD received over 2,000 additional applications in Roseland, Pullman and other low-income communities.
- **Residential Flood Assistance Program** – In 2016, the City created a special program to assist homeowners whose properties had been significantly damaged by the severe flooding that occurred in April 2013. The CDBG-DR Residential Flood Assistance Program (RFAP) provided forgivable grants to owner-occupants who had registered with FEMA for damage repairs or home improvements to reduce future flooding risks. Under the program a total of 56 homeowners received grants of up to \$50,000, awarded through five subrecipients selected through a competitive application process. Eligible work included mold remediation, electrical and appliance repair/replacement, basement and roof repair, and other rehabilitation or mitigation measures.
- **DPD's Downtown Affordable Housing Density Bonus** – This program offers additional square footage for residential development projects in downtown zoning districts in exchange for affordable housing created on-site or a financial contribution to the City's Affordable Housing Opportunity Fund.
- **The City's Redevelopment Project Area Properties Program** – City-owned properties located in designated redevelopment project areas can be conveyed to developers at a

significantly reduced price from appraised value if they provide tangible public benefits such as affordable housing units.

- **DPD's Multi-Family Rehab and New Construction Program** – This program provides HOME and CDBG funded loans and allocates a broad range of public resources to enable developers to produce affordable multi-family housing in both new construction and rehab projects. In 2016, DPD allocated \$206 million in resources to create or rehabilitate 1,237 rental units in affordable housing developments. Of these units, 91% (1,128 units) were earmarked for residents whose incomes did not exceed 60% of AMI.

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

The City has established several policy objectives and strategic goals designed to better meet underserved housing needs:

- Supporting Single Room Occupancy (SRO) and family housing in Chicago by developing, rehabilitating, or arranging special financing for properties in target areas where successful shelter programs that also offer support services and job creation opportunities can be closely linked.
- Developing short- and medium-term subsidy assistance for individuals that enter the homeless system in order to transition them back as quickly as possible to permanent affordable housing.
- Focusing resources to increase the availability of housing units for households under 30 percent of AMI.
- Supporting the not-for-profit community, notably with the help of Supportive Housing Program (SHP) funding, in the provision of supportive services that aid in and help overcome obstacles to moving from homelessness or near homelessness to self-sufficiency.

The City utilizes the Affordable Requirements Ordinance (ARO) to stimulate the production of affordable units downtown and in other areas where the demand for market-rate housing is strong. The ARO applies to residential developments of ten or more units and requires developers to either set aside 10% of residential units as affordable housing or contribute from \$50,000 to \$225,000 (depending on the location and type of development) per required unit to the City's Affordable Housing Opportunity Fund. For projects receiving financial assistance from the City, 20% of the units must be affordable. Projects are generally subject to ARO if they include 10 or more residential units AND receive a zoning change that:

- permits a higher floor area ratio (FAR);
- changes from a non-residential to a residential use;
- permits residential uses on ground floor, where that use was not allowed;
- includes land purchased from the City (even if purchase was at the appraised value);
- receives financial assistance from the City; OR
- is part of a Planned Development (PD) in a downtown zoning district.

For-sale units produced through the ARO must be affordable to households at or below 100 percent of AMI. Rental units must be affordable to households earning up to 60 percent of AMI.

Units built under the ARO are required to remain affordable over time. Some units will have recapture mortgages to regulate the long-term affordability. At the time of purchase, the City records a 30-year lien for the difference between the unit's market price and its affordable price. During 2016 the ARO created nine (9) units for sale that were purchased by affordable buyers and placed in the Chicago Community Land Trust (CCLT). CCLT has been set up to preserve the long-term affordability of homes created through City of Chicago programs, to preserve the public/private subsidies used to make the homes affordable, and to maintain a permanent pool of homeownership opportunities for working families. These units are sold with a 30-year restrictive covenant stipulating a maximum resale price. The maximum resale price is set at the original purchase price plus a percentage of the market appreciation; in most cases it will be below market price.

DPD's Housing Bureau continually reassesses its policies and makes adjustments in response to changing market conditions and service needs. Recently, because of the current state of the national economy and regional housing markets, DPD has seen lower levels of participation in programs that leverage private loans for home repairs. Additionally, the Purchase Price Assistance Program, which offers down payment assistance to homebuyers, has underperformed due to the nationwide slowdown in home lending. The allocation of federal dollars is influenced by the availability of leveraged resources. As a result of these conditions, the City has shifted greater resources towards programs that assist the existing housing stock, with particular attention to those programs serving homes falling into disrepair or presenting imminent hazards to residents.

CDPH's Mental Health Services for Children and Adolescent Victims of Sexual Assault program delegate agency, the Chicago Children's Advocacy Center, was careful to ensure that the Spanish speaking therapists had a level of both language and clinical proficiency. All program partners are encouraged to develop memoranda of agreement with other agencies and community partners to support successful engagement across the provider network. The delegate currently hosts a provider network meeting once a quarter to ensure that service needs are being considered across the Chicago region.

Through the Chicago "Ending Veteran Homeless Initiative" (EVHI), the City of Chicago has housed more than 3,000 homeless veterans through the national Ending Veterans Homelessness initiative since 2015. The effort has been a partnership between the city, federal partners, homelessness advocates and organizations. In 2016, building on EVHI, DFSS secured \$100,000 in private funding, provided by the Elks, which has created an Emergency fund to help support veterans in securing stable housing. Also in 2016, the City launched a new resource website designed to meet the needs of Chicago's military Veterans, and has appointed a new Director to the Chicago Veteran Affairs Office to lead efforts and continue to grow programs and services to help the City's Veterans.

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

In 2016, the CDPH Lead Poisoning Prevention Program continued to ensure the homes (or other locations where children may have spent time) of children with lead poisoning were inspected for lead hazards, and that these hazards were remediated. A total of 657 homes were inspected. Following an initial inspection and assessment for lead hazards, re-inspections occurred to ensure the home were properly maintained or the required remediation was being done. Data for this time period indicates that some 3,091 re-inspections took place. The final step is to ensure that the home is cleared of the hazard; in 2016, 764 homes were cleared. If property owners did not or were unable to remediate the hazard they are referred to court and forced to come into compliance. In 2016, 237 property owners were referred to court. In addition to enforcement, the program conducted 24 lead-safe work practices training sessions, 12 in Spanish, attended by 358 participants. These trainings provided property owners with the knowledge and skills to remediate lead hazards in their properties in a safe and effective manner.

Approximately 424 cases were opened for case management in this time period while a total of 1,716 cases are open and receiving follow-up case management as of June 30, 2016. 189 home visits were performed.

Out of all 1,716 open cases, 86 (5%) are White non-Hispanic, 89 (5%) are Asian, 1030 (60%) are black, and 511 (30%) are Hispanic White. We estimate that 1201 (70%) of the children that we serve are very low income, 429 (25%) are low income, and 86 (5%) are moderate income.

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

The City is dedicated to supporting a continuum of coordinated services to enhance the lives of Chicago residents, particularly those most in need, from birth through the senior years. The City works to promote the independence and well-being of individuals, support families and strengthen neighborhoods by providing direct assistance and administering resources to a network of community based organizations, social service providers and institutions. The City will use CDBG funding to provide services for low-income residents with the objective of providing basic needs and improving their quality of life and the quality of life for all citizens in the city.

CDBG as well as Community Services Block Grant (CSBG) and other funding sources were used to support a Human Services System that addresses the critical and emergency human services needs of low-income persons and families. The goal of the human services system is to provide or help individuals and households access services that support positive outcomes that promote and help maintain self-sufficiency. Service programs are tailored to meet immediate, short-term, or long term needs.

CDBG programs managed by the CDPH: mental health, lead poisoning abatement, violence prevention, HIV prevention and HIV housing, along with HOPWA, are all focused in community areas with high hardship index numbers, which general indicates that they are low income communities. Additional programs managed by CDPH function to reduce poverty in those communities through a variety of means.

In late 2015, the CDPH Lead Poisoning Prevention Program began working with two community-based organizations to identify pregnant women and young children at high risk of lead exposure to offer services including lead-based paint risk assessments and grant-funded abatement. The goal is to reduce lead-based paint hazards prior to exposure.

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

Providing the full range of needed services for the City's target low-income populations requires active cooperation among public, private and non-profit organizations. The City participates in numerous partnerships examples of which are highlighted below.

Chicago Advisory Council on Aging

The DFSS Senior Services Division (DFSS-SS) is the local Area Agency on Aging (AAA) and receives federal and state funding to serve as the lead on all aging issues on behalf of older persons in Planning and Service Area (PSA) 12. Under the direction of the state agency on Aging, Illinois Department on Aging, the AAA is responsible for a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring, and evaluation designed to lead to the development, or enhancement, of comprehensive and coordinated systems in the service area. These systems assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.

As the local AAA, DFSS-SS is required to have an advisory board, and the Chicago Advisory Council on Aging serves in this capacity. Appointed by the Mayor, the Council consists of 21 seniors who advise the DFSS-SS on a broad range of issues, including the senior services funded with Entitlement funding.

Continuum of Care Coordination

DFSS is actively involved with the Chicago Continuum of Care (CoC), the Chicago Alliance to End Homelessness (CAEH), which is the CoC's designated Collaborative Applicant, and the Chicago Planning Council on Homelessness (Planning Council). The Planning Council is a public-private planning body with representatives from local, state and federal government agencies and a broad base of constituency groups, including persons with lived homelessness experience. The Planning Council is the CoC governing body and makes policy decisions on funding priorities for HUD McKinney-Vento funding and other resources needed to achieve the goals of Chicago's plan to prevent and end homelessness, Plan 2.0, and monitoring the progress of that plan. The

DFSS and CAEH serve as lead implementing agencies for Plan 2.0 under the direction of the Planning Council.

Chicago Cook Workforce Partnership

In 2012, Chicago Mayor Rahm Emanuel and Cook County Board President Toni Preckwinkle worked together to create the Chicago Cook Workforce Partnership for the purpose of providing citizens the skills needed to compete in the workforce, find and keep jobs, and ensure that local businesses can access the skilled labor they need. The Partnership serves as the new home for the work previously initiated through the Chicago Workforce Investment Council, Cook County Works, the Workforce Board of Northern Cook County, and the workforce development division of DFSS.

The Chicago Cook Workforce Partnership is an independent 501(c)3 nonprofit organization led by board and business leaders. The Partnership's mission is to improve services, reduce costs and support job creation and economic development across the Cook County workforce system. In addition, the Partnership will create and support innovative programs that allow for region-wide implementation of best practices and coordinated engagement with the region's business community in order to meet the workforce needs of employers.

The Partnership provides staffing to the Workforce Investment Board, the federally mandated body that oversees Cook County's Workforce Investment Act (WIA) allocation and other federal grants and is a leading partner on strategic workforce initiatives.

Chicago Area HIV Integrated Services Council (CAHISC)

CDPH's STI/HIV Division has ongoing experience with collaboration, planning, and decision-making around multiple HIV/AIDS-related services and prevention projects across different organizations and service providers. The STI/HIV Division is an active participant of CAHISC. The Council integrates the mandated HIV Prevention Planning Group and Ryan White Part A Planning Council, and includes the HIV Housing Program. The STI/HIV Division was an active partner with AIDS Foundation of Chicago in the development of the 2013-2017 Five-Year Chicago Area AIDS Housing Plan and supports the AIDS Housing Advisory Council which consists of consumers of HOPWA programs.

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

In 2016, DFSS launched the Intergovernmental Task Force and Chronic Homeless Pilot. DFSS Chairs the Mayor's new citywide task force dedicated to addressing and reducing homelessness in Chicago. It focuses on improved coordination between city and sister departments, increased efficiencies in service delivery, and identifying additional resources to devote to these efforts. In 2016, the Task Force focused on the Chronic Homeless Pilot Project (CHP) which sought to house 75 homeless residents staying under north lake front viaducts. As of December 31, 2016 70 of the original 75 people assessed for the pilot program are no longer under the

viaducts and there are 5 remaining to be housed.

DFSS strengthens coordination between public and private housing and social service agencies through the Continuum of Care committee structure and under the direction of Chicago's Plan 2.0. DFSS partners with City sister agencies to support their plans and to operationalize strategies under Plan 2.0. For example, DFSS, DPD and CHA work together on efforts to expand permanent and affordable housing for vulnerable Chicagoan's with DFSS funding services to pair with housing subsidies provided by DPD or potentially CHA.

In late 2015, the CDPH Lead Poisoning Prevention Program began working with two community-based organizations to identify pregnant women and young children at high risk of lead exposure to offer services including lead-based paint risk assessments and grant-funded abatement. The goal is to reduce lead-based paint hazards prior to exposure.

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

In 2015, the Chicago Commission on Human Relations (CCHR), in conjunction with the Office of the Mayor, initiated steps to prepare an amendment to the Chicago Fair Housing Ordinance (CFHO) to add retaliation as a violation of the ordinance. Currently under the CFHO, if a tenant believes he or she is being subjected to discrimination by the landlord and files a discrimination complaint and the landlord subsequently moves to terminate the tenant's lease because of the existing complaint, the tenant does not have the right to file a retaliation claim.

While the protection against retaliation in housing exists at the state and federal levels, among the applicable local authorities, only the CFHO prohibits discrimination in all dwellings as opposed to other authorities which limit their applicability to properties with four or more units and/or properties not occupied by the owner. Thus, Chicago's housing ordinance already casts a wider net than other fair housing laws. Expanding the Ordinance to include a ban on retaliatory conduct will further advance the City of Chicago's commitment to protect people from housing discrimination in Chicago.

A second proposed change to the CFHO would add "Military Status" as a protected class. Currently, the CFHO only prohibits discrimination based on an individual's "military discharge status." Consequently, veterans and current military personnel, including reservists and members of the National Guard facing discrimination in the City of Chicago are unable to obtain any relief through the complaint filing and hearing process available at the Commission, unless the discriminatory conduct was based on the fact of discharge from their military service.

Adding Military Status to the CFHO would protect current and former military personnel from discrimination in housing. The proposed definition of military status would incorporate the current "military discharge status" category and extend protections to current and former members of any branch of the armed forces, irrespective of discharge status. The Commission's

Advisory Council on Veterans identified four major areas where it has become aware of discriminatory practices faced by veterans in obtaining housing. First, in working with Chicago's veterans' community, the council has learned that veterans seeking financing to buy homes are sometimes steered by lenders toward obtaining FHA loans as compared to Veterans Administration Loans which typically have more favorable terms for veterans. Secondly, the council identified the refusal of landlords to rent to veterans and members of the military based on their own socio/political objections to the military. The third issue identified was the reluctance of landlords to rent to reservists and members of the National Guard who may be deployed for indefinite periods of time. Lastly, the council is aware of the practice of some landlords to reject veteran applicants for apartments who seek to use their GI Bill housing funds to pay rent. Some of these issues can be addressed by other laws, but all would be covered through the proposed amendment. The amendment introduced and approved in February 2016.

Bringing Fair Housing Information to the Community

The CCHR's housing discrimination investigators and the Director of Fair Housing Compliance answer numerous telephone inquiries from the public. They furnish basic information on the CFHO, assistance on how to file a complaint, and provide referrals for additional or alternative resources to address callers' needs. Information and complaint intake is provided by staff in English and Spanish. Interpreting services are available to assist speakers in Polish, Arabic, Hindi, and Chinese (Mandarin).

Adjudication staff also participate in outreach to inform the public about the CFHO, which includes City-sponsored programs such as aldermanic community meetings and resource fairs for seniors, people with disabilities, and other groups. In addition, the CCHR also staffs information tables at a broad range of community events and festivals. Outreach activities including presentations, workshops, and media interviews can be conducted in both English and Spanish. The CCHR also posts information on social media in English and Spanish.

Similarly, CCHR staff attorneys provide trainings to bar associations to help attorneys become familiar with the CFHO and the CCHR's procedures. To assist complainants in obtaining legal representation, the CCHR partners with and makes referrals to Chicago-area organizations that may provide free legal counsel in housing discrimination cases. These include the John Marshall Law School Fair Housing Legal Clinic, the Lawyers Committee for Better Housing, the Chicago Coalition for the Homeless, Access Living (serving persons with disabilities), and the Legal Assistance Foundation of Metropolitan Chicago. These organizations also handle discrimination cases in other forums that enforce county, state, and federal laws prohibiting housing discrimination.

Furthering Fair Housing through Intervention and Education

A key component of the CCHR's fair housing efforts is its Inter-Group Relations (IGR) unit. IGR mediates conflicts; advocates on behalf of victims of hate crimes; and proactively works to

prevent discrimination through educational programs in schools and communities most at risk for violence based on bias and stereotypes. IGR services are provided in both English and Spanish. Through its work, IGR promotes stable communities and addresses issues that impact the City's fair housing efforts. IGR staff are often called to assist families in crisis due to racial, ethnic, religious, and other types of tensions in their communities. In 2016, IGR responded to 49 requests for intervention in the community. In addition, IGR held 62 educational workshops and 390 presentations throughout Chicago. Lastly, 57 persons received hate crime assistance.

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

The City has established standards and procedures to monitor the use of federal grant funds. Overall resource management for the City is the responsibility of the Office of Budget and Management (OBM). OBM oversees the administration of all grant funds received by the City. Annually, the Mayor presents to the City Council for approval the anticipated allocation of grant resources to individual City departments. Once resources are awarded for specific purposes, the designated department is responsible for implementing and monitoring the program and/or services and approving the disbursement of funds to subrecipients.

Each department allocates grant resources received in accordance with preapproved uses of the funds. Contracts, agreements, and loan documents with program participants incorporate the services and activities to be completed, the compliance requirements, and the specific conditions under which funds may be released.

A. Audits

The City's Department of Finance, Grants and Projects Accounting Division (GPAD) is responsible for ensuring timely grants disbursements and monitoring actual expenditures. In addition, the City's Internal Audit Division (Internal Audit) has developed and implemented independent audit processes and controls for A-133 Single Audit Report Reviews, A-122 Voucher Documentation Audits, and Agreed-Upon Monitoring Procedures.

- **A-133 Single Audit Report Reviews:** Internal Audit assesses the annual Single Audit Reports of approximately 500 of the City's delegate agencies that spend Federal funds annually, including reviewing their financial statements, reported internal controls, major programs. In accordance with the 2014 OMB Super Circular changes, the single audit threshold for audits increased from \$500,000 to \$750,000. Effective December 26, 2014, Internal Audit will review the annual Single Audit reports of delegate agencies that spend \$750,000 or more in Federal funds. Internal Audit will communicate deficiencies and findings to delegate agencies and follow-up with these agencies or finance departments as necessary.
- **A-122 Voucher Documentation Audits:** In accordance with OMB Circular A-122, Internal Audit performs independent annual onsite audits of reimbursement vouchers and supporting documentation for approximately 500 of the City's delegate agencies. Vouchers and invoices are reviewed for compliance with the delegate agency contract budget and with Federal cost regulations. Internal Audit will communicate deficiencies and findings to delegate agencies and follow-up with these agencies or finance departments as necessary.

- Agreed-Upon Audit Procedures (AUPs): Internal Audit may perform additional AUPs on select agencies, based upon recent financial or operational deficiencies or instances of non-compliance, to assess an agency's internal controls and fiscal operations. AUPs can also be performed on agencies that expend less than \$750,000 in Federal funds.

Within each department, designated staff are responsible for monitoring compliance with applicable federal, state, and city regulations for programs directly administered by City staff and for those delivered by third-parties, such as delegate agencies. Each department conducts monitoring activities regularly or as required by HUD regulations to ensure compliance. Some examples of monitoring activities for funded programs include:

- Unscheduled program site visits to evaluate program compliance and client participation
- Standard evaluation of programs to determine scope of work compliance, verify participant eligibility, and confirm deliverables reported
- Regular review of participant level data via the City's web-based tracking system
- Fiscal and programmatic audits of delegate agencies to determine compliance with regulations
- Review of program deliverable reports submitted monthly and quarterly; performance-based contracts must be supported with appropriate documentation.
- Internal monitoring to ensure standards of care and documentation requirements are met according to Illinois Department of Human Services' Division of Mental Health Admin Rule 132
- Annual survey by the Illinois Department of Human Services Bureau of Accreditation, Licensure, and Certification
- Survey every three years by the Commission on Accreditation of Rehabilitation Facilities
- On-site construction inspections
- Loan underwriting to determine eligible and reasonable costs
- Verification and certification of initial occupancy (income, assets, rent levels)
- Environmental reviews
- Review of Davis Bacon wage requirements compliance
- Review of owner's certifications (general compliance requirements for affordable housing) as required under certain programs

B. Minority Business Enterprise and Women Business Enterprise Compliance

The City of Chicago assures compliance through the inclusion and enforcement of Section 2-92-420 through 2-92-570 of the Municipal Code, which authorizes a minority-owned procurement program. Quarterly, the City publishes a directory of certified contractors or vendors that have applied for and been determined to be legitimate Minority Business Enterprises (MBE) or Women Business Enterprises (WBE).

The application process is very thorough, including a review of operations, financial documentation, and work references. Certification is for one year and must be renewed

annually through a re-certification application. MBE/WBE participation is sought, as well as encouraged, on all projects financed with City and federal funds. Each project is measured for the percentages of MBE/WBE participation with each phase being accountable - reconstruction activities, construction, and post construction activities.

Based on past experiences, the largest percentage of MBE/WBE participation occurs during construction, as this phase generates a greater dollar value and a greater number of skilled jobs. The certified directory enables prospective grantees to contact, request bids, and contract with certified MBEs and WBEs. Construction monitoring meetings are held with all developers and general contractors. City staff discuss all compliance requirements during these meetings, including the requirement of participation by certified MBE and certified WBE firms. The City, with the Department of Procurement Services as lead agency, regularly reviews the MBE/WBE certification processes and the impact of this program. City staff uses the directory of certified contractors or vendors to determine the MBE/WBE project participation percentages. Additionally, the City monitors participation of minority and women contractors and submits this information to HUD via a semi-annual report.

C. Section 3 Compliance

Section 3 of the Housing and Urban Development Act of 1968 requires that employment, training, and contracting opportunities generated by financial assistance from HUD shall, to the greatest extent feasible, be given to low- and very low-income persons and businesses that provide economic opportunity for these individuals. There are both hiring and contracting goals for recipients, contractors, and subcontractors that when met, satisfactorily demonstrate efforts to comply with Section 3.

The City requires that each affected department submit an annual Section 3 Compliance Plan that includes the identification of departmental Section 3 covered programs and departmental monitoring and compliance strategies. The City encourages all recipients of City funds, their contractors and subcontractors, to surpass the minimum requirements described above, and to undertake additional efforts to provide low- and very low-income persons with economic opportunities. The City also facilitates the referral process for Section 3 to assist both the entities that do business with the City in their compliance and the individuals and businesses that Section 3 seeks to benefit.

The City distributes the Section 3 Compliance Plan Booklet to developers and contractors at applicable preconstruction and monitoring meetings. The Booklet explains the intent of Section 3 and provides forms on which the developers and contractors can document their efforts. These forms are then used by the City to maintain its records and provide reports as necessary.

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.

To ensure that citizen's priorities and needs are addressed in the Action Plan, the City holds two public hearings each year. The public hearings provide an opportunity for community groups, non-profit organizations, and citizens to explore entitlement grant programming ideas and to communicate their views and comments to the City.

In 2016, the first public hearing was held at 5:30 p.m. on March 10th at the Chicago Cultural Center, 78 E. Washington Street, to provide comments on the 2015 Draft Comprehensive Annual Performance and Evaluation Report (CAPER) and the Analysis of Impediments to Fair Housing Choice and to provide input on funding priorities for the 2017 Action Plan. A public notice was published in three local newspapers, the Chicago Sun-Times, the Chicago Defender, and Hoy, to announce the hearing and to solicit comments for the 2015 draft CAPER and the 2017 Action Plan. A 15-day comment period was provided for the CAPER and a 30-day comment period was provided for the 2017 Action Plan and the Analysis of Impediments to Fair Housing Choice. The 2015 draft CAPER was posted on the City's website and written comments were accepted through March 25th.

A second public hearing was held on October 19th at the Chicago Cultural Center. This hearing coincided with the draft release of the City's annual budget appropriation and was held to solicit citizens' comments on the proposed 2017 Action Plan. Public notices were published in the three local newspapers referenced above. A summary of public comments received from the public hearing will be included in the final 2017 Action Plan that is anticipated to be submitted to HUD in June 2017.

The Mayoral appointed Community Development Advisory Committee (CDAC) helps promote neighborhood participation by identifying needs and priorities for funding and advise the City on the citizen participation process. CDAC members are chosen from among Chicago residents that are nominated by various communities and citywide organizations. CDAC members act as representatives of the entire city and provide decision-makers with the advantage of their first-hand knowledge of community and program facts, experiences, perceptions, and opinions.

In 2016, CDAC held four public community meetings between March and December. Lead City departments responsible for the administration of entitlement funded held presentations to provide an overview of programs funded in the 2015-2019 Consolidated Plan and the 2016 Action Plan and to discuss if the activities address the priority needs of the community areas CDAC members represent.

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.

In 2016, there were no significant changes to the City's CDBG program objectives.

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

N/A

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

In 2016, 65 HOME projects containing 1,009 units were inspected. In general, the HOME portfolio is in good physical condition despite the various ages of the buildings dating back to 1997. However, the following are the top physical inspection issues found and the corrections that are routinely requested:

Arc Fault Circuits

Absence of ARC fault circuit breakers in resident bedrooms

GFI Outlets

Absence of ground fault interrupt outlets and/ or improperly located devices in common areas and in residential units

Smoke Detectors

Absence of smoke detectors and/or improperly located devices in common areas and residential units

Carbon Monoxide Detectors

Absence of carbon monoxide detectors and/or improperly located devices in common areas and residential units

Moisture Infiltration

Moisture infiltration at roofs, slabs, windows, doors and exterior walls

Excessive Clutter

Excessive clutter in residential units and storage areas

Fire Protection Systems

Absent fire extinguishers in common areas and residential units and expired inspection tags for existing fire extinguishers and fire protection systems

Emergency Power Systems

Confirmation of working emergency power systems including emergency back-Power Systemsup systems, emergency generators and emergency generator transfer switches

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

DPD has developed an assessment tool that is incorporated into all project applications for HOME funds. The objectives of the affirmative marketing efforts are to ensure that individuals

not likely to apply, whether minority or non-minority, know about the vacancies, feel welcome to apply and have the opportunity to rent.

Developers or borrowers must comply with the affirmative marketing requirements established by DPD, which include a written affirmative marketing plan that identifies client-addressed contacts with community groups and churches, media outreach and other outward efforts; maintaining on-site records indicating steps or procedures undertaken to fill vacant units; and maintaining documentation as to program eligibility for all tenants and prospective tenants.

During each monitoring visit the affirmative marketing plan was reviewed and on-site records were inspected for compliance with the plan. Advertisements were reviewed for adherence with all regulations. Tenant files were examined to determine eligibility and waiting lists reviewed to assess fairness in placement.

DPD compliance staff continues to review and reevaluate the standard operating procedures and processes in order to enhance and update assessment tools. Copies of the Annual Owner's Certification, Tenant File Review, and Physical Inspection forms are kept on file at DPD.

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

In 2016, DPD received \$1,378,659 in HOME program income. Per IDIS report PR 23 "HOME Summary of Accomplishments", 298 HOME units were completed in 2016.

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)

In 2014, DPD took a key step in advancing long-range housing policy initiatives at the local, state, and federal levels by adopting a new housing plan, *Bouncing Back: Chicago Five-Year Housing Plan 2014-2018*. The fifth five-year housing plan issued by the City since 1994, *Bouncing Back* was developed with the help of more than 120 housing experts, activists, developers and other stakeholders. The plan explicitly links Chicago's housing submarkets to economic development, jobs, neighborhood amenities, land use patterns, and other non-housing factors. *Bouncing Back* projects commitments of more than \$1.3 billion from federal, state, city and private sources to create or preserve 41,000 housing units over the years 2014-18. Calendar year 2016 represented the third year of the plan, which DPD is implementing in cooperation with public, private, philanthropic and non-profit partners who are working together to leverage effective resources for 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 assistance payments	0	28
Tenant-based rental assistance	208	256
Units provided in transitional housing facilities developed, leased, or operated with HOPWA funds	0	0
Units provided in permanent housing facilities developed, leased, or operated with HOPWA funds	519	511
Total	799	795

Table 14 – HOPWA Number of Households Served

Narrative

The CDPH STI/HIV Division administers the City’s HOPWA program. It coordinates and oversees a broad range of HIV/AIDS programs including direct services, public policy advocacy and prevention, and service provider education and training. HOPWA funding supports community based programs that provide housing to eligible low-income persons living with HIV throughout the Eligible Metropolitan Statistical Area (EMSA), which includes Cook, DuPage, Grundy, Kendall, McHenry, and Will counties. In partnership with the Chicago Area HIV Integrated Planning Council (CAHISC), and other related community planning bodies, the STI/HIV Division regularly undertakes thorough needs assessment processes and develops comprehensive plans to prioritize HIV needs and allocate resources, allowing the Chicago area to maximize resources and leverage additional ones.

A. Housing Information Services: In addition to the households served by the activities in the above table, CDPH uses HOPWA funds for its Housing Information Services program, which assists persons living with HIV/AIDS and their families to identify, locate and obtain affordable housing. The project sponsor assists by identifying local housing resources, developing a comprehensive inventory of available housing units, and building relationships with landlords in the private market for referral of persons seeking housing. In 2016, 797 households were served by this program.

B. Facility-Based Housing Assistance: Funds in this service category are for community residential facilities including community residences, Single Room Occupancy (SRO) dwellings, short-term facilities, project-based rental units, and master leased units, serving low-income individuals with HIV/AIDS and low-income families with at least one HIV/AIDS positive member, that are homeless or in imminent danger of becoming homeless. Facility-Based Housing may also be multiple apartments within the same building, building complex, or building proximity housing individuals with HIV/AIDS and their families.

C. Tenant-Based Rental Assistance (TBRA): The TBRA program provides subsidies to low-income and extremely low-income individuals disabled by HIV/AIDS to avoid homelessness during periods of illness or financial difficulties. The subsidy amount is determined in part based on household income and rental costs associated with the tenant's lease.

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	CHICAGO
Organizational DUNS Number	942439068
EIN/TIN Number	366005820
Identify the Field Office	CHICAGO
Identify CoC(s) in which the recipient or subrecipient(s) will provide ESG assistance	Chicago CoC

ESG Contact Name

Prefix	Ms
First Name	ALESSANDRA
Middle Name	0
Last Name	BUDNIK
Suffix	0
Title	Entitlement Grant Manager

ESG Contact Address

Street Address 1	121 N. LaSalle Street
Street Address 2	Room 604
City	Chicago
State	IL
ZIP Code	-
Phone Number	3127446670
Extension	0
Fax Number	3127446599
Email Address	ABUDNIK@CITYOFCHICAGO.ORG

ESG Secondary Contact

Prefix	Mrs
First Name	Tami
Last Name	Cole
Suffix	0
Title	Director of Human Services
Phone Number	3127468380
Extension	0
Email Address	Tami.Cole@cityofchicago.org

2. Reporting Period—All Recipients Complete

Program Year Start Date 01/01/2016
Program Year End Date 12/31/2016

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

Subrecipient or Contractor Name: A Safe Haven Foundation
City: Chicago
State: IL
Zip Code: 60608, 1094
DUNS Number: 603161139
Is subrecipient a victim services provider: N
Subrecipient Organization Type: Other Non-Profit Organization
ESG Subgrant or Contract Award Amount: 386785

Subrecipient or Contractor Name: Polish American Association
City: Chicago
State: IL
Zip Code: 60641, 3622
DUNS Number: 067011239
Is subrecipient a victim services provider: N
Subrecipient Organization Type: Other Non-Profit Organization
ESG Subgrant or Contract Award Amount: 23000

Subrecipient or Contractor Name: Casa Central
City: Chicago
State: IL
Zip Code: 60622, 2803
DUNS Number: 040883282
Is subrecipient a victim services provider: N
Subrecipient Organization Type: Other Non-Profit Organization
ESG Subgrant or Contract Award Amount: 110749

Subrecipient or Contractor Name: Connections Abused Women & Children

City: Chicago

State: IL

Zip Code: 60651, 4152

DUNS Number: 193731114

Is subrecipient a victim services provider: Y

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 73696

Subrecipient or Contractor Name: Good News Partners

City: Chicago

State: IL

Zip Code: 60626, 1018

DUNS Number: 797874419

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 176675

Subrecipient or Contractor Name: Interfaith House

City: Chicago

State: IL

Zip Code: 60624, 1308

DUNS Number: 054230573

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Faith-Based Organization

ESG Subgrant or Contract Award Amount: 218288

Subrecipient or Contractor Name: Neopolitan Lighthouse

City: Chicago

State: IL

Zip Code: 60651, 4110

DUNS Number: 879083087

Is subrecipient a victim services provider: Y

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 56818

Subrecipient or Contractor Name: Olive Branch Mission

City: Chicago

State: IL

Zip Code: 60636, 2439

DUNS Number: 604541755

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 572394

Subrecipient or Contractor Name: Primo Center for Women and Children

City: Chicago

State: IL

Zip Code: 60624, 2219

DUNS Number: 964958511

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 699320

Subrecipient or Contractor Name: San Jose Obrero Mission

City: Chicago

State: IL

Zip Code: 60608, 3019

DUNS Number: 097591213

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 88508

Subrecipient or Contractor Name: The Night Ministry

City: Chicago

State: IL

Zip Code: 60640, 4407

DUNS Number: 186823373

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 184047

Subrecipient or Contractor Name: The Salvation Army

City: Chicago

State: IL

Zip Code: 60630, 2740

DUNS Number: 110435323

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 355608

Subrecipient or Contractor Name: YMCA of Metropolitan Chicago

City: Chicago

State: IL

Zip Code: 60610, 3316

DUNS Number: 006933295

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 6417

Subrecipient or Contractor Name: You Can Make It

City: Chicago

State: IL

Zip Code: 60609, 4939

DUNS Number: 362764800

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 475033

Subrecipient or Contractor Name: Options for Housing

City: Chicago

State: IL

Zip Code: 60654, 3503

DUNS Number: 795774012

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 188237

Subrecipient or Contractor Name: Emergency Fund

City: Chicago

State: IL

Zip Code: 60661, 2122

DUNS Number: 999999999

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 250000

Subrecipient or Contractor Name: CATHOLIC CHARITIES

City: Chicago

State: IL

Zip Code: 60654, 3503

DUNS Number: 069958528

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 63743

Subrecipient or Contractor Name: Single Room Housing Assistance Corporation

City: Chicago

State: IL

Zip Code: 60644, 1509

DUNS Number: 363904296

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 200456

Subrecipient or Contractor Name: Institute of Women Today

City: Chicago

State: IL

Zip Code: 60617, 5051

DUNS Number: 120380931

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 202844

Subrecipient or Contractor Name: All Chicago

City: Chicago

State: IL

Zip Code: 60641, 4616

DUNS Number: 999999999

Is subrecipient a victim services provider: N

Subrecipient Organization Type: Other Non-Profit Organization

ESG Subgrant or Contract Award Amount: 100000

CR-65 - Persons Assisted

4. Persons Served

4a. Complete for Homelessness Prevention Activities

Number of Persons in Households	Total
Adults	0
Children	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 15 – Household Information for Homeless Prevention Activities

4b. Complete for Rapid Re-Housing Activities

Number of Persons in Households	Total
Adults	0
Children	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 16 – Household Information for Rapid Re-Housing Activities

4c. Complete for Shelter

Number of Persons in Households	Total
Adults	0
Children	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 17 – Shelter Information

4d. Street Outreach

Number of Persons in Households	Total
Adults	0
Children	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 18 – Household Information for Street Outreach

4e. Totals for all Persons Served with ESG

Number of Persons in Households	Total
Adults	0
Children	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 19 – Household Information for Persons Served with ESG

5. Gender—Complete for All Activities

	Total
Male	0
Female	0
Transgender	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 20 – Gender Information

6. Age—Complete for All Activities

	Total
Under 18	0
18-24	0
25 and over	0
Don't Know/Refused/Other	0
Missing Information	0
Total	0

Table 21 – Age Information

7. Special Populations Served—Complete for All Activities

Number of Persons in Households

Subpopulation	Total	Total Persons Served – Prevention	Total Persons Served – RRH	Total Persons Served in Emergency Shelters
Veterans	0	0	0	0
Victims of Domestic Violence	0	0	0	0
Elderly	0	0	0	0
HIV/AIDS	0	0	0	0
Chronically Homeless	0	0	0	0
Persons with Disabilities:				
Severely Mentally Ill	0	0	0	0
Chronic Substance Abuse	0	0	0	0
Other Disability	0	0	0	0
Total (Unduplicated if possible)	0	0	0	0

Table 22 – Special Population Served

eCart

The information provided in eCart has replaced the data collected in screen CR-65. The completed eCart can be found in the appendix within the online IDIS CAPER template.

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

8. Shelter Utilization

Number of New Units - Rehabbed	0
Number of New Units - Conversion	0
Total Number of bed-nights available	527,545
Total Number of bed-nights provided	454,539
Capacity Utilization	86%

Table 23 – Shelter Capacity

9. Project Outcomes Data measured under the performance standards developed in

consultation with the CoC(s) : The average performance measures for ESG activities by program model are listed below:

Outreach and Engagement

- 61% of participants engaged in case management and/or enriched individual services
- 78% of participants receiving case management and/or enriched individual services connected to formal and informal support systems at drop-in centers or other community providers
- 22% of participants moved to more stable housing (family, friends, shelter, housing programs or permanent housing)

Low Threshold Youth Overnight Shelter

- 44% of participants connected to supportive services at drop-in centers or other community providers
- 60% of participants participated in leadership development and community building activities
- 7% of participants moved to more stable housing (family, friends, longer term shelter/housing programs or permanent housing)

Interim Housing (Adult)

Adult:

- 26% of participants exited the program to permanent housing within 120 Days
- 6% of participants exited the program to permanent housing within 180 Days
- 8% of participants exited the program to permanent housing within 270 Days
- 4% of participants without a source of reportable income at program entry obtained cash benefits at exit.
- 6% of participants without a source of reportable income at program entry obtained non-cash benefits at exit.
- 28% of participants maintained/increased benefits, employment or a combination of both
- 6% of participants without a source of reportable income at program entry obtained employment
- 7% of program exits were to another homeless services location

CR-75 – Expenditures

11. Expenditures

11a. ESG Expenditures for Homelessness Prevention

	Dollar Amount of Expenditures in Program Year		
	2014	2015	2016
Expenditures for Rental Assistance	0	0	0
Expenditures for Housing Relocation and Stabilization Services - Financial Assistance	0	0	0
Expenditures for Housing Relocation & Stabilization Services - Services	0	0	0
Expenditures for Homeless Prevention under Emergency Shelter Grants Program	\$582,752.65	\$958,386.75	\$1,096,564.95
Subtotal Homelessness Prevention	\$582,752.65	\$958,386.75	\$1,096,564.95

Table 24 – ESG Expenditures for Homelessness Prevention

11b. ESG Expenditures for Rapid Re-Housing

	Dollar Amount of Expenditures in Program Year		
	2014	2015	2016
Expenditures for Rental Assistance	0	0	0
Expenditures for Housing Relocation and Stabilization Services - Financial Assistance	0	0	0
Expenditures for Housing Relocation & Stabilization Services - Services	0	0	0
Expenditures for Homeless Assistance under Emergency Shelter Grants Program	\$1,771,776.29	\$1,994,838.42	\$2,761,780.12
Subtotal Rapid Re-Housing	\$1,771,776.29	\$1,994,838.42	\$2,761,780.12

Table 25 – ESG Expenditures for Rapid Re-Housing

11c. ESG Expenditures for Emergency Shelter

	Dollar Amount of Expenditures in Program Year		
	2014	2015	2016
Essential Services	\$4,172,399.70	\$3,973,720.09	\$3,799,772.42
Operations	0	0	0
Renovation	0	0	0
Major Rehab	0	0	0
Conversion	0	0	0

City of Chicago, 2016 Program Year CAPER

Subtotal	\$4,172,399.70	\$3,973,720.09	\$3,799,772.42
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Table 26 – ESG Expenditures for Emergency Shelter

11d. Other Grant Expenditures

	Dollar Amount of Expenditures in Program Year		
	2014	2015	2016
HMIS		\$15,799.48	\$91,322.29
Administration		\$317,104.31	\$96,805.38
Street Outreach	\$337,801.00	\$340,118.58	\$345,503.12

Table 27 - Other Grant Expenditures

11e. Total ESG Grant Funds

Total ESG Funds Expended	2014	2015	2016
	\$6,684,729.64	\$7,599,967.63	\$8,191,748.28

Table 28 - Total ESG Funds Expended

11f. Match Source

	2014	2015	2016
Other Non-ESG HUD Funds	0	0	0
Other Federal Funds	0	0	0
State Government	\$5,600,723.66	\$4,673,980.53	\$4,369,765.40
Local Government	\$1,264,005.98	\$2,961,987.10	\$3,821,982.88
Private Funds	0	0	0
Other	0	0	0
Fees	0	0	0
Program Income	0	0	0
Total Match Amount	\$6,864,729.64	\$7,635,967.63	\$8,191,748.28

Table 29 - Other Funds Expended on Eligible ESG Activities

11g. Total

Total Amount of Funds Expended on ESG Activities	2014	2015	2016
	\$13,729,459.28	\$15,119,911.64	\$16,383,496.56

Table 30 - Total Amount of Funds Expended on ESG Activities

Appendix I
PR26 Report



PART I: SUMMARY OF CDBG RESOURCES

01 UNEXPENDED CDBG FUNDS AT END OF PREVIOUS PROGRAM YEAR	23,713,787.14
02 ENTITLEMENT GRANT	72,220,468.00
03 SURPLUS URBAN RENEWAL	0.00
04 SECTION 108 GUARANTEED LOAN FUNDS	0.00
05 CURRENT YEAR PROGRAM INCOME	4,547,262.86
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	0.00
07 ADJUSTMENT TO COMPUTE TOTAL AVAILABLE	0.00
08 TOTAL AVAILABLE (SUM, LINES 01-07)	100,481,518.00

PART II: SUMMARY OF CDBG EXPENDITURES

09 DISBURSEMENTS OTHER THAN SECTION 108 REPAYMENTS AND PLANNING/ADMINISTRATION	66,905,883.14
10 ADJUSTMENT TO COMPUTE TOTAL AMOUNT SUBJECT TO LOW/MOD BENEFIT	(117,170.66)
11 AMOUNT SUBJECT TO LOW/MOD BENEFIT (LINE 09 + LINE 10)	66,788,712.48
12 DISBURSED IN IDIS FOR PLANNING/ADMINISTRATION	7,146,992.92
13 DISBURSED IN IDIS FOR SECTION 108 REPAYMENTS	2,353,271.50
14 ADJUSTMENT TO COMPUTE TOTAL EXPENDITURES	(30,519.80)
15 TOTAL EXPENDITURES (SUM, LINES 11-14)	76,258,457.10
16 UNEXPENDED BALANCE (LINE 08 - LINE 15)	24,223,060.90

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	6,206,533.55
19 DISBURSED FOR OTHER LOW/MOD ACTIVITIES	53,474,500.17
20 ADJUSTMENT TO COMPUTE TOTAL LOW/MOD CREDIT	(117,170.66)
21 TOTAL LOW/MOD CREDIT (SUM, LINES 17-20)	59,563,863.06
22 PERCENT LOW/MOD CREDIT (LINE 21/LINE 11)	89.18%

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	39,025,994.48
28 PS UNLIQUIDATED OBLIGATIONS AT END OF CURRENT PROGRAM YEAR	0.00
29 PS UNLIQUIDATED OBLIGATIONS AT END OF PREVIOUS PROGRAM YEAR	353,547.22
30 ADJUSTMENT TO COMPUTE TOTAL PS OBLIGATIONS	0.00
31 TOTAL PS OBLIGATIONS (LINE 27 + LINE 28 - LINE 29 + LINE 30)	38,672,447.26
32 ENTITLEMENT GRANT	72,220,468.00
33 PRIOR YEAR PROGRAM INCOME	2,466,965.48
34 ADJUSTMENT TO COMPUTE TOTAL SUBJECT TO PS CAP	0.00
35 TOTAL SUBJECT TO PS CAP (SUM, LINES 32-34)	74,687,433.48
36 PERCENT FUNDS OBLIGATED FOR PS ACTIVITIES (LINE 31/LINE 35)	51.78%

PART V: PLANNING AND ADMINISTRATION (PA) CAP

37 DISBURSED IN IDIS FOR PLANNING/ADMINISTRATION	7,146,992.92
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	(30,519.80)
41 TOTAL PA OBLIGATIONS (LINE 37 + LINE 38 - LINE 39 +LINE 40)	7,116,473.12
42 ENTITLEMENT GRANT	72,220,468.00
43 CURRENT YEAR PROGRAM INCOME	4,547,262.86
44 ADJUSTMENT TO COMPUTE TOTAL SUBJECT TO PA CAP	0.00
45 TOTAL SUBJECT TO PA CAP (SUM, LINES 42-44)	76,767,730.86
46 PERCENT FUNDS OBLIGATED FOR PA ACTIVITIES (LINE 41/LINE 45)	9.27%

LINE 17 DETAIL: ACTIVITIES TO CONSIDER IN DETERMINING THE AMOUNT TO ENTER ON LINE 17

Report returned no data.

APPENDIX II

HOPWA CAPER

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence					
c.	Project-based rental assistance units or leased units			1	1	2
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	5	\$114,253.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	5	\$114,253.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Alexian Brothers Bonaventure House

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
	<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
	<input type="checkbox"/> Rehabilitation	\$	\$	
	<input type="checkbox"/> Acquisition	\$	\$	
	<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:			Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:			Date started: Date Completed:
c.	Operation dates:			Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:			Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:			HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?			<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?			
h.	Is the address of the project site confidential?			<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling	35				
b.	Community residence					
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	20	\$191,624.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	20	\$191,624.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

CALOR Division of Anixter Center

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
	<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
	<input type="checkbox"/> Rehabilitation	\$	\$	
	<input type="checkbox"/> Acquisition	\$	\$	
	<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:			Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:			Date started: Date Completed:
c.	Operation dates:			Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:			Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:			HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?			<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?			
h.	Is the address of the project site confidential?			<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence		9	8		
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	17	\$68,360.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	17	\$68,360.00

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling	40				
b.	Community residence		3	6	6	
c.	Project-based rental assistance units or leased units	17	49	2	3	1
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	43	\$625,545.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	43	\$625,545.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Children's Place Association

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
	<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
	<input type="checkbox"/> Rehabilitation	\$	\$	
	<input type="checkbox"/> Acquisition	\$	\$	
	<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:			Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:			Date started: Date Completed:
c.	Operation dates:			Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:			Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:			HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?			<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?			
h.	Is the address of the project site confidential?			<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 <u>with or without</u> rehab				
Rental units rehabbed				
Homeownership units constructed (if approved)				

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

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence					
c.	Project-based rental assistance units or leased units			8	3	
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	11	\$160,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	11	\$160,000.00

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient	Total Number of Units 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			3	1		
d. Other housing facility <u>Specify:</u>						

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a. Leasing Costs		
b. Operating Costs	4	\$114,950.00
c. Project-Based Rental Assistance (PBRA) or other leased units		
d. Other Activity (if approved in grant agreement) <u>Specify:</u>		
e. Adjustment to eliminate duplication (subtract)		
f. TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	4	\$114,950.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Community Supportive Living Systems, Inc.

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/>	New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/>	Rehabilitation	\$	\$	
<input type="checkbox"/>	Acquisition	\$	\$	
<input type="checkbox"/>	Operating	\$	\$	
a.	Purchase/lease of property:			Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:			Date started: Date Completed:
c.	Operation dates:			Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:			Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:			HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?			<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?			
h.	Is the address of the project site confidential?			<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 <u>with or without</u> rehab				
Rental units rehabbed				
Homeownership units constructed (if approved)				

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

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence	9				
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/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	9	\$92,584.00
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.)	9	\$92,584.00

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		Total Number of Units 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
a.	Single room occupancy dwelling	32				
b.	Community residence					
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	32	\$80,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	32	\$80,000.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Edge Alliance (Garden view)

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/> Rehabilitation	\$	\$	
<input type="checkbox"/> Acquisition	\$	\$	
<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:		Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:		Date started: Date Completed:
c.	Operation dates:		Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:		Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:		HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?		
h.	Is the address of the project site confidential?		<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		Total Number of Units 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
a.	Single room occupancy dwelling					
b.	Community residence		12	4		
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	16	\$300,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	16	\$300,000.00

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 <u>with or without</u> rehab				
Rental units rehabbed				
Homeownership units constructed (if approved)				

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

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence					
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify: Recovery Home</u>	115				

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	58	\$346,589.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	58	\$346,589.00

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient	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	30					
d. Other housing facility <u>Specify:</u>						

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a. Leasing Costs		
b. Operating Costs	31	\$502,252.00
c. Project-Based Rental Assistance (PBRA) or other leased units		
d. Other Activity (if approved in grant agreement) <u>Specify:</u>		
e. Adjustment to eliminate duplication (subtract)		
f. TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	31	\$502,252.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Heartland Health Outreach

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/> Rehabilitation	\$	\$	
<input type="checkbox"/> Acquisition	\$	\$	
<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:		Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:		Date started: _____ Date Completed: _____
c.	Operation dates:		Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:		Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:		HOPWA-funded units = _____ Total Units = _____
f.	Is a waiting list maintained for the facility?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?		
h.	Is the address of the project site confidential?		<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient	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	2	7	1			
c. Project-based rental assistance units or leased units	3	1	0	3		
d. Other housing facility <u>Specify:</u>						

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a. Leasing Costs		
b. Operating Costs	12	\$245,706.00
c. Project-Based Rental Assistance (PBRA) or other leased units		
d. Other Activity (if approved in grant agreement) <u>Specify:</u>		
e. Adjustment to eliminate duplication (subtract)		
f. TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	12	\$245,706.00

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient	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	5	8	1	1		
d. Other housing facility <u>Specify:</u>						

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a. Leasing Costs		
b. Operating Costs	14	\$170,262.00
c. Project-Based Rental Assistance (PBRA) or other leased units		
d. Other Activity (if approved in grant agreement) <u>Specify:</u>		
e. Adjustment to eliminate duplication (subtract)		
f. TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	14	\$170,262.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Human Resources Development Institute, Inc.

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/> Rehabilitation	\$	\$	
<input type="checkbox"/> Acquisition	\$	\$	
<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:		Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:		Date started: _____ Date Completed: _____
c.	Operation dates:		Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:		Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:		HOPWA-funded units = _____ Total Units = _____
f.	Is a waiting list maintained for the facility?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?		
h.	Is the address of the project site confidential?		<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		Total Number of Units 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
a.	Single room occupancy dwelling					
b.	Community residence	11				
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	11	\$185,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	11	\$185,000.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

The Boulevard of Chicago

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."

	HOPWA Funds Expended this operating year (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/> Rehabilitation	\$	\$	
<input type="checkbox"/> Acquisition	\$	\$	
<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:		Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:		Date started: Date Completed:
c.	Operation dates:		Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:		Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:		HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?		
h.	Is the address of the project site confidential?		<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence					
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify: Dormitory - For the Dormitory there are 12 large rooms with multiple full beds</u>	12(64)				

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	77	\$311,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	77	\$311,000.00

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient Agency Name (Required)

Open Door Health Center of Illinois

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 (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/> Rehabilitation	\$	\$	
<input type="checkbox"/> Acquisition	\$	\$	
<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:		Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:		Date started: _____ Date Completed: _____
c.	Operation dates:		Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:		Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:		HOPWA-funded units = _____ Total Units = _____
f.	Is a waiting list maintained for the facility?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?		
h.	Is the address of the project site confidential?		<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence		5		3	
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	14	\$245,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	14	\$245,000.00

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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient	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	10					
c. Project-based rental assistance units or leased units						
d. Other housing facility <u>Specify:</u>						

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a. Leasing Costs		
b. Operating Costs	3	\$80,000.00
c. Project-Based Rental Assistance (PBRA) or other leased units		
d. Other Activity (if approved in grant agreement) <u>Specify:</u>		
e. Adjustment to eliminate duplication (subtract)		
f. TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	3	\$80,000.00

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 <u>with or without</u> rehab				
Rental units rehabbed				
Homeownership units constructed (if approved)				

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

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient	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	27					
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/subrecipient 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/subrecipient
a. Leasing Costs		
b. Operating Costs	7	\$130,000.00
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.)	7	\$130,000.00

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 <u>with or without</u> rehab				
Rental units rehabbed				
Homeownership units constructed (if approved)				

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

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence					
c.	Project-based rental assistance units or leased units	5	2			
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs	11	\$100,000.00
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)	11	\$100,000.00

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Agape Missions		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Jill A. Skole, Executive Director			
Email Address	jskole@agapemissionsnfp.org			
Business Address	840 Plainfield Road			
City, County, State, Zip,	Joliet	Will	Illinois	60435
Phone Number (with area code)	815-723-1548 #21		Fax Number (with area code) 815-740-5910	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3789462			
DUN & Bradstreet Number (DUNs):	162682590			
Congressional District of Project Sponsor's Business Address	43 rd District 2200 Weber Road, Crest Hill, IL 60435			
Congressional District(s) of Primary Service Area(s)	43rd District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Joliet, Crest Hill, Ingalls Park		Counties: Will	
Total HOPWA contract amount for this Organization for the operating year	\$114,253			
Organization's Website Address www.agapemissionsnfp.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name AIDS Foundation of Chicago		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Madeline Shea			
Email Address	mshea@aidschicago.org			
Business Address	200 W. Jackson , Suite 2100			
City, County, State, Zip,	Chicago	Cook	Illinois	60606
Phone Number (with area code)	312-784-9098		Fax Number (with area code) 312-922-2916	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3412054			
DUN & Bradstreet Number (DUNs):	60-723-55870			
Congressional District of Project Sponsor's Business Address	7 th District 2746 W. Madison Street Chicago, IL 60612			
Congressional District(s) of Primary Service Area(s)	All City of Chicago Congressional Districts			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: All Zip Codes in the City of Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	Rental Assistance - \$2,495,965 Housing Information Services – \$430,000			
Organization's Website Address www.aidschicago.org www.direct2housing.org www.direct2food.org	Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Asian Human Services		Parent Company Name, if applicable			
Name and Title of Contact at Project Sponsor Agency	Dr. Craig Maki Chief Executive Officer				
Email Address	cmaki@ahschicago.org				
Business Address	4753 N. Broadway Street, Suite 700				
City, County, State, Zip,	Chicago	Cook	Illinois	60640	
Phone Number (with area code)	773-293-8448		Fax Number (with area code) 773-278-4751		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3005889				
DUN & Bradstreet Number (DUNs):	627221211				
Congressional District of Project Sponsor's Business Address	9 th District 5533 N. Broadway, Suite 2 Chicago, IL 60640				
Congressional District(s) of Primary Service Area(s)	9 th District				
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook		
Total HOPWA contract amount for this Organization for the operating year	\$87,000				
Organization's Website Address www.ahschicago.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Alexian Brothers Bonaventure House		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Cheryl Potts, Executive Director			
Email Address	cpotts@abam.org			
Business Address	825 West Wellington Ave.			
City, County, State, Zip,	Chicago	Cook	Illinois	60657
Phone Number (with area code)	773-327-9921 ext 123	Fax Number (with area code) 773-327-9113		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3527899			
DUN & Bradstreet Number (DUNs):	623140886			
Congressional District of Project Sponsor's Business Address	5 th District 3742 West Irving Park Road Chicago, IL 60618			
Congressional District(s) of Primary Service Area(s)	5 th District			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Lakeview		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$191,624			
Organization's Website Address www.alexianbrothershousing.org	Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input checked="" type="checkbox"/> Please check if yes and a grassroots organization. <input type="checkbox"/>	If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Anixter Center - CALOR		Parent Company Name, if applicable Lester & Rosalie Anixter Center		
Name and Title of Contact at Project Sponsor Agency		Carmen Valentin – Building Manager		
Email Address		cvalentin@anixter.org		
Business Address		1122 N. California		
City, County, State, Zip,		Chicago	Cook	Illinois 60622
Phone Number (with area code)		773-489-2417	Fax Number (with area code) 773-489-2462	
Employer Identification Number (EIN) or Tax Identification Number (TIN)		36-2244895		
DUN & Bradstreet Number (DUNs):		068475623		
Congressional District of Project Sponsor's Business Address		4 District 1324 N. Wolcott, Chicago IL 60622		
Congressional District(s) of Primary Service Area(s)		4 District 1324 N. Wolcott, Chicago IL 60622		
City(ies) and County(ies) of Primary Service Area(s)		Cities: Chicago		Counties: Cook
Total HOPWA contract amount for this Organization for the operating year		\$68,360		
Organization's Website Address www.calor.org www.anixter.org		Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.		
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/> <input type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Chicago House and Social Services Agency		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Scott Ammarell, Chief Executive Officer			
Email Address	sammarell@chicagohouse.org			
Business Address	1925 North Clybourn Avenue Suite 401			
City, County, State, Zip,	Chicago	Cook	IL	60640
Phone Number (with area code)	773-248-5200 ext 202		Fax Number (with area code) 773-248-5019	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3376432			
DUN & Bradstreet Number (DUNs):	604544965			
Congressional District of Project Sponsor's Business Address	7 th District, 2746 West Madison Street Chicago IL 60612			
Congressional District(s) of Primary Service Area(s)	4 th , 9 th Districts			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$625,545			
Organization's Website Address www.chicagohouse.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Children's Place Association		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Curt Schubert, Chief Financial Officer			
Email Address	cschubert@childrens-place.org			
Business Address	700 N. Sacramento Blvd.			
City, County, State, Zip,	Chicago	Cook	IL	60612
Phone Number (with area code)	<input type="text" value="312-660-3024"/>	Fax Number (with area code)		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	<input type="text" value="36-3641017"/>			
DUN & Bradstreet Number (DUNs):	<input type="text" value="7826916358"/>			
Congressional District of Project Sponsor's Business Address	4th District 3210 W. North Ave Chicago IL 60647			
Congressional District(s) of Primary Service Area(s)	4 th , 5 th District			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$160,000			
Organization's Website Address www.childrens-place.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Christian Community Health Center		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Kenneth Burnett - CEO			
Email Address	kenneth.burnett@cchc-rchm.org			
Business Address	9718 S. Halsted			
City, County, State, Zip,	Chicago	Cook	IL	60628
Phone Number (with area code)	773-298-4725	Fax Number (with area code)		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-37999834			
DUN & Bradstreet Number (DUNs):	113661839			
Congressional District of Project Sponsor's Business Address	1 st District , 700 East 79 th Street Chicago, IL 60619 2 nd District, 7121 South Yates Bldg Chicago, IL 60649			
Congressional District(s) of Primary Service Area(s)	Chicago City Wide Currently			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$114,950			
Organization's Website Address www.cchc.online.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Community Supportive Living System		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Herschel L. Gamble, Executive Director			
Email Address	www.hgamble1@csls.org			
Business Address	12231 South Emerald			
City, County, State, Zip,	Chicago	Cook	IL	60628
Phone Number (with area code)	773-291-0482		Fax Number (with area code)	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3447148			
DUN & Bradstreet Number (DUNs):	604549196			
Congressional District of Project Sponsor's Business Address	2 nd District 7121 South Yates Bldg Chicago IL 60649			
Congressional District(s) of Primary Service Area(s)	Chicago City Wide Currently			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$92,584			
Organization's Website Address www.csls.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name EdgeAlliance		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency		Tamesia Hoard, Program Director		
Email Address		thoard@edgealliance.org		
Business Address		1251 South Sawyer Avenue		
City, County, State, Zip,		Chicago	Cook	IL 60623
Phone Number (with area code)		773-420-7766	Fax Number (with area code) 773-935-4662	
Employer Identification Number (EIN) or Tax Identification Number (TIN)		36-3846410		
DUN & Bradstreet Number (DUNs):		019960913		
Congressional District of Project Sponsor's Business Address		7th District 2746 West Madison Street Chicago, IL 60612		
Congressional District(s) of Primary Service Area(s)		7 th District		
City(ies) and County(ies) of Primary Service Area(s)		Cities: Chicago		Counties: Cook
Total HOPWA contract amount for this Organization for the operating year		\$380,000		
Organization's Website Address www.edgealliance.org		Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.		
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name FOLA Community Action Services		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	F. Cornelius Ogundele, Director			
Email Address	fcasinc@yahoo.com			
Business Address	8014-18 S. Ashland			
City, County, State, Zip,	Chicago	Cook	IL	60620
Phone Number (with area code)	773-487-4310	Fax Number (with area code)		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36431784			
DUN & Bradstreet Number (DUNs):	1164878			
Congressional District of Project Sponsor's Business Address	1 st District 700 East 79 th Street Chicago, IL 60619			
Congressional District(s) of Primary Service Area(s)	1 st District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$60,000			
Organization's Website Address n/a	Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Haymarket Center (McDermott Center)		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Dr. Dan Lustig, VP of Clinical Services			
Email Address	dlustig@hcenter.org			
Business Address	120 North Sangamon			
City, County, State, Zip,	Chicago	Cook	IL	60607
Phone Number (with area code)	312-226-7984 ext 488		Fax Number (with area code) 312-226-8048	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	23-7249917			
DUN & Bradstreet Number (DUNs):	070696252			
Congressional District of Project Sponsor's Business Address	7 th Districts 3333 West Arthington Suite 130 Chicago, IL 60624			
Congressional District(s) of Primary Service Area(s)	7 th Districts			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$346,589			
Organization's Website Address www.hcenter.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Heartland Health Outreach		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Debbie Hinde, Executive Director			
Email Address	dhinde@heartlandalliance.org			
Business Address	4750 North Sheridan, Ste. 449			
City, County, State, Zip,	Chicago	Cook	Illinois	60640
Phone Number (with area code)	773-751-4104		Fax Number (with area code) 773-826-2109	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3775696			
DUN & Bradstreet Number (DUNs):	860981695			
Congressional District of Project Sponsor's Business Address	7 th District 2746 West Madison Street Chicago, IL 60612			
Congressional District(s) of Primary Service Area(s)	7 th District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$245,706			
Organization's Website Address www.heartlandalliance.org	Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Heartland Human Care Services, Inc. -Summit		Parent Company Name, if applicable	
Name and Title of Contact at Project Sponsor Agency	Katie Durrah, Program Director		
Email Address	kdurrah@heartlandalliance.org		
Business Address	208 South LaSalle, Ste. 1300		
City, County, State, Zip,	Chicago	Cook	Illinois 60604
Phone Number (with area code)	773-336-6020	Fax Number (with area code) 773-989-1935	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	E9953-1429-03		
DUN & Bradstreet Number (DUNs):	149584877		
Congressional District of Project Sponsor's Business Address	US Rep 5 th 3742 W. Irving Park Rd. Chicago IL 60618		
Congressional District(s) of Primary Service Area(s)	US Rep 9 th IL State Rep 14 th & 18th		
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago, Jefferson Park, River Grove, Melrose Park	Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$502,252		
Organization's Website Address www.heartlandalliance.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.		

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Housing Opportunities For Women, Inc.		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	David Mowery – Director of Government Relations			
Email Address	dmowery@how-inc.org			
Business Address	1607 W. Howard St. 2nd Floor			
City, County, State, Zip,	Chicago	Cook	Illinois	60626
Phone Number (with area code)	773-465-5770 x247		Fax Number (with area code) 773-465-5771	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-3263818			
DUN & Bradstreet Number (DUNS):	604532242			
Congressional District of Project Sponsor's Business Address	9 th District 3849 Wes Ogden Avenue Chicago IL 60623			
Congressional District(s) of Primary Service Area(s)	9 th District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$170,262			
Organization's Website Address www.how-inc.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Human Resources Development Institute, Inc.		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Joel K. Johnson, President/CEO			
Email Address	jjohnson@hrdi.org			
Business Address	222 S. Jefferson Street			
City, County, State, Zip,	Chicago	Cook	Illinois	60661
Phone Number (with area code)	312-441-9009		Fax Number (with area code) 312-441-9019	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-2894887			
DUN & Bradstreet Number (DUNs):	147007173			
Congressional District of Project Sponsor's Business Address	7 th District 3333 W. Arthington Suite 130 Chicago, IL 60624			
Congressional District(s) of Primary Service Area(s)	7 th District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	(Facility Based Housing Assistance - \$ 185,000) (Housing Information Services - \$72,000)			
Organization's Website Address www.hrdi.org	Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Open Door Health Center of Illinois		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Perry Maier, Executive Director			
Email Address	perrym@odhcil.org			
Business Address	1665 Larkin Ave.			
City, County, State, Zip,	Elgin	Cook	Illinois	60123
Phone Number (with area code)	847-695-1093 ext 219		Fax Number (with area code) 847-695-0501	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-2899274			
DUN & Bradstreet Number (DUNs):	792064313			
Congressional District of Project Sponsor's Business Address	6 th District 245 W. Roosevelt Rd. Ste 135 West Chicago, IL 60185			
Congressional District(s) of Primary Service Area(s)	6 th District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Addison, Aurora, Bensenville, Darien, West Chicago, Villa Park, Wheaton, Wayne		Counties: DuPage	
Total HOPWA contract amount for this Organization for the operating year	\$246,000			
Organization's Website Address www.odhcil.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name The Boulevard of Chicago		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Jennifer Nelson-Seals, Executive Director			
Email Address	j.seals@blvd.org			
Business Address	3456 W. Franklin Boulevard			
City, County, State, Zip,	Chicago	Cook	Illinois	60624
Phone Number (with area code)	773-533-6013 x225		Fax Number (with area code) 773-533-9034	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-4075641			
DUN & Bradstreet Number (DUNs):	054230573			
Congressional District of Project Sponsor's Business Address	7 th District 3333 West Arthington Suite 130 Chicago, IL 60624			
Congressional District(s) of Primary Service Area(s)	7 th District			
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$311,000			
Organization's Website Address www.blvd.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>				

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Legal Assistance Foundation		Parent Company Name, if applicable			
Name and Title of Contact at Project Sponsor Agency		Michelle J. Gilbert, Supervisory Attorney			
Email Address		mgilbert@lafchicago.org			
Business Address		120 S. LaSalle, Suite 900			
City, County, State, Zip,		Chicago	Cook	Illinois	60603
Phone Number (with area code)		312-347-8315		Fax Number (with area code) 312-612-1415	
Employer Identification Number (EIN) or Tax Identification Number (TIN)		36-2754650			
DUN & Bradstreet Number (DUNs):		06-8484294			
Congressional District of Project Sponsor's Business Address		7 th District 3333 W. Arthington Suite 130 th Chicago, IL 60624			
Congressional District(s) of Primary Service Area(s)		1 st , 2 nd , and 7 th District			
City(ies) and County(ies) of Primary Service Area(s)		Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year		\$116,166			
Organization's Website Address www.lafchicago.org		Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>		If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Pilsen Wellness Center		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency	Monica Masana, Program Manager			
Email Address	mmasana@pilsenmh.org			
Business Address	2625 W. 23 rd Street			
City, County, State, Zip,	Chicago	Cook	Illinois	60608
Phone Number (with area code)	773-579-0832 X-229	Fax Number (with area code) 773-376-0949		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-2836998			
DUN & Bradstreet Number (DUNs):	082554452			
Congressional District of Project Sponsor's Business Address	4 th District 2201 West North Ave Chicago, IL			
Congressional District(s) of Primary Service Area(s)	Chicagoland area			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year	\$80,000			
Organization's Website Address www.pilsenwellnesscenter.org	Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.			

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Puerto Rican Cultural Center		Parent Company Name, if applicable	
Name and Title of Contact at Project Sponsor Agency	Juan Calderon, Chief Operating Officer		
Email Address	juanc@prcc-chgo.org		
Business Address	2703 W. Division Street		
City, County, State, Zip,	Chicago	Cook	Illinois 60622
Phone Number (with area code)	<input type="text" value="773-278-6737"/>	Fax Number (with area code)	
Employer Identification Number (EIN) or Tax Identification Number (TIN)	<input type="text" value="23-7347778"/>		
DUN & Bradstreet Number (DUNs):	<input type="text" value="085858900"/>		
Congressional District of Project Sponsor's Business Address	2703 W. Division St., Chicago, IL		
Congressional District(s) of Primary Service Area(s)	4 th Congressional District		
City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook
Total HOPWA contract amount for this Organization for the operating year	(Facility-Based Housing Assistance - \$130,000) (Housing Information Services - \$70,000)		
Organization's Website Address www.prcc-chgo.org	Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>	If yes, explain in the narrative section how this list is administered.		

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsors, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Note: Please see Definition section for distinctions between project sponsor and subrecipient

Project Sponsor Agency Name Unity Parenting and Counseling Inc.		Parent Company Name, if applicable			
Name and Title of Contact at Project Sponsor Agency		Flora Koppel, Executive Director			
Email Address		fkoppel@unityparenting.org			
Business Address		600 West Cermak Suite 300			
City, County, State, Zip,		Chicago	Cook	Illinois	60616
Phone Number (with area code)		312-455-0007		Fax Number (with area code) 312-455-0038	
Employer Identification Number (EIN) or Tax Identification Number (TIN)		36-4029502			
DUN & Bradstreet Number (DUNs):		808801567			
Congressional District of Project Sponsor's Business Address		4 th District 3210 West North Ave Chicago IL 60647			
Congressional District(s) of Primary Service Area(s)		4 th District			
City(ies) and County(ies) of Primary Service Area(s)		Cities: Chicago		Counties: Cook	
Total HOPWA contract amount for this Organization for the operating year		\$100,000			
Organization's Website Address www.unityparenting.org			Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input checked="" type="checkbox"/>			If yes, explain in the narrative section how this list is administered.		



Housing Opportunities for Persons with AIDS (HOPWA) Program

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

Revised 1/22/15

OMB Number 2506-0133 (Expiration Date: 12/31/2017)

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. The public reporting burden for the collection of information is estimated to average 42 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, in conjunction with the Integrated Disbursement Information System (IDIS), 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, and complete annual performance information for all activities undertaken during each program year in the IDIS, demonstrating coordination with other Consolidated Plan resources. HUD uses the CAPER and IDIS data to obtain essential information on grant activities, project sponsors, Subrecipient organizations, 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 received HOPWA funding for new construction, acquisition, or substantial rehabilitations are required to operate their facilities 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 Certification of Continued Project Operation throughout the required use periods. This certification is included in Part 6 in CAPER. The required use period is three (3) years if the rehabilitation is non-substantial.

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 HOPWA-funded homeless assistance projects. These project sponsor/subrecipient 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, and Housing Status or Destination at the end of the operating year. Other suggested but optional elements are: Physical Disability, Developmental Disability, Chronic Health Condition, Mental Health, Substance Abuse, Domestic Violence, Date of Contact, Date of Engagement, Financial

Assistance, Housing Relocation & Stabilization Services, Employment, Education, General Health Status, , Pregnancy Status, Reasons for Leaving, Veteran’s Information, and Children’s Education. Other HOPWA projects sponsors may also benefit from collecting these data elements.

Final Assembly of Report. After the entire report is assembled, please 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 HOPWA@hud.gov. 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 7212, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, D.C.

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.**

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:

HOPWA 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.

Central Contractor Registration (CCR): The primary registrant database for the U.S. Federal Government. CCR collects, validates, stores, and disseminates data in support of agency acquisition missions, including Federal agency contract and assistance awards. Both current and potential federal government registrants (**grantees**) are required to register in CCR in order to be awarded contracts by the federal government. Registrants must update or renew their registration at least once per year to maintain an active status. Although recipients of direct federal contracts and grant awards have been required to be registered with CCR since 2003, this requirement is now being extended to indirect recipients of federal funds with the passage of ARRA (American Recovery and Reinvestment Act). Per ARRA and FFATA (Federal Funding Accountability and Transparency Act) federal regulations, all **grantees** and sub-grantees or subcontractors receiving federal grant awards or contracts must have a DUNS (Data Universal Numbering System) Number.

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 non-beneficiaries (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 involve 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 rate established in HUD notices, such as the rate of ten dollars per hour. 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 well-being 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 the *Code of Federal Regulations Title 24, Part 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 for state and local governments at 24 CFR 85.25, or for non-profits at 24 CFR 84.24.

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

Project Sponsor Organizations: 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. Funding flows to a project sponsor as follows:

HUD Funding → Grantee → Project Sponsor

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.

Subrecipient Organization: Any organization that receives funds from a project sponsor to provide eligible housing and other support services and/or administrative services as defined in 24 CFR 574.300. If a subrecipient organization provides housing and/or other supportive services directly to clients, the subrecipient organization must provide performance data on household served and funds expended. Funding flows to subrecipients as follows:

HUD Funding → Grantee → Project Sponsor → Subrecipient

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.

Housing Opportunities for Person with AIDS (HOPWA) Consolidated Annual Performance and Evaluation Report (CAPER) Measuring Performance Outputs and Outcomes

OMB Number 2506-0133 (Expiration Date: 10/31/2017)

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 CFR 574.3. In Chart 3, indicate each subrecipient organization with a contract/agreement of \$25,000 or greater that assists grantees or project sponsors carrying out their administrative or evaluation activities. In Chart 4, indicate each subrecipient organization with a contract/agreement to provide HOPWA-funded services to client households. These elements address requirements in the Federal Funding and Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definition section for distinctions between project sponsor and subrecipient.

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 ILH013-F001	Operating Year for this report <i>From (mm/dd/yy)</i> 01/01/2016 <i>To (mm/dd/yy)</i> 12/31/2016			
Grantee Name City of Chicago Department of Public Health – STI/HIV Division				
Business Address	333 South State Street, DePaul Center, 2 nd Floor			
City, County, State, Zip	Chicago	Cook	IL	60604
Employer Identification Number (EIN) or Tax Identification Number (TIN)	36-600-5820			
DUN & Bradstreet Number (DUNs):	956-049-399	Central Contractor Registration (CCR): Is the grantee's CCR status currently active? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide CCR Number:		
Congressional District of Grantee's Business Address	7th			
*Congressional District of Primary Service Area(s)	7th			
*City(ies) and County(ies) of Primary Service Area(s)	Cities: Chicago		Counties: Cook	
Organization's Website Address www.cityofchicago.org	Is there a waiting list(s) for HOPWA Housing Subsidy Assistance Services in the Grantee service Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain in the narrative section what services maintain a waiting list and how this list is administered.			

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

2. Project Sponsor Information See Attachment: 2016 City of Chicago – Project Sponsors Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households. These elements address requirements in the Federal Financial Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Project Sponsor Agency Name		Parent Company Name, <i>if applicable</i>		
Name and Title of Contact at Project Sponsor Agency				
Email Address				
Business Address				
City, County, State, Zip,				
Phone Number (<i>with area code</i>)				
Employer Identification Number (EIN) or Tax Identification Number (TIN)		Fax Number (<i>with area code</i>)		
DUN & Bradstreet Number (DUNs):				
Congressional District of Project Sponsor's Business Address				
Congressional District(s) of Primary Service Area(s)				
City(ies) <u>and</u> County(ies) of Primary Service Area(s)		Cities:	Counties:	
Total HOPWA contract amount for this Organization for the operating year				
Organization's Website Address				
Is the sponsor a nonprofit organization? <input type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input type="checkbox"/>		Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.		

3. Administrative Subrecipient Information

Use Chart 3 to provide the following information for each subrecipient with a contract/agreement of \$25,000 or greater that assists project sponsors to carry out their administrative services but no services directly to client households. Agreements include: grants, subgrants, loans, awards, cooperative agreements, and other forms of financial assistance; and contracts, subcontracts, purchase orders, task orders, and delivery orders. (Organizations listed may have contracts with project sponsors) These elements address requirements in the Federal Funding and Accountability and Transparency Act of 2006 (Public Law 109-282).

Note: Please see the definitions for distinctions between project sponsor and subrecipient.

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

Subrecipient Name				Parent Company Name, if applicable
Name and Title of Contact at Subrecipient				
Email Address				
Business Address				
City, State, Zip, County				
Phone Number (with area code)			Fax Number (include area code)	
Employer Identification Number (EIN) or Tax Identification Number (TIN)				
DUN & Bradstreet Number (DUNs):				
North American Industry Classification System (NAICS) Code				
Congressional District of Subrecipient's Business Address				
Congressional District of Primary Service Area				
City (ies) <u>and</u> County (ies) of Primary Service Area(s)	Cities:		Counties:	
Total HOPWA Subcontract Amount of this Organization for the operating year				

4. Program Subrecipient Information

Complete the following information for each subrecipient organization providing HOPWA-funded services to client households. These organizations would hold a contract/agreement with a project sponsor(s) to provide these services. For example, a subrecipient organization may receive funds from a project sponsor to provide nutritional services for clients residing within a HOPWA facility-based housing program. Please note that subrecipients who work directly with client households must provide performance data for the grantee to include in Parts 2-7 of the CAPER.

Note: Please see the definition of a subrecipient for more information.

Note: Types of contracts/agreements may include: grants, sub-grants, loans, awards, cooperative agreements, and other forms of financial assistance; and contracts, subcontracts, purchase orders, task orders, and delivery orders.

Note: If any information is not applicable to the organization, please report N/A in the appropriate box. Do not leave boxes blank.

Sub-recipient Name		Parent Company Name, if applicable		
Name <u>and</u> Title of Contact at Contractor/ Sub-contractor Agency				
Email Address				
Business Address				
City, County, State, Zip				
Phone Number (included area code)			Fax Number (include area code)	
Employer Identification Number (EIN) or Tax Identification Number (TIN)				
DUN & Bradstreet Number (DUNs)				
North American Industry Classification System (NAICS) Code				
Congressional District of the Sub-recipient's Business Address				
Congressional District(s) of Primary Service Area				
City(ies) <u>and</u> County(ies) of Primary Service Area	Cities:		Counties:	
Total HOPWA Subcontract Amount of this Organization for the operating year				

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.*

The Chicago Department of Public Health (CDPH), Division of STI/HIV (the Division) coordinates and oversees a broad range of HIV/AIDS programs including direct services, public policy advocacy and prevention, and service provider education and training. Since 1992, the Division has served as the grantee of the Housing Opportunities for Persons with AIDS (HOPWA) program. The Division is also the recipient of Community Development Block Grant funds for housing services, HIV prevention funding from the Centers for Disease Prevention and Control, and Ryan White Title I funds from the Health Resources and Services Administration.

As the recipient of these funds, the Division is uniquely able to meet the variety of needs of people living with HIV. In partnership with two community planning bodies, the Division regularly undertakes through needs assessment processes and develops comprehensive plans to prioritize HIV needs and allocate resources, allowing the Chicago area to maximize resources and leverage additional ones.

The Division conducts site visits each year to every project sponsor funded under the HOPWA program. Compliance with all related HOPWA guidelines and requirements is determined via review of the condition of housing units provided to program participants, examination of files to verify clients' HIV/AIDS medical status and income eligibility and administrative and fiscal documentation and processes. Project Sponsors are selected via a Request for Proposals (RFP) process.

The Division's HIV Housing program has ongoing experience with collaboration, planning, and decision-making around multiple HIV/AIDS-related service and prevention projects across different organizations and service providers. The Housing staff has worked to promote active participation in the Chicago Area HIV Integrated Services Council (CAHISC) planning body of our providers to assure housing has an active presence and voice when overall planning is conducted for the City of Chicago and for all 3 major programs: CDC – HIV Prevention; Ryan White Care; and HOPWA. During FY 2016, 55% of our project sponsors actively participated in the CAHISC Planning Body. 5 HOPWA service providers were involved in leadership role in the planning body: 1 was the overall CAHISC Co-Chair Elect; 4 were co-chairs for the 4 main working committees. The CAHISC Council integrates the mandated HIV Prevention Planning Group and Ryan White Part A- Planning Council, and includes the HIV Housing Program. The HIV Housing program is an active partner with AIDS Foundation of Chicago in the development, implementation, and evaluation of the 2013–2017 Five-Year Chicago Area AIDS Housing Plan. We also support the AIDS Housing Advisory Council. The council consists of consumers of HOPWA program. In 2016 the Council was active in the Chicago Area HIV Integrated Planning Council (CAHISC).

In 2016 the Division's HIV Housing program developed the first HIV Continuum of Care among City of Chicago HOPWA Clients (FY 2015). It was the program's first time compiling individual client data to match with Chicago's Enhanced HIV/AIDS Re-HARS data base and place our HOPWA clients within the HIV/AIDS Cascade to assess status of our clients in the following areas: linked to Care, accessing treatment & care for HIV, retained in care, and virally suppression. The pilot was conducted with our Facility-Based Housing Assistance and Tenant-Based Rental Assistance clients.

Results:

Of the 471 clients submitted by HOPWA funded agencies, 71% (n=332) were matched to Chicago's eHARS (Table 1). Among matched cases, 73% (n=241) were AIDS cases, and 34% (n=113) were diagnosed concurrently with both HIV and AIDS within a 12 month period. Seventy-four percent (n=245) of clients were male, 61% (n=201) were non-Hispanic (NH) Black, and 71% were over the age of 45. The most common mode of HIV transmission was MSM at 39% (n=130). Of the clients who were matched, 310 met the criteria for determining linkage to care. Fifty-one percent were linked within 3 months of diagnosis (n=158), compared to 82% for the Chicago EMA (Fig. 1).

Linkage within 3 months was higher among men (54%, n=124) compared to women (43%, n=34), and lowest among NH Whites (44%, n=16), heterosexuals (41%, n=20), and clients aged 25-34 years (45%, n=46) (Figs. 2-5).

A total of 332 individuals met the criteria for determining accessing care, retention, and viral suppression. Overall, a larger proportion of HOPWA clients were shown to access care, be retained in care, and be virally suppressed compared to the rest of the Chicago EMA. Retention in care was 73% among all clients included in the analysis, and was higher among men (74%, n=177) compared to women (70%, n=60), and lowest among NH Blacks (67%, n=132), heterosexuals (67%, n=34), and clients aged 25-34 years (61%, n=11) (Figs. 1-5). Viral suppression was 66% among clients included in the analysis. A higher proportion of men (68%, n=162) were virally suppressed than women (60%, n=51). Viral suppression was lowest among NH Blacks (59%, n=115), clients aged 25-34 years (44%, n=8), and heterosexuals (55%, n=28).

During FY 2017 we aim to compile data from clients in all 3 service categories and include other pertinent data elements such as types of support services accessed, among others. The data will be crucial in targeting housing assistance and support services to all HOPWA recipients.

In FY 2016, the HOPWA program received an \$885,127 decrease in funding. Obviously, the decrease impacted our overall scopes of services. HOPWA resources are directed toward the provision of facility-based housing assistance, housing information services and tenant based rental assistance activities. The HIV Housing program provided the following units of service: Facility-Based Housing Assistance (FBHA) 408; Tenant-Based Rental Assistance (TBRA) 386; Housing Information Services (HIS) 797. Housing services were negatively impacted by increase in fair market rents, and the overall status of our economy. HOPWA formula funds were expended in the following categories of services:

Facility-Based Housing Assistance	\$3,890,684
Housing Information Services	\$1,025,357
Tenant Based Rental Assistance (includes STRMU)	\$1,490,000

HIVIDS Housing Staff is composed of three Public Health professionals:

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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 program year among different categories of housing and geographic areas to address needs throughout the grant service area, consistent with approved plans.

The main barrier in providing housing assistance continues to be the high fair market rent in Chicago and the shrinking housing market. The HOPWA resources are directed toward the provision of facility-based housing assistance, housing information services, and tenant-based rental assistance and financial aid activities for its homeless assistance program. In 2016 we had 22 Project Sponsors, and 26 programs throughout the Chicago EMSA. 4 of our Project Sponsors are funded in two different service categories. 18 provided facility-based housing assistance, 1 provided Tenant Based Rental Assistance and 7 were providers of Housing Information/Advocacy Services. Overall the Division HOPWA provided 1,591 units of service to households in the HOPWA program.

The HIV Housing program provided the following units of service: Facility-Based Housing assistance 408; Tenant-Based Rental Assistance (TBRA) 386; Housing Information Services 797. Housing services were negatively impacted by increase in fair market rents, and the overall status of our economy. HOPWA formula funds were expended in the following categories of services:

Facility-Based Housing Assistance	\$3,890,684
Housing Information Services	\$1,025,357
Tenant Based Rental Assistance (includes STRMU)	\$1,490,000

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.

During PY16 100% of our clients had a housing plan for maintaining or establishing stable on-going housing, had contact with case manager /benefits counselor consistent with the schedule specified in client's individual service plan, and successfully accessed or maintained qualification for sources of income. All clients had at least 2 contact visits with a primary health care provider consistent with the schedule specified in client's individual service plan, and have accessed and maintained medical insurance/assistance. The personnel at agencies are consistent in following-up with clients, and assuring they are moving forward in gaining housing stability, and in accessing the needed support service to address their needs.

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.

The Division has ongoing experience with collaboration, planning, and decision-making around multiple HIV/AIDS-related service and prevention projects across different organizations and service providers. The Division has been a member of the Consolidated Plan Steering Committee, a group that presents strategies in addressing the needs of low-income communities, and is a contributing partner in the formation of the Consolidated Plan that is submitted to the U.S. Department of Housing and Urban Development (HUD) each year. Additionally, the Division is active in the Chicago Alliance to End Homelessness (formerly the Chicago Continuum of Care). We also support the AIDS Housing Advisory Council. The council consists of mainly consumers of HOPWA programs. In 2016 the Council was active in participating in the integrated planning body – CAHISC. As participants of CAHISC our HOPWA clients receive orientation, information, training in leadership, and planning. They are also informed of services that are available to them such job openings, job training, and information about other HIV/AIDS Housing events, and planning bodies within their community and county.

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

No technical assistance need at this time.

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.

Affordable housing for low income families is not widely available and this constitutes a significant barrier to providing housing to people living with HIV/AIDS and their families.

The Fair Market Rents continue to rise, decreasing the housing availability options, and safe locations for households. Cost of living in the City of Chicago EMSA – continues to have a very high cost of living and fair market rates making the CPU's over HUD averages.

Housing HOPWA clients in the TBRA and FBHA service categories. Project Sponsors maintain a high standard of housing participants as quickly as possible in all its supportive housing programs by working to increase its pool of landlords through which it can identify units for program participants. However, participants sometimes face barriers in securing housing within 45 days due to application rejections. The program also honors participant's preference; as such, housing location may take longer than 45 days if the participant has specific needs or requirements for their unit.

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.

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

In 2016 the Division’s HIV Housing program developed the first HIV Continuum of Care among City of Chicago HOPWA Clients (FY 2015). It was the program’s first time compiling individual client data to match with Chicago’s Enhanced HIV/AIDS Re-HARS data base and place our HOPWA clients within the HIV/AIDS Cascade to assess status of our clients in the following areas: linked to Care, accessing treatment & care for HIV, retained in care, and virally suppression. The pilot was conducted with our Facility-Based Housing Assistance and Tenant-Based Rental Assistance clients.

d. Unmet Housing Needs: An Assessment of Unmet Housing Needs

In Chart 1, provide an assessment of the number of HOPWA-eligible households that require HOPWA housing subsidy assistance but are not currently served by any HOPWA-funded housing subsidy assistance in this service area.

In Row 1, report the total unmet need of the geographical service area, as reported in *Unmet Needs for Persons with HIV/AIDS*, Chart 1B of the Consolidated or Annual Plan(s), or as reported under HOPWA worksheet in the Needs Workbook of the Consolidated Planning Management Process (CPMP) tool.

Note: Report most current data available, through Consolidated or Annual Plan(s), and account for local housing issues, or changes in HIV/AIDS cases, by using combination of one or more of the sources in Chart 2.

If data is collected on the type of housing that is needed in Rows a. through c., enter the number of HOPWA-eligible households by type of housing subsidy assistance needed. For an approximate breakdown of overall unmet need by type of housing subsidy assistance refer to the Consolidated or Annual Plan (s), CPMP tool or local distribution of funds. Do not include clients who are already receiving HOPWA-funded housing subsidy assistance.

Refer to Chart 2, and check all sources consulted to calculate unmet need. Reference any data from neighboring states’ or municipalities’ Consolidated Plan or other planning efforts that informed the assessment of Unmet Need in your service area.

Note: In order to ensure that the unmet need assessment for the region is comprehensive, HOPWA formula grantees should include those unmet needs assessed by HOPWA competitive grantees operating within the service area.

1. Planning Estimate of Area’s Unmet Needs for HOPWA-Eligible Households

1. Total number of households that have unmet housing subsidy assistance need.	1,550
2. From the total reported in Row 1, identify the number of households with unmet housing needs by type of housing subsidy assistance:	400
a. Tenant-Based Rental Assistance (TBRA)	
b. Short-Term Rent, Mortgage and Utility payments (STRMU)	800
• Assistance with rental costs	
• Assistance with mortgage payments	
• Assistance with utility costs.	
c. Housing Facilities, such as community residences, SRO dwellings, other housing facilities	350

2. Recommended Data Sources for Assessing Unmet Need (check all sources used)

X	= Data as reported in the area Consolidated Plan, e.g. Table 1B, CPMP charts, and related narratives
	= Data established by area HIV/AIDS housing planning and coordination efforts, e.g. Continuum of Care
	= Data from client information provided in Homeless Management Information Systems (HMIS)
	= Data from project sponsors or housing providers, including waiting lists for assistance or other assessments on need including those completed by HOPWA competitive grantees operating in the region.
	= Data from prisons or jails on persons being discharged with HIV/AIDS, if mandatory testing is conducted
	= Data from local Ryan White Planning Councils or reported in CARE Act Data Reports, e.g. number of clients with permanent housing
	= Data collected for HIV/AIDS surveillance reporting or other health assessments, e.g. local health department or CDC surveillance data

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.

A. Source of Leveraging Chart

[1] Source of Leveraging	[2] Amount of Leveraged Funds	[3] Type of Contribution	[4] Housing Subsidy Assistance or Other Support
Public Funding			
Ryan White-Housing Assistance			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Ryan White-Other	\$164,797	Case Management	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
Housing Choice Voucher Program			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Low Income Housing Tax Credit			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
HOME			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Shelter Plus Care			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Emergency Solutions Grant			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Public: Fundraising	\$50,000	Agencies Fundraising	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
Other Public: HUD, COC, SHP	\$462,016	COC Grant & Homeless Assistance Program	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
Other Public: DFSS, DRS	\$225,000	Case Management, Mental Health Services	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
Other Public: IDHS, Supportive Housing	\$45,258	Educational Services, Case Management,	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
Private Funding			
Grants: Chicago Community Trust Fund, Private Foundations	\$105,000	Case Management	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
In-kind Resources	\$10,1000	Donations: Clothing, Materials, Volunteers	<input type="checkbox"/> Housing Subsidy Assistance X <input type="checkbox"/> Other Support
Other Private:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Private:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Funding			
Grantee/Project Sponsor/Subrecipient (Agency) Cash			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support

Resident Rent Payments by Client to Private Landlord			
TOTAL (Sum of all Rows)	\$1,062,171.00		

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 program income. (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.

Note: The total households assisted with HOPWA funds and reported in PART 3 of the CAPER should be the same as reported in the annual year-end IDIS data, and goals reported should be consistent with the Annual Plan information. Any discrepancies or deviations should be explained in the narrative section of PART 1.

1. HOPWA Performance Planned Goal and Actual Outputs

HOPWA Performance Planned Goal and Actual		[1] Output: Households				[2] Output: Funding	
		HOPWA Assistance		Leveraged Households		HOPWA Funds	
		a.	b.	c.	d.	e.	f.
		Goal	Actual	Goal	Actual	HOPWA Budget	HOPWA Actual
HOPWA Housing Subsidy Assistance		[1] Output: Households				[2] Output: Funding	
1.	Tenant-Based Rental Assistance	282	386			1,490,000	1,384,129
2a.	Permanent Housing Facilities: Received Operating Subsidies/Leased units (Households Served)	484	408			3,890,684	3,325,999
2b.	Transitional/Short-term Facilities: Received Operating Subsidies/Leased units (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)						
4.	Short-Term Rent, Mortgage and Utility Assistance						
5.	Permanent Housing Placement Services						
6.	Adjustments for duplication (subtract)						
7.	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)	766	794			5,380,684	4,710,128
Housing Development (Construction and Stewardship of facility based housing)		[1] Output: Housing Units				[2] Output: Funding	
8.	Facility-based units; Capital Development Projects not yet opened (Housing Units)						
9.	Stewardship Units subject to 3 or 10 year use agreements						
10.	Total Housing Developed (Sum of Rows 8 & 9)						
Supportive Services		[1] Output Households				[2] Output: Funding	
11a.	Supportive Services provided by project sponsors/subrecipient that also delivered HOPWA housing subsidy assistance						
11b.	Supportive Services provided by project sponsors/subrecipient that only provided supportive services.						
12.	Adjustment for duplication (subtract)						
13.	Total Supportive Services (Columns a. – d. equal 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] Output Households				[2] Output: Funding	
14.	Housing Information Services	774	797			1,025,357	1,019,252
15.	Total Housing Information Services	797	797			1,025,357	1,019,252

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)			191,110	175,018
19.	Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded)			382,889	322,127
20.	Total Grant Administration and Other Activities (Sum of Rows 16 – 19)			573,99	497,145
Total Expended				[2] Outputs: HOPWA Funds Expended	
				Budget	Actual
21.	Total Expenditures for program year (Sum of Rows 7, 10, 13, 15, and 20)			6,980,040	6,226,525

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	0	0
2.	Alcohol and drug abuse services	0	0
3.	Case management	0	0
4.	Child care and other child services	0	0
5.	Education	0	0
6.	Employment assistance and training	0	0
7.	Health/medical/intensive care services, if approved Note: Client records must conform with 24 CFR §574.310	0	0
8.	Legal services	0	0
9.	Life skills management (outside of case management)	0	0
10.	Meals/nutritional services	0	0
11.	Mental health services	0	0
12.	Outreach	0	0
13.	Transportation	0	0
14.	Other Activity (if approved in grant agreement). Specify:	0	0
15.	Sub-Total Households receiving Supportive Services (Sum of Rows 1-14)	0	
16.	Adjustment for Duplication (subtract)	0	
17.	TOTAL Unduplicated Households receiving Supportive Services (Column [1] equals Row 15 minus Row 16; Column [2] equals sum of Rows 1-14)	0	0

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 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.

Housing 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)		

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: Number of Households that exited this HOPWA Program; their Housing Status after Exiting		[4] HOPWA Client Outcomes
Tenant-Based Rental Assistance	386	386	1 Emergency Shelter/Streets		<i>Unstable Arrangements</i>
			2 Temporary Housing		<i>Temporarily Stable, with Reduced Risk of Homelessness</i>
			3 Private Housing		<i>Stable/Permanent Housing (PH)</i>
			4 Other HOPWA		
			5 Other Subsidy		
			6 Institution		
			7 Jail/Prison		<i>Unstable Arrangements</i>
			8 Disconnected/Unknown		
			9 Death		
Permanent Supportive Housing Facilities/ Units	408	408	1 Emergency Shelter/Streets		<i>Unstable Arrangements</i>
			2 Temporary Housing		<i>Temporarily Stable, with Reduced Risk of Homelessness</i>
			3 Private Housing		<i>Stable/Permanent Housing (PH)</i>
			4 Other HOPWA		
			5 Other Subsidy		
			6 Institution		
			7 Jail/Prison		<i>Unstable Arrangements</i>
			8 Disconnected/Unknown		
			9 Death		

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: Number of Households that exited this HOPWA Program; their Housing Status after Exiting		[4] HOPWA Client Outcomes
Transitional/ Short-Term Housing Facilities/ Units			1 Emergency Shelter/Streets		<i>Unstable Arrangements</i>
			2 Temporary Housing		<i>Temporarily Stable with Reduced Risk of Homelessness</i>
			3 Private Housing		<i>Stable/Permanent Housing (PH)</i>
			4 Other HOPWA		
			5 Other Subsidy		
			6 Institution		
			7 Jail/Prison		<i>Unstable Arrangements</i>
			8 Disconnected/unknown		
			9 Death		

B1: Total number of households receiving transitional/short-term housing assistance whose tenure exceeded 24 months	
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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 or subrecipient’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].

Assessment of Households that Received STRMU Assistance

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

Section 3. HOPWA Outcomes on Access to Care and Support

1a. Total Number of Households

Line [1]: For project sponsors/subrecipients 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/subrecipients that did NOT 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 Households	
1. For Project Sponsors/Subrecipients 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	794
b. Case Management	0
c. Adjustment for duplication (subtraction)	0
d. Total Households Served by Project Sponsors/Subrecipients with Housing Subsidy Assistance (Sum of Rows a.b. minus Row c.)	794
2. For Project Sponsors/Subrecipients 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/Subrecipients without Housing Subsidy Assistance	

1b. Status of Households Accessing Care and Support

Column [1]: Of the households identified as receiving services from project sponsors/subrecipients 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 program year.

Column [2]: Of the households identified as receiving services from project sponsors/subrecipients 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 program 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/subrecipients that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following:	[2] For project sponsors/subrecipients 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	794		<i>Support for Stable Housing</i>
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)	794		<i>Access to Support</i>
3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan	794		<i>Access to Health Care</i>
4. Accessed and maintained medical insurance/assistance	794		<i>Access to Health Care</i>
5. Successfully accessed or maintained qualification for sources of income	794		<i>Sources of Income</i>

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

<ul style="list-style-type: none"> • MEDICAID Health Insurance Program, or use local program name • MEDICARE Health Insurance Program, or use local program name 	<ul style="list-style-type: none"> • Veterans Affairs Medical Services • AIDS Drug Assistance Program (ADAP) • State Children’s Health Insurance Program (SCHIP), or use local program name 	<ul style="list-style-type: none"> • Ryan White-funded Medical or Dental Assistance
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Chart 1b., Row 5: Sources of Income include, but are not limited to the following (Reference only)

<ul style="list-style-type: none"> • Earned Income • Veteran’s Pension • Unemployment Insurance • Pension from Former Job • Supplemental Security Income (SSI) 	<ul style="list-style-type: none"> • Child Support • Social Security Disability Income (SSDI) • Alimony or other Spousal Support • Veteran’s Disability Payment • Retirement Income from Social Security • Worker’s Compensation 	<ul style="list-style-type: none"> • General Assistance (GA), or use local program name • Private Disability Insurance • Temporary Assistance for Needy Families (TANF) • Other Income Sources
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1c. Households that Obtained Employment

Column [1]: Of the households identified as receiving services from project sponsors/subrecipients 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/subrecipients 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/subrecipients 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/subrecipients that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following:	[2] For project sponsors/subrecipients 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	70	

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 Housing Subsidy Assistance	Stable Housing (# of households remaining in program plus 3+4+5+6)	Temporary Housing (2)	Unstable Arrangements (1+7+8)	Life Event (9)
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 Homelessness: Short-Term Assistance	Stable/Permanent Housing	Temporarily Stable, with Reduced Risk of Homelessness	Unstable Arrangements	Life Events
Short-Term Rent, Mortgage, and Utility Assistance (STRMU)				
Total HOPWA 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: Stable Housing 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. Temporary Housing is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item: 2. Unstable Situations is the sum of numbers reported under items: 1, 7, and 8.

Permanent Facility-Based Housing Assistance: Stable Housing 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 Housing is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. Unstable Situations is the sum of numbers reported under items: 1, 7, and 8.

Transitional/Short-Term Facility-Based Housing Assistance: Stable Housing 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 Temporary Housing is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. Unstable Situations 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: Stable Housing 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. Temporarily Stable, 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. Unstable Situation is the sum of number of households reported under housing status: Emergency Shelter; Jail/Prison; and Disconnected.

End of PART 5

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

The Annual Certification of 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) <input type="checkbox"/> Final Yr <input type="checkbox"/> Yr 1; <input type="checkbox"/> Yr 2; <input type="checkbox"/> Yr 3; <input type="checkbox"/> Yr 4; <input type="checkbox"/> Yr 5; <input type="checkbox"/> Yr 6; <input type="checkbox"/> Yr 7; <input type="checkbox"/> Yr 8; <input type="checkbox"/> Yr 9; <input type="checkbox"/> Yr 10;
Grantee Name	Date Facility Began Operations (mm/dd/yy)

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?	<input type="checkbox"/> Yes, protect information; do not list <input type="checkbox"/> 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	

I certify that the facility that received assistance for acquisition, rehabilitation, or new construction from the Housing Opportunities for Persons with AIDS Program has operated as a facility to assist HOPWA-eligible persons from the date shown above. I also certify that the grant is still serving the planned number of HOPWA-eligible households at this facility through leveraged resources and all other requirements of the grant agreement are being satisfied.

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

Name & Title of Authorized Official of the organization that continues to operate the facility:	Signature & Date (mm/dd/yy)
Name & Title of Contact at Grantee Agency (person who can answer questions about the report and program)	Contact Phone (with area code)

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) low-income individuals living with HIV/AIDS 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.	794

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.	<u>Continuing</u> to receive HOPWA support from the prior operating year	637
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)	47
3.	Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher)	19
4.	Transitional housing for homeless persons	20
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)	86
6.	Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod Rehab)	15
7.	Psychiatric hospital or other psychiatric facility	10
8.	Substance abuse treatment facility or detox center	14
9.	Hospital (non-psychiatric facility)	0
10.	Foster care home or foster care group home	0
11.	Jail, prison or juvenile detention facility	18
12.	Rented room, apartment, or house	0
13.	House you own	0
14.	Staying or living in someone else's (family and friends) room, apartment, or house	14
15.	Hotel or motel paid for without emergency shelter voucher	0
16.	Other	0
17.	Don't Know or Refused	0
18.	TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17)	794

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 not 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	6	77

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 HOPWA Eligible Individual

Note: See definition of Transgender.

Note: See definition of Beneficiaries.

Data Check: The sum of each 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.)	794
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	204
4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1,2, & 3)	1,002

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)						
		A.	B.	C.	D.	E.
		Male	Female	Transgender M to F	Transgender F to M	TOTAL (Sum of Columns A-D)
1.	Under 18	21	42	0	0	63
2.	18 to 30 years	57	17	11	0	85
3.	31 to 50 years	212	80	14	1	307
4.	51 years and Older	270	65	4	0	339
5.	Subtotal (Sum of Rows 1-4)	560	204	29	1	794
All Other Beneficiaries (Chart a, Rows 2 and 3)						
		A.	B.	C.	D.	E.
		Male	Female	Transgender M to F	Transgender F to M	TOTAL (Sum of Columns A-D)
6.	Under 18	11	0	0	0	11
7.	18 to 30 years	33	10	0	0	43
8.	31 to 50 years	63	26	0	0	89
9.	51 years and Older	45	20	0	0	65
10.	Subtotal (Sum of Rows 6-9)	152	56	0	0	208
Total Beneficiaries (Chart a, Row 4)						
11.	TOTAL (Sum of Rows 5 & 10)	712	260	29	1	1,002

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 race of all HOPWA eligible individuals in Column [A]. Report the ethnicity of all HOPWA eligible individuals in column [B]. Report the race of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [C]. Report the ethnicity 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 Eligible 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		0	
2.	Asian	6		4	
3.	Black/African American	569	59	130	14
4.	Native Hawaiian/Other Pacific Islander	0	0	0	
5.	White	139		24	
6.	American Indian/Alaskan Native & White	6		2	
7.	Asian & White	1		1	
8.	Black/African American & White	1		9	
9.	American Indian/Alaskan Native & Black/African American	2		0	
10.	Other Multi-Racial	68		24	
11.	Column Totals (Sum of Rows 1-10)	794	59	208	14

Data Check: Sum of Row 11 Column A and Row 11 Column C equals the total number HOPWA Beneficiaries reported in Part 3A, Section 2, Chart a., Row 4.

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

Section 3. Households

Household Area Median Income

Report the area median 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 http://www.huduser.org/portal/datasets/il/il2010/select_Geography_mfi.odn for information on area median income in your community.

Percentage of Area Median Income		Households Served with HOPWA Housing Subsidy Assistance
1.	0-30% of area median income (extremely low)	794
2.	31-50% of area median income (very low)	0
3.	51-80% of area median income (low)	0
4.	Total (Sum of Rows 1-3)	794

See Attachment: 2016 City of Chicago – Project Sponsors – Facility-Based Housing Assistance

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 or subrecipient should complete Part 6: Annual Certification of 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/Subrecipient 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."

	HOPWA Funds Expended this operating year (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility:
<input type="checkbox"/> New construction	\$	\$	Type of Facility [Check <u>only one</u> box.] <input type="checkbox"/> Permanent housing <input type="checkbox"/> Short-term Shelter or Transitional housing <input type="checkbox"/> Supportive services only facility
<input type="checkbox"/> Rehabilitation	\$	\$	
<input type="checkbox"/> Acquisition	\$	\$	
<input type="checkbox"/> Operating	\$	\$	
a.	Purchase/lease of property:		Date (mm/dd/yy):
b.	Rehabilitation/Construction Dates:		Date started: Date Completed:
c.	Operation dates:		Date residents began to occupy: <input type="checkbox"/> Not yet occupied
d.	Date supportive services began:		Date started: <input type="checkbox"/> Not yet providing services
e.	Number of units in the facility:		HOPWA-funded units = Total Units =
f.	Is a waiting list maintained for the facility?		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, number of participants on the list at the end of operating year</i>
g.	What is the address of the facility (if different from business address)?		
h.	Is the address of the project site confidential?		<input type="checkbox"/> Yes, protect information; do not publish list <input type="checkbox"/> 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 or Subrecipient

Charts 3a., 3b. and 4 are required for each facility. 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/subrecipient		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
a.	Single room occupancy dwelling					
b.	Community residence					
c.	Project-based rental assistance units or leased units					
d.	Other housing facility <u>Specify:</u>					

4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor/subrecipient 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/subrecipient
a.	Leasing Costs		
b.	Operating Costs		
c.	Project-Based Rental Assistance (PBRA) or other leased units		
d.	Other Activity (if approved in grant agreement) <u>Specify:</u>		
e.	Adjustment to eliminate duplication (subtract)		
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a. through d. minus Row e.)		

APPENDIX III

SUMMARY OF PUBLIC COMMENTS

SUMMARY OF PUBLIC COMMENTS

The Public Hearing was held on March 7, 2017 at the Chicago Cultural Center. The Hearing gave citizens the opportunity to comment on the 2016 Draft Comprehensive Annual Performance and Evaluation Report (CAPER) and input on developing the 2018 Annual Action Plan. The 15-day public comment period for the CAPER began March 7, 2017 and ended March 24, 2017. A summary of Public and written comments received during the comment period follows.

	Individual	Organization	Summary of Comments and Responses
1.	Melissa Siemasz	Chicago Children's Advocacy Center	<p>I'm from Chicago Children's Advocacy Center. I'm just here on our behalf. We receive CDBG funding through the Chicago Department of Public Health. We serve as first responders to reported child sexual abuse in the City of Chicago, and as part of that provide mental health services to children who have been reported as sexually abused. We received a CDBG grant two years ago that allowed us to expand our mental health services and hire three new therapists and a clinical supervisor. In the last year of that grant, we were able to serve 77 children through those therapists. And we're very pleased to have received a renewal of that grant. Thank you for that.</p> <p>City Response from the Office of Budget and Management: Thank you for your testimony.</p>
2.	Latisha Thomas	I Am We	<p>I am the founder and CEO of a nonprofit organization called I Am We. We are comprised of artists, educators, and anthropologists who came together to think about what would our city look like if young people had access to states of the arts in the community. We've been around for several years. We've been self-funded. We serve over 150 children each quarter through partnerships. We do various arts, art therapy; we are putting in cameras, violins, copy machines in underserved communities. We're making measurable impact and engagement of learning. And as a young organization, like I said, we have been self-funded. So our theory is that we're learning about all these opportunities, but when we show the evidence of our work and our claim in providing services in some of Chicago schools' underserved communities, there is no funding, and we are encouraged to come back. So I'm glad to hear about the work and impact that you're doing.</p> <p>City Response from the Office of Budget and Management: Thank you for your testimony.</p>

SUMMARY OF PUBLIC COMMENTS

The Public Hearing was held on March 7, 2017 at the Chicago Cultural Center. The Hearing gave citizens the opportunity to comment on the 2016 Draft Comprehensive Annual Performance and Evaluation Report (CAPER) and input on developing the 2018 Annual Action Plan. The 15-day public comment period for the CAPER began March 7, 2017 and ended March 24, 2017. A summary of Public and written comments received during the comment period follows.

3	Livial Gutierrez	Enlace Chicago	<p>I am the director of violence prevention at Enlace Chicago. And Enlace Chicago is in South Lawndale or Little Village. We primarily serve a migrant and immigrant community. And the CDBG block grant through the Department of Family & Support Services supports our mental health course, our school-based mentors program with intensive youth service grants. We serve at least 65 individual youths through one-on-one counseling. We serve over 111 individuals through our great family work, which is family therapy efforts. So I wanted to thank you for your support. But I also wanted to share some needs that are happening in this community that relevant to the panel. With individual youth that we're serving and our families, there's a lot of housing instability in the neighborhood as well as food access. And with the new political climate, given that a quarter of our population is undocumented, there's been an increase in mental health service needs. So even though the funding that we have doesn't directly supports this, it does allow us to have the staffing to have external support and interns to start responding to the needs that we're having. So we're developing service and support groups to do advocacy around responding to their needs. We have a community response plan that we're working on, and we're doing it right towards the end of this month.</p> <p>City Response from the Office of Budget and Management: Thank you for your testimony.</p>
4	Gisella Faggi	Chinese Mutual Aid Association	<p>I work with the Chinese Mutual Aid Association. We are located in Uptown. And we receive CDBG funding for a few services. I specifically manage our workforce services. And I just wish to know if you could speak a little bit about the funding priority specifically within workforce. And then also to a separate question, and this is just some of the rhetoric that's happening at the federal level that's affecting federal funding. I'm just wondering if you have any indication as to how this might affect CDBG funding in the future?</p> <p>City Response from OBM and DFSS: We have been in discussions with our HUD representatives just to find out what the environment -- the budgetary environment is going to look like for the upcoming year, and they themselves didn't have quite a lot of information to offer just yet. I think they're all still working out their own budgetary concerns, particularly with the U.S. Department of Housing and Urban Development, which runs all of our entitlement programs. We are anticipating that we will have level funding for next year. So we're trying to keep the program level to the extent that is possible. That's how we're proceeding now unless we have any other information that suggests otherwise. But so far we're doing whatever we can to keep programming level. Also, in regards to the 2018 priorities, I think as long as funding is level, our plan is to continue with the four existing programs. I do believe that there was a 12 slight reduction from 2016 to 2017 in the workforce.</p>

SUMMARY OF PUBLIC COMMENTS

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5	Zehra Quadri	ZAM's Hope Community Resource Center	<p>I'm from ZAM's Hope Community Resource Center located at 6401 North Artesian Avenue. I'm very thankful for the City of Chicago for community uplifting programs that you have. And we are very thankful from Department of Planning and Development receiving HUD HOME programs. And since last year -- actually, we are receiving so many refugee families, kids having problems because they do not speak English, drop out, they don't want to go to school because of bullying programs, stuff like that. And I'm requesting -- we do have after-school programs. We have services for seniors. ZAM's Hope built a commercial kitchen to provide Zabiha halal meat -- actually meal services for the neighborhood. And we have senior programing and grocery distribution. So I'm just requesting from City of Chicago from different departments, please visit ZAM's Hope Community Resource Center so you can see who we are and what we do instead of -- we are submitting our grant application every year, but we 1 are not receiving other departments' response. So I really want every one of you, if you're interested -- we have so many families, and we are all just one interfaces. And I could tell you a separate story that we do receive more than \$80,000 private funding from private donations that we are doing. We have -- we design clothes with our youth and senior programming. And everybody is volunteer. We have a community boutique that we auction our items. I'm just requesting from all of you to just pay a little bit attention, because the refugee families, 260 refugee families come here, and you have no neighborhood programs and stuff like this. It is very tough for us to handle, and so we need your attention. Thank you.</p> <p>City Response from the Office of Budget and Management: Thank you for your testimony.</p>
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6	Ray Stanton	South Side Church	<p>I have started attending a church at 102nd and South Halsted. The bishop asked me in November to be a speaker and that evening I got to meet a lot of the pastors and reverends on the South Side and talk with them. And it seems to me that there's a lot of church organizations that probably have about 100,000 kids off the streets. And I was really encouraged by what I saw within that community. And I started saying, No, I don't see -- I see gymnasiums, but I don't see any life skill programs. I don't see any motivational stuff. You know, a lot of creative arts is out of the schools across the country now. I mean, I don't have any answers, but I'm putting together programs. So I'm getting a lot of excitement generated. Now I need to find out ways to fund it.</p> <p>City Response from the Office of Budget and Management: What we can help you with is with grant writing first and foremost. I don't know if your organization has ever applied for funding through the City of Chicago, but that would be the first step, is to get you some basic grant technical assistance so that when we do have our next RFP, you will already have been in our database and we can invite you to our technical assistance session and we can help you apply for funding when that funding is available through the City.</p>
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