



Housing Opportunities for Persons with AIDS (HOPWA) Program

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

OMB Number 2506-0133 (Expiration Date: 10/31/2014)

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.

Table of Contents

PART 1: Grantee Executive Summary

1. Grantee Information
2. Project Sponsor Information
3. Administrative Subrecipient Information
4. Program Subrecipient Information
5. Grantee Narrative and Performance Assessment
 - a. Grantee and Community Overview
 - b. Annual Performance under the Action Plan
 - c. Barriers or Trends Overview
 - d. Assessment of Unmet Housing Needs

PART 2: Sources of Leveraging and Program Income

1. Sources of Leveraging
2. Program Income and Resident Rent Payments

PART 3: Accomplishment Data: Planned Goals and Actual Outputs

PART 4: Summary of Performance Outcomes

1. Housing Stability: Permanent Housing and Related Facilities
2. Prevention of Homelessness: Short-Term Housing Payments
3. Access to Care and Support: Housing Subsidy Assistance with Supportive Services

PART 5: Worksheet - Determining Housing Stability Outcomes

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

PART 7: Summary Overview of Grant Activities

- A. Information on Individuals, Beneficiaries and Households Receiving HOPWA Housing Subsidy Assistance (TBRA, STRMU, PHP, Facility Based Units, Master Leased Units ONLY)
- B. Facility-Based Housing Assistance

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: 10/31/2014)

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 KYH14F999		Operating Year for this report From (mm/dd/yy) 07/01/14 To (mm/dd/yy) 06/30/15		
Grantee Name Kentucky Housing Corporation				
Business Address		1231 Louisville Rd.		
City, County, State, Zip	Frankfort	Franklin	KY	40601
Employer Identification Number (EIN) or Tax Identification Number (TIN)		610864674		
DUN & Bradstreet Number (DUNs):		082316696	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	6			
*Congressional District of Primary Service Area(s)	N/A			
*City(ies) and County(ies) of Primary Service Area(s)	Cities: N/A		Counties: N/A	
Organization's Website Address www.kyhousing.org		Is there a waiting list(s) for HOPWA Housing Subsidy Assistance Services in the Grantee service Area? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain in the narrative section what services maintain a waiting list and how this list is administered. N/A		

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

2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by 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 AIDS Volunteers, Inc. (AVOL)		Parent Company Name, if applicable	
Name and Title of Contact at Project Sponsor Agency	Tami O. Damron, Director of Client Services		
Email Address	tami@avolky.org		
Business Address	225 Walton Ave, Suite 110		
City, County, State, Zip,	Lexington, KY 40502		
Phone Number (with area code)	859-225-3000		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	61-1149457	Fax Number (with area code) 859-225-9244	
DUN & Bradstreet Number (DUNS):	01-330 194		
Congressional District of Project Sponsor's Business Address	6		
Congressional District(s) of Primary Service Area(s)	4, 5, 6		
City(ies) and County(ies) of Primary Service Area(s)	Counties: Adair, Anderson, Bath, Bell, Boone, Bourbon, Boyd, Boyle, Bracken, Breathitt, Campbell, Carroll, Carter, Casey, Clark, Clay, Clinton, Cumberland, Elliott, Estill, Fayette, Fleming, Floyd, Franklin, Gallatin, Garrard, Grant, Green, Greenup, Harlan, Harrison, Jackson, Jessamine, Johnson, Kenton, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, Madison, Magoffin, Martin, Mason, McCreary, Menifee, Mercer, Montgomery, Morgan, Nicholas, Owen, Owsley, Pendleton, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Scott, Taylor, Wayne, Whitley, Wolf, and Woodford		
Total HOPWA contract amount for this Organization for the operating year	\$406,581.05	Counties: please see above list	
Organization's Website Address www.avolky.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 type="checkbox"/>	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.		

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.

Project Sponsor Agency Name Blue Grass Community Action Partnership		Parent Company Name, if applicable NA	
Name and Title of Contact at Project Sponsor Agency	Troy Roberts		
Email Address	Troy.roberts@bgcap.org		
Business Address	111 Professional Court		
City, County, State, Zip,	Frankfort, Franklin, Ky. 40601		
Phone Number (with area code)	502-695-4290 ext. 213		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	61-0659583	Fax Number (with area code) 502-695-1075	
DUN & Bradstreet Number (DUNs):	144314226		
Congressional District of Project Sponsor's Business Address	06		
Congressional District(s) of Primary Service Area(s)	06		
City(ies) and County(ies) of Primary Service Area(s)	Cities: Lawrenceburg, Frankfort, Nicholasville, Georgetown and Versailles		
Total HOPWA contract amount for this Organization for the operating year	\$20,054.83	Counties: Anderson, Franklin, Jessamine, Scott and Woodford	
Organization's Website Address www.bluegrasscommunityactionpartnership.org	Does your organization maintain a waiting list? X Yes <input type="checkbox"/> No If yes, explain in the narrative section how this list is administered.		
Is the sponsor a nonprofit organization? X 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? X Yes <input type="checkbox"/> No 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.

Project Sponsor Agency Name Heartland CARES, Inc.		Parent Company Name, if applicable	
Name and Title of Contact at Project Sponsor Agency	Steve Clark, Housing Team Leader		
Email Address	sclark@hcares.org		
Business Address	619 N.30 th Street		
City, County, State, Zip,	Paducah, McCracken, KY 42001		
Phone Number (with area code)	270-444-8183		
Employer Identification Number (EIN) or Tax Identification Number (TIN)	31-1525402	Fax Number (with area code) 270-933-1969	
DUN & Bradstreet Number (DUNs):	967244765		
Congressional District of Project Sponsor's Business Address	District 1		
Congressional District(s) of Primary Service Area(s)	District 1 & 2		
City(ies) and County(ies) of Primary Service Area(s)	Cities: Paducah, Bowling Green, Mayfield, Madisonville, Hopkinsville, Princeton, Franklin, Benton, Woodburn, Murray		
Total HOPWA contract amount for this Organization for the operating year	\$231,963.66	Counties: McCracken, Ballard, Carlisle, Graves, Fulton, Hickman, Marshall, Calloway, Livingston, Caldwell, Crittenden, Lyon, Todd, Trigg, Hopkins, Muhlenberg, Christian, Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, Warren	
Organization's Website Address www.hcares.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 type="checkbox"/>	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.		

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.

Project Sponsor Agency Name Matthew 25 AIDS Services		Parent Company Name, if applicable		
Name and Title of Contact at Project Sponsor Agency		Cyndee Burton		
Email Address		cburton@matthew25clinic.org		
Business Address		452 Old Corydon Rd.		
City, County, State, Zip,		Henderson		
Phone Number (with area code)		270	826	0200
Employer Identification Number (EIN) or Tax Identification Number (TIN)		61-1351672	Fax Number (with area code) 270-826-0212	
DUN & Bradstreet Number (DUNs):		188633734		
Congressional District of Project Sponsor's Business Address		First		
Congressional District(s) of Primary Service Area(s)		First		
City(ies) and County(ies) of Primary Service Area(s)		Counties: Breckinridge, Daviess, Grayson, Hancock, Hardin, Henderson, Larue, Marion, Meade, McLean, Nelson, Ohio, Union, Washington, Webster		
Total HOPWA contract amount for this Organization for the operating year		\$121,617	Counties: as above	
Organization's Website Address Matthew 25Clinic		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 type="checkbox"/>		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.		

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.*

AVOL- AVOL (AIDS Volunteers, Inc.) collaborates with communities to stop the spread of HIV/AIDS and to empower those affected. The primary goals of AVOL's Housing & Assistance Program are to reduce or eliminate clients' risk of homelessness; to assist clients in establishing and/or maintaining safe, affordable, stable permanent housing; and to increase clients' self-sufficiency by helping them increase income, connect to available resources, and improve access to healthcare and other supportive services.

During the reporting year, AVOL served 361 low-income clients in central and eastern Kentucky with HOPWA Formula funds. TBRA assistance exceeded the agency goal, with plans to further increase TBRA assistance in the current program year. The majority of clients served by AVOL fall into the lowest income category, often living on fixed disability incomes. The average household served survives on roughly \$900 a month. Without on-going subsidy assistance, these households struggle with housing burdens that often exceed 60% of their monthly gross incomes, leaving few resources for other basic needs, such as food and transportation. AVOL has found TBRA to be the most effective means to stabilize clients. The majority of clients receiving TBRA assistance (73%) continued receiving assistance into the new program year. Of those who exited TBRA, 75% achieved stable permanent housing. All clients who received short-term assistance (STRMU) avoided homelessness, with 46% achieving housing stability. Additionally, all clients who received case management and housing information services were provided basic financial management counseling, helping them prioritize limited resources to increase housing stability. These case management efforts coupled with a focus on increased TBRA assistance led to 26% decrease in the number of households that received STRMU assistance in two consecutive operating years, and a 65% decrease in the number of households that received STRMU assistance in three consecutive operating years.

AVOL's Housing & Assistance Program serves roughly 400 individuals living with HIV throughout the service area each year. Services are designed to reach underserved, at-risk populations, including those who are chronically homeless and precariously housed, those who have just released from jail and/or alcohol or drug recovery programs, and persons in the later stages of HIV disease. Through multiple funding sources, AVOL's Housing & Assistance Program provides an array of services to meet the needs of low-income individuals and families living with HIV in over 70 counties in Kentucky, including:

- Solomon House, a long-term permanent community residence for people with AIDS
- Rainbow Apartments, a small complex of furnished units for people living with HIV/AIDS, who are transitioning from homelessness to permanent housing
- Tenant-based rental assistance
- Short-term rent, mortgage, and utility assistance
- Permanent housing placement assistance, which provides deposits and first month's rent for individuals establishing housing
- Case management
- Housing information
- Transportation assistance
- Substance abuse/mental health treatment assistance
- Referrals to community resources for other basic needs

In addition, AVOL's Prevention Program provides HIV testing to 750 to 1,000 people each year, referring individuals newly diagnosed with HIV to needed housing and supportive services.

Tami Damron is AVOL's Director of Client Services and Jon Parker is the Executive Director.

BGCAP- Blue Grass Community Action Partnership is 501c3 private non-profit corporation that works to reduce the causes and conditions of poverty. The agency has dedicated resources to enable low-income earning, disadvantaged and disabled families and individuals of all ages and ethnic backgrounds to attain skills, knowledge and motivation to become fully self-sufficient.

Blue Grass Community Action proposed to provide emergency housing assistance, long term rental assistance and supportive service to persons with aids through the HOPWA program in the geographic areas of Anderson,

Franklin, Jessamine, Scott and Woodford Counties under the leadership of Troy Roberts, Executive Director, and Community Services Specialist, Tracy Fain and we are proud to have provided housing services to a total of 1 person living with HIV/AIDS. HOPWA eligible participants were successful in maintaining stable housing arrangements and were able to reduce their risk of homelessness and improve their access to care through HOPWA funds.

Heartland CARES- Heartland CARES, Inc. (HCI), located at 619 N. 30th Street, Paducah, KY 42001, started as a grantee of Housing Opportunities for People with AIDS in the operating year of 1996-1997. Through expanding case management and a close working relationship with other service agencies, Heartland CARES, Inc. strives to make the most resources available to the most clients in the most efficient manner possible. The Heartland CARES, Inc.'s HOPWA program provides rental assistance, mortgage payments, utility assistance, and case management to those individuals who meet the financial guidelines. In addition we can provide emergency assistance to homeless individuals. Eighty-six percent of our clients are either at or below the 300% federal poverty level, and last year, from all housing programs/grants, we assisted 175 persons (107 households) with housing and the same number with supportive services from a total client case load of 377. With such a high percentage of clients eligible for assistance, current funding is inadequate to meet the ongoing needs of persons living with HIV/AIDS. Heartland CARES, Inc. maintains a waiting list for all eligible individuals. Individuals must be HIV positive and at or below 80% of the median income for their respective county. Preference is given to individuals that are homeless or unsheltered. Through the HOPWA program we currently provide services to 27 counties in Kentucky which include: Allen, Ballard, Barren, Butler, Caldwell, Calloway, Carlisle, Crittenden, Graves, Hickman, Hopkins, Logan, Lyon, McCracken, Marshall, Muhlenberg, Simpson, Todd, Trigg, Warren, Christian, Fulton, Livingston, Edmonson, Hart, Metcalfe, and Monroe. This expansive service area requires more funds for short-term, transitional, community, and permanent residency and emergency assistance. The Heartland CARES Inc.'s HOPWA program is overseen by Steve Clark, housing case manager/Team Leader; Carrie Wren, housing case manager; and B. Andrew Halford, executive director.

Matthew 25- Matthew 25 AIDS Services provides an array of support and services to address the special needs of person's living with HIV/AIDS. Our clients require many supportive services because most face a high risk of homelessness on a daily basis.

Housing case management and care coordination are one of the most important links for our clients. Clients are connected to HIV Specialty Care, case management, life saving medications, stable and decent housing, nutritional services, support groups, transportation and mental health services. All of Matthew 25 clients are provided with a comprehensive risk assessment and connected to the appropriate services to reach a stable living situation.

Matthew 25 was incorporated in 1999 after 3 years of operation as a church ministry. Because of the high demand for services to the whole community, we advanced our mission and formed an independent 501c3 organization. Since that time Matthew 25 has become 1 of 4 HIV Specialty clinics in the commonwealth of Kentucky and expanded its services to include housing programs, state care coordination contracts, added a comprehensive food pantry and provides transportation to persons without means to be able to stay connected to HIV Specialty Care. Our coverage area for HOPWA includes the Green River and Lincoln Trail ADD Districts for a total of 15 counties. The contact for the administration of HOPWA is Cyndee Burton and the housing Support Specialist is Laura Teague.

Our housing programs consist of HOPWA and Home TBRA program. HOPWA also utilizes STRMU. TBRA is utilized for long-term rental subsidies and security deposits for rent and utilities.

Matthew 25 does not have a current waiting list for out HOPWA program. When we have a waiting list, it is maintained on a first come first served basis unless the person is without any type of shelter and has documentation verifying this, in which they move to the top of the list. It is rare for us to have someone on the waiting list for HOPWA.

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.

AVOL- Focusing on proper case management, client assessment, and TBRA solutions has helped AVOL increase the overall housing stability of our clients. TBRA assistance exceeded the agency goal, with plans to further increase TBRA assistance in the current program year. The majority of clients served by AVOL fall into the lowest income category, often living on fixed disability incomes. The average household served survives on roughly \$900 a month. Without on-going subsidy assistance, these households struggle with housing burdens that often exceed 60% of their monthly gross incomes, leaving few resources for other basic needs, such as food and transportation. AVOL has found TBRA to be the most effective means to stabilize clients. The majority of clients receiving TBRA assistance (73%) continued receiving assistance into the new program year. Of those who exited TBRA, 75% achieved stable permanent housing. Although fewer clients were served with STRMU assistance than anticipated, 100% of those served experienced increased housing stability as a result of assistance, with 46% anticipated to maintain stable housing after the reporting period. As AVOL focuses more on long-term subsidy assistance, the number of those served with STRMU decreases each year. AVOL moved 14 clients to into various long-term subsidies during the reporting year, shifting clients who may otherwise rely on STRMU assistance to programming that better meets their housing needs. Additionally, most clients served by AVOL struggle with housing instability due to low-income and high housing burdens, which makes them more ideally suited for long-term assistance rather than STRMU assistance. Although PHP goals were not met during this reporting period, AVOL provided a total of 55 clients with deposit assistance from other funding sources during the reporting period. As those funding sources have changed or been exhausted, AVOL anticipates meeting or exceeding goals for PHP assistance in the next reporting period.

During the reporting period, 52% of program funds were spent directly on housing assistance payments (TBRA, STRMU, PHP). This is a significant increase compared to the 36% of total funds spent on housing assistance in the previous reporting period. The balance of funds (less administrative) was spent on staff time to negotiate/process payments, case management, housing information, and other supportive services.

AVOL's service area includes 9 Area Development Districts: Big Sandy, Bluegrass, Buffalo Trace, Cumberland Valley, FIVCO, Gateway, Kentucky River, Lake Cumberland, and Northern Kentucky. According to the HIV/AIDS Surveillance Report published by the HIV/AIDS Branch of the Kentucky Department of Health in June 2014, there are 2,246 individuals living with HIV in these 9 Area Development Districts. During the reporting year, AVOL provided services to 16% (361 of 2,246) of all known individuals living with HIV across these Area Development Districts, and served clients in 42 counties within those districts. Of those served, 51% resided in Fayette County, which has the highest number of known HIV cases in the service area. During the reporting period, however, AVOL served 88 new clients, only 24% of whom resided in Fayette County.

BGCAP- BGCAP was able to assist 1 family/individual with housing assistance. The household was set up on a housing plan and has adhered to the guidelines within the plan and moved on from their assistance. BGCAP is currently providing housing assistance and supportive services to one household in Jessamine County.

Heartland CARES- Heartland CARES, Inc. (HCI) has continued to provide short-term/emergency housing assistance to eligible clients for up to 21 out of 52 weeks a year. HCI has addressed the recognized need for those clients who have unsuccessfully attempted to return to work, or whose illness has decreased their ability to work or even prohibited them from working a full-time job, thus drastically reducing their ability to obtain safe and affordable housing, assisting 57 individuals (29 households) with short-term/emergency funding and 41 individuals (21 households) through Long Term HOPWA (TBRA). In addressing the special needs of persons who are not homeless but required supportive housing, as well as those persons who are homeless, one-hundred percent of the clients who applied to, and were eligible for, our Short-Term/Emergency or Long Term HOPWA (TBRA) programs received assistance.

Matthew 25- Major accomplishments include awareness among property owners that our clients are good renters. In addition we have been able to take a lead in our community to work toward accurate homeless counts, demonstrating to our elected officials and city/state government that person's with any disability needs stable and decent affordable housing. We also have demonstrated stable housing plays a huge role in how well our clients are able to manage and LIVE HEALTHY with HIV/AIDS.

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.

AVOL- Kentucky's Consolidated Housing Plan attempts to address chronic homelessness, including chronic homelessness among people with disabilities including HIV/AIDS, and AVOL is aligned with this goal. AVOL coordinates HOPWA formula and competitive funding with other grant and private funding in an effort to maximize the housing stability of our clients. Thanks to careful client assessment and case management throughout the reporting period, 100% of clients receiving housing assistance achieved housing stability and/or temporary housing stability with a reduced risk of homelessness as well as consistent access to medical care and supportive services. To help insure that housing is safe, decent, and sanitary, units assisted with TBRA are inspected by a trained Housing Quality Standards (HQS) inspector on staff. To better assess housing quality, two additional staff members are scheduled to receive HQS training in September.

BGCAP- With HOPWA/TBRA funds BGCAP is able to help clients who are homeless by obtaining housing and by assisting clients who are currently housed avoid homelessness. All households are case managed and taught how to better maintain their current situation to ensure safety and stability.

Heartland CARES- In the 2014-2015 fiscal year, we projected that we would provide tenant-based rental assistance to 15 clients. With the use of Long Term HOPWA we have assisted 41 individuals (21 households) with tenant-based rental assistance. Our estimation of STRMU assistance was at 39 and in the 2014-15 year we provided STRMU assistance to 57 individuals (29 households). For supportive services in conjunction with HOPWA housing activities we assisted 98 households of the anticipated 75. The actual outcomes through this grant were near maximized this fiscal year, spending 89 percent of funds budgeted. A large portion of our funds were directed to STRMU because once again, our area was hit with a severe winter coupled with utility companies' increased energy charges. The Section 8 and public housing application admission in most of the counties we serve has been closed for many months and has been predicted to be closed for several more months due to the number of persons on the list.

Matthew 25- Although we did not serve as many in STRMU (our goal is 50 for the 2 year cycle) we served 29, we made up for it with the supportive services of our food pantry, serving 208 with a goal of 175. Almost all of our housing clients have undetectable viral loads and have improved CD4 counts, proving that stable housing does improve the stability of our HIV patients.

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.

AVOL- AVOL coordinates with several other agencies to meet client housing needs and to provide supportive services. These agencies include but are not limited to the Lexington Housing Authority, Kentucky Housing Corporation, Moveable Feast, the Bluegrass Care Clinic, the Lexington-Fayette County Health Department, the Cumberland Valley Regional Health Department, Bluegrass.org, God's Pantry, Kentucky Refugee Ministries, the Men's and Women's Hope Centers, and the Community Action Council. AVOL is a member of the Kentucky Balance of State Continuum of Care, the Central Kentucky Housing and Homelessness Initiative, and Lexington-Fayette Urban County Government's Homelessness Prevention & Intervention Board. AVOL is also a United Way of the Bluegrass Partner Agency.

BGCAP- BGCAP has coordinated our outreach programs with the Blue Grass Care Clinic and all community partners in each service area to identify and refer eligible applicants to BGCAP where they are offered wrap around services through their case management on how to overcome barriers and on how to become more self-sufficient.

Heartland CARES- Upon entering Heartland CARES, Inc. and specifically, the HOPWA program, each client is required to complete an intake process and an Individualized Housing Plan stating intended goals and ways to achieve these goals, noting any barriers that may prevent them from meeting their goals and ways in which to overcome these barriers. The mere task of formulating these goals and reviewing them periodically acts as an incentive and a focal point to encourage the client's success in meeting goals and achieving the highest level of self-sufficiency. As Heartland CARES, Inc. is a "One-Stop-Shop", we offer a wide variety of support services aside from our housing programs that will greatly enhance the efforts of the clients of Heartland CARES, Inc. to become or to regain self-sufficiency. Support services offered through our agency include clinical primary care. The client can receive medical management of their HIV/AIDS using a multi-faceted primary care team including, nutrition counseling, mental health counseling, and adherence counseling. HCI also offers Care Coordination through the Ryan White Part B grant. The client's care coordinator will work closely with the client to assist with medication assistance through the Kentucky Drug Assistance Program from the University of Kentucky, transportation to and from medical appointments, food and hygiene emergency assistance vouchers, and referrals for dental work. For

clients in the Barren River District a referral will be made to Matthew 25 care coordination services. Heartland CARES, Inc. has developed strong linkages throughout the community for services that are needed that are not offered in house. A referral will be made for services such as domestic violence counseling, vocational rehabilitation, food stamp services, family service, and assistance with clothing and furniture.

Matthew 25- Providing care and services across 15 counties is a huge job, however with 5 care coordinators (funded by the Commonwealth's Ryan White Part B and Matthew 25's Ryan White Part C HIV Specialty care) across the region we are able to provide a continuum of care and a linkage to our housing Support Service Specialist. For patients in Bowling Green we have been able to assist a few who could not get services via Heartland Cares in the past when funding was low at that organization. We were able to communicate with KHC to obtain permission to do so and were able to stabilize the housing situation.

Matthew 25 strives to be able to make connections to care a reality. By providing transportation in the form of gas cards to those who have access to a vehicle and actually utilizing our company van to transport clients we are able to eliminate the barrier of no transportation to services. However this requires much coordination and a willingness from the clients to actually utilize the service again for fear of being stigmatized. The additional fuel costs have stretched many local resources including Matthew 25's. We are only providing round trip transportation to those with zero income and one way gas assistance for those with some form of income

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

AVOL- In addition to the guidance provided by the Kentucky Housing Corporation as the Grantee, the OneCPD Resource Exchange is a useful tool in receiving timely feedback for making decisions and effectively managing programs. On-going technical assistance regarding changes in OMB regulations is always welcome and appreciated to ensure grant compliance and best services to beneficiaries.

BGCAP- Training classes would be helpful in staying current with guidelines of the HOPWA program.

Heartland CARES- The technical assistance needed at this time would be in the form of training in addressing the issue of extremely low fair market rent for the extreme Western Kentucky counties of the Purchase District. Affordable rental housing in the Purchase District is becoming nonexistent. The demand far surpassing the supply has caused rents to increase. Landlords, having endless requests for housing, do not feel inspired to update and repair their units as they should and the quality of housing drops as well.

Matthew 25- Will be happy when HMIS can produce reports that completely fit the CAPER

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.

AVOL- Dwindling mainstream housing resources and a lack of affordable housing creates barriers for clients in achieving permanent housing stability. Agencies who offer Section 8 and public housing in Kentucky often have long waiting lists, and rarely accept new applications. Affordable housing units that are available are often located in areas with high crime and high drug activity. Additionally, many clients served struggle with mental health and substance abuse disorders and often have criminal records, making it difficult to access limited affordable housing options and difficult to maintain even with financial assistance. Access to treatment options for clients who accept that they have a problem and are ready for change is also limited.

Transportation continues to be a significant barrier for the men and women we serve. Unlike urban areas where bus tokens and cab vouchers may alleviate transportation barriers, transportation barriers in rural areas require more flexible solutions. HUD's decision to disallow the purchase of gas cards/vouchers has definitely increased rather than reduced barriers to care for clients in rural areas. AVOL strongly urges HUD to reconsider this prohibition and allow the purchase of gas cards for clients with supportive service funding, especially given that transportation assistance is already an approved expense category under HOPWA regulations.

BGCAP- no current issues

Heartland CARES- The fact that western Kentucky is a rural area and the travel distance to access services is great for many clients places a huge travel expense on many having limited, extreme low, and even zero income. The Fair Market Rents, particularly in the Purchase District, on the one bedroom units, are far below the average rent costs in most of our service areas. Heartland CARES, Inc. works diligently with area landlords to try to keep rent costs within the FMR and also to encourage many landlords to include utilities in the rent. We would recommend that HUD re-evaluate the accuracy of the FMR, particularly on the one bedroom units and make necessary adjustments. With more people losing their homes in the economic crisis, it is becoming more difficult to locate available, affordable housing. Client discrimination and confidentiality is a barrier due to the sensitive nature of HIV/AIDS. Client confidentiality is a number one priority of Heartland CARES, Inc. Upon initial intake with client, the housing counselor discusses the possibility that it might be necessary to disclose certain information, “that the client has a disability”, but that we are no more specific than just that. At that time the housing counselor has the client sign a release of information giving Heartland CARES, Inc. the ability to speak with Kentucky Housing Corporation, HUD, Landlords, and utility companies. Since Heartland CARES, Inc. is becoming well known as the place to go for help with HIV/AIDS in the community, our checks are sent out with only the post office box address on them so that the association with Heartland CARES, Inc. is not apparent. Many of our clients have criminal records that prevent them from being eligible for public housing. Most clients will become eligible in a two to three year time period; therefore Heartland CARES, Inc. subsidizes their rent for that period of time through various grant programs. For those that will never qualify for public housing, Housing CARES, Inc. counsels with the client to research all avenues of possible living arrangements including moving in with friends and family, obtaining more education, and increasing their income. Our clients may also have undesirable past rental history. To overcome this barrier, Heartland CARES Inc. has developed an excellent working relationship with area landlords and many times this eliminates the need for the client to go through a rental history or credit check.

Matthew 25- Many of our patients continue to struggle with stigma and fear of sharing their diagnosis with others. This fear sometimes gets in the way of patients accessing services. Our case managers offer to meet in public places like McDonalds or local libraries so patients won't have to go to the health departments where we collaborate for office usage in the small towns away from our main service site in Henderson. Many newly infected patients may not feel well enough to work because of the virus as well as the medication side effects. It may take many attempts to get disability. However until they do obtain some type of income they are penniless and rely on community service providers, family and friends.

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.

AVOL- During the reporting period, AVOL has worked hard to create a seamless continuum of care to connect HIV-positive people to care. AVOL's Prevention & Testing program has worked carefully with AVOL's Housing & Supportive Services team as well as with the local health department and Ryan White Clinic to ensure that clients, upon diagnosis with HIV, are moved quickly and seamlessly to care. The Housing and Prevention programs have also been able to work together to reconnect clients who have fallen out of medical care. All AVOL's efforts are to streamline prevention, housing, and care coordination as per the National HIV/AIDS Strategy.

Additionally, the Affordable Care Act (ACA) has expanded access to medical care for all Kentuckians, including those living with HIV/AIDS. Over the years, services covered by Ryan White funding have become more restrictive, leaving

<input checked="" type="checkbox"/> HOPWA/HUD Regulations	<input type="checkbox"/> Planning	<input checked="" type="checkbox"/> Housing Availability	<input checked="" type="checkbox"/> Rent Determination and Fair Market Rents
<input checked="" type="checkbox"/> Discrimination/Confidentiality	<input checked="" type="checkbox"/> Multiple Diagnoses	<input checked="" type="checkbox"/> Eligibility	<input type="checkbox"/> Technical Assistance or Training
<input type="checkbox"/> Supportive Services	<input checked="" type="checkbox"/> Credit History	<input checked="" type="checkbox"/> Rental History	<input checked="" type="checkbox"/> Criminal Justice History
<input checked="" type="checkbox"/> Housing Affordability	<input checked="" type="checkbox"/> Geography/Rural Access	<input type="checkbox"/> Other, please explain further	

many low-income individuals living with HIV/AIDS few options for covering healthcare costs for issues not directly related to their HIV/AIDS. The ACA and Kentucky's expansion of Medicaid under the ACA has helped fill this gap for

many clients we serve, and we have encountered a number of clients who were diagnosed with HIV as a result of accessing healthcare under the ACA.

Heartland CARES- Due to monies being cut across the board in all grants, we are anticipating that it will become increasingly difficult for people to receive compassionate use drugs and co-pays will become more expensive. Because of this, our clients will be paying more out of pocket for their necessary medical care and medications which in turn will leave less money for rent and utilities.

Matthew 25- We have seen a huge increase in the number of households needing food assistance in comparison to last year. Although most of all of our patients in Kentucky now have insurance they continue to struggle with co-pays and deductibles. We feel like this correlates with the increase food need. If you now have \$3.00 co-pays on 5 drugs this is \$15.00 of money budgeted for food, which aren't much to begin with and soaring food prices at the grocery store add addition burdens. Without the service of our food pantry I fear some would stop taking their life savings drugs in order to purchase food.

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

AVOL- AVOL communicates service statistics and program descriptions in a variety of ways via email, website, and in print. There are no current or formal studies or reports to be made available.

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.	37
--	----

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)
x	= 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
x	= 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	\$21,659	Ryan White/Rent Utility Assist	<input checked="" type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Ryan White-Other	\$126,505	Medical Case-Management Services	<input type="checkbox"/> Housing Subsidy Assistance <input checked="" type="checkbox"/> Other Support
Ryan White-Part B, C and D	1,344,678	Clinical and Supportive Services	<input type="checkbox"/> Housing Subsidy Assistance <input checked="" type="checkbox"/> Other Support
HOME	\$72,229	Sec.& Util Dep../Rent Subsidy	<input checked="" type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
HOME	\$35,638.90	TBRA	<input checked="" type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Shelter Plus Care	\$15,313	Rental Subsidy	<input checked="" type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
HOME/TBRA	50,000	14 vouchers	<input checked="" type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Public:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Public:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Public:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Public:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Other Public:			<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Private Funding			
Grants/MAC and Broadway	22500	Food Pantry	<input type="checkbox"/> Housing Subsidy Assistance <input checked="" type="checkbox"/> Other Support
In-kind Resources			<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 Private: United Way Community Partner Grant	\$18,568.45	Financial Assist., Supp. Svc, Case Mgt	<input checked="" type="checkbox"/> Housing Subsidy Assistance <input checked="" type="checkbox"/> Other Support
Other Funding			
Grantee/Project Sponsor/Subrecipient (Agency) Cash	\$7,500		<input type="checkbox"/> Housing Subsidy Assistance <input type="checkbox"/> Other Support
Resident Rent Payments by Client to Private Landlord			
TOTAL (Sum of all Rows)	\$1,714,591.35		

2. Program Income and Resident Rent Payments**N/A**

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	30	37	36	32	152,304.61	129,212.91
2a.	Permanent Housing Facilities: Received Operating Subsidies/Leased units (Households Served)						
2b.	Transitional/Short-term Facilities: Received Operating Subsidies/Leased units (Households Served) (Households Served)						
3a.	Permanent Housing Facilities: Capital Development Projects placed in service during the operating year (Households Served)						
3b.	Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year (Households Served)						
4.	Short-Term Rent, Mortgage and Utility Assistance	175	121	47	34	130,751.33	100,314.08
5.	Permanent Housing Placement Services	24	1	5	7	13,650.00	315.80
6.	Adjustments for duplication (subtract)	10	0	0	2		
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)	219	159	88	71	296,705.94	229,842.79
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 78 & 9)						
Supportive Services		[1] Output Households				[2] Output: Funding	
11a.	Supportive Services provided by project sponsors/subrecipient that also delivered HOPWA housing subsidy assistance	541	668			101,407.42	93,345.95
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.)	541	668			101,407.42	93,345.95
Housing Information Services		[1] Output Households				[2] Output: Funding	
14.	Housing Information Services	354	383			28,863.51	25,227.11
15.	Total Housing Information Services	354	383			28,863.51	25,227.11

Grant Administration and Other Activities		[1] Output Households				[2] Output: Funding	
16.	Resource Identification to establish, coordinate and develop housing assistance resources					4035.80	635.59
17.	Technical Assistance (if approved in grant agreement)						
18.	Grantee Administration (maximum 3% of total HOPWA grant)						9,743.33
19.	Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded)					34,558.32	22,692.12
20.	Total Grant Administration and Other Activities (Sum of Rows 17 – 20)					38,594.12	33,071.04
Total Expended							
						[2] Outputs: HOPWA Funds Expended	
						Budget	Actual
21.	Total Expenditures for program year (Sum of Rows 7, 10, 13, 15, and 20)					465,570.99	381,486.89

2. Listing of Supportive Services

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

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

Supportive Services		[1] Output: Number of <u>Households</u>	[2] Output: Amount of HOPWA Funds Expended
1.	Adult day care and personal assistance		
2.	Alcohol and drug abuse services	1	275.00
3.	Case management	460	76,109.03
4.	Child care and other child services		
5.	Education		
6.	Employment assistance and training		
7.	Health/medical/intensive care services, if approved Note: Client records must conform with 24 CFR §574.310		
8.	Legal services		
9.	Life skills management (outside of case management)		
10.	Meals/nutritional services	208	9,368.92
11.	Mental health services		
12.	Outreach		
13.	Transportation	158	7,593.00
14.	Other Activity (if approved in grant agreement). Specify:		
15.	Sub-Total Households receiving Supportive Services (Sum of Rows 1-14)	827	
16.	Adjustment for Duplication (subtract)	159	
17.	TOTAL Unduplicated Households receiving Supportive Services (Column [1] equals Row 15 minus Row 16; Column [2] equals sum of Rows 1-14)	668	93,345.95

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	121	\$100,314.08
b.	<u>Of the total STRMU reported on Row a.</u> , total who received assistance with mortgage costs ONLY.	5	\$3,149.49
c.	<u>Of the total STRMU reported on Row a.</u> , total who received assistance with mortgage and utility costs.	0	\$0
d.	<u>Of the total STRMU reported on Row a.</u> , total who received assistance with rental costs ONLY.	58	\$43,136.55
e.	<u>Of the total STRMU reported on Row a.</u> , total who received assistance with rental and utility costs.	12	\$14,867.38
f.	<u>Of the total STRMU reported on Row a.</u> , total who received assistance with utility costs ONLY.	46	\$13,718.51
g.	Direct program delivery costs (e.g., program operations staff time)		\$25,442.15

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	37	18	1 Emergency Shelter/Streets		<i>Unstable Arrangements</i>
			2 Temporary Housing	1	<i>Temporarily Stable, with Reduced Risk of Homelessness</i>
			3 Private Housing	10	<i>Stable/Permanent Housing (PH)</i>
			4 Other HOPWA		
			5 Other Subsidy	6	
			6 Institution	1	<i>Unstable Arrangements</i>
			7 Jail/Prison		
			8 Disconnected/Unknown		
Permanent Supportive 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		<i>Unstable Arrangements</i>
			7 Jail/Prison		
			8 Disconnected/Unknown		

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		<i>Unstable Arrangements</i>
			7 Jail/Prison		
			8 Disconnected/unknown		

B1: Total number of households receiving transitional/short-term housing assistance whose tenure exceeded 24 months	
---	--

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
121	Maintain Private Housing without subsidy <i>(e.g. Assistance provided/completed and client is stable, not likely to seek additional support)</i>	60	<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>	6	
	Other HOPWA Housing Subsidy Assistance	3	
	Other Housing Subsidy (PH)	3	
	Institution <i>(e.g. residential and long-term care)</i>		
	Likely that additional STRMU is needed to maintain current housing arrangements	47	<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>	1	
	Emergency Shelter/street	1	<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).			52
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).			28

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	159
b. Case Management	460
c. Adjustment for duplication (subtraction)	159
d. Total Households Served by Project Sponsors/Subrecipients with Housing Subsidy Assistance (Sum of Rows a.b. minus Row c.)	460
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	460		Support for Stable Housing
2. Had contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan (may include leveraged services such as Ryan White Medical Case Management)	460		Access to Support
3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan	460		Access to Health Care
4. Accessed and maintained medical insurance/assistance	460		Access to Health Care
5. Successfully accessed or maintained qualification for sources of income	409		Sources of Income

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 |
|--|--|--|

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 |
|---|--|--|

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	7	

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.	159

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	80
New Individuals who received HOPWA Housing Subsidy Assistance support during Operating Year		
2.	Place not meant for human habitation (such as a vehicle, abandoned building, bus/train/subway station/airport, or outside)	
3.	Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher)	
4.	Transitional housing for homeless persons	
5.	Total number of new Eligible Individuals who received HOPWA Housing Subsidy Assistance with a Prior Living Situation that meets HUD definition of homelessness (Sum of Rows 2 – 4)	
6.	Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod Rehab)	
7.	Psychiatric hospital or other psychiatric facility	
8.	Substance abuse treatment facility or detox center	
9.	Hospital (non-psychiatric facility)	
10.	Foster care home or foster care group home	
11.	Jail, prison or juvenile detention facility	
12.	Rented room, apartment, or house	64
13.	House you own	8
14.	Staying or living in someone else's (family and friends) room, apartment, or house	5
15.	Hotel or motel paid for without emergency shelter voucher	1
16.	Other	1
17.	Don't Know or Refused	
18.	TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17)	159

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		

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.)	159
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	9
3. Number of ALL other persons NOT diagnosed as HIV positive who reside with the HOPWA eligible individual identified in Row 1 and who benefitted from the HOPWA housing subsidy	134
4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1,2, & 3)	302

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					
2.	18 to 30 years	13	6			19
3.	31 to 50 years	70	24	2		96
4.	51 years and Older	32	12			44
5.	Subtotal (Sum of Rows 1-4)	115	42	2		159
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	34	43			77
7.	18 to 30 years	12	8			20
8.	31 to 50 years	14	14			28
9.	51 years and Older	8	10			18
10.	Subtotal (Sum of Rows 6-9)	68	75			143
Total Beneficiaries (Chart a, Row 4)						
11.	TOTAL (Sum of Rows 5 & 10)	183	117	2		302

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.	Asian				
3.	Black/African American	57	2	49	
4.	Native Hawaiian/Other Pacific Islander				
5.	White	98	7	85	
6.	American Indian/Alaskan Native & White				
7.	Asian & White				
8.	Black/African American & White			3	
9.	American Indian/Alaskan Native & Black/African American				
10.	Other Multi-Racial	4	4	6	
11.	Column Totals (Sum of Rows 1-10)	159	13	143	
<p>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.</p>					

*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)	112
2.	31-50% of area median income (very low)	39
3.	51-80% of area median income (low)	8
4.	Total (Sum of Rows 1-3)	159

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."

	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					
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.)		