

Part I: Summary	
PHA Name: Fairfax County Redevelopment and housing Authority	Grant Type and Number Capital Fund Program Grant No: VA39P019-50109 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2009 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement **Reserve for Disasters/Emergencies** **Revised Annual Statement (revision no: _____)**
 Performance and Evaluation Report for Period Ending: **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$181,242			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$140,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,490,500			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary						
PHA Name: FAIRFAX COUNTY RHA		Grant Type and Number Capital Fund Program Grant No: VA39P019-50109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,811,742				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities	\$739,000				
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures	\$363,000				
Signature of Executive Director			Date		Signature of Public Housing Director	
					Date	

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Part II: Supporting Pages								
PHA Name: Fairfax County			Grant Type and Number Capital Fund Program Grant No: 39P019-50109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
VA019-0000001 VA19-13 Atrium	Convert 6 Units to UFAS Accessibility	1460	6	\$108,000				
	A&E Fees	1430	LS	\$25,000				
VA-019000008	Convert 14 Units To HC Accessibility	1460	14	\$252,000				
VA19-42 Old Mill	A&E FEES	1430	LS	\$35,000				
VA-019000011								
VA19-05 WEST GLADE	CONVERT 5 UNITS TO UFAS	1460	5	\$120,000				
	REPLACE HVAC	1460	26	\$105,000				
	REPLACE COM.CENTER HWHS	1460	3	\$6,500				
	A&E FEES	1430	LS	\$35,000				
VA019000004								
VA19-45 REGAN OAKS	CONVERT 11 UNITS TO UFAS	1460	11	\$154,000				
	A&E	1430	LS	\$20,000				
VA019000005								
VA19-30	CONVERT 4 UNITS TO UFAS	1460	4	\$60,000				
	A&E FEES	1430	LS	\$25,000				
VA019000010								
VA19-51 TAVENNER	CONVERT 4 UNITS TO UFAS	1460	4	\$45,000				

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Annual Statement/Performance and Evaluation Report
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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
VA19-01 ATRIUM	9/2011		9/2013		
VA19-42 OLD MILL	9/2011		9/2013		
VA19-05 WEST GLADE	9/2011		9/2013		
VA19-45 RAGAN OAKS	9/2011		9/2013		
VA19-05 GREENWOOD	9/2011		9/2013		
VA19-TAVENNER	9/2011		9/2013		
VA19-34 WEST FORD III	9/2011		9/2013		
VA19-38 KINGSLEY	9/2011		9/2013		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

