

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 6/30/2017

Part I: Summary		
PHA Name: Boston Housing Authority	Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 Replacement Housing Factor Grant No:	Federal FY of Grant: FFY15 Federal FY of Grant Approval: FFY15

Type of Grant

Original Annual Statement
 Performance and Evaluation Report for Program Year Ending

Reserve for Disasters/Emergencies
 Final Performance and Evaluation Report

Revised Annual Statement (revision no:)

Line No.	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 20)	2,063,202			
3	1408 Management Improvements				
4	1410 Administration	1,681,542			
5	1411 Audit	25,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,429,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	30,000			
10	1460 Dwelling Structures	5,014,000			
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures	-			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	65,000			
17	1499 Development Activities*				
18a	1501 Collateralization or Debt Service paid by PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	6,743,981			
19	1502 Contingency (may not exceed 8% of line 20)	13,698			
20	Amount of Annual Grant (Sum of lines 2-19)	17,065,423	-	0.00	0.00
21	Amount of line 20 Related to LBP Testing	250,000			
22	Amount of line 20 Related to Section 504 Activities	166,000			
23	Amount of line 20 Related to Security - Soft Costs			0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	125,000			
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	Date	Signature of Public Housing Director/Office of Native American Programs Administrator	Date
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¹ To be completed for the Performance and Evaluation Report.
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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

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Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised1	Difference	Obligated2	Expended2	

AUTHORITY WIDE

2-00	OPERATION	1406		2,063,202.00					
2-00	ADMINISTRATIVE	1410		1,681,542.00					
2-00	AUDIT	1411		25,000.00					
2-00	ARCH / ENG(Environmental)	1430		100,000.00					
2-00	ARCH / ENG (Lead)	1430							
2-00	ARCH / ENG (Elevators)	1430		43,000.00					
2-00	ARCH / ENG (504 Compliance)	1430		20,000.00					
2-00	CONSULTANTS	1430		440,000.00					
2-00	CONSULTANTS(GPNA)	1430		25,000.00					
2-00	ENVIRONMENTAL REMEDIATION	1450							
2-00	504 COMPLIANCE	1460		100,000.00					
2-00	LEAD PAINT ABATEMENT	1460		250,000.00					
2-00	ASBESTOS ABATEMENT	1460							
2-00	VACANT UNIT REHAB	1460							
2-00	RELOCATION	1495		65,000.00					
2-00	RELOCATION(504 Compliance)	1495							
2-00	DEBT SERVICE	9000		6,743,981.00					
2-00	CONTINGENCY	1502		13,698.00					
				<u>11,570,423.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

CHARLESTOWN

2-01	ARCH / ENG (Roofs)	1430	Roof Replacement	40,000.00					
2-01	ARCH / ENG (504)	1430	Replace two Metal Ramps	10,000.00					
				<u>50,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

LENOX STREET

2-04	ARCH / ENG (Asbestos)	1430	ACM Study at one Basement	5,000.00					
				<u>5,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

CATHEDRAL

2-06	ARCH / ENG (504)	1430	Replace Metal Ramps	6,000.00					
2-06	504 COMPLIANCE	1460	Replace Metal Ramps	30,000.00					
				<u>36,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

WHITTIER STREET

2-11

0.00	0.00	0.00	0.00	0.00
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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

BEECH STREET

2-13

0.00					
0.00	0.00	0.00	0.00	0.00	0.00

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

ALICE TAYLOR

2-14	HVAC	1460	Boilers at 2 HI Rise Bldgs.	300,000.00					
				<u>300,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

BROMLEY/HEATH

2-19	ARCH / ENG (Building Envelope)	1430	Masonry	140,000.00					
2-19	HVAC	1460	Boiler Replacement (five)	750,000.00					
2-19	SECURITY	1460	Cameras	125,000.00					
2-19	BUILDING EXTERIOR	1460	Masonry	1,900,000.00					
				2,915,000.00	0.00	0.00	0.00	0.00	

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				Approved	Revised1	Difference	Obligated2	Expended2	

MARY ELLEN McCORMACK

2-23	ARCH / ENG (Roofs)	1430	Slate Roofs at Rowhouses	180,000.00					
2-23	ARCH / ENG (Site)	1430	Four Courtyards	60,000.00					
2-23	ARCH / ENG (Stairhalls)	1430	Stairpan Replacement	40,000.00					
2-23	SITE GROUNDS	1450	Trash Enclosures	30,000.00					
				310,000.00	0.00	0.00	0.00	0.00	0.00

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

OLD COLONY

2-24

0.00	0.00	0.00	0.00	0.00
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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

MARGARET COLLINS

2-26	ARCH / ENG (Asbestos)	1430	ACM removal	2,000.00					
2-26	ASBESTOS	1460	ACM removal	25,000.00					
				<u>27,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

ANNAPOLIS

2-27	ARCH / ENG (Building Envelope)	1430	Roof trim	6,500.00					
2-27	BUILDING EXTERIOR	1460	Roof trim	65,000.00					
				<u>71,500.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised1	Difference	Obligated2	Expended2	

ASHMONT

2-28	ARCH / ENG (Building Envelope)	1430	Roof trim	3,500.00					
2-28	ARCH / ENG (Asbestos)	1430	ACM removal	2,000.00					
2-28	BUILDING EXTERIOR	1460	Roof trim	35,000.00					
2-28	ASBESTOS	1460	ACM removal	25,000.00					
				<u>65,500.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

HOLGATE

2-29	ARCH / ENG (Asbestos)	1430	ACM removal	2,000.00					
2-29	ASBESTOS	1460	ACM removal	25,000.00					
				<u>27,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

FOLEY APARTMENTS

2-30

0.00	0.00	0.00	0.00	0.00
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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

GROVELAND

2-32	ARCH / ENG (Building Envelope)	1430	Roof trim	25,000.00					
2-32	BUILDING EXTERIOR	1460	Roof trim	95,000.00					
				<u>120,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

DAVISON

2-34	ARCH / ENG (Building Envelope)	1430	Windows	15,000.00					
2-34	BUILDING EXTERIOR	1460	Windows	70,000.00					
				<u>85,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

WASHINGTON STREET

2-35

0.00	0.00	0.00	0.00	0.00
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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

WEST NINTH STREET

2-36	ARCH / ENG (Building Envelope)	1430	Doors/Intercom	8,000.00					
2-36	BUILDING EXTERIOR	1460	Doors/Intercom	79,000.00					
				87,000.00					

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

CARROLL APARTMENTS

2-37	ARCH / ENG (Asbestos)	1430	ACM removal	5,000.00					
				5,000.00	0.00	0.00	0.00	0.00	0.00

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MEADE APARTMENTS

2-38

0.00

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MARTIN LUTHER KING

2-40	ARCH / ENG (Asbestos)	1430	ACM removal on unit piping	3,000.00					
				3,000.00	0.00	0.00	0.00	0.00	0.00

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

EVA WHITE

2-41

0.00	0.00	0.00	0.00	0.00
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WALNUT PARK

2-42	ELEVATORS	1460	Elevator Modernization	400,000.00					
				<u>400,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

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				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

AMORY STREET

2-45

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

GENERAL WARREN

2-47

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

TORRE UNIDAD

2-49

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

ROCKLAND

2-50

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

CODMAN APARTMENTS

2-51

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

HERITAGE

2-52

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

ST. BOTOLPH

2-53

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

PASCIUCCO

2-54

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

LOWER MILLS

2-57

0.00					
0.00	0.00	0.00	0.00	0.00	0.00

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

W. NEWTON -RUTLAND-E. SPRINGFIELD STREETS

2-58

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

AUSONIA

2-61

0.00	0.00	0.00	0.00	0.00
------	------	------	------	------

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

HASSAN

2-62

0.00	0.00	0.00	0.00	0.00
------	------	------	------	------

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

SPRING STREET

2-70

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

PATRICIA WHITE

2-71

0.00	0.00	0.00	0.00	0.00
------	------	------	------	------

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

ROSLYN APARTMENTS

2-72

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

BELLFLOWER

2-77

0.00	0.00	0.00	0.00	0.00
------	------	------	------	------

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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
 Expires 6/30/2017

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

COMMONWEALTH FAMILY

2-82	FIRE PROTECTION	1460	Check Valves	200,000.00					
				<u>200,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

PEABODY SQUARE

2-83

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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
 Expires 6/30/2017

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

FRANKLIN FIELD

2-89	ARCH / ENG (Basements)	1430	Basement improvements Ph.2	60,000.00					
2-89	ARCH / ENG (Basements)	1430	Basement improvements Ph.3	140,000.00					
				200,000.00	0.00	0.00	0.00	0.00	0.00

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

JOSEPH MALONE

2-90

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

HIGHLAND PARK

2-93

0.00	0.00	0.00	0.00	0.00
------	------	------	------	------

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

COMMONWEALTH ELDERLY

2-95

0.00	0.00	0.00	0.00	0.00
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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
 Expires 6/30/2017

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

HAMPTON STREET

2-98	ARCH / ENG (Building Envelope)	1430	Envelope Improvements	18,000.00					
2-98	BUILDING ENVELOPE	1460	Envelope Improvements	200,000.00					
				<u>218,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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
 Expires 6/30/2017

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

FREDERICK DOUGLASS

2-126	ARCH / ENG (Building Envelope)	1430	Envelope Improvements	10,000.00					
2-126	BUILDING ENVELOPE	1460	Envelope Improvements	90,000.00					
				<u>100,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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
 Expires 6/30/2017

Part II: Supporting Pages

PHA Name: Boston Housing Authority				Grant Type and Number: Capital Fund Program Grant No: MA06-P002-501-15 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: FFY15		
Dev. No./ Name	General Description of Major Work Categories	Dev. Account Number	Quantity	Total Estimated Cost			Total Actual Cost		Status of Work
				Approved	Revised ¹	Difference	Obligated ²	Expended ²	

WASHINGTON MANOR

2-127	ARCH / ENG (Building Envelope)	1430	Envelope Improvements	20,000.00					
2-127	BUILDING ENVELOPE	1460	Envelope Improvements	250,000.00					
				<u>270,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
PART III: Implementation Schedule

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Capital Fund Program Grant Number:

MA06-P002-501-15

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised	Actual	Original	Revised	Actual	
PHA AUTHORITY-WIDE	09/30/17			09/30/19			
2-01 CHARLESTOWN	09/30/17			09/30/19			
2-04 LENOX STREET	09/30/17			09/30/19			
2-06 CATHEDRAL	09/30/17			09/30/19			
2-07 HEATH STREET	09/30/17			09/30/19			
2-08 MAVERICK	09/30/17			09/30/19			
2-09 FRANKLIN HILL	09/30/17			09/30/19			
2-11 WHITTIER STREET	09/30/17			09/30/19			
2-13 WASHINGTON-BEECH	09/30/17			09/30/19			
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement				(2) To be completed for the Performance and Evaluation Report			
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
PART III: Implementation Schedule

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Capital Fund Program Grant Number:

MA06-P002-501-15

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised	Actual	Original	Revised	Actual	
2-14 ALICE H. TAYLOR	09/30/17			09/30/19			
2-19 BROMLEY PARK	09/30/17			09/30/19			
2-23 M.E. McCORMACK	09/30/17			09/30/19			
2-24 OLD COLONY	09/30/17			09/30/19			
2-58 W. NEWTON/RUTLAND/E. SPRINGFIELD	09/30/17			09/30/19			
2-82 COMMONWEALTH	09/30/17			09/30/19			
2-89 FRANKLIN FIELD	09/30/17			09/30/19			
2-93 HIGHLAND PARK	09/30/17			09/30/19			
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement Signature of Executive Director and Date				(2) To be completed for the Performance and Evaluation Report Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
PART III: Implementation Schedule

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Capital Fund Program Grant Number:

MA06-P002-501-15

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised	Actual	Original	Revised	Actual	
2-26 M. COLLINS	09/30/17			09/30/19			
2-27 ANNAPOLIS	09/30/17			09/30/19			
2-28 ASHMONT	09/30/17			09/30/19			
2-29 HOLGATE	09/30/17			09/30/19			
2-30 FOLEY	09/30/17			09/30/19			
2-34 DAVISON	09/30/17			09/30/19			
2-35 WASHINGTON STREET	09/30/17			09/30/19			
2-36 W. NINTH STREET	09/30/17			09/30/19			
2-37 JOHN CARROLL	09/30/17			09/30/19			
2-38 J.J. MEADE	09/30/17			09/30/19			
2-40 MLK TOWERS	09/30/17			09/30/19			
2-41 EVA WHITE	09/30/17			09/30/19			
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement				(2) To be completed for the Performance and Evaluation Report			
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
PART III: Implementation Schedule

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Capital Fund Program Grant Number:

MA06-P002-501-15

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised	Actual	Original	Revised	Actual	
2-42 WALNUT PARK	09/30/17			09/30/19			
2-45 AMORY STREET	09/30/17			09/30/19			
2-47 GENERAL WARREN	09/30/17			09/30/19			
2-49 TORRE UNIDAD	09/30/17			09/30/19			
2-50 ROCKLAND	09/30/17			09/30/19			
2-51 CODMAN	09/30/17			09/30/19			
2-52 HERITAGE	09/30/17			09/30/19			
2-53 ST. BOTOLPH	09/30/17			09/30/19			
2-54 PASCIUCCO	09/30/17			09/30/19			
2-57 LOWER MILLS	09/30/17			09/30/19			
2-61 AUSONIA	09/30/17			09/30/19			
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement Signature of Executive Director and Date				(2) To be completed for the Performance and Evaluation Report Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
PART III: Implementation Schedule

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Capital Fund Program Grant Number:

MA06-P002-501-15

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised	Actual	Original	Revised	Actual	
2-62 HASSAN	09/30/17			09/30/19			
2-70 SPRING STREET	09/30/17			09/30/19			
2-71 PATRICIA WHITE	09/30/17			09/30/19			
2-72 ROSLYN	09/30/17			09/30/19			
2-77 BELLFLOWER	09/30/17			09/30/19			
2-83 PEABODY SQUARE	09/30/17			09/30/19			
2-90 JOSEPH MALONE	09/30/17			09/30/19			
2-93 COMMONWEALTH ELDERLY	09/30/17			09/30/19			
2-98 HAMPTON HOUSE	09/30/17			09/30/19			
2-126 F. DOUGLASS	09/30/17			09/30/19			
2-127 WASHINGTON MANOR	09/30/17			09/30/19			
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement				2) To be completed for the Performance and Evaluation Report			
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			