

Annual PHA Plan <i>(Standard PHAs and Troubled PHAs)</i>	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires: 02/29/2016
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Purpose. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families.

Applicability. Form HUD-50075-ST is to be completed annually by **STANDARD PHAs** or **TROUBLED PHAs**. PHAs that meet the definition of a High Performer PHA, Small PHA, HCV-Only PHA or Qualified PHA do not need to submit this form.

Definitions.

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both of the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments if administering both programs, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceeds 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceeds 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined, and is not PHAS or SEMAP troubled.

A.	PHA Information.																										
A.1	<p>PHA Name: <u>Waukegan Housing Authority</u> PHA Code: <u>IL026</u></p> <p>PHA Type: <input checked="" type="checkbox"/> Standard PHA <input type="checkbox"/> Troubled PHA</p> <p>PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>01/2023</u></p> <p>PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)</p> <p>Number of Public Housing (PH) Units <u>278</u> Number of Housing Choice Vouchers (HCVs) <u>699</u> Total Combined Units/Vouchers <u>977</u></p> <p>PHA Plan Submission Type: <input type="checkbox"/> Annual Submission <input checked="" type="checkbox"/> Revised Annual Submission</p> <p>Availability of Information. PHAs must have the elements listed below in sections B and C readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><input type="checkbox"/> PHA Consortia: (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th rowspan="2">Program(s) not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>Lead PHA:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program		PH	HCV	Lead PHA:																	
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Lead PHA:																											

B. Annual Plan Elements	
B.1	<p>Revision of PHA Plan Elements.</p> <p>(a) Have the following PHA Plan elements been revised by the PHA?</p> <p>Y N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Financial Resources.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Rent Determination.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Operation and Management.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Grievance Procedures.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Homeownership Programs.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Community Service and Self-Sufficiency Programs.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Safety and Crime Prevention.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Pet Policy.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Asset Management.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification</p> <p>(b) If the PHA answered yes for any element, describe the revisions for each revised element(s):</p> <p>None.</p> <p>(c) The PHA must submit its Deconcentration Policy for Field Office review.</p>
B.2	<p>New Activities*</p> <p>(a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p> <p>Y N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Mixed Finance Modernization or Development.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Demolition and/or Disposition.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Designated Housing for Elderly and/or Disabled Families.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Tenant-Based Assistance.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Project-Based Assistance under RAD.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Occupancy by Over-Income Families.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Occupancy by Police Officers.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Non-Smoking Policies.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Project-Based Vouchers.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Units with Approved Vacancies for Modernization.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project based units and general locations, and describe how project basing would be consistent with the PHA Plan.</p>
B.3	<p>Civil Rights Certification.</p> <p>Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
B.4	<p>Most Recent Fiscal Year Audit.</p> <p>(a) Were there any findings in the most recent FY Audit?</p> <p>Y N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>(b) If yes, please describe:</p>

<p>B.5</p>	<p>Progress Report.</p> <p>Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year and Annual Plan. Answer on attached page.</p>
<p>B.6</p>	<p>Resident Advisory Board (RAB) Comments.</p> <p>(a) Did the RAB(s) provide comments to the PHA Plan?</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>(c) If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>
<p>B.7</p>	<p>Certification by State or Local Officials.</p> <p><u>Form HUD 50077-SL</u>, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
<p>B.8</p>	<p>Troubled PHA.</p> <p>(a) Does the PHA have any current Memorandum of Agreement, Performance Improvement Plan, or Recovery Plan in place?</p> <p>Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>(b) If yes, please describe:</p>
<p>C. Statement of Capital Improvements. Required for all PHAs completing this form that administer public housing and receive funding from the Capital Fund Program (CFP).</p>	
<p>C.1</p>	<p>Capital Improvements. Include a reference here to the most recent HUD-approved 5-Year Action Plan (HUD-50075.2) and the date that it was approved by HUD.</p>

Annual Plan Section B- Answers

B3.) Civil Rights Certification. Attached in this documentation.

B5.) Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year and Annual Plan. The Waukegan Housing Authority has met its Mission and Goals by promoting adequate and affordable housing for our residents and the community. We have provided Economic Opportunity for our residents via our Family Self Sufficiency program and by hiring people from the community. We also have hired residents to work at our Housing Agency. We have provided suitable living environments for our residents by completing make ready units, making regular repairs and making sure all our units are safe, decent, sanitary and in good repair.

Part I: Summary					
PHA Name: Housing Authority of the City of Waukegan	Grant Type and Number Capital Fund Program Grant No. IL01P02650123 Replacement Housing Factor Grant No. Date of CFFP:				
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
1	Total non-CFP Funds				
2	1406 Operations	\$140,000.00			
3	1408 Management Improvement	\$10,000.00			
4	1410 Administration	\$60,000.00			
5	1480 General Capital Activity	\$885,876.00			
6	1492 MovingToWorkDemonstration				
7	1501 Collater Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

(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 include here

Part I: Summary			
PHA Name: Housing Authority of the City of Waukegan	Grant Type and Number Capital Fund Program Grant No. IL01P02650123 Replacement Housing Factor Grant No. _____ Date of CFFP: _____		
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <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	Obligated
		Revised (2)	Expended
12	9000 Debt Reserves		
13	9001 Bond Debt Obligation		
14	9002 Loan Debt Obligation		
15	RESERVED		
16	RESERVED		
17	RESERVED		
18a	RESERVED		
18ba	RESERVED		
19	RESERVED		
20	RESERVED		
21	Amount of Annual Grant: (sum of lines 2-20)	\$1,095,876.00	

(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 CFFP Grants for operations
 (4) RHF funds shall be include here

PHA Name:
 Housing Authority of the City of Waukegan

Grant Type and Number
 Capital Fund Program Grant No. IL01P02650123
 Replacement Housing Factor Grant No.
 Date of CFFP:

FFY of Grant:
FFY of Grant Approval:

Original Annual Statement
 Performance and Evaluation Report for Period Ending:

Reserve for Disasters/Emergencies
 Revised Annual Statement (Revision No:)
 Final Performance and Evaluation Report

Type of Grant

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost (1)	
		Original	Revised (2)	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director *M. Chulaf* **Date** 08/25/2023

Signature of Public Housing Director

Date

(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 include here

Part II: Supporting Pages									
PHA Name: Housing Authority of the City of Waukegan		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:			
		IL-01P02650123							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)	Status of Work		
				Original	Revised (1)			Funds Obligated	Funds Expended
IL026000215 - WAUKEGAN H. A.	1406 Operations (Operations (1406)) Description : Funds associated with Day to Day Operations	1406		\$140,000.00					
IL026000215 - WAUKEGAN H. A.	1408 Management Improvement (Management Improvement (1408)) Description : Consulting Services associated with over all Management Improvements	1408		\$10,000.00					
IL026000215 - WAUKEGAN H. A.	1410 Administration (Administration (1410)) Description : Cost associated with Administrative Expenses.	1410		\$60,000.00					

(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: Housing Authority of the City of Waukegan		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPP(Yes/No):				Federal FFY of Grant:			
		IL01P02650123							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work	
				Original	Revised (1)	Funds Obligated	Funds Expended		
IL026000215 - WAUKEGAN H. A.	1430 Fee and Cost (Contract Administration (1480)) Description : Professional Consultant Cost associated with Modernization and Development	1480		\$20,200.00					
IL026000006 - ARMORY TERRACE HOMES	1450, 1460 (Dwelling Unit-Exterior (1480),Dwelling Unit-Interior (1480)) Description : Site Improvements, Dwelling Structures	1480		\$275,898.00					
IL026000002 - RAVINE TERRACE HOMES	1480 (Dwelling Unit-Interior (1480),Dwelling Unit-Exterior (1480)) Description : Dwelling Structures, Site work, Interior repairs	1480		\$200,854.50					

(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: Housing Authority of the City of Waukegan		Grant Type and Number Capital Fund Program Grant No. IL01P02650123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work	
				Original	Revised (1)	Funds Obligated	Funds Expended		
IL026000003 - HARRY A. POE MANOR HOME	1480 (Dwelling Unit-Interior (1480),Dwelling Unit-Exterior (1480)) Description : Dwelling Structures	1480		\$200,854.50					
IL026000215 - WAUKEGAN H. A.	1465.1 Dwelling Equipment -Non Expendable (Dwelling Unit-Interior (1480)) Description : Stoves and Refrigerators	1480		\$50,000.00					
IL026000215 - WAUKEGAN H. A.	1475 Non-Dwelling Equipment (Non- Dwelling Equipment-Expendable/Non- Expendable (1480)) Description : New Vehicles and other Maintenance equipment	1480		\$61,421.00					

(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: Housing Authority of the City of Waukegan		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPPY es/No):				Federal FFY of Grant:				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work		
				Original	Revised (1)	Funds Obligated	Funds Expended			
IL026000002 - RAVINE TERRACE HOMES	1480 Vacant Unit Preparation (Dwelling Unit-Interior (1480)) Description : 10 Vacant Unit Preparation	1480		\$38,324.00						
IL026000003 - HARRY A. POE MANOR HOME	1480 Vacant Unit Preparation (Dwelling Unit-Interior (1480)) Description : 10 Vacant Unit Preparations	1480		\$38,324.00						
	Total:			\$1,095,876.00						

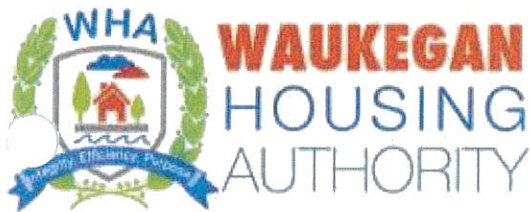
(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the City of Waukegan		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	

(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.



Executive Director/CEO
Charles J. Chambers, Jr.

Chairman
Eleanor Murkey

Vice-Chairman
Michelle Obleton

Commissioners
Kittie Harden
Jesus Gerena
Pauline Redd

July 25, 2023

Mr. William Dawson III
Director of Illinois State Office
Department of Housing and Urban Development
77 W. Jackson Blvd. Room 2400
Chicago Illinois 60604

Attn: HUD Official

Re: Significant Amendment or Modification with the below listed language.

Dear Mr. Dawson,

We have Significant Amendment or Modification to our 5 year and Annual Plan. We have included the below language here which is the cover page for our Significant Amendment or Modification.

- ***“ In addition to the criteria established by the PHA, a proposed demolition, disposition, homeownership, RAD conversion, Capital Fund Financing, development, or mixed finance proposal is considered by HUD to be significant amendment to the CFP 5-Year Action Plan based on the Capital Fund Final Rule.”***

Sincerely,

A handwritten signature in blue ink that reads 'Mr. Charles J. Chambers Jr.'.

Charles J. Chambers Jr.

Executive Director/CEO

215 S. Martin Luther King Jr. Ave Waukegan, IL 60085 (847) 244-8500
(847) 244-8591 Fax
www.waukeganhousing.com

Significant Amendment or Modification. Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.

Significant Amendment and Substantial Deviation/Modification

Barwell Manor Homes (AMP 1), Ravine Terrace Homes (AMP 2), Harry Poe Manor (AMP3), Armory Terrace and Scattered Site Homes (AMP 6) RAD: A significant or substantial deviation/modification would be the conversion of the family sites under the HUD RAD program. For all projects, there will be a large investment in the projects to make significant investment into site improvements, consisting of parking lot repairs/stripping, dumpster pad repair or replacement, landscaping, playground equipment, bike racks and trash receptacles, along with full interior and exterior updates to the buildings. Also, the WHA plans to include the 25 scattered site units as part of the Armory Terrace Homes RAD redevelopment. WHA may also be distributing Request for Proposals for Project Base Voucher (PBV) opportunities.

Section 5.2 of the RAD Civil Rights Notice: For all sites that are undergoing a RAD conversion, the site selection will be consistent with the requirements of the Fair Housing Act, Title VI of the Civil Rights Act of 1964 including implementing regulations at 24 CFR- 1.4(b)(3), section 504 of the Rehabilitation Act of 1973 including implementing regulations at 24CFR-8.4(b)(5), and the Americans with Disabilities Act.

The RAD conversion of **Harry Poe Manor Homes** will convert using new Project Based Vouchers or Project Based Rental Assistance under RAD include the following:

21. Unit Mix:
 - o A total of 155 residential units and two community spaces.
 - o The 155 units include: 84- 0BR; 69- 1BR; 2- 2BR;
 - o All units are "Family" units
22. Change in Units:
 - o As part of the RAD conversion there will be a combination of Section 18 disposition and RAD units. 75% of the units will be "RAD" units and 25% of the units will be disposed of under Section 18. Those disposed of under Section 18 will receive project-based vouchers from WHA's voucher inventory and be included in the redevelopment.
 - o There may be new construction or modification of the bedroom composition of some of the units.
23. Changes in Policies:
 - o There will not be any changes in policies that govern eligibility, admission, selection, and occupancy of units at the project aside from the overlay of low-income housing tax credit (LIHTC) compliance. The area median income (AMI) restrictions as it relates to LIHTC requires an average AMI of 60%, with a maximum AMI of qualified units of 80% AMI. The AMIs will be set as to not displace any existing residents and there will be no involuntary relocation.
24. Transfer of assistance:
 - o There will not be any transfer of assistance.
25. WHA is not currently under a voluntary compliance agreement, consent order or consent decree or final judicial ruling or administrative ruling.
26. The RAD conversion complies with all applicable site selection and neighborhood review standards and all appropriate procedures have and will be followed.
27. Please see Resident Advisory Board comments included to this plan as an attachment.
28. Capital Funds:
 - o As a result of the RAD conversion, WHA anticipates the elimination of Capital Funds once the project is completed and closed out. Harry Poe Manor Homes or AMP 3 share of 2020 CFP funds is currently \$112,729.00 Harry Poe Manor Homes will no longer be eligible for these funds as the properties will no longer be public housing after the conversion.
29. CFFP & EPC:
 - o The development has no EPC and or CFFP loans outstanding.
30. Rent Increases:
 - o As part of the RAD conversion, in instances where a tenant's monthly rent increased by more than the greater of 10% or \$25 dollars purely as a result of the RAD conversion, the rent increase will be phased in over a period of 3 years.

The RAD conversion of **Ravine Terrace Homes** will convert using new Project Based Vouchers or Project Based Rental Assistance under RAD include the following:

31. Unit Mix:
 - o A total of 98 residential units and two community spaces.
 - o The 98 units include: 56- 0BR; 42- 1BR;
 - o All units are "Senior" units
32. Change in Units:

- As part of the RAD conversion there will be a combination of Section 18 disposition and RAD units. 75% of the units will be "RAD" units and 25% of the units will be disposed of under Section 18. Those disposed of under Section 18 will receive project-based vouchers from WHA's voucher inventory and be included in the redevelopment.
- There will not be any new construction or modification of the bedroom composition of any units.
- 33. Changes in Policies:
 - There will not be any changes in policies that govern eligibility, admission, selection, and occupancy of units at the project aside from the overlay of low-income housing tax credit (LIHTC) compliance. The area median income (AMI) restrictions as it relates to LIHTC requires an average AMI of 60%, with a maximum AMI of qualified units of 80% AMI. The AMIs will be set as to not displace any existing residents and there will be no involuntary relocation.
- 34. Transfer of assistance:
 - There will not be any transfer of assistance.
- 35. WHA is not currently under a voluntary compliance agreement, consent order or consent decree or final judicial ruling or administrative ruling.
- 36. The RAD conversion complies with all applicable site selection and neighborhood review standards and all appropriate procedures have and will be followed.
- 37. Please see Resident Advisory Board comments included to this plan as an attachment.
- 38. Capital Funds:
 - As a result of the RAD conversion, WHA anticipates the elimination of Capital Funds once the project is completed and closed out. The Ravine Terrace Homes or AMP 2 share of 2020 CFP funds is currently \$112,728.00 Ravine Terrace Homes will no longer be eligible for these funds as the properties will no longer be public housing after the conversion.
- 39. CFFP & EPC:
 - The development has no EPC and or CFFP loans outstanding.
- 40. Rent Increases:
 - As part of the RAD conversion, in instances where a tenant's monthly rent increased by more than the greater of 10% or \$25 dollars purely as a result of the RAD conversion, the rent increase will be phased in over a period of 3 years.

General exclusions of what qualifies as a Substantial Deviation for Barwell Manor Homes, Armory Terrace and Scattered Site Homes, Harry Poe Manor Homes and Ravine Terrace Homes. The following will be excluded from being a substantial Deviation for any properties undergoing a RAD conversion:

- The Change in decision to convert to Project Based Rental Assistance instead of Project Based Voucher Assistance or vice-versa;
- The change in the number of units converted under RAD versus under section 18;
- Changes to the Capital Fund Budget produced as a result of each approved RAD Conversion, regardless of whether the proposed conversion will include use of additional Capital Funds.
- Changes to the Construction and rehabilitation Plan for each approved RAD conversion; and
- Changes to the financing structure of each approved RAD Conversion.

2023 Capital Fund

OMB Approval No. 2577-0075 (exp. 08/31/2023)

Capital Fund Program (CFP) Amendment Annual Contributions Contract Terms and Conditions (HUD-52840-A)

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

The information collection requirements contained in this document have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520) and assigned OMB control number 2577-0075. There is no personal information contained in this application. Information on activities and expenditures of grant funds is public information and is generally available for disclosure. Recipients are responsible for ensuring confidentiality when disclosure is not required. In accordance with the Paperwork Reduction Act, HUD may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a currently valid OMB control number.

Whereas, (Public Housing Authority) Housing Authority of the City of Waukegan IL026 (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into an Annual Contributions Contract ACC(s) Numbers(s) (On File) dated (On File)

Whereas, in accordance with Public Law 117-328, Division L, Title II,

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities at existing public housing projects in order to ensure that such projects continue to be available to serve low-income families. HUD reserves the right to provide additional CFP assistance in this FY to the PHA. When HUD provides additional amounts, it will notify the PHA and those amended grants will be subject to these terms and conditions.

\$ 1,095,876.00 for Fiscal Year 2023 to be referred to under the Capital Fund Grant Number L01P02650123 PHA Tax Identification Number (TIN): On File UEI Number: On File

Whereas, HUD and the PHA are entering into the CFP Amendment Number On File

Now Therefore, the ACC is amended as follows:

- 1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA projects. This CFP Amendment is a part of the ACC.
2. The PHA must carry out all capital and management activities in accordance with the United States Housing Act of 1937 (the Act), 24 CFR Part 905 (the Capital Fund Final rule) as well as other applicable HUD requirements, except that the limitation in section 9(g)(1) of the Act is eased such that the amount of CFP assistance provided for under this CFP amendment the PHA may use no more than 25 percent for activities that are eligible under section 9(e) of the Act only if the PHA's HUD-approved Five Year Action Plan provides for such use; however, if the PHA owns or operates less than 250 public housing dwelling units, such PHA may continue to use the full flexibility in accordance with section 9(g)(2) of the Act.
3. The PHA has a HUD-approved Capital Fund Five Year Action Plan and has complied with the requirements for reporting on open grants through the Performance and Evaluation Report. The PHA must comply with 24 CFR 905.300 of the Capital Fund Final rule regarding amendment of the Five Year Action Plan where the PHA proposes a Significant Amendment to the Capital Fund Five Year Action Plan.
4. For cases where HUD has approved a Capital Fund Financing Amendment to the ACC, HUD will deduct the payment for amortization scheduled payments from the grant immediately on the effective date of this CFP Amendment. The payment of CFP funds due per the amortization scheduled will be made directly to a designated trustee within 3 days of the due date.
5. Unless otherwise provided, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the Act and 48 month time period in which the PHA must expend this CFP assistance pursuant to section 9(j)(5) of the Act starts with the effective date of this CFP amendment (the date on which CFP assistance becomes available to the PHA for obligation). Any additional CFP assistance this FY will start with the same effective date.
6. Subject to the provisions of the ACC(s) and paragraph 3, and to assist in capital and management activities, HUD agrees to disburse to the PHA or the designated trustee from time to time as needed up to the amount of the funding assistance specified herein.
7. The PHA shall continue to operate each public housing project as low-income housing in compliance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modernization activities for each public housing project or portion thereof and for a period of forty years after the last distribution of CFP assistance for development activities for each public housing project and for a period of ten years following the last payment of assistance from the Operating Fund to each public housing project. Provided further that, no disposition of any project covered by this amendment shall occur unless approved by HUD.
8. The PHA will accept all CFP assistance provided for this FY. If the PHA does not comply with any of its obligations under this CFP Amendment and does not have its Annual PHA Plan approved within the period specified by HUD, HUD shall impose such penalties or take such remedial action as provided by law. HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the Annual PHA Plan. In such case, the PHA shall only incur additional costs with HUD approval.
9. Implementation or use of funding assistance provided under this CFP Amendment is subject to the attached corrective action order(s). (mark one): Yes [] No [x]
10. The PHA is required to report in the format and frequency established by HUD on all open Capital Fund grants awarded, including information on the installation of energy conservation measures.
11. If CFP assistance is provided for activities authorized pursuant to agreements between HUD and the PHA under the Rental Assistance Demonstration Program, the PHA shall follow such applicable statutory authorities and all applicable HUD regulations and requirements. For total conversion of public housing projects, no disposition or conversion of any public housing project covered by these terms and conditions shall occur unless approved by HUD. For partial conversion, the PHA shall continue to operate each non-converted public housing project as low-income housing in accordance with paragraph 7.
12. CFP assistance provided as an Emergency grant or a Safety and Security grant shall be subject to a 12 month obligation and 24 month expenditure time period. CFP assistance provided as a Natural Disaster grant shall be subject to a 24 month obligation and 48 month expenditure time period. The start date shall be the date on which such funding becomes available to the PHA for obligation. The PHA must have a recorded and effective Declaration(s) of Trust on all property funded with Capital Fund grants (all types) or HUD will exercise all available remedies including recapture of grant funding.

The parties have executed this CFP Amendment, and it will be effective on the date HUD signs below.

U.S. Dept of HUD /s/ Marianne Nazzaro Title: Deputy Assistant Secretary Office Public Housing Investments Date: 02/17/2023 PHA (Executive Director or authorized agent) By: Mr. Charles J. Cheloff Title: Executive Director/CEO Date: 7/25/2023

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Waukegan Housing Authority 215 S. Martin Luther King Jr Ave Waukegan, IL 60085 Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U.S. Department of Housing and Urban Development	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known: IL01P02650123	9. Award Amount, if known: \$ 1,095,876.00	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Mr. Charles J. Chambers Jr.</u> Print Name: <u>Charles J. Chambers Jr.</u> Title: <u>Executive Director/CEO</u> Telephone No.: <u>847-244-8500</u> Date: <u>7/25/2023</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**Certifications of Compliance with
PHA Plans and Related Regulations
(Standard, Troubled, HCV-Only, and
High Performer PHAs)**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 02/29/2016

**PHA Certifications of Compliance with the PHA Plan and Related Regulations including
Required Civil Rights Certifications**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 01/2023, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Resident Advisory Board or Boards in developing the Plan, including any changes or revisions to the policies and programs identified in the Plan before they were implemented, and considered the recommendations of the RAB (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identifying any impediments to fair housing choice within those programs, addressing those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and by maintaining records reflecting these analyses and actions.
7. For PHA Plans that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2010-25);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of a site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such a waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

12. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
13. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
14. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
15. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
16. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
17. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
18. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
19. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
22. The PHA certifies that it is in compliance with applicable Federal statutory and regulatory requirements, including the Declaration of Trust(s).

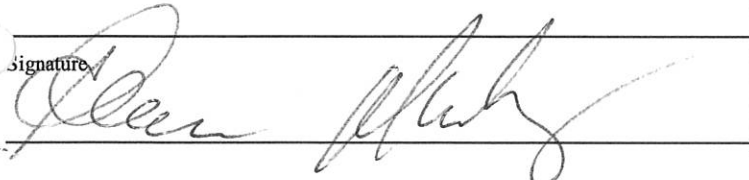
Waukegan Housing Authority
 PHA Name

IL026
 PHA Number/HA Code

2023 Annual PHA Plan for Fiscal Year 2023

____ 5-Year PHA Plan for Fiscal Years 20 ____ - 20 ____

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802).

Name of Authorized Official Eleanor Murkey	Title Chairman
Signature 	Date 7/25/2023

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan or
State Consolidated Plan
(All PHAs)**

U. S Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 3/31/2024

**Certification by State or Local Official of PHA Plans
Consistency with the Consolidated Plan or State Consolidated Plan**

I, Brenda L. O'Connell, the Community Development Administrator
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 22-26 and/or Annual PHA Plan for fiscal
year 2023 of the Waukegan Housing Authority is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including the Analysis of Impediments (AI) to Fair
Housing Choice or Assessment of Fair Housing (AFH) as applicable to the

Lake County, IL

Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR §§ 903.7(o)(3) and 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or
State Consolidated Plan.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will
prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official:

Brenda L. O'Connell

Title:

Community Development Administrator

Signature:

Brenda L. O'Connell

Date:

7/26/2023

The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S.
Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information
are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality. This information is collected to
ensure consistency with the consolidated plan or state consolidated plan.

Public reporting burden for this information collection is estimated to average 0.16 hours per year per response, including the time for reviewing
instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD
may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.