

Attachment 4

**Housing Opportunities for Persons with AIDS
(HOPWA) Program**

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

June 2024

Part 1 of 2

Housing Opportunities for Persons With AIDS (HOPWA) Program

Revised: 11/30/2022

Consolidated APR/CAPER – Grantee Workbook

OMB Number 2506-0133 (Expiration Date: 12/31/2024)

Overview

The public reporting burden for this collection of information is estimated to average 40.0 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Performance Reports for HOPWA formula grantees and competitive grantees provide HUD with annual information to support program evaluation and measure program beneficiary outcomes related to maintaining housing stability; preventing homelessness; and improving access to care and support. This collection of information consolidates the information in the APR and CAPER reports and clarifies reporting requirements, which will allow HUD's Office of HIV/AIDS Housing to better respond to data calls from Congress and make better program decisions based on more relevant grantee annual data. Reporting is required for all HOPWA grantees pursuant to 42 U.S.C. § 12911; 24 CFR §§ 574.520(a) and (b); 24 CFR § 91.520(f). The information collected regarding grantees, their respective project sponsors, and the identities of HOPWA program participants will remain confidential pursuant to 42 U.S.C. § 12905(e) and 24 § CFR 574.440.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to Colette Pollard, Reports Management Officer, Department of Housing and Urban Development, 451 7th Street SW, Room 4176, Washington, DC 20410-5000. When providing comments,

HOPWA formula grantees are required to submit a Performance Report demonstrating coordination with other Consolidated Plan resources. HUD uses the Performance Report data to obtain essential information on grant activities, project sponsors, 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.

In addition, grantees must comply with the Federal Funding Accountability and Transparency Act 2006 (Public Law 109-282), which requires grant recipients to provide general information for all entities (including

HOPWA competitive grantees are required to submit a Performance Report for each operating year in which HOPWA grant funds were expended. Information on each competitive grant is to be reported in a separate Performance Report. Grantees approved for "Other Activities", as detailed in their grant agreement, are requested to report on their unique program accomplishments.

In addition, grantees must comply with the Federal Funding Accountability and Transparency Act 2006 (Public Law 109-282), which requires grant recipients to provide general information for all entities (including

Continued-use Periods. Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation of a building or structure are required to operate the building or structure 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 the "CAP DEV" tab in the Performance Report Worksheet, the grantee must complete an Annual Report of Continued Project Operation throughout the required use periods. This report is found on the "STEWARD" tab of this workbook. The required use period is three (3) years if the rehabilitation is non-

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

HMIS. 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 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, Housing Status or Destination at the end of the operating year, Physical Disability, Developmental Disability, Chronic Health Condition, Mental Health, Substance Abuse, Domestic Violence, Medical Assistance, and T-cell Count. Other HOPWA projects sponsors may also benefit from collecting these data elements. HMIS local data systems must maintain client confidentiality by using a closed system in which medical information and HIV status are only shared with providers that have a direct involvement in the client's

Formula Operating Year. HOPWA formula grants are annually awarded for a three-year period of performance with three operating years. The information contained in this Performance Report must represent a one-year period of HOPWA program operation that coincides with the grantee's program year; this is the operating year. More than one HOPWA formula grant awarded to the same grantee may be used during an operating year and the Performance Report must capture all formula grant funding used during the operating year. Project sponsor accomplishment information must also coincide with the operating year this Performance Report covers. Any change to the period of performance requires the approval of HUD by amendment, such as an extension for an

Competitive Operating Year. HOPWA competitive grants are awarded for a three-year period of performance with Performance Reports submitted for each of the three operating years. The information contained in this Performance Report should reflect the grantee's operating year with the beginning date determined at the time the grant agreement is signed. Project sponsor accomplishment information must coincide with the operating year this Performance Report covers. Any change to the period of performance requires the approval of HUD by amendment, such as an extension for one additional operating year. A PSH renewal/replacement grant start date would be coordinated with the close out of the existing grant.

Grantees with an approved extension period of less than 6-months must submit the Performance Report for the third year of the grant term at the end of the approved extension period and incorporate data from the additional months. Grantees with an approved extension period of 6-months or more must turn in a

Filing Requirements. Within 90 days of the completion of each operating year, grantees must submit their completed Performance Report to the CPD Director in the grantee's State or Local HUD Field Office, and to the HOPWA Program Office: at HOPWAReports@hud.gov. Electronic submission to HOPWA Program office is preferred. If electronic submission is not possible, please send an email to the HOPWA@hud.gov email inbox.

Definitions

Achieved Viral Suppression: When the load or volume of HIV virus present in a person's blood is measured at less than 200 copies per milliliter of blood.

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.

Administrative Costs: Costs for general management, oversight, coordination, evaluation, and reporting. By statute, grantee administrative costs are limited to 3% of the 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

<p>Anti-Retroviral Therapy: The combination of drugs used to treat HIV.</p>
<p>Area Median Income: The Department of Housing and Urban Development (HUD) sets income limits that determine eligibility for assisted housing programs including the HOPWA program. HUD develops income limits based on Median Family Income estimates and Fair Market Rent area definitions for each metropolitan area, parts of some metropolitan areas, and each non-metropolitan county. AMI values vary by location and are</p>
<p>Beneficiary(ies): All members of a household (with or without HIV) who benefitted from HOPWA assistance during the operating year, NOT including the HOPWA eligible individual (see definition).</p>
<p>Chronically Homeless Person: An individual or family who is homeless and lives or resides as an individual or family who a) lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter; b) 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 one year or on at least four separate occasions in the last three years; and c) 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 two 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</p>
<p>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.</p>
<p>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.</p>
<p>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.</p>
<p>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."</p>
<p>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 Performance Report 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).</p>
<p>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</p>
<p>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</p>
<p>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 in the Performance Report.</p>

<p>Housing Stability: The degree to which the HOPWA project assisted beneficiaries to remain in stable housing during the operating year.</p>
<p>Improved HIV Viral Load: A reduction in the load or volume of HIV present in the HOPWA eligible individual's blood at the end of the reporting period compared to the beginning of the reporting period. Most PLWHA who are engaged in medical care have routine laboratory tests. The HOPWA eligible individual's latest laboratory</p>
<p>In-kind Leveraged Resources: These are 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 criteria described in 2 CFR 200. 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 <u>bills of sales, advertised prices, appraisals, or other information for comparable property similarly situated.</u></p>
<p>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.</p>
<p>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 Code of Federal Regulations Title 24 Part 5.403 and the HOPWA Grantee Oversight Resource Guide for additional reference.</p>
<p>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</p>
<p>Medically Assisted Living Facilities: HOPWA facility-based housing that assists residents with most or all activities of daily living, such as meals, bathing, dressing, and toileting. Regular medical care, supervision, and</p>
<p>Nonbinary: A gender other than singularly female or male.</p>
<p>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</p>
<p>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</p>
<p>Output: The number of units of housing or households that receive HOPWA assistance during the operating</p>
<p>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.</p>
<p>Program Income: Gross income directly generated from the use of HOPWA funds, including repayments. See grant administration requirements on program income at 2 CFR 200.307.</p>
<p>Project-Based Rental Assistance (PBRA): A rental subsidy program that is tied to specific facilities or units owned or controlled by a project sponsor. Assistance is tied directly to the properties and is not portable or</p>
<p>Project Sponsor Organizations: Per HOPWA regulations at 24 CFR 574.3, 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.</p>
<p>SAM: All organizations applying for a Federal award must have a valid registration active at sam.gov. SAM (System for Award Management) registration includes maintaining current information and providing a valid</p>
<p>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</p>

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

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

Transgender: Transgender is defined as a person who identifies with, or presents as, a gender that is different from his/her gender assigned at birth

VAWA Internal Emergency Transfers: Per 24 CFR 5.2005e, an emergency transfer under the VAWA protections refers to an emergency relocation of a tenant to another unit where the tenant would not be categorized as a new applicant; that is, the tenant may reside in the new unit without having to undergo an application process.

VAWA External Emergency Transfers: Per 24 CFR 5.2005e, an emergency transfer under the VAWA protections refers to an emergency relocation of a tenant to another unit where the tenant would be categorized as a new applicant; that is, the tenant must undergo an application process in order to reside in the new unit.

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.

Instructions for Completing the HOPWA Performance Report Workbook

What is the HOPWA Performance Report Workbook?

This workbook provides annual performance data for HOPWA activities. This includes outputs (e.g., households served and demographic information), outcomes (e.g., access to care and support outcomes) and expenditures (for HOPWA-eligible costs).

This data will be compiled by the HOPWA Formula or Competitive Grantee, as part of providing annual performance reporting to HUD.

Who completes this form?

This workbook will be completed by **any organization** that conducts any HOPWA activities other than administrative activities. This includes HOPWA Formula or Competitive Grantees that conduct other HOPWA activities besides administrative activities, and the **Project Sponsor** organizations that Grantees contract to provide HOPWA services (as defined in 24 CFR 574.3).

There should be one organization's HOPWA activities reported in each workbook. Each organization should complete a separate performance report workbook that only includes the HOPWA activities conducted by that organization.

What tabs should be completed for this report?

The Performance Report Workbook requires the completion of the following tabs:

- **DEM (Demographics) & Prior Living (see Note)**
- **Leveraging**
- **ATC (Access to Care) & Totals**

ONLY PROJECT SPONSORS* should complete these tabs:

- **HOPWA Provider**
- **CONTACT**

* For Grantees that are approved to conduct *Resource Identification or Technical Assistance activities*, please report your expenditure amounts for those budget line items in the **HOPWA Provider tab**. These are the only cells that you will need to complete in the **HOPWA Provider** tab.

Note: Complete Prior Living information only for individuals served by TBRA, P-FBH, ST-TFBH or PHP.

The remaining tabs should **ONLY** be completed **based on HOPWA services provided by the organization completing this workbook**. *Leave tabs untouched* if the activity is not provided by the organization.

- **TBRA (Tenant-Based Rental Assistance)**

- *P-FBH (Permanent Facility-Based Housing)*
- *ST-TFBH (Short-Term or Transitional Facility-Based Housing)*
- *STRMU (Short-Term Rent, Mortgage and Utilities Assistance)*
- *PHP (Permanent Housing Placement Assistance)*
- *Housing Info (Housing Information Services)*
- *Supp Svcs (HOPWA Supportive Services)*
- *Other Competitive Activity*
- *CAP DEV (Capital Development)*
- *VAWA (Housing Transfers for Households Covered by the Violence Against Women Act)*

Important Information

To ensure the integrity of this reporting form, please do not DELETE or ALTER any rows, columns, tabs, or the NAME of the report. This form requires the entry of data only where applicable, with no other actions required.

- 1 Enter text in empty cells next to questions.
- 2 Enter numbers where the entry reads "0" and the answer is an amount greater than zero.

SUBMISSION INSTRUCTIONS

- Once complete, the Project Sponsor should return the entire workbook to *the Grantee* in the manner and timeline prescribed by the Grantee.
- The report **MUST** be submitted in this Excel format.
- **DO NOT** alter the name of this file; return it to the Grantee with the file name as provided.
- The Grantee is responsible for reviewing this report and submitting it to HUD. Project Sponsors **should not** submit this report to HUD; only to the Grantee.
- The Grantee may be contacted by HUD or a HUD contractor regarding the accuracy of this report.
- Please contact the Grantee if you require support submitting this form.

Grantee	Grant ID	Sponsor(s)	File ID
ALABAMA	FALG8522	S9306A_AIDS Alabama	24059_4654991
		S9307A_Thrive Alabama, Inc.	
		S9308A_Unity Wellness Center	
		S9309A_AIDS Alabama South (formerly South Alabama Care:	
		S93010A_Five Horizons Health Services Inc	
		S93011A_Birmingham AIDS Outreach	
		S93014A_Selma AIDS Information and Referral (AIR)	
		S93012A_The Right Place	

GRANTEE SUMMARY

Complete the chart below to provide more detailed information about the agencies and organizations responsible for the administration and implementation of the HOPWA program.

Question	Responses
<i>For Competitive Grantees Only</i>	
For Competitive Grantees only, what is the grant number?	
For Competitive Grantees only, which year (1, 2, or 3) of the grant does this report cover?	
Is the Competitive Grantee a nonprofit organization? Yes or No.	
Is the Competitive Grantee a grassroots organization? Yes or No.	
For Competitive Grantees only, how much was expended on an "Other Housing Activity" (as approved in the grant agreement)?	
<i>For All HOPWA Grantees</i>	
What is the name of the Grantee organization?	AIDS Alabama
What is the Grantee's Unique Entity Identifier (UEI)?	834432999
What is the Employer ID Number (EIN) or Tax ID Number (TIN) of the Grantee?	58 1727755
For formula grantees only, are there any changes to your program year? Yes or No.	NO
<i>Note: HUD must be notified of consolidated program year changes at least two months before the date the program year would have ended if it had not been lengthened, or at least two months before the end of a proposed shortened program year.</i>	
If yes above, what is the revised program start date?	
If yes above, what is the revised program end date?	
What is the street address of the Grantee's office?	3529 7th Ave. South
In what city is the Grantee's business address?	Birmingham
In what county is the Grantee's business address?	Jefferson
In what state is the Grantee's office located?	Alabama
What is the zip code for the Grantee's business address?	35222
What is the parent company of the Grantee (if applicable)?	N/A
What department at the Grantee organization administers the grant?	Operations Department
What is the Grantee organization's website address?	www.aidsalabama.org
What is the Facebook name or page of the Grantee?	AIDS Alabama
What is the Twitter handle of the Grantee?	AIDS Alabama
What are the cities of the primary service area of the Grantee?	Birmingham, Hoover, Jasper, Oneonta, Leeds
What are the counties of the primary service area of the Grantee?	Jefferson, Shelby, St. Clair, Blount, Walker
What is the congressional district of the Grantee's business address?	7
What is the congressional district of the Grantee's primary service area?	6,7

Is there a waiting list(s) for HOPWA Housing Subsidy Assistance Services in the Grantee service area? Yes or No.	Yes
Is the Grantee's System for Award Management (SAM) status currently active for this report? Yes or No.	Yes
What is the Grantee's SAM registration number for this report?	
Does the Grantee provide HOPWA-funded services directly to clients? Yes or No.	Yes
Does the Grantee take the allowable 3% Grantee Administration allowance? Yes or No.	Yes
How much was expended on Grantee Administration?	0

Contact Information for your Organization

Question	Responses
Contact Information for Authorizing Official	
What is the Authorizing Official contact name?	Kathie Hiers
What is the Authorizing Official contact title?	CEO
In what department does the Authorizing Official contact work?	Operations
What is the Authorizing Official contact email?	kathie.hiers@aidسالabama.org
What is the Authorizing Official contact phone number (including extension)?	(205) 324-9822 #2437
What is the Authorizing Official contact fax number?	(205)324-9981
Contact Information for Reporting (APR/CAPER) Contact	
What is the Reporting contact name?	Lakreash Dixon
What is the Reporting contact title?	Director of Grants Management Programs
In what department does the Reporting contact work?	Programs
What is the Reporting contact email?	lakreash.dixon@aidسالabama.org
What is the Reporting contact phone number (including extension)?	(205)324-9822
What is the Reporting contact fax number?	(205)324-9981
Contact Information for HMIS User	
What is the HMIS User contact name?	Lakreash Dixon
What is the HMIS User contact title?	Director of Grants Management Programs
In what department does the HMIS User contact work?	Programs
What is the HMIS User contact email?	lakreash.dixon@aidسالabama.org
What is the HMIS User contact phone number (including extension)?	(205)324-9822
What is the HMIS User contact fax number?	(205)324-9981
Contact Information for IDIS User	
What is the IDIS User contact name?	Kevin Finney
What is the IDIS User contact title?	CFO
In what department does the IDIS User contact work?	Financial Operations
What is the IDIS User contact email?	finney@aidسالabama.org
What is the IDIS User contact phone number (including extension)?	(205)918-8187
What is the IDIS User contact fax number?	(205)324-9881
Contact Information for Primary Program Contact	
What is the Primary Program contact name?	Lakreash Dixon
What is the Primary Program contact title?	Director of Grants Management Programs
In what department does the Primary Program contact work?	Programs

What is the Primary Program contact email?	lakreash.dixon@aidسالabama.org
What is the Primary Program contact phone number (including extension)?	(205)324-9822
What is the Primary Program contact fax number?	(205)324-9881
Contact Information for Secondary Program Contact	
What is the Secondary Program contact name?	Heather Rauckman
What is the Secondary Program contact title?	Excutive Director
In what department does the Secondary Program contact work?	Programs
What is the Secondary Program contact email?	heather.rauckman@aidسالabama.org
What is the contact Secondary Program phone number (including extension)?	(205) 780-6058
What is the Secondary Program contact fax number?	(205) 324-9881
Contact Information for Individuals Seeking Services	
What is the Services contact name?	Tricia McMullen
What is the Services contact title?	HOPWA Adminsitratve Specialist
In what department does the Services contact work?	Programs
What is the Services contact email?	tricia.mcmullen@aidسالabama.org
What is the Services contact phone number (including extension)?	(205)861-2789
What is the Services contact fax number?	(205)324-9881

Narrative Questions

Provide a maximum of 4,000 characters 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.

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.

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

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.

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

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.

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

Response - Maximum 4,000 characters for each question.	Character Count
<p>Highlights and achievements during this reporting year includes services AIDS Alabama and community ASO partners provided to HOPWA eligible persons throughout the state of Alabama. AIDS Alabama uses HOPWA funding for rental & mortgage assistance, supportive services (case management, employment linkage, housing information services, outreach, transportation, and medical care linkage) and continued operations of AIDS Alabama in collaboration with seven ASONA partnering organizations were able to provide HOPWA beneficiaries and their families with establishing and/or better maintain stable living environments in housing that is safe, decent, sanitary, and improve access to care. The works of collaboration aided in beneficiaries accessing resources and services for stabilize housing, utility assistance, gained employment, receiving routine medical care, ongoing case management services, transportation, access to food and clothing security, linkage to mental health or substance abuse services, and HIV testing. Services and housing programs such as Tenant Base Rental Assistance (TBRA), Short Term Rental, Mortgage &</p>	5661
<p>This reporting year accomplishments consisted of Goals listed for the April 1, 2023 -March 31, 2024 grant cycle. For the reporting year of 2023 - 2024, AIDS Alabama and ASO partners collectively served a total of 4,235 unduplicated households for services that ranges from emergency housing & utility assistance, emergency overnight shelter, short term transitional facility based housing, permanent facility based housing, 1- master lease property, transportation, housing information, employment and case management</p>	6157
<p>City of Birmingham Community Development consist of:</p> <ul style="list-style-type: none"> • Birmingham AIDS Outreach; • Five Horizons Health Services; 	3228
<p>As AIDS Alabama continues the management of the ADECA's HOPWA program, the technical assistance needs relate primarily to developing additional funding streams,</p>	1964
<p>In addition to barriers for housing services, AIDS Alabama and partnering organizations has encountered challenges related to safe and affordable housing in the State of Alabama. Typically, units affordable to a very-low income household are not in a desired neighborhood and may not be considered decent or safe. Secondly, the state has an shortage of affordable housing units due to landlords lack of acceptance for housing vouchers and the rise rent amounts. Furthermore, according to the Low Income Housing Coalition of Alabama, extremely low-income renters must also compete with higher-income households for the limited number of rental units affordable to them in the private</p>	1491

Narrative Questions	Response - Maximum 4,000 characters for each question.	Character Count
<p>Provide a maximum of 4,000 characters 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.</p>	<p>Highlights and achievements during this reporting year includes services AIDS Alabama and community ASO partners provided to HOPWA eligible persons throughout the state of Alabama. AIDS Alabama uses HOPWA funding for rental & mortgage assistance, supportive services (case management, employment linkage, housing information services, outreach, transportation, and medical care linkage) and continued operations of affordable permanent supportive housing in the State of Alabama. AIDS Alabama in collaboration with the AIDS Service Organization Network of Alabama (ASONA) members were able to provide housing and supportive services throughout 67 counties in the state of Alabama. Furthermore, AIDS Alabama sustains a working partnership with the local Continuum of Care, One Roof, Balance of the State Continuum, and the Alabama Rural Coalition for the Homeless. These partnerships allows AIDS Alabama to network with other housing providers across the State, as well as to have a voice in discussion regarding affordable housing and homelessness prevention.</p> <p>AIDS Alabama and its ASO community partners provided 8,875 instances of supportive services to individuals living with HIV during this reporting period. Homeless prevention and stable housing services were provided in the form of Short-Term Mortgage, Rental, and Utility Assistance (STRMU) to 127 unduplicated qualified households. Long term affordable permanent housing for Tenant-Based Rental Assistance (TBRA) were provided to 72 unduplicated qualified households. Short Term Transitional Facility Based Housing was provided to 50 unduplicated qualified persons to aid in shelter, or temporary transitional housing at the Way Station center & Rectory center know as the LibCap campus program. Project-Based Rental Assistance (PBRA) is another form of housing assistance that can be used to aid housing assistance, which there were no households who needed this particular funding for housing during this reporting period.</p> <p>AIDS Alabama provides a spectrum of decent, safe, and affordable housing for low-income persons living with HIV. Housing ranges from Short Term Transitional Facility Based Housing, which provides dually diagnosed persons living with HIV and a severe mental</p>	5661

<p>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.</p>	<p>2239</p> <p>AIDS Alabama in collaboration with seven ASONA partnering organizations were able to provide HOPWA beneficiaries and their families with establishing and/or better maintain stable living environments in housing that is safe, decent, sanitary, and improve access to care. The works of collaboration aided in beneficiaries accessing resources and services for stabilize housing, utility assistance, gained employment, receiving routine medical care, ongoing case management services, transportation, access to food and clothing security, linkage to mental health or substance abuse services, and HIV testing. Services and housing programs such as Tenant Base Rental Assistance (TBRA), Short Term Rental, Mortgage & Utility (STRMU), Permanent Facility Base Housing, and Short Term Transitional Facility Base Housing assistance and supportive services, all contributed to meeting, or nearly meeting this grant's year goals. In effort towards meeting the goals for this grant period, AIDS Alabama and partnering organizations worked together to ensure persons served were identified as unduplicated households to accurately capture and report demographics of households served. Program activities such as community outreach, attending health fairs, agency referrals, attending HIV educational conferences, and marketing throughout the state of Alabama played a major role in connecting with qualified consumers. Overall, there were no program challenges with program implementation, but there were two target goals that were nearly met. In effort to work towards meeting the upcoming grant cycle target goals, AIDS Alabama and partners will increase outreach attempts to build new community partnerships with other social service agencies to continue growing the HOPWA State waitlist for housing and increasing awareness for offered supportive services. In addition to exceeding targeted goals, AIDS Alabama and partners successfully surpassed the goal of placing qualified consumers in short term transitional facility based housing and providing STRMU assistance. Both goals were successfully met due to need for services and assigned case managers thoroughly assessing consumer needs and developing individualized consumer case plans.</p>
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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 operating year among different categories of housing and geographic areas to address needs throughout the grant service area, consistent with approved plans.

This reporting year accomplishments consisted of Goals listed for the April 1, 2023 -March 31, 2024 grant cycle. For the reporting year of 2023 - 2024, AIDS Alabama and ASO partners collectively served a total of 4,235 unduplicated households for services that ranges from emergency housing & utility assistance, emergency overnight shelter, short term transitional facility based housing, permanent facility based housing, 1- master lease property, transportation, housing information, employment and case management services. ASO partners worked diligently to reach and provide case management services to HOPWA eligible persons in order to refer, help stabilize, and further assess consumer needs for HOPWA program services. Goal 1: Support a statewide rental assistance program through qualified AIDS Service Organizations. Objective 1 - Provide 50 households with emergency Short-Term Rent/Mortgage and Utility (STRMU) assistance. Outcome 1- AIDS Alabama provided 55 households with short-term rental, mortgage and utility assistance during this reporting period. AIDS Alabama successfully met this goal at 100% percent, which allowed consumers to remain stably housed access up to five months of financial assistance. Goal 2- To support a statewide Tenant Based Rental Program Assistance (TBRA) program through qualified AIDS Service Organizations. Objective- Provide 100 households with long-term, Tenant-Based Rental Assistance. Outcome 1- AIDS Alabama provided 72 households with TBRA assistance, which this goal was met at 72 percent. Although this goal was not met during this reporting period, the effort towards meeting this goal was increased by 4 percent this year. In terms of success, the TBRA program assisted with onboarding new consumers to gain housing stability and helping long-term consumers maintain their long-term affordable housing. In order to reach this goal during the next grant period, AIDS Alabama will work towards increasing outreach efforts and building new community partnerships, so that new eligible persons are aware of the services offered throughout the state of Alabama. Goal 3 - Support permanent housing through facility based housing subsidy. Objective 3- AIDS Alabama will use \$800,000 to subsidize the cost of permanent housing units, serving a potential 100 PLWH and their families with

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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.

City of Birmingham Community Development consist of:

- Birmingham AIDS Outreach;
- Five Horizons Health Services;
- Unity Wellness Center;
- Thrive Alabama;
- Health Service Center;
- AIDS Alabama South;
- Selma AIR;
- The Right Place;
- Aletheia House;
- One Roof;
- Alabama Rural Coalition for the Homeless;
- Ryan White Consortium;
- Family Clinic at UAB;
- 1917 Clinic at UAB;
- Jefferson County Health Department;
- JBS Mental Health/Mental Retardation Authority;
- United Way of Central Alabama;
- United Way of Southwest Alabama;
- Alabama Department of Economic and Community Affairs (ADECA);
- Alabama Department of Public Health (ADPH);
- Alabama Department of Mental Health;
- AIDS Service Organization Network of Alabama (ASONA); and
- Other state and local social service agencies as needed. The following describes how federal, state, and local public/private resources will be used to address the identified consumer needs:
- HOPWA entitlement funds are provided through the State of Alabama and the City of

<p>Describe any program technical assistance needs and how they would benefit program beneficiaries.</p>	<p>As AIDS Alabama continues the management of the ADECA's HOPWA program, the technical assistance needs relate primarily to developing additional funding streams, deepening existing funding streams, HMIS participation, and identifying best practices and innovations in programs serving PLWHA. While currently successful, the program would benefit from continuous technical assistance from HUD in order to improve the program and ensure its sustainability. The program would benefit from technical assistance in refining and improving development strategies for deepening existing funding streams and identifying and accessing new funding streams. AIDS Alabama continues to seek out new funding streams for the important housing services and supportive services that ensure the success of this program. As a statewide program, HMIS participation subjects the program to the requirement for coordinating with multiple Continuums of Care (CoC) with competing and often conflicting requirements for utilization of the statewide HMIS system since it is managed regionally. Current HMIS policy allows for entities in multiple CoCs to participate in the CoC where they are headquartered alone, but AIDS Alabama partners with other AIDS Service Organizations (ASO) to provide service coverage to all 67 counties in Alabama. The local HMIS administrators have decided that each partnering ASO must partner locally for training and compliance for HMIS. Unfortunately, this does not allow for a uniform system for ADECA's HOPWA program. AIDS Alabama currently completes data collection on paper and manually enters this data in compliance with data entry requirements. The program would benefit from an updated HOPWA Specific HMIS Technical Manual outlining both the required data collection and workflows. Lastly, credit and rental history has become a major component when assisting qualified individuals with locating housing due to previous negative rental consequences.</p>	<p>1964</p>
<p>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. 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. Identify any evaluations, studies, or other assessments of the HOPWA program that are available to the public.</p>	<p>In addition to barriers for housing services, AIDS Alabama and partnering organizations has encountered challenges related to safe and affordable housing in the State of Alabama. Typically, units affordable to a very-low income household are not in a desired neighborhood and may not be considered decent or safe. Secondly, the state has an shortage of affordable housing units due to landlords lack of acceptance for housing vouchers and the rise rent amounts. Furthermore, according to the Low Income Housing Coalition of Alabama, extremely low-income renters must also compete with higher-income households for the limited number of rental units affordable to them in the private market as well. Thus, rent supplement programs and affordable housing developments are vital; within the HIV-positive population, as with other vulnerable groups, housing is often the catalyst for stable health care, decreased risky behaviors, and successful long-term outcomes. Additionally, the availability of supportive services is a crucial factor when determining success outcomes in persons living with HIV. In addition to challenges persons who initially qualified for housing services at the time of being placed on the waitlist may have already received an Section 8 voucher, found low income housing, or no longer qualifies for services per household income. AIDS Alabama and partners ultimate goal is for any qualifying individual to successfully transition to permanent affordable housing.</p>	<p>1491</p>

Complete the Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units, as defined in the Definitions, for EACH Stewardship Facility.

Question	Facility 1	Facility 2	Facility 3	Facility 4
What is the name of the stewardship facility?				
What is the stewardship year (1-10) for this facility?	0	0	0	0
What date did the facility operations begin?				
How many HOPWA units are supported in this stewardship facility?	0	0	0	0
What is the amount of non-HOPWA funds expended on the stewardship facilities?	0	0	0	0
What is the name of the <i>authorized official</i> that operates the facility?				
What is the name of the primary program contact at the facility?				
What is the email address of the primary program contact at the facility?				
What is the phone number of the primary program contact at the facility?				

Facility 59	Facility 60
	0
	0
	0

Grant ID
FALG8522

Grantee
ALABAMA

Sponsor ID
S9306A

Sponsor
S9306A_AIDS Alabama

File ID
24059_46551

Please complete for organizations designated to serve as project sponsor, i.e., organizations involved in the direct delivery of services for client households, as defined by 24 CFR 574.3.

Project Sponsor Questions	Responses
What is the organization's name?	AIDS Alabama
What is the organization's Unique Entity Identifier (UEI)?	STULKA42ZA45
What is the organization's Employer ID Number (EIN) or Tax ID Number (TIN)?	58 1727755
What is the HOPWA contract amount for this organization?	\$4,251,646.00
What is the organization's business street address?	3529 7th Ave South
In what city is the organization's business address?	Birmingham
In what county is the organization's business address?	Jefferson
In what state is the organization's business address?	Alabama
What is the organization's business address zip code?	35222
What is the organization's parent company, if applicable?	
What department administers the organization's grant?	Finanacial Department
What is the organization's phone number (including extension)?	(205)324-9822
What is the organization's fax number?	(205)324-9311
What is the organization's website?	www.aidsalabama.org
What is the organization's Facebook page?	AIDS Alabama
What is the organization's Twitter handle?	AIDS Alabama
Is this a faith-based organization? Yes or No.	no
Is this a nonprofit organization? Yes or No.	yes
Is this a grassroots organization? Yes or No.	yes
What are the cities of the organization's primary service area?	Birmingham, Hoover, Jasper, Oneonta, Leeds
What are the counties of the organization's primary service area?	Jefferson, Shelby, St.Clair, Blount, Walker
In what congressional district is the organization located?	7
In what congressional district is the primary service area?	6. 7
Is there a waiting list for HOPWA housing subsidy assistance services in the organization's service area? Yes or No.	Yes

Project Sponsor Non-Direct Service Expenditures	
What were the total HOPWA funds expended for Administration costs?	\$187,635.00
How much was expended on Technical Assistance?	0
How much was expended on Resource Identification?	\$77,702.21

Contact Information for your Organization

Only organizations designated as project sponsors (see definition of "Project Sponsor Organization" in Performance Report Cover tab) should complete this tab.

Question	Responses
Contact Information for Primary Program Contact	
What is the Primary Program contact name?	Lakreash Dixon
What is the Primary Program contact title?	Grants Management
In what department does the Primary Program contact work?	205-918-8196
What is the Primary Program contact email?	lakreash.dixon@aidسالabama.or
What is the Primary Program contact phone number (including extension)?	8196
What is the Primary Program contact fax number?	205-324-9311
Contact Information for Secondary Program Contact	
What is the Secondary Program contact name?	Heather Rauckman
What is the Secondary Program contact title?	Excutive Director
In what department does the Secondary Program contact work?	205-324-9822
What is the Secondary Program contact email?	heather.rauckman@aidسالabama
What is the Secondary Program contact phone number (including extension)?	6258
What is the Secondary Program contact fax number?	205-324-9311
Contact Information for Individuals Seeking Services	
What is the Services contact name?	Tricia McMullen
What is the Services contact title?	HOPWA Administrative
In what department does the Services contact work?	205-861-2789
What is the Services contact email?	tricia.mcmullen@aidسالabama.o
What is the Services contact phone number (including extension)?	8213
What is the Services contact fax number?	205-324-9311

Complete the age, gender, race, and ethnicity information for all individuals served with all types of HOPWA assistance. See totals in rows 27 and 28.

A. For each racial category, how many HOPWA-eligible individuals identified as such?	Male					Female					Gender Nonbinary					Transgender Female					
	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	
	Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Asian & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Black/African American	0	25	59	85	0	3	41	49	0	1	0	0	0	0	3	87	2	0	0	0	0
Black/African American & White	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
American Indian/Alaskan Native	0	0	2	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0
American Indian/Alaskan Native & Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
American																					
American Indian/Alaskan Native & White	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Native Hawaiian/Other Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Multi-Racial	0	1	5	1	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
White	0	0	10	13	0	1	2	10	0	0	0	0	0	1	1	0	0	0	0	0	0
B. For each racial category, how many other household members (beneficiaries) identified as such?	Male					Female					Gender Nonbinary					Transgender Female					
	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	
b. Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Asian & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Black/African American	23	5	2	3	17	10	1	4	0	0	0	0	0	0	0	0	0	0	0	0	
b. Black/African American & White	4	0	0	0	3	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	
b. American Indian/Alaskan Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. American Indian/Alaskan Native & Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. American Indian/Alaskan Native & White	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Native Hawaiian/Other Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Other Multi-Racial	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. White	0	0	1	1	7	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total number of HOPWA-eligible individuals served with HOPWA assistance (rows 4-13):	410																				
Total number of other household members (beneficiaries) served with HOPWA assistance (rows 14-25):	87																				
How many other household members (beneficiaries) are HIV+?	5																				

How many other household members (beneficiaries) are HIV negative or have an unknown HIV status?	82
Complete Prior Living Situations for HOPWA-eligible Individuals served by TBRA, P-FBH, ST-TFBH, or PHP	
How many HOPWA-eligible individuals continued receiving HOPWA assistance from the previous year?	121
How many individuals newly receiving HOPWA assistance came from:	
A place not meant for human habitation?	7
An emergency shelter?	11
A transitional housing facility for formerly homeless persons?	0
A permanent housing situation for formerly homeless persons?	1
A psychiatric hospital or other psychiatric facility?	0
A substance abuse facility?	2
A non-psychiatric hospital?	0
A foster care home?	0
Jail, prison, or a juvenile detention facility?	0
A rented room, apartment or house?	8
A house the individual owned?	0
Staying at someone else's house?	5
A hotel or motel paid for by the individual?	2
Any other prior living situation?	37
How many individuals newly receiving HOPWA assistance didn't report or refused to report their prior living situation?	0
How many individuals newly receiving HOPWA assistance during this program year reported a prior living situation of homelessness (place not for human habitation, emergency shelter, transitional housing):	18
Also meet the definition of experiencing chronic homelessness?	18
Also were veterans?	0

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in either the Consolidated or Annual Plan (for formula grantees) or the grant proposal/application (for competitive grantees) and used in the delivery of the HOPWA program and the amount of leveraged dollars.

What is the amount and type of leveraged funding that was provided by any of these sources?	Funding for this Report	Was this a Housing Subsidy Assistance? Yes or No.
ESG	0	
HOME	0	
Ryan White	\$69,606.96	
Continuum of Care (CoC)	0	
Low-Income Housing Tax Credit	0	
Housing Choice Voucher Program	0	
Private grants	0	
In-kind resources	0	
Grantee cash	0	
Other types of private or public funding:		
Other FUNDING_1	\$6,780.06	Targeted Case Management
Other FUNDING_2	22,746.69	
Other FUNDING_3	0	
Other FUNDING_4	0	
Other FUNDING_5	0	
Other FUNDING_6	0	
Other FUNDING_7	0	
Other FUNDING_8	0	
Other FUNDING_9	0	
Other FUNDING_10	0	
Other FUNDING_11	0	
Other FUNDING_12	0	
Other FUNDING_13	0	
Other FUNDING_14	0	
Other FUNDING_15	0	
Program Income	9346.03	
What was the amount of program income collected from resident rent payments in the program year?	9,346.03	

What was the amount of program income collected from other sources (non-resident payments) in the program year?		
Uses of Program Income	9346.03	
What was the amount of total program income that was spent on housing assistance in the program year?	9,346.03	
What was the amount of total program income that was spent on supportive services or other non-housing costs in the program year?	0	
Rent Payments Made by HOPWA Housing Subsidy Assistance Recipients Directly to Private Landlords		
What was the amount of resident rent payment that residents paid directly to private landlords?	\$180,635.74	

Complete this section for all Households served with HOPWA Tenant-Based Rental Assistance (TBRA) by your organization in the reporting year.

Question	This Report
<i>TBRA Households Served and Expenditures</i>	
How many households were served with HOPWA TBRA assistance?	72
What were the total HOPWA funds expended for TBRA rental assistance?	\$370,880.07
<i>Other (Non-TBRA) Rental Assistance Households Served and Expenditures (Other Non-TBRA Rental Assistance activities must be approved in the grant agreement).</i>	
How many total households were served with Other (non-TBRA) Rental Assistance?	0
What were the total HOPWA funds expended for Other (non-TBRA) Rental Assistance, as approved in the grant agreement?	0
Describe the Other (non-TBRA) Rental Assistance provided. (150 characters).	
<i>TBRA Household Total (TBRA + Other)</i>	72
<i>Income Levels for Households Served by this Activity</i>	72
What is the number of households with income below 30% of Area Median Income?	72
What is the number of households with income between 31% and 50% of Area Median Income?	0
What is the number of households with income between 51% and 80% of Area Median Income?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	87
Earned Income from Employment	28
Retirement	0
SSI	41
SSDI	13
Other Welfare Assistance (Supplemental Nutrition Assistance Program, WIC, TANF, etc.)	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service connected payment)	0
Regular contributions or gifts from organizations or persons not residing in the residence	0
Worker's Compensation	0
General Assistance (GA), or local program	0
Unemployment Insurance	0

Other Sources of Income	2
How many households maintained no sources of income?	3
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	29
MEDICARE Health Insurance or local program equivalent	15
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	1
State Children's Health Insurance Program (SCHIP) or	0
Ryan White-funded Medical or Dental Assistance	0
Health Outcomes for Households Served by this Activity	
How many HOPWA-eligible individuals served with TBRA this year have <i>ever</i> been prescribed Anti-Retroviral Therapy?	72
How many HOPWA-eligible persons served with TBRA have shown an improved viral load or achieved viral suppression?	72
Longevity for Households Served by this Activity	72
How many households have been served with TBRA for less than one year?	9
How many households have been served with TBRA for more than one year, but less than five years?	25
How many households have been served with TBRA for more than five years, but less than 10 years?	21
How many households have been served with TBRA for more than 10 years, but less than 15 years?	8
How many households have been served with TBRA for more than 15 years?	9
Housing Outcomes for Households Served by this Activity	72
How many households continued receiving HOPWA TBRA assistance into the next year?	62
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	1
How many households exited to an emergency shelter?	0
How many households exited to private housing?	6

How many households exited to transitional housing (time limited - up to 24 months)?	0
How many households exited to an institutional arrangement expected to last less than six months?	0
How many households exited to institutional arrangement expected to last more than six months?	0
How many households exited to a jail/prison term expected to last less than six months?	0
How many households exited to a jail/prison term expected to last more than six months?	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0
How many households exited to a place not meant for human habitation?	0
How many households were disconnected from care?	3
How many of the HOPWA eligible individuals died?	0

There are sixty columns for facilities. If more columns are needed, please contact the HOPWA Validation Team.

Complete this section for all Households served with HOPWA Permanent Facility-Based Housing assistance by your organization in the reporting year.

Question	Facility 1	Facility 2	Facility 3	Facility 4	Facility 5	Facility 6	Facility 7	Facility 8	Facility 9
Facility Information									
What is the name of the housing facility?	AGAPE I	AGAPE II	Mustard Seed	Magnolia Place	Jasper House				
Is the facility a medically assisted living facility? Yes or No.	NO	NO	NO	NO	NO				
Was the housing facility placed into service during this program year? Yes or No.	NO	NO	NO	NO	NO				
For housing facilities placed into service during this program year, how many units were placed into service? (Do not complete if facility placed in service in prior years.)	0	0	0	0	0	0	0	0	0
Leasing -- Households and Expenditures Served by this Activity									
How many households received Permanent Facility-Based Housing Leasing support for each facility?	0	0	0	0	0	0	0	0	0
What were the HOPWA funds expended for Permanent Facility-Based Housing Leasing Costs for each facility?	0	0	0	0	0	0	0	0	0
Operating -- Households and Expenditures Served by this Activity									
How many households received Permanent Facility-Based Housing Operating support for each facility?	19	13	5	19	16	0	0	0	0
What were the HOPWA funds expended for Permanent Facility-Based Housing Operating Costs for each facility?	\$138,301.13	\$109,993.10	97,078.98	\$124,056.66	\$135,589.92	0	0	0	0
Other Housing Support -- Households and Expenditures Served by this Activity									
How many households received Other types of Permanent Facility-Based Housing support for each facility?	0	0	0	0	0	0	0	0	0
What were the HOPWA funds expended for Other types of Permanent Facility-Based Housing for each facility?	0	0	0	0	0	0	0	0	0
For households served with Other Permanent Facility-Based Housing, what type of service were they provided? (150 characters)									
PFBH Deduplication									
How many households received more than one type of PFBH for each facility? (Leasing, Operating, Other)	0	0	0	0	0	0	0	0	0
Total Deduplicated Household Count	19	13	5	19	16	0	0	0	0
Income Levels for Households Served by this Activity	19	13	5	19	16	0	0	0	0
What is the number of households with income below 30% of Area Median income?	19	13	5	19	16	0	0	0	0
What is the number of households with income between 31% and 50% of Area Median Income?	0	0	0	0	0	0	0	0	0
What is the number of households with income between 51% and 80% of Area Median Income?	0	0	0	0	0	0	0	0	0
Sources of Income for Households Served by this Activity									
How many households accessed or maintained access to the following sources of income in the past year?	22	13	5	0	16	0	0	0	0

How many households continued receiving this type of HOPWA assistance into the next year?	13	12	3	12	0	0	0	0
How many households exited to other HOPWA housing programs?	0	0	0	0	0	0	0	0
How many households exited to other housing subsidy programs?	0	0	0	0	0	0	0	0
How many households exited to an emergency shelter?	0	0	0	0	0	0	0	0
How many households exited to private housing?	0	0	0	1	0	0	0	0
How many households exited to transitional housing (time limited - up to 24 months)?	0	0	0	0	0	0	0	0
How many households exited to institutional arrangement expected to last less than six months?	0	0	0	0	0	0	0	0
How many households exited to institutional arrangement expected to last more than six months?	0	0	0	0	0	0	0	0
How many households exited to a jail/prison term expected to last less than six months?	0	0	0	0	0	0	0	0
How many households exited to a jail/prison term expected to last more than six months?	0	0	0	0	0	0	0	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0	0	0	0	0	0	0	0
How many households exited to a place not meant for human habitation?	0	0	0	0	0	0	0	0
How many households were disconnected from care?	6	0	1	4	0	0	0	0
How many of the HOPWA eligible individuals died?	0	1	1	2	0	0	0	0

There are sixty columns for facilities. If more columns are needed, please contact the HOPWA Validation Team.

Complete this section for Facilities; Households served with HOPWA Short-Term or Transitional Facility-Based Housing assistance by your organization in the reporting year.

Examples include Short-Term and Transitional Housing Types, Facility Based Housing with a tenure of fewer than 24 months, short-term treatment or health facilities, hotel-motel vouchers.

Question	Facility 1	Facility 2	Facility 3	Facility 4	Facility 5	Facility 6	Facility 7
Facility Information							
What is the name of the housing facility?	Way Station	Rectory					
Is the facility a medically assisted living facility? Yes or No.	NO	NO					
Was the housing facility placed into service during this program year? Yes or No.	NO	NO					
For housing facilities placed into service during this program year, how many units were placed into service? [Do not complete if facility placed in service in prior years.]	0	0	0	0	0	0	0
Leasing – Households and Expenditures Served by this Activity							
How many households received Transitional/Short-Term Facility-Based Housing Leasing support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Transitional/Short-Term Facility-Based Housing Leasing Costs for each facility?	0	0	0	0	0	0	0
Operating – Households and Expenditures Served by this Activity							
How many households received Transitional/Short-Term Facility-Based Housing Operating support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Transitional/Short-Term Facility-Based Housing Operating Costs for each facility?	0	0	0	0	0	0	0
Hotel-Motel – Households and Expenditures Served by this Activity							
How many households received Hotel-Motel cost support for each facility?	24	26	0	0	0	0	0
What were the HOPWA funds expended for Hotel-Motel Costs for each facility?	\$147,354.73	\$39,105.93	0	0	0	0	0
Other Housing Support – Households and Expenditures Served by this Activity							
How many households received Other types of Transitional/Short-Term Facility-Based Housing support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Other types of Transitional/Short-Term Facility-Based Housing for each facility?	0	0	0	0	0	0	0
For households served with Other Transitional/Short-Term Facility-Based Housing, what type of service were they provided? (150 characters)							
ST-TFBH Deduplication							
How many households received more than one type of ST-TFBH for each facility? (Leasing, Operating, Hotel-Motel, Other)	0	0	0	0	0	0	0
Total Deduplicated Household Count	24	26	0	0	0	0	0

Complete this section for all Households served with HOPWA Short-Term Rent, Mortgage, and Utilities Assistance (STRMU) by your organization in the reporting year.

Question	This Report
<i>Households Served by this Activity - STRMU Breakdown</i>	
a. How many households were served with STRMU mortgage assistance only ?	4
b. How many households were served with STRMU rental assistance only ?	48
c. How many households were served with STRMU utilities assistance only ?	2
d. How many households received more than one type of STRMU assistance?	1
<i>STRMU Households Total</i>	55
<i>STRMU Expenditures</i>	
What were the HOPWA funds expended for the following budget line items?	
STRMU mortgage assistance	\$3,927.36
STRMU rental assistance	\$39,694.78
STRMU utility assistance	\$3,022.29
Total STRMU Expenditures	46644.43
<i>Income Levels for Households Served by this Activity</i>	55
What is the number of households with income below 30% of Area Median Income?	52
What is the number of households with income between 31% and 50% of Area Median Income?	3
What is the number of households with income between 51% and 80% of Area Median Income?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	54
Earned Income from Employment	16
Retirement	0
SSI	4
SSDI	3
Other Welfare Assistance (Supplemental Nutrition	0
Private Disability Insurance	1
Veteran's Disability Payment (service or non-service	0
Regular contributions or gifts from organizations or	0
Worker's Compensation	1
General Assistance (GA), or local program	0

Unemployment Insurance	0
Other Sources of Income	2
How many households maintained no sources of income?	27
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	5
MEDICARE Health Insurance or local program equivalent	4
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	2
State Children's Health Insurance Program (SCHIP) or local program equivalent	0
Ryan White-funded Medical or Dental Assistance	3
Longevity for Households Served by this Activity	0
How many households have been served by STRMU for the first time this year?	0
How many households also received STRMU assistance during the previous STRMU eligibility period?	0
How many households received STRMU assistance more than twice during the previous five eligibility periods?	0
How many households received STRMU assistance during the last five consecutive eligibility periods?	0
Housing Outcomes for Households Served by this Activity	55
How many households continued receiving this type of HOPWA assistance into the next year?	43
How many households exited to other HOPWA housing programs?	2
How many households exited to other housing subsidy programs?	0
How many households exited to an emergency shelter?	0
How many households served with STRMU were able to maintain a private housing situation without subsidy?	10
How many households exited to transitional housing (time limited - up to 24 months)?	0
How many households exited to institutional arrangement expected to last less than six months?	0

How many households exited to institutional arrangement expected to last more than six months?	0
How many households exited to a jail/prison term expected to last less than six months?	0
How many households exited to a jail/prison term expected to last more than six months?	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0
How many households exited to a place not meant for human habitation?	0
How many households were disconnected from care?	0
How many of the HOPWA eligible individuals died?	0
How many households are likely to need additional Short-Term Rent, Mortgage and Utilities assistance to maintain the current housing arrangements?	0

Complete this section for all Households served with HOPWA Permanent Housing Placement (PHP) assistance by your organization in the reporting year.

Question	This Report
Households Served by this Activity	
How many households were served with PHP assistance?	0
PHP Expenditures for Households Served by this Activity	
What were the HOPWA funds expended for PHP?	0
Sources of Income for Households Served by this Activity	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition Assistance Program, WIC, TANF, etc.)	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service connected payment)	0
Regular contributions or gifts from organizations or persons not residing in the residence	0
Worker's Compensation	0
General Assistance (GA), or local program	0
Unemployment Insurance	0
Other Sources of Income	0
How many households maintained no sources of income?	0
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or local program equivalent	0
Ryan White-funded Medical or Dental Assistance	0

Housing Outcomes for Households Served by this Activity	0
<i>In the context of PHP, "exited" means the housing situation into which the household was placed using the PHP assistance.</i>	
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to private housing?	0

Complete for all households served with HOPWA-funded Housing Information Services by your organization in the reporting year.

See definition of "Housing Information Services" on "Performance Report Cover" tab.

Question	This Report
<i>Households Served by this Activity</i>	
How many households were served with housing information services?	252
<i>Housing Information Services Expenditures</i>	
What were the HOPWA funds expended for Housing Information Services?	\$114,939.43

Complete for all households served with HOPWA funded Supportive Services by your organization in the reporting year.

Note that this table also collects HOPWA Supportive Service expenditures.

Questions	This Report	
	Number of Households	Expenditures
Households and Expenditures for Supportive Service Types		
What were the expenditures and number of households for each of the following types of supportive services in the program year?		
Adult Day Care and Personal Assistance	0	0
Alcohol-Drug Abuse	0	0
Child Care	0	0
Case Management	410	\$813,130.15
Education	0	0
Employment Assistance and Training	5	0
Health/Medical Services	0	0
Legal Services	0	0
Life Skills Management	0	0
Meals/Nutritional Services	0	0
Mental Health Services	0	0
Outreach	0	0
Transportation	144	0
Any other type of HOPWA funded, HUD approved supportive service?	0	0
What were the other type(s) of supportive services provided? (150 characters)		
Deduplication of Supportive Services		
How many households received more than one of any type of Supportive Services?	149	

Only Competitive Grantees with an "Other Housing Activity" approved in their grant agreement should complete this tab.

"Other" Housing Activities -- Households and Expenditures Served by this Activity	This Report
How many households were served with "Other Housing Activity" assistance?	0
What were the HOPWA funds expended for "Other Housing Activity" assistance?	0
What is the "Other" HOPWA budget line item approved in the grant agreement? (150 characters)	

Activity Review	TBRA	P-FBH	ST-TFBH	STRMU	PHP	Housing Info	SUPP SVC	Other Competitive Activity
Total Households Served in ALL Activities from this report for each Activity.	72	72	50	55	0	252	410	0
Housing Subsidy Assistance Household Count Deduplication								
<i>Total Housing Subsidy Assistance (from the TBRA, P-FBH, ST-TFBH, STRMU, PHP, Other Competitive Activity counts above)</i>	249							
How many households received more than one type of HOPWA Housing Subsidy Assistance for TBRA, P-FBH, ST-TFBH, STRMU, PHP, Other Competitive Activity?	0							
Total Unduplicated Housing Subsidy Assistance Household Count	249							
Access to Care (ATC)								
Complete HOPWA Outcomes for Access to Care and Support for all households served with HOPWA housing assistance and "other competitive activities" in the reporting year.								
Questions	This Report							
How many households had contact with a case manager?	249							
How many households developed a housing plan for maintaining or establishing stable housing?	177							
How many households accessed and maintained medical insurance and/or assistance?	249							
How many households had contact with a primary health care provider?	249							
How many households accessed or maintained qualification for sources of income?	220							
How many households obtained/maintained an income-producing job during the program year (with or without any HOPWA-related assistance)?	244							
Subsidy Assistance with Supportive Service, Funded Case Management								
Questions	This Report							
How many households received any type of HOPWA Housing Subsidy Assistance and HOPWA Funded Case Management?	249							
How many households received any type of HOPWA Housing Subsidy Assistance and HOPWA Supportive Services?	149							

If there is a waiting list, how many households are on the waiting list?	0	0	0	0	0	0	0	0	0
How many total units (HOPWA and non-HOPWA units) were developed in this facility?	0	0	0	0	0	0	0	0	0
How many units in this facility were developed with HOPWA funds?	0	0	0	0	0	0	0	0	0
For all Facilities	Total Units Designated for the Chronically Homeless	Total Units Designated to Assist the Homeless	Total Units Energy-Star Compliant	Total Units 500 Accessible – Mobility Units – Sensory Units					
For units constructed (new) and/or acquired with or without rehab:	0	0	0	0					
For rental units rehabbed:	0	0	0	0					
For homeownership units constructed (if approved):	0	0	0	0					

Complete for all households who requested Violence Against Women Act (VAWA) protections per 24 CFR 5.2005 with your organization in the reporting year.

Question	This Report
How many internal emergency transfers were requested?	0
How many internal emergency transfers were granted?	0
How many external emergency transfers were requested?	0
How many external emergency transfers were granted?	0
How many emergency transfers were denied?	0

Grant ID FALG8522 **Grantee** ALABAMA **Sponsor ID** S9309A **Sponsor** S9309A_AIDS Alabama South (formerly South Ala 24059_46554) **File ID**

Please complete for organizations designated to serve as project sponsor, i.e., organizations involved in the direct delivery of services for client households, as defined by 24 CFR 574.3.

Project Sponsor Questions	Responses
What is the organization's name?	AIDS Alabama South
What is the organization's Unique Entity Identifier (UEI)?	785542564
What is the organization's Employer ID Number (EIN) or Tax ID Number (TIN)?	58 1989250
What is the HOPWA contract amount for this organization?	\$90,000
What is the organization's business street address?	4321 Downtown Loop North
In what city is the organization's business address?	Mobile
In what county is the organization's business address?	Mobile
In what state is the organization's business address?	Alabama
What is the organization's business address zip code?	36609
What is the organization's parent company, if applicable?	AIDS Alabama
What department administers the organization's grant?	Financial Department
What is the organization's phone number (including extension)?	(251) 471-5277
What is the organization's fax number?	(251) 471-5294
What is the organization's website?	www.aidsalabamasouth.org
What is the organization's Facebook page?	AIDS Alabama South
What is the organization's Twitter handle?	AIDS Alabama South
Is this a faith-based organization? Yes or No.	No
Is this a nonprofit organization? Yes or No.	Yes
Is this a grassroots organization? Yes or No.	Yes
What are the cities of the organization's primary service area?	Mobile, Loxley, Marion
What are the counties of the organization's primary service area?	Mobile, Baldwin, Perry
In what congressional district is the organization located?	1
In what congressional district is the primary service area?	1
Is there a waiting list for HOPWA housing subsidy assistance services in the organization's service area? Yes or No.	Yes

Project Sponsor Non-Direct Service Expenditures	
What were the total HOPWA funds expended for Administration costs?	0
How much was expended on Technical Assistance?	0
How much was expended on Resource Identification?	0

Contact Information for your Organization

Only organizations designated as project sponsors (see definition of "Project Sponsor Organization" in Performance Report Cover tab) should complete this tab.

Question	Responses
Contact Information for Primary Program Contact	
What is the Primary Program contact name?	Johnita Tucker
What is the Primary Program contact title?	Director Programs
In what department does the Primary Program contact work?	(251) 287-3052
What is the Primary Program contact email?	johnita.tucker@aidsalabama.org
What is the Primary Program contact phone number (including extension)?	6121
What is the Primary Program contact fax number?	(251) 471-5294
Contact Information for Secondary Program Contact	
What is the Secondary Program contact name?	Candace Taylor
What is the Secondary Program contact title?	Excutive Director
In what department does the Secondary Program contact work?	Social Services
What is the Secondary Program contact email?	candace.taylor@aidsalabama.or
What is the Secondary Program contact phone number (including extension)?	(251) 471-5277
What is the Secondary Program contact fax number?	(251) 471-5294
Contact Information for Individuals Seeking Services	
What is the Services contact name?	Johnita Tucker
What is the Services contact title?	Director Programs
In what department does the Services contact work?	Programs
What is the Services contact email?	johnita.tucker@aidsalabama.org
What is the Services contact phone number (including extension)?	(251) 287-3052
What is the Services contact fax number?	(251) 471-5294

Complete the age, gender, race, and ethnicity information for all individuals served with all types of HOPWA assistance.

See totals in rows 27 and 28.

A. For each racial category, how many HOPWA-eligible individuals identified as such?	Male					Female					Gender Nonbinary					Transgender Female											
	18-30		31-50		51 or Older	18-30		31-50		51 or Older	18-30		31-50		51 or Older	18-30		31-50		51 or Older	18-30		31-50		51 or Older		
	Younger Than 18	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older		
Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Asian & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Black/African American	0	49	115	111	100	14	114	100	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Black/African American & White	0	0	3	3	4	0	2	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
American Indian/Alaskan Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
American Indian/Alaskan Native & Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
American Indian/Alaskan Native & White	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Native Hawaiian/Other Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other Multi-Racial	0	10	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
White	0	4	26	41	8	0	12	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
B. For each racial category, how many other household members (beneficiary/ies) identified as such?																											
	Male					Female					Gender Nonbinary					Transgender Female											
	18-30		31-50		51 or Older	18-30		31-50		51 or Older	18-30		31-50		51 or Older	18-30		31-50		51 or Older	18-30		31-50		51 or Older		
	Younger Than 18	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older	Younger Than 18	18-30	31-50	51 or Older		
b. Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Asian & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Black/African American & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. American Indian/Alaskan Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. American Indian/Alaskan Native & Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. American Indian/Alaskan Native & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Native Hawaiian/Other Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. Other Multi-Racial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
b. White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total number of HOPWA-eligible individuals served with HOPWA assistance (rows 4-13)	630																										
Total number of other household members (beneficiary/ies) served with HOPWA assistance (rows 16-25)	0																										
How many other household members (beneficiary/ies) are HIV+?	0																										

How many other household members (beneficiaries) are HIV negative or have an unknown HIV status?	0
Complete Prior Living Situations for HOPWA-eligible Individuals served by TBRA, P-FBH, ST-TFBH, or PHP	
How many HOPWA-eligible individuals continued receiving HOPWA assistance from the previous year?	0
How many individuals newly receiving HOPWA assistance came from:	
A place not meant for human habitation?	0
An emergency shelter?	0
A transitional housing facility for formerly homeless persons?	0
A permanent housing situation for formerly homeless persons?	0
A psychiatric hospital or other psychiatric facility?	0
A substance abuse facility?	0
A non-psychiatric hospital?	0
A foster care home?	0
Jail, prison, or a juvenile detention facility?	0
A rented room, apartment or house?	0
A house the individual owned?	0
Staying at someone else's house?	0
A hotel or motel paid for by the individual?	0
Any other prior living situation?	0
How many individuals newly receiving HOPWA assistance didn't report or refused to report their prior living situation?	0
How many individuals newly receiving HOPWA assistance during this program year reported a prior living situation of homelessness (place not for human habitation, emergency shelter, transitional housing):	0
Also meet the definition of experiencing chronic homelessness?	0
Also were veterans?	0

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in either the Consolidated or Annual Plan (for formula grantees) or the grant proposal/application (for competitive grantees) and used in the delivery of the HOPWA program and the amount of leveraged dollars.

What is the amount and type of leveraged funding that was provided by any of these sources?	Funding for this Report	Was this a Housing Subsidy Assistance? Yes or No.
ESG	0	
HOME	0	
Ryan White	0	
Continuum of Care (CoC)	0	
Low-Income Housing Tax Credit	0	
Housing Choice Voucher Program	0	
Private Grants	0	
In-kind resources	0	
Grantee cash	0	
Other types of private or public funding:		
Other FUNDING_1	0	
Other FUNDING_2	0	
Other FUNDING_3	0	
Other FUNDING_4	0	
Other FUNDING_5	0	
Other FUNDING_6	0	
Other FUNDING_7	0	
Other FUNDING_8	0	
Other FUNDING_9	0	
Other FUNDING_10	0	
Other FUNDING_11	0	
Other FUNDING_12	0	
Other FUNDING_13	0	
Other FUNDING_14	0	
Other FUNDING_15	0	
Program Income	0	
What was the amount of program income collected from resident rent payments in the program year?	0	
What was the amount of program income collected from other sources (non-resident payments) in the program year?	0	
Uses of Program Income	0	
What was the amount of total program income that was spent on housing assistance in the program year?	0	
What was the amount of total program income that was spent on supportive services or other non-housing costs in the program year?	0	
Rent Payments Made by HOPWA Housing Subsidy Assistance Recipients Directly to Private Landlords		
What was the amount of resident rent payment that residents paid directly to private landlords?	0	

Complete this section for all Households served with HOPWA Tenant-Based Rental Assistance (TBRA) by your organization in the reporting year.

Question	This Report
TBRA Households Served and Expenditures	
How many households were served with HOPWA TBRA assistance?	0
What were the total HOPWA funds expended for TBRA rental assistance?	0
Other (Non-TBRA) Rental Assistance Households Served and Expenditures (Other Non-TBRA Rental Assistance activities must be approved in the grant agreement).	
How many total households were served with Other (non-TBRA) Rental Assistance?	0
What were the total HOPWA funds expended for Other (non-TBRA) Rental Assistance, as approved in the grant agreement?	0
Describe the Other (non-TBRA) Rental Assistance provided. (150 characters).	
TBRA Household Total (TBRA + Other)	0
Income Levels for Households Served by this Activity	0
What is the number of households with income below 30% of Area Median Income?	0
What is the number of households with income between 31% and 50% of Area Median Income?	0
What is the number of households with income between 51% and 80% of Area Median Income?	0
Sources of Income for Households Served by this Activity	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition Assistance Program, WIC, TANF, etc.)	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service connected payment)	0
Regular contributions or gifts from organizations or persons not residing in the residence	0
Worker's Compensation	0
General Assistance (GA), or local program	0
Unemployment Insurance	0

Other Sources of Income	0
How many households maintained no sources of income?	0
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or	0
Ryan White-funded Medical or Dental Assistance	0
Health Outcomes for Households Served by this Activity	
How many HOPWA-eligible individuals served with TBRA this year have <i>ever</i> been prescribed Anti-Retroviral Therapy?	0
How many HOPWA-eligible persons served with TBRA have shown an improved viral load or achieved viral suppression?	0
Longevity for Households Served by this Activity	0
How many households have been served with TBRA for less than one year?	0
How many households have been served with TBRA for more than one year, but less than five years?	0
How many households have been served with TBRA for more than five years, but less than 10 years?	0
How many households have been served with TBRA for more than 10 years, but less than 15 years?	0
How many households have been served with TBRA for more than 15 years?	0
Housing Outcomes for Households Served by this Activity	0
How many households continued receiving HOPWA TBRA assistance into the next year?	0
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to an emergency shelter?	0
How many households exited to private housing?	0

How many households exited to transitional housing (time limited - up to 24 months)?	0
How many households exited to an institutional arrangement expected to last less than six months?	0
How many households exited to institutional arrangement expected to last more than six months?	0
How many households exited to a jail/prison term expected to last less than six months?	0
How many households exited to a jail/prison term expected to last more than six months?	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0
How many households exited to a place not meant for human habitation?	0
How many households were disconnected from care?	0
How many of the HOPWA eligible individuals died?	0

There are sixty columns for facilities. If more columns are needed, please contact the HOPWA Validation Team.

Complete this section for Facilities. Households served with HOPWA Short-Term or Transitional Facility-Based Housing assistance by your organization in the reporting year.

Examples include Short-term and Transitional Housing Types, Facility Based Housing with a tenure of fewer than 24 months, short-term treatment or health facilities, hotel-motel vouchers.

Question	Facility 1	Facility 2	Facility 3	Facility 4	Facility 5	Facility 6	Facility 7
Facility Information							
What is the name of the housing facility?							
Is the facility a medically assisted living facility? Yes or No.							
Was the housing facility placed into service during this program year? Yes or No.							
For housing facilities placed into service during this program year, how many units were placed into service? [Do not complete if facility placed in service in prior years.]	0	0	0	0	0	0	0
Leasing – Households and Expenditures Served by this Activity							
How many households received Transitional/Short-Term Facility-Based Housing Leasing support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Transitional/Short-Term Facility-Based Housing Leasing. Costs for each facility?	0	0	0	0	0	0	0
Operating – Households and Expenditures Served by this Activity							
How many households received Transitional/Short-Term Facility-Based Housing Operating support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Transitional/Short-Term Facility-Based Housing Operating Costs for each facility?	0	0	0	0	0	0	0
Hotel-Motel – Households and Expenditures Served by this Activity							
How many households received Hotel-Motel cost support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Hotel-Motel Costs for each facility?	0	0	0	0	0	0	0
Other Housing Support – Households and Expenditures Served by this Activity							
How many households received Other types of Transitional/Short-Term Facility-Based Housing support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Other types of Transitional/Short-Term Facility-Based Housing for each facility?	0	0	0	0	0	0	0
For households served with Other Transitional/Short-Term Facility-Based Housing, what type of service were they provided? (150 characters)							
ST-TFBH Deduplication							
How many households received more than one type of ST-TFBH for each facility? (Leasing, Operating, Hotel-Motel, Other)	0	0	0	0	0	0	0
Total Deduplicated Household Count	0	0	0	0	0	0	0

Complete this section for all Households served with HOPWA Short-Term Rent, Mortgage, and Utilities Assistance (STRMU) by your organization in the reporting year.

Question	This Report
<i>Households Served by this Activity - STRMU Breakdown</i>	
a. How many households were served with STRMU mortgage assistance only ?	0
b. How many households were served with STRMU rental assistance only ?	0
c. How many households were served with STRMU utilities assistance only ?	0
d. How many households received more than one type of STRMU assistance?	0
<i>STRMU Households Total</i>	0
<i>STRMU Expenditures</i>	
What were the HOPWA funds expended for the following budget line items?	
STRMU mortgage assistance	0
STRMU rental assistance	0
STRMU utility assistance	0
<i>Total STRMU Expenditures</i>	0
<i>Income Levels for Households Served by this Activity</i>	0
What is the number of households with income below 30% of Area Median Income?	0
What is the number of households with income between 31% and 50% of Area Median Income?	0
What is the number of households with income between 51% and 80% of Area Median Income?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service	0
Regular contributions or gifts from organizations or	0
Worker's Compensation	0
General Assistance (GA), or local program	0

Unemployment Insurance	0
Other Sources of Income	0
How many households maintained no sources of income?	0
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or local program equivalent	0
Ryan White-funded Medical or Dental Assistance	0
Longevity for Households Served by this Activity	0
How many households have been served by STRMU for the first time this year?	0
How many households also received STRMU assistance during the previous STRMU eligibility period?	0
How many households received STRMU assistance more than twice during the previous five eligibility periods?	0
How many households received STRMU assistance during the last five consecutive eligibility periods?	0
Housing Outcomes for Households Served by this Activity	0
How many households continued receiving this type of HOPWA assistance into the next year?	0
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to an emergency shelter?	0
How many households served with STRMU were able to maintain a private housing situation without subsidy?	0
How many households exited to transitional housing (time limited - up to 24 months)?	0
How many households exited to institutional arrangement expected to last less than six months?	0

How many households exited to institutional arrangement expected to last more than six months?	0
How many households exited to a jail/prison term expected to last less than six months?	0
How many households exited to a jail/prison term expected to last more than six months?	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0
How many households exited to a place not meant for human habitation?	0
How many households were disconnected from care?	0
How many of the HOPWA eligible individuals died?	0
How many households are likely to need additional Short-Term Rent, Mortgage and Utilities assistance to maintain the current housing arrangements?	0

Complete this section for all Households served with HOPWA Permanent Housing Placement (PHP) assistance by your organization in the reporting year.

Question	This Report
<i>Households Served by this Activity</i>	
How many households were served with PHP assistance?	
<i>PHP Expenditures for Households Served by this Activity</i>	
What were the HOPWA funds expended for PHP?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition Assistance Program, WIC, TANF, etc.)	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service connected payment)	0
Regular contributions or gifts from organizations or persons not residing in the residence	0
Worker's Compensation	0
General Assistance (GA), or local program	0
Unemployment Insurance	0
Other Sources of Income	0
How many households maintained no sources of income?	0
<i>Medical Insurance for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or local program equivalent	0
Ryan White-funded Medical or Dental Assistance	0

Housing Outcomes for Households Served by this Activity	0
<i>In the context of PHP, "exited" means the housing situation into which the household was placed using the PHP assistance.</i>	
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to private housing?	0

Complete for all households served with HOPWA-funded Housing Information Services by your organization in the reporting year.

See definition of "Housing Information Services" on "Performance Report Cover" tab.

Question	This Report
<i>Households Served by this Activity</i>	
How many households were served with housing information services?	0
<i>Housing Information Services Expenditures</i>	
What were the HOPWA funds expended for Housing Information Services?	0

Complete for all households served with HOPWA funded Supportive Services by your organization in the reporting year.

*Note that this table also collects **HOPWA Supportive Service expenditures.***

Questions	This Report	
	Number of Households	Expenditures
Households and Expenditures for Supportive Service Types		
What were the expenditures and number of households for each of the following types of supportive services in the program year?		
Adult Day Care and Personal Assistance	0	0
Alcohol-Drug Abuse	0	0
Child Care	0	0
Case Management	630	\$134,015.37
Education	0	0
Employment Assistance and Training	0	0
Health/Medical Services	0	0
Legal Services	0	0
Life Skills Management	0	0
Meals/Nutritional Services	0	0
Mental Health Services	0	0
Outreach	0	0
Transportation	0	0
Any other type of HOPWA funded, HUD approved supportive service?	0	0
What were the other type(s) of supportive services provided? (150 characters)		
Deduplication of Supportive Services		
How many households received more than one of any type of Supportive Services?	0	

Only Competitive Grantees with an "Other Housing Activity" approved in their grant agreement should complete this tab.

"Other" Housing Activities -- Households and Expenditures Served by this Activity	This Report
How many households were served with "Other Housing Activity" assistance?	0
What were the HOPWA funds expended for "Other Housing Activity" assistance?	0
What is the "Other" HOPWA budget line item approved in the grant agreement? (150 characters)	

Activity Review	TBRA	P-FBH	ST-TFBH	STRMU	PHP	Housing Info	SUPP SVC	Other Competitive Activity
Total Households Served in ALL Activities from this report for each Activity.	0	0	0	0	0	0	630	0
Housing Subsidy Assistance Household Count Deduplication								
<i>Total Housing Subsidy Assistance (from the TBRA, P-FBH, ST-TFBH, STRMU, PHP, Other Competitive Activity counts above)</i>	0							
How many households received more than one type of HOPWA Housing Subsidy Assistance for TBRA, P-FBH, ST-TFBH, STRMU, PHP, Other Competitive Activity?	0							
Total Unduplicated Housing Subsidy Assistance Household Count	0							
Access to Care (ATC)								
Complete HOPWA Outcomes for Access to Care and Support for all households served with HOPWA housing assistance and "other competitive activities" in the reporting year.								
Questions	This Report							
How many households had contact with a case manager?	0							
How many households developed a housing plan for maintaining or establishing stable housing?	0							
How many households accessed and maintained medical insurance and/or assistance?	0							
How many households had contact with a primary health care provider?	0							
How many households accessed or maintained qualification for sources of income?	0							
How many households obtained/maintained an income-producing job during the program year (with or without any HOPWA-related assistance)?	0							
Subsidy Assistance with Supportive Service, Funded Case Management								
Questions	This Report							
How many households received any type of HOPWA Housing Subsidy Assistance and HOPWA Funded Case Management?	0							
How many households received any type of HOPWA Housing Subsidy Assistance and HOPWA Supportive Services?	0							

If there is a waiting list, how many households are on the waiting list?	0	0	0	0	0	0	0	0	0	0
How many total units (HOPWA and non-HOPWA units) were developed in this facility?	0	0	0	0	0	0	0	0	0	0
How many units in this facility were developed with HOPWA funds?	0	0	0	0	0	0	0	0	0	0
For all Facilities	Total Units Designated for the Chronically Homeless	Total Units Demingwood to Assist the Homeless	Total Units Energy Star Compliant	Total Units 504 Accessible - Mobility Units - Sensory Units						
For units constructed (new) and/or acquired with or without rehab:	0	0	0	0						
For rental units rehabbed:	0	0	0	0						
For homeownership units constructed (if approved):	0	0	0	0						

Complete for all households who requested Violence Against Women Act (VAWA) protections per 24 CFR 5.2005 with your organization in the reporting year.

Question	This Report
How many internal emergency transfers were requested?	0
How many internal emergency transfers were granted?	0
How many external emergency transfers were requested?	0
How many external emergency transfers were granted?	0
How many emergency transfers were denied?	0

Grant ID
FALG8522

Grantee
ALABAMA

Sponsor ID **Sponsor**
S93012A S93012A_ The Right Place

File ID
24059_46557

Please complete for organizations designated to serve as project sponsor, i.e., organizations involved in the direct delivery of services for client households, as defined by 24 CFR 574.3.

Project Sponsor Questions	Responses
What is the organization's name?	The Right Place
What is the organization's Unique Entity Identifier (UEI)?	78455692
What is the organization's Employer ID Number (EIN) or Tax ID Number (TIN)?	45 4568903
What is the HOPWA contract amount for this organization?	\$30,000
What is the organization's business street address?	105 West 15th Street P.O. Box 1061
In what city is the organization's business address?	Anniston
In what county is the organization's business address?	Calhoun
In what state is the organization's business address?	Alabama
What is the organization's business address zip code?	36201
What is the organization's parent company, if applicable?	N/A
What department administers the organization's grant?	
What is the organization's phone number (including extension)?	(256) 238-6231
What is the organization's fax number?	www.therightplaceanniston.org
What is the organization's website?	The Right Place
What is the organization's Facebook page?	The Right Place
What is the organization's Twitter handle?	no
Is this a faith-based organization? Yes or No.	yes
Is this a nonprofit organization? Yes or No.	yes
Is this a grassroots organization? Yes or No.	Anniston
What are the cities of the organization's primary service area?	Etowah
What are the counties of the organization's primary service area?	4
In what congressional district is the organization located?	4
In what congressional district is the primary service area?	yes
Is there a waiting list for HOPWA housing subsidy assistance services in the organization's service area? Yes or No.	No

Project Sponsor Non-Direct Service Expenditures	
What were the total HOPWA funds expended for Administration costs?	0
How much was expended on Technical Assistance?	0
How much was expended on Resource Identification?	0

Contact Information for your Organization

Only organizations designated as project sponsors (see definition of "Project Sponsor Organization" in Performance Report Cover tab) should complete this tab.

Question	Responses
Contact Information for Primary Program Contact	
What is the Primary Program contact name?	Lori Floyd
What is the Primary Program contact title?	Director
In what department does the Primary Program contact work?	Social Services Housing
What is the Primary Program contact email?	Lorifloyd@the-right-place.org
What is the Primary Program contact phone number (including extension)?	(256)238-6231
What is the Primary Program contact fax number?	
Contact Information for Secondary Program Contact	
What is the Secondary Program contact name?	Brittini Marable
What is the Secondary Program contact title?	Case Manager
In what department does the Secondary Program contact work?	(256) 238-6231
What is the Secondary Program contact email?	brittnimarable@trpalabama.org
What is the Secondary Program contact phone number (including extension)?	(256)238-6231
What is the Secondary Program contact fax number?	
Contact Information for Individuals Seeking Services	
What is the Services contact name?	Brittini Marable
What is the Services contact title?	Case Manager
In what department does the Services contact work?	(256) 238-6231
What is the Services contact email?	brittnimarable@trpalabama.org
What is the Services contact phone number (including extension)?	(256)238-6231
What is the Services contact fax number?	

Complete the age, gender, race, and ethnicity information for all individuals served with all types of HOPWA assistance.

See totals in rows 27 and 28.

A. For each racial category, how many HOPWA-eligible individuals identified as such?	Male					Female					Gender Nonbinary					Transgender Female												
	Younger Than 18		18-30		31-50		51 or Older		Younger Than 18		18-30		31-50		51 or Older		Younger Than 18		18-30		31-50		51 or Older		Younger Than 18			
Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Asian & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Black/African American	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Black/African American & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
American Indian/Alaskan Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
American Indian/Alaskan Native & Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
American Indian/Alaskan Native & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Native Hawaiian/Other Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Other Multi-Racial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
B. For each racial category, how many other household members (beneficiaries) identified as such?																												
b. Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. Asian & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. Black/African American & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. American Indian/Alaskan Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. American Indian/Alaskan Native & Black/African American	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. American Indian/Alaskan Native & White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. Native Hawaiian/Other Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. Other Multi-Racial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
b. White	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Total number of HOPWA-eligible individuals served with HOPWA assistance (rows 4-13):	4																											
Total number of other household members (beneficiaries) served with HOPWA assistance (rows 16-25):	0																											
How many other household members (beneficiaries) are HIV+?	0																											

How many other household members (beneficiaries) are HIV negative or have an unknown HIV status?	0
Complete Prior Living Situations for HOPWA-eligible Individuals served by TBRA, P-FBH, ST-TFBH, or PHP	
How many HOPWA-eligible individuals continued receiving HOPWA assistance from the previous year?	0
How many individuals newly receiving HOPWA assistance came from:	
A place not meant for human habitation?	0
An emergency shelter?	0
A transitional housing facility for formerly homeless persons?	0
A permanent housing situation for formerly homeless persons?	0
A psychiatric hospital or other psychiatric facility?	0
A substance abuse facility?	0
A non-psychiatric hospital?	0
A foster care home?	0
Jail, prison, or a juvenile detention facility?	0
A rented room, apartment or house?	0
A house the individual owned?	0
Staying at someone else's house?	0
A hotel or motel paid for by the individual?	0
Any other prior living situation?	0
How many individuals newly receiving HOPWA assistance didn't report or refused to report their prior living situation?	0
How many individuals newly receiving HOPWA assistance during this program year reported a prior living situation of homelessness [place not for human habitation, emergency shelter, transitional housing]:	0
Also meet the definition of experiencing chronic homelessness?	0
Also were veterans?	0

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in either the Consolidated or Annual Plan (for formula grantees) or the grant proposal/application (for competitive grantees) and used in the delivery of the HOPWA program and the amount of leveraged dollars.

What is the amount and type of leveraged funding that was provided by any of these sources?	Funding for this Report	Was this a Housing Subsidy Assistance? Yes or No.
ESG	0	
HOME	0	
Ryan White	0	
Continuum of Care (CoC)	0	
Low-Income Housing Tax Credit	0	
Housing Choice Voucher Program	0	
Private grants	0	
In-kind resources	0	
Grantee cash	0	
Other types of private or public funding:		
Other FUNDING_1	0	
Other FUNDING_2	0	
Other FUNDING_3	0	
Other FUNDING_4	0	
Other FUNDING_5	0	
Other FUNDING_6	0	
Other FUNDING_7	0	
Other FUNDING_8	0	
Other FUNDING_9	0	
Other FUNDING_10	0	
Other FUNDING_11	0	
Other FUNDING_12	0	
Other FUNDING_13	0	
Other FUNDING_14	0	
Other FUNDING_15	0	
Program Income	0	
What was the amount of program income collected from resident rent payments in the program year?	0	
What was the amount of program income collected from other sources (non-resident payments) in the program year?	0	
Uses of Program Income		
What was the amount of total program income that was spent on housing assistance in the program year?	0	
What was the amount of total program income that was spent on supportive services or other non-housing costs in the program year?	0	
Rent Payments Made by HOPWA Housing Subsidy Assistance Recipients Directly to Private Landlords		
What was the amount of resident rent payment that residents paid directly to private landlords?	0	

Complete this section for all Households served with HOPWA Tenant-Based Rental Assistance (TBRA) by your organization in the reporting year.

Question	This Report
<i>TBRA Households Served and Expenditures</i>	
How many households were served with HOPWA TBRA assistance?	0
What were the total HOPWA funds expended for TBRA rental assistance?	0
<i>Other (Non-TBRA) Rental Assistance Households Served and Expenditures (Other Non-TBRA Rental Assistance activities must be approved in the grant agreement).</i>	
How many total households were served with Other (non-TBRA) Rental Assistance?	0
What were the total HOPWA funds expended for Other (non-TBRA) Rental Assistance, as approved in the grant agreement?	0
Describe the Other (non-TBRA) Rental Assistance provided. (150 characters).	
<i>TBRA Household Total (TBRA + Other)</i>	0
<i>Income Levels for Households Served by this Activity</i>	0
What is the number of households with income below 30% of Area Median Income?	0
What is the number of households with income between 31% and 50% of Area Median Income?	0
What is the number of households with income between 51% and 80% of Area Median Income?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition Assistance Program, WIC, TANF, etc.)	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service connected payment)	0
Regular contributions or gifts from organizations or persons not residing in the residence	0
Worker's Compensation	0
General Assistance (GA), or local program	0
Unemployment Insurance	0

Other Sources of Income	0
How many households maintained no sources of income?	0
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or Ryan White-funded Medical or Dental Assistance	0
Health Outcomes for Households Served by this Activity	
How many HOPWA-eligible individuals served with TBRA this year have <i>ever</i> been prescribed Anti-Retroviral Therapy?	0
How many HOPWA-eligible persons served with TBRA have shown an improved viral load or achieved viral suppression?	0
Longevity for Households Served by this Activity	
How many households have been served with TBRA for less than one year?	0
How many households have been served with TBRA for more than one year, but less than five years?	0
How many households have been served with TBRA for more than five years, but less than 10 years?	0
How many households have been served with TBRA for more than 10 years, but less than 15 years?	0
How many households have been served with TBRA for more than 15 years?	0
Housing Outcomes for Households Served by this Activity	
How many households continued receiving HOPWA TBRA assistance into the next year?	0
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to an emergency shelter?	0
How many households exited to private housing?	0

How many households exited to transitional housing (time limited - up to 24 months)?	0
How many households exited to an institutional arrangement expected to last less than six months?	0
How many households exited to institutional arrangement expected to last more than six months?	0
How many households exited to a jail/prison term expected to last less than six months?	0
How many households exited to a jail/prison term expected to last more than six months?	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0
How many households exited to a place not meant for human habitation?	0
How many households were disconnected from care?	0
How many of the HOPWA eligible individuals died?	0

There are sixty columns for facilities. If more columns are needed, please contact the HOPWA Validation Team.

Complete this section for Facilities, Households served with HOPWA Short-Term or Transitional Facility-Based Housing assistance by your organization in the reporting year.

Examples include Short-Term and Transitional Housing Types, Facility Based Housing with a tenure of fewer than 24 months, short-term treatment or health facilities, hotel-motel vouchers.

Question	Facility 1	Facility 2	Facility 3	Facility 4	Facility 5	Facility 6	Facility 7
Facility Information							
What is the name of the housing facility?							
Is the facility a medically assisted living facility? Yes or No.							
Was the housing facility placed into service during this program year?							
Yes or No.							
For housing facilities placed into service during this program year, how many units were placed into service? [Do not complete if facility placed in service in prior years.]	0	0	0	0	0	0	0
Leasing – Households and Expenditures Served by this Activity							
How many households received Transitional/Short-Term Facility-Based Housing Leasing support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Transitional/Short-Term Facility-Based Housing Leasing Costs for each facility?	0	0	0	0	0	0	0
Operating – Households and Expenditures Served by this Activity							
How many households received Transitional/Short-Term Facility-Based Housing Operating support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Transitional/Short-Term Facility-Based Housing Operating Costs for each facility?	0	0	0	0	0	0	0
Hotel-Motel – Households and Expenditures Served by this Activity							
How many households received Hotel-Motel cost support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Hotel-Motel Costs for each facility?	0	0	0	0	0	0	0
Other Housing Support – Households and Expenditures Served by this Activity							
How many households received Other types of Transitional/Short-Term Facility-Based Housing support for each facility?	0	0	0	0	0	0	0
What were the HOPWA funds expended for Other types of Transitional/Short-Term Facility-Based Housing for each facility?	0	0	0	0	0	0	0
For households served with Other Transitional/Short-Term Facility-Based Housing, what type of service were they provided? (150 characters)							
ST-TFBH Deduplication							
How many households received more than one type of ST-TFBH for each facility? (Leasing, Operating, Hotel-Motel, Other)	0	0	0	0	0	0	0
Total Deduplicated Household Count	0	0	0	0	0	0	0

Complete this section for all Households served with HOPWA Short-Term Rent, Mortgage, and Utilities Assistance (STRMU) by your organization in the reporting year.

Question	This Report
<i>Households Served by this Activity - STRMU Breakdown</i>	
a. How many households were served with STRMU mortgage assistance only ?	0
b. How many households were served with STRMU rental assistance only ?	0
c. How many households were served with STRMU utilities assistance only ?	0
d. How many households received more than one type of STRMU assistance?	0
<i>STRMU Households Total</i>	0
<i>STRMU Expenditures</i>	
What were the HOPWA funds expended for the following budget line items?	
STRMU mortgage assistance	0
STRMU rental assistance	0
STRMU utility assistance	0
Total STRMU Expenditures	0
<i>Income Levels for Households Served by this Activity</i>	0
What is the number of households with income below 30% of Area Median Income?	0
What is the number of households with income between 31% and 50% of Area Median Income?	0
What is the number of households with income between 51% and 80% of Area Median Income?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service	0
Regular contributions or gifts from organizations or	0
Worker's Compensation	0
General Assistance (GA), or local program	0

Unemployment Insurance	0
Other Sources of Income	0
How many households maintained no sources of income?	0
Medical Insurance for Households Served by this Activity	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or local program equivalent	0
Ryan White-funded Medical or Dental Assistance	0
Longevity for Households Served by this Activity	0
How many households have been served by STRMU for the first time this year?	0
How many households also received STRMU assistance during the previous STRMU eligibility period?	0
How many households received STRMU assistance more than twice during the previous five eligibility periods?	0
How many households received STRMU assistance during the last five consecutive eligibility periods?	0
Housing Outcomes for Households Served by this Activity	0
How many households continued receiving this type of HOPWA assistance into the next year?	0
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to an emergency shelter?	0
How many households served with STRMU were able to maintain a private housing situation without subsidy?	0
How many households exited to transitional housing (time limited - up to 24 months)?	0
How many households exited to institutional arrangement expected to last less than six months?	0

How many households exited to institutional arrangement expected to last more than six months?	0
How many households exited to a jail/prison term expected to last less than six months?	0
How many households exited to a jail/prison term expected to last more than six months?	0
How many households exited to a situation that isn't transitional, but is not expected to last more than 90 days and their housing situation after those 90 days is uncertain?	0
How many households exited to a place not meant for human habitation?	0
How many households were disconnected from care?	0
How many of the HOPWA eligible individuals died?	0
How many households are likely to need additional Short-Term Rent, Mortgage and Utilities assistance to maintain the current housing arrangements?	0

Complete this section for all Households served with HOPWA Permanent Housing Placement (PHP) assistance by your organization in the reporting year.

Question	This Report
<i>Households Served by this Activity</i>	
How many households were served with PHP assistance?	0
<i>PHP Expenditures for Households Served by this Activity</i>	
What were the HOPWA funds expended for PHP?	0
<i>Sources of Income for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of income in the past year?	0
Earned Income from Employment	0
Retirement	0
SSI	0
SSDI	0
Other Welfare Assistance (Supplemental Nutrition Assistance Program, WIC, TANF, etc.)	0
Private Disability Insurance	0
Veteran's Disability Payment (service or non-service connected payment)	0
Regular contributions or gifts from organizations or persons not residing in the residence	0
Worker's Compensation	0
General Assistance (GA), or local program	0
Unemployment Insurance	0
Other Sources of Income	0
How many households maintained no sources of income?	0
<i>Medical Insurance for Households Served by this Activity</i>	
How many households accessed or maintained access to the following sources of medical insurance in the past year?	
MEDICAID Health Program or local program equivalent	0
MEDICARE Health Insurance or local program equivalent	0
Veterans Affairs Medical Services	0
AIDS Drug Assistance Program	0
State Children's Health Insurance Program (SCHIP) or local program equivalent	0
Ryan White-funded Medical or Dental Assistance	0

Housing Outcomes for Households Served by this Activity	0
<i>In the context of PHP, "exited" means the housing situation into which the household was placed using the PHP assistance.</i>	
How many households exited to other HOPWA housing programs?	0
How many households exited to other housing subsidy programs?	0
How many households exited to private housing?	0

Complete for all households served with HOPWA-funded Housing Information Services by your organization in the reporting year.

See definition of "Housing Information Services" on "Performance Report Cover" tab.

Question	This Report
<i>Households Served by this Activity</i>	
How many households were served with housing information services?	0
<i>Housing Information Services Expenditures</i>	
What were the HOPWA funds expended for Housing Information Services?	0

Complete for all households served with HOPWA funded Supportive Services by your organization in the reporting year.

Note that this table also collects HOPWA Supportive Service expenditures.

Questions	This Report	
	Number of Households	Expenditures
Households and Expenditures for Supportive Service Types		
What were the expenditures and number of households for each of the following types of supportive services in the program year?		
Adult Day Care and Personal Assistance	0	0
Alcohol-Drug Abuse	0	0
Child Care	0	0
Case Management	4	\$24,833.84
Education	0	0
Employment Assistance and Training	0	0
Health/Medical Services	0	0
Legal Services	0	0
Life Skills Management	0	0
Meals/Nutritional Services	0	0
Mental Health Services	0	0
Outreach	0	0
Transportation	0	0
Any other type of HOPWA funded, HUD approved supportive service?	0	0
What were the other type(s) of supportive services provided? (150 characters)		
Deduplication of Supportive Services		
How many households received more than one of any type of Supportive Services?	0	

Only Competitive Grantees with an "Other Housing Activity" approved in their grant agreement should complete this tab.

"Other" Housing Activities -- Households and Expenditures Served by this Activity	This Report
How many households were served with "Other Housing Activity" assistance?	0
What were the HOPWA funds expended for "Other Housing Activity" assistance?	0
What is the "Other" HOPWA budget line item approved in the grant agreement? (150 characters)	

Activity Review	TBRA	P-FBH	ST-TFBH	STRMU	PHP	Housing Info	SUPP SVC	Other Competitive Activity
Total Households Served in ALL Activities from this report for each Activity .	0	0	0	0	0	0	4	0
Housing Subsidy Assistance Household Count Deduplication								
<i>Total Housing Subsidy Assistance (from the TBRA, P-FBH, ST-TFBH, STRMU, PHP, Other Competitive Activity counts above)</i>	0							
How many households received more than one type of HOPWA Housing Subsidy Assistance for TBRA, P-FBH, ST-TFBH, STRMU, PHP, Other Competitive Activity?	0							
Total Unduplicated Housing Subsidy Assistance Household Count	0							
Access to Care (ATC)								
Complete HOPWA Outcomes for Access to Care and Support for all households served with HOPWA housing assistance and "other competitive activities" in the reporting year.								
Questions	This Report							
How many households had contact with a case manager?	0							
How many households developed a housing plan for maintaining or establishing stable housing?	0							
How many households accessed and maintained medical insurance and/or assistance?	0							
How many households had contact with a primary health care provider?	0							
How many households accessed or maintained qualification for sources of income?	0							
How many households obtained/maintained an income-producing job during the program year (with or without any HOPWA-related assistance)?	0							
Subsidy Assistance with Supportive Service, Funded Case Management								
Questions	This Report							
How many households received any type of HOPWA Housing Subsidy Assistance and HOPWA Funded Case Management?	0							
How many households received any type of HOPWA Housing Subsidy Assistance and HOPWA Supportive Services?	0							

If there is a waiting list, how many households are on the waiting list?	0	0	0	0	0	0	0	0	0	0
How many total units (HOPWA and non-HOPWA units) were developed in this facility?	0	0	0	0	0	0	0	0	0	0
How many units in this facility were developed with HOPWA funds?	0	0	0	0	0	0	0	0	0	0
For all Facilities	Total Units Designated for the Chronically Homeless	Total Units Designated to Assist the Homeless	Total Units Energy-Star Compliant	Total Units 504 Accessible – Mobility Units – Sensory Units						
For units constructed (new) and/or acquired with or without rehab:	0	0	0	0						
For rental units rehabbed:	0	0	0	0						
For homeownership units constructed (if approved):	0	0	0	0						

Complete for all households who requested Violence Against Women Act (VAWA) protections per 24 CFR 5.2005 with your organization in the reporting year.

Question	This Report
How many internal emergency transfers were requested?	0
How many internal emergency transfers were granted?	0
How many external emergency transfers were requested?	0
How many external emergency transfers were granted?	0
How many emergency transfers were denied?	0