

Match Contributions for
Federal Fiscal Year (yyyy) 2014

Part I Participant Identification

1. Participant No. (assigned by HUD) M-97-DC-41-2014		2. Name of the Participating Jurisdiction Portland HOME HOME Consortium		3. Name of Contact (person completing this report) Kathy Anderson Peoples	
5. Street Address of the Participating Jurisdiction 421 SW 6th Avenue				4. Contact's Phone Number (include area code) 503-823-3359	
6. City Portland		7. State OR	8. Zip Code 97204		

Part II Fiscal Year Summary

1. Excess match from prior Federal fiscal year	\$	6,788,018	
2. Match contributed during current Federal fiscal year (see Part III.9.)	\$	4,547,351	
3. Total match available for current Federal fiscal year (line 1 + line 2)			\$ 11,335,369
4. Match liability for current Federal fiscal year			\$ 568,783
5. Excess match carried over to next Federal fiscal year (line 3 minus line 4)			\$ 10,766,586

Part III Match Contribution for the Federal Fiscal Year

1. Project No. or Other ID	2. Date of Contribution (mm/dd/yyyy)	3. Cash (non-Federal sources)	4. Foregone Taxes, Fees, Charges	5. Appraised Land / Real Property	6. Required Infrastructure	7. Site Preparation, Construction Materials, Donated labor	8. Bond Financing	9. Total Match
4654	2014	681,412						681,412
4462	2014							0
4819	2014	1,542,210						1,542,210
4792	2014	1,663,729	660,000					2,323,729
								4,547,351

Annual Performance Report HOME Program

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development

OMB Approval No. 2506-0171
(exp. 8/31/2009)

Public reporting burden for this collection of information is estimated to average 2.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct a collection of information unless it displays a valid OMB control number.

The HOME statute imposes a significant number of data collection and reporting requirements. This includes information on assisted properties, on the owners or tenants of the properties, and on other programmatic areas. The information will be used: 1) to assist HOME participants in managing their programs; 2) to track performance of participants in meeting fund commitment and expenditure deadlines; 3) to permit HUD to determine whether each participant meets the HOME statutory income targeting and affordability requirements; and 4) to permit HUD to determine compliance with other statutory and regulatory program requirements. This data collection is authorized under Title II of the Cranston-Gonzalez National Affordable Housing Act or related authorities. Access to Federal grant funds is contingent on the reporting of certain project-specific data elements. Records of information collected will be maintained by the recipients of the assistance. Information on activities and expenditures of grant funds is public information and is generally available for disclosure. Recipients are responsible for ensuring confidentiality when public disclosure is not required.

This form is intended to collect numeric data to be aggregated nationally as a complement to data collected through the Cash and Management Information (C/MI) System. Participants should enter the reporting period in the first block. The reporting period is October 1 to September 30. Instructions are included for each section if further explanation is needed.

Submit this form on or before December 31.	This report is for period (mm/dd/yyyy)		Date Submitted (mm/dd/yyyy)
Send one copy to the appropriate HUD Field Office and one copy to: HOME Program, Rm 7176, 451 7th Street, S.W., Washington D.C. 20410	Starting 7/1/2014	Ending 6/30/2015	9/1/2015

Part I Participant Identification

1. Participant Number	2. Participant Name City of Portland - Portland Housing Bureau		
3. Name of Person completing this report Stella Martinez		4. Phone Number (Include Area Code) 503-823-2383	
5. Address 421 SW 6th Avenue, Suite 500	6. City Portland	7. State Oregon	8. Zip Code 97204

Part II Program Income

Enter the following program income amounts for the reporting period: in block 1, enter the balance on hand at the beginning; in block 2, enter the amount generated; in block 3, enter the amount expended; and in block 4, enter the amount for Tenant-Based rental Assistance.

1. Balance on hand at Beginning of Reporting Period	2. Amount received during Reporting Period	3. Total amount expended during Reporting Period	4. Amount expended for Tenant-Based Rental Assistance	5. Balance on hand at end of Reporting Period (1 + 2 - 3) = 5
---	--	--	---	---

Part III Minority Business Enterprises (MBE) and Women Business Enterprises (WBE)

In the table below, indicate the number and dollar value of contracts for HOME projects completed during the reporting period.

	a. Total	Minority Business Enterprises (MBE)			f. White Non-Hispanic
		b. Alaskan Native or American Indian	c. Asian or Pacific Islander	d. Black Non-Hispanic	
A. Contracts					
1. Number	2	0	0	1	1
2. Dollar Amount	12800672	0	0	2061785	10738887
B. Sub-Contracts					
1. Number	89	2	2	4	70
2. Dollar Amount	8866002	30134	42983	1259960	5590504
	a. Total	b. Women Business Enterprises (WBE)	c. Male		
C. Contracts					
1. Number	2	0	2		
2. Dollar Amount	12800672	0	12800672		
D. Sub-Contracts					
1. Number	89	9	80		
2. Dollar Amounts	8866002	602322	8263680		

Part IV Minority Owners of Rental Property

In the table below, indicate the number of HOME assisted rental property owners and the total dollar amount of HOME funds in these rental properties assisted during the reporting period.

	a. Total	Minority Property Owners				f. White Non-Hispanic
		b. Alaskan Native or American Indian	c. Asian or Pacific Islander	d. Black Non-Hispanic	e. Hispanic	
1. Number	-0-					
2. Dollar Amount	-0-					

Part V Relocation and Real Property Acquisition

Indicate the number of persons displaced, the cost of relocation payments, the number of parcels acquired, and the cost of acquisition. The data provided should reflect only displacements and acquisitions occurring during the reporting period.

	a. Number	b. Cost
1. Parcels Acquired	-0-	
2. Businesses Displaced	-0-	
3. Nonprofit Organizations Displaced	-0-	
4. Households Temporarily Relocated, not Displaced	-0-	

Households Displaced	a. Total	Minority Business Enterprises (MBE)				f. White Non-Hispanic
		b. Alaskan Native or American Indian	c. Asian or Pacific Islander	d. Black Non-Hispanic	e. Hispanic	
5. Households Displaced - Number	-0-					
6. Households Displaced - Cost	-0-					