



ANNUAL REPORTING GUIDE

COMMUNITY INVESTMENT TEAM

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Purpose

The purpose of the Annual Reporting Guide is to provide guidance on the reporting requirements associated with the receipt and use of federal and local funds from the City of Boulder, Division of Housing Fund Rounds. The guide is designed to help Funding Recipients understand the reporting requirements that apply to specific activities, programs and projects.

Ongoing compliance monitoring for the Division of Housing will be administered by the Compliance & Project Manager and the Compliance & Data Specialist. Project specific inquiries should be directed to the Division of Housing Project Manager assigned to the funded project. All Division of Housing personnel can be reached at 303-441-3157.

Reporting Requirements

The City of Boulder requires all Funding Recipients to submit quarterly and annual performance reports. These reports serve as a valuable tool to evaluate progress in meeting specific objectives and ensure compliant use of the funds received. The information collected is also used to report outcomes to the U.S. Department of Housing and Urban Development (HUD), Boulder City Council and the community.

QUARTERLY PROGRESS REPORTS

The Quarterly Progress Report is required for all Open projects that have not yet expended the entirety of the funds awarded to the project. The purpose of the Quarterly Progress Report is to track progress toward satisfying the funding conditions detailed in the executed funding agreement, evaluate progress towards meeting the project objectives and ensure compliant use of all funds.

If the project has executed a funding agreement but has yet to seek reimbursement of any project expenses, it is only necessary to complete **Parts I and II** of the report. In these sections, please describe the project status, any progress made in satisfying funding conditions and critical milestones. If the project is experiencing any complications or obstacles please provide an overview of these factors and the actions to be taken to address the factors impeding the progress of the project. Please be concise and explicit.

Prior to the reimbursement of any funds, the Funding Recipient must demonstrate to the assigned Project Manager that all funding conditions have been met. Funds will not be released if the funding conditions have not been satisfied. Funding conditions are included in the executed funding agreement and may include local and federal rules and regulations (i.e. procurement, Davis-Bacon, relocation, etc.)

Once all of funding conditions have been met, the assigned Project Manager will approve the reimbursement of funds. Once the project has started to expend and be reimbursed expenditures, Funding Recipients must also complete **Part III** of the Quarterly Progress Report. This section informs the Project Manager how the project is progressing and the amount of funds expended to date.

The Quarterly Progress Report is due every quarter (four times a year) until the project is completed and all funds have been expended. This report must be submitted within thirty (30) days of the end of each quarter. The reporting period and submission timeline is as follows:

Quarterly Report	Reporting Period
First Quarter	January – March (Due 4/30)
Second Quarter	April – June (Due 7/30)
Third Quarter	July – September (Due 10/31)
Fourth Quarter	October – December (Due 1/31)

ANNUAL BENEFICIARY REPORT

The “Annual Beneficiary Report” is required for all community development projects and some rental housing properties that have reached a **Project Complete** status. This report summarizes the number of individuals or households (beneficiaries) that benefited from services provided by the project/program. This report must be completed on an annual basis and received by the Compliance & Project Manager no later than January 30th of the each year.

Only rental housing properties that provide overnight shelter or short-term transitional housing are required to submit an Annual Beneficiary Report. All other rental properties must submit an Annual Tenant Report.

ANNUAL CERTIFICATION OF COMPLIANCE

As part of our Annual Risk Analysis for the Affordable Rental Housing Program, the Annual Certification of Compliance is now required to be submitted on an annual basis. This report is required for all permanently affordable rental housing units under Covenant with the City of Boulder. Please note that only the first page of this report is represented in this guide. To access the complete four (4) page document, click on the report hyperlink.

ANNUAL TENANT REPORT

All multifamily affordable rental housing properties are required to submit an Annual Tenant Report by January 31st every year. This report serves as a tool to verify unit details, student status, household demographics, income eligibility and to ensure that the tenant paid rent does not exceed the maximum rent allowed for each unit as outlined in the Covenant. *

***Important Notice:**

The Annual Tenant Report has been revised to include additional required information. Any Grantee/Owner/Manager that chooses to submit this report in an alternate format such as Yardi must include the following information:

- Square Feet
- Student Status
- Total Assets
- Source of Assets

ANNUAL OPERATING INCOME/EXPENSE & VACANCY RATE REPORT

Any Grantee that owns/manages more than one permanently affordable multifamily rental property is required to submit an Annual Operating Income & Expense Report along with a Vacancy Rate Report for each property under Covenant with the City of Boulder. These reports must be submitted along with the Annual Certification of Compliance and Annual Tenant Report.

SUBMITTING REPORTS

A copy of each report may be found in the following attachments. To complete each report, click on the text within each document and a hyperlink to the original report will open. Once you've completed the report, save a copy to your files and submit your completed reports to the Compliance & Project Manager at communityinvestmentteam@bouldercolorado.gov

ATTACHMENTS

- A. 1st Quarter Progress Report
- B. 2nd Quarter Progress Report
- C. 3rd Quarter Progress Report
- D. 4th Quarter Progress Report
- E. Annual Beneficiary Report
- F. Annual Certification of Compliance
- G. Annual Tenant Report
- H. Annual Operating/Income/Expense & Vacancy Rate Report

1st Quarter Progress Report

PART 1: GRANTEE INFORMATION

Grantee Name	
Person Completing Report	Phone Number
Reporting Period	Reporting Year
January 1 st through March 31st	

PART II: NARRATIVE

Describe Project Status; Note Progress Satisfying Funding Conditions:

PART III: HOUSING PROJECTS WITH COVENANTS

Provide the following information on the status of all housing units for which funds are being provided through this contract:

Total # of affordable units in Project	
# of affordable units currently under construction/rehab	
# of affordable units completed	
# of affordable units sold	
# of affordable units leased	
Total # of units in Project	

Provide the following information with regard to all **SOURCES** used to date for this project:

SOURCE	TOTAL AWARD	SPENT TO DATE	BALANCE REMAINING

2nd Quarter Progress Report

PART 1: GRANTEE INFORMATION

Grantee (Name, address and zip code)	
Person Completing Report	Phone Number
Reporting Period	Reporting Year
April 1 st through June 30 th	

PART II: NARRATIVE

Describe Project Status; Note Progress Satisfying Funding Conditions:

PART III: HOUSING PROJECTS WITH COVENANTS

Provide the following information on the status of all housing units for which funds are being provided through this contract:

Total # of affordable units in Project	
# of affordable units currently under construction/rehab	
# of affordable units completed	
# of affordable units sold	
# of affordable units leased	
Total # of units in Project	

Provide the following information with regard to all **SOURCES** used to date for this project:

SOURCE	TOTAL AWARD	SPENT TO DATE	BALANCE REMAINING

3rd Quarter Progress Report

PART 1: GRANTEE INFORMATION

Grantee (Name, address and zip code)	
Person Completing Report	Phone Number
Reporting Period	Reporting Year
July 1 st through September 30 th	

PART II: NARRATIVE

Describe Project Status; Note Progress Satisfying Funding Conditions:

PART III: HOUSING PROJECTS WITH COVENANTS

Provide the following information on the status of all housing units for which funds are being provided through this contract:

Total # of affordable units in Project	
# of affordable units currently under construction/rehab	
# of affordable units completed	
# of affordable units sold	
# of affordable units leased	
Total # of units in Project	

Provide the following information with regard to all **SOURCES** used to date for this project:

SOURCE	TOTAL AWARD	SPENT TO DATE	BALANCE REMAINING

4th Quarter Progress Report

PART 1: GRANTEE INFORMATION

Grantee (Name, address and zip code)	
Person Completing Report	Phone Number
Reporting Period	Reporting Year
October 1 st through December 31st	

PART II: NARRATIVE

Describe Project Status; Note Progress Satisfying Funding Conditions:

PART III: HOUSING PROJECTS WITH COVENANTS

Provide the following information on the status of all housing units for which funds are being provided through this contract:

Total # of affordable units in Project	
# of affordable units currently under construction/rehab	
# of affordable units completed	
# of affordable units sold	
# of affordable units leased	
Total # of units in Project	

Provide the following information with regard to all **SOURCES** used to date for this project:

SOURCE	TOTAL AWARD	SPENT TO DATE	BALANCE REMAINING

Annual Beneficiary Report

I. GRANTEE INFORMATION	
Grantee Name	Address
Person Completing Report	Phone Number
CDBG Award Amount	Reporting Year

II. BENEFICIARIES & UNITS	
Beneficiaries	Total Number Served
Total Persons or Households Served	
Total Female Head of Households Served	
Housing Projects (rehab, acquisition or construction)	Total Number Served
Total # of units at start of project	
Total # of units expected at project completion	
Total # of units completed	

III. RACE & ETHNICITY		
Race	Non-Hispanic/Latino	Hispanic/Latino
American Indian/Alaska Native		
Asian		
Native Hawaiian/Other Pacific Islander		
Black/African American		
White		
Other		

IV. INCOME INFORMATION	
Beneficiaries	Total Number Served
Total # Extremely Low Income Persons (up to 30% AMI)	
Total Very Low Income Persons (31% to 50% AMI)	
Total # Low Income Persons (51% to 66.2% AMI)	
Total Moderate (66.3% to 100% AMI)	
Total Other (above 100% AMI)	

Please refer to the enclosed chart for information on Boulder-Longmont AMI numbers.



Annual Certification of Compliance

As part of our Annual Risk Analysis for the Affordable Rental Housing Programs, the Owner's Annual Certification of Compliance is now required to be submitted on an annual basis. The electronic submission affects all affordable rental housing programs that are required to submit annual performance reports to the City of Boulder, Division of Housing.

Please submit all reports to: Shelly Conley, Compliance & Project Manager at conleys@bouldercolorado.gov

Reporting Period:	From: January 1, 2015	To: December 31, 2015
Project Name:		

CERTIFICATION

The undersigned hereby certifies that the information presented herein is true and correct to the best of his/her knowledge and that he/she will, if requested, submit documentation in support of such statement. He/she further certifies UNDER PENALTY OF PERJURY that the project meets the compliance requirements as outlined in the Covenant and Rental Compliance Manual, including any HUD regulations pursuant thereto and other applicable laws, rules, regulations and ordinances.

Recipient Information			
Name of Recipient			
Name/Title of Recipient Contact Person			Daytime Telephone Number
Address			Fax Number
City	State	Zip Code	E-mail Address
Signature			Date Form Completed:

Check if new Recipient contact, new address or phone number since submittal of last annual report

Management Agent Information			
Name of Management Company (if different from recipient)			
Name of Management Contact Person			Daytime Telephone Number
Address			Fax Number
City	State	Zip Code	E-mail Address

Check if new management company, new address or phone number since submittal of last annual report.



Division of Housing
Community Investment Team

Annual Operating Income/Expense Report

Owner Name:	
Street Address:	
City/State/Zip:	
Property Name:	
Street Address:	
City/State/Zip:	
Number of Units:	0
Reporting Year:	
Note:	

Operating Income		
Rental Income	\$ -	
Other Income	\$ -	
Less Vacancy	\$ -	
<i>Effective Gross Income</i>	\$ -	
Annual Expenses		
Administrative	\$ -	
Operating & Maintenance*	\$ -	
Taxes & Insurance	\$ -	
Other Expenses	\$ -	
<i>Total Annual Expenses</i>	\$ -	
Net Operating Income Before Reserves and Debt Service	\$ -	Per Unit
Replacement Reserve	\$ -	#DIV/0!
Operating Reserve	\$ -	#DIV/0!
Debt Service	\$ -	
<i>Casflow After Debt Service</i>	\$ -	

*Includes trash removal, utilities, maintenance, repairs, extermination, grounds, snow removal, other