

**HCR Neighborhood Preservation Program and Rural Preservation Program
Mid-Year Report
2022-23 Program Year**

1. Organization Name: _____
2. The organization submitted the Service Area Confirmation Form and understands the boundaries of its current NPP / RPP Service Area. Yes No
3. Has the organization's office address within the service area changed or is there a new phone number or contact person for the organization? Yes No
If "Yes," please provide the updated information in the space below.
4. Per Articles XVI and AVII of Private Housing Finance Law, the organization must have an office within the designated NPP / RPP Service Area. Does the organization have an office within its approved Service Area? Yes No
5. Have there been any significant staff changes at the organization? Yes No
Specifically, any changes in staff paid (all or in part) with NPP / RPP funding? *If, "Yes," please provide the names and titles of any new staff in the space below.*
6. Have any of the organization's insurance certificates expired, or are they about to expire? *If "Yes," please upload the current insurance coverage in CDOL.* Yes No
7. If the organization owns or manages property, are any properties owned or managed by the organization under review by HCR or another local or financial entity for outstanding tenant, maintenance, rehabilitation, financial, or any other ongoing concerns (i.e., issues of non-compliance, including any open IRS Form 8823 noncompliance findings)? Yes No
NA
8. Has the organization had audit concerns or findings, bankruptcy, or any other financial issue since July 2022? Describe below the systems used by the organization to monitor and evaluate its financial status. Yes No

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| 9. Is the organization currently in default with any other HCR funded programs or Contracts (including the Affordable Housing Corporation, Housing Trust Fund Corporation, the Division of Housing and Community Renewal, SONYMA, etc.)? If the organization doesn't have any other contracts with HCR, please answer "NA." | Yes | No |
| | | NA |

If "Yes," please identify the HCR programs/grants/contracts the organization is not in good standing with below.

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| 10. Is the organization up to date with its filings with the NYS Charities Bureau? <i>If "No," please provide an explanation below.</i> | Yes | No |
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| 11. Has there been any changes to the organization's Board of Directors since July 1, 2022? <i>If "Yes", please submit an updated board roster via CDOL.</i> | Yes | No |
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| 12. Please confirm the following:
NPP ONLY: Do 33% of the current Board of Directors reside in the designated NPP Service Area? | Yes | No |
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| RPP ONLY: Do 51% of the current Board of Directors reside in the designated RPP Service Area? | Yes | No |
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13. The Nonprofit Revitalization Act of 2013 annual gross revenue dictates whether the organization's most recent annual financial report, financial report plus an audited financial statement, or full agency-wide audit must be submitted. Accordingly, organizations are required to submit either an audit or financial statement predicated on the following:

- If the organization's gross revenue is over \$1 million, please submit a full audit.
- If the organization's gross revenue is over \$250k but less than \$1 million, please submit an annual financial report, accompanied by an annual financial statement that includes an independent CPA's review.
- If the organization's gross revenue is less than \$250k, please submit an unaudited financial report, to include a statement of any changes in the information required to be contained in the registration form filed on behalf of such organization. The financial report shall be signed by the President or other authorized officer and the Chief Fiscal Officer.
- Annual gross revenue for the organization: _____

Additional information can be found here: [NPP / RPP Program Manual](#)

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Work Plan Progress –07/01/22 through 12/31/22

Please refer to the organization’s executed 22-23 Grant Agreement when answering the following questions.

1. Indicate how much of the work plan has been completed from July 1, 2022, through December 31, 2022. For example, if the organization proposed to improve 30 housing units under Property Rehab and Construction and 15 are completed, 50% of the work plan has been completed.

A. Property Rehabilitation and Construction:

B. Client Assistance:

C. Community Renewal:

2. Has the organization experienced any setbacks or hardships during the first half of the program year? If “Yes,” please explain below how these issues have impacted the approved work plan. Yes No

3. Please provide an overall update on the organization’s work plan progress from July 1, 2022, through December 31, 2022. Include any accomplishments, closings, work completed, grants written, etc. **This question is not optional, and “NA” is not an acceptable answer.**

2022-23 Program Year - NPP/RPP Mid-Year Expenditures

Instructions: In Column A, please provide the organization's approved 2022-23 Budget, as detailed in the 22-23 Grant Agreement. In Column B, please show how the first half of the award was spent. NPP/RPP funding can cover approved expenses dating back to July 1, 2022.

	A	B
Item		
Personnel Services		
Total Salaries		
Total Fringe Benefits		
Total Personnel Services		
Regulated Other Than Personnel Services (OTPS)		
Insurance/Bonding		
Professional Services - Agency Audit		
Professional Services - Legal		
Professional Services - Other (Define):		
Professional Services - Other (Define):		
Equipment		
Regulated OTPS Other (Define):		
Regulated OTPS Other (Define):		
Total Regulated OTPS		
General Other Than Personnel Services (OTPS)		
Rent/Mortgage		
Utilities (Phone, Electric, Etc.)		
Office Supplies		
Printing/Postage		
Travel		
Bank Charges (not interest)		
General OTPS Other (Define):		
General OTPS Other (Define):		
Total General OTPS		
TOTAL BUDGET		

Helpful Tip: Use the exact numbers from the Budget Section of the executed Grant Agreement for Column A.

The total of Column B should not exceed the first disbursement amount (\$47,313.44 for NPP and \$44,913.80 for RPP).

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The Grantee certifies that:

The information and supporting documentation contained in this report are complete and accurate and acknowledges that falsification of information will result in, denial of funding, rescinding of subsequent award and contract or required repayment of funds disbursed for any Office of Community Renewal (OCR) or NYS Homes and Community Renewal (HCR) Program. The undersigned further recognizes and accepts the responsibility and obligation to notify the Housing Trust Fund Corporation (HTFC) and OCR, in writing, if the Grantee becomes aware of any subsequent events or information which would change any statements or representations previously submitted to HTFC/OCR.

Signature of Executive Director or Board Chair: _____

Date: _____

- **Mid-Year Reports will be reviewed in the order they are received.**
- **The organization must submit the most recent Audit or Financial Statements available.**
- **Please submit a final disbursement request with the Mid-Year Report and Audit.**
- **Please return the electronically signed report via the Community Development Online (CDOL) application system.**
- **Disbursements will not be made until the Mid-Year Report and the most recent Audit or Financial Statements of the organization is received.**