

**HCR Neighborhood Preservation Program and Rural Preservation Program
Mid-Year Report
2023-24 Program Year**

1. Organization Name: _____

2. 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:

3. 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.*

4. 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

5. 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

6. Has the organization had audit concerns or findings, bankruptcy, or any other financial issues since July 2023? *If "Yes," please attach a signed letter with an explanation of the issues.* Yes No

7. Is the organization currently in default with any other HCR (including, the Affordable Housing Corporation, Housing Trust Fund Corporation, the Division of Housing and Community Renewal, SONYMA, etc.) funded programs or Contracts? 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.

8. Is the organization up to date with its filings with the NYS Charities Bureau? *If "No," please provide an explanation below.* Yes No

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9. Have there been any changes to the organization’s Board of Directors since July 1, 2023? *If “Yes”, please submit an updated board roster via CDOL.* Yes No
10. Please confirm the following:
- NPP ONLY:** Do 33% of the current Board of Directors reside in the designated NPP Service Area? Yes No
- RPP ONLY:** Do 51% of the current Board of Directors reside in the designated RPP Service Area Yes No
11. Has the organization been awarded any new grants or sources of funding since July 1, 2023? *If yes, please provide the funding source and amount in the space below.* Yes No
12. Using the space below, describe the systems used by the organization to monitor and evaluate its financial status and to track NPP / RPP expenses.
13. The Nonprofit Revitalization Act of 2013 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.

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

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Work Plan Progress –07/01/23 through 12/31/23

Please refer to the organization's executed 23-24 Grant Agreement when answering the following questions.

1. Indicate how much of the work plan has been completed from July 1, 2023, through December 31, 2023. *For example, if the organization proposed to improve 30 housing units under Property Rehab and Construction and 15 are completed, 50% of that work plan activity 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 describe the organization's work plan progress from July 1, 2023, through December 31, 2023. Include any accomplishments, closings, work completed, grants written, etc. **This question is not optional, and "NA" is not an acceptable answer.**

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Instructions: In Column A, please provide the organization's approved 2023-24 Budget, as detailed in the 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, 2023.

Item	A	B
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 (\$64,861.94 for NPP and \$60,891.66 for RPP).

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Mid-Year Report Certification

The grantee, _____, under contract with the Housing Trust Fund Corporation hereby certifies that all responses provided herein and in all sections of this report are true and accurate and in accordance with the requirements described under Articles XVI (NPP) or XVII (RPP) of PHFL. The grantee understands that NYS HCR may ask for documentation to support the responses provided in all sections of this report. Further, the grantee certifies that the undersigned has authorization to sign for the organization.

Name of Executive Director: _____ Date: _____

Signature: _____

- Note: Please use the fill and sign function on Adobe Acrobat to sign the document. Do not use secure sign or use DocuSign.
- Upon completion, upload the following to CDOL using the 2023 SHARS ID:
 - Mid-Year Report
 - the organization's most recent audit
 - second / final disbursement request
- All of the above items **MUST** be received in order for the final payment to be disbursed.

All documents must be submitted to CDOL on or before February 16, 2024.