Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant:**
Housing Authority of the City of Lomita	Capital Fund Program Grant No. CA16P13950125 Replacement Housing Factor Grant No. Date of CFFP:	**FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (Revision No:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost (1)	
		Original	Revised (2)	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	$241,516.00			
3	1408 Management Improvement				
4	1410 Administration				
5	1480 General Capital Activity				
6	1492 MovingToWorkDemonstration				
7	1501 Collater Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

(1) To be completed for the Performance and Evaluation Report

(2) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(3) PHAs with under 250 units in management may use 100% of CFP Grants for operations

(4) RHF funds shall be include here

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant:**
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Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost (1)	
		Original	Revised (2)	Obligated	Expended
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	$241,516.00			

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Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant:**
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Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (Revision No:)**

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Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost (1)	
		Original	Revised (2)	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director */S/ MUE633* **Date** *04/10/2026*	**Signature of Public Housing Director** **Date**

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(4) RHF funds shall be include here

Part II: Supporting Pages

PHA Name:	**Grant Type and Number**	**Federal FFY of Grant:**
Housing Authority of the City of Lomita	Capital Fund Program Grant No. CA16P13950125 Replacement Housing Factor Grant No. CFFP(Yes/No):	

Development Number Name/PHA-Wide Activities	**General Description of Major Work Categories**	**Development Account No.**	**Quantity**	**Total Estimated Cost**		**Total Actual Cost** (2)		**Status of Work**
				Original	**Revised** (1)	**Funds Obligated**	**Funds Expended**	
CA139000001 - LOMITA MANOR	Operations 2025 (Operations (1406)) Description : 1406	1406		$241,516.00				
	Total:			$241,516.00				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the City of Lomita					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	**All Fund Obligated (Quarter Ending Date)**		**All Funds Expended (Quarter Ending Date)**		**Reasons for Revised Target Dates** (1)
	Original Obligation End Date	**Actual Obligation End Date**	**Original Expenditure End Date**	**Actual Expenditure End Date**	

(1) Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S, Housing Act of 1937, as amended.