U.S. Department of Housing and Urban Development Office of Administration

1. Assistance Instrument		2. Type of Action	
Cooperative Agreement	Grant		lment
3. Instrument Number	4. Amendment Number	5. Effective Date of this Action	6. Control Number
FF206K186002		08/28/2018	EIN #75-6000528
7. Name and Address of Recipient		8. HUD Administering Office	
Fort Worth Human Relations Commission		Region VI FHEO	
Hazel Harvey Peace Center of Neighborhoods		801 Cherry St, Unit #45, Suite 2500	
818 Missouri Avenue		Fort Worth, TX 76102	
Fort Worth, TX 76104			
		8a. Name of Administrator	8b. Telephone Number
DUNS #824614754		Garry L. Sweeney	817-978-5868
10. Recipient Project Manager		9. HUD Government Technical Representative	
Angela Rush, Adminstrator		Bonita Howard, 817-978-5890	
11. Assistance Arrangement 12.	Payment Method	13. HUD Payment Office	
		Fort Worth Field Accounting, P.O. Box 2905	
	Treasury Check Reimbursement	Fort Worth, TX 76113-2905	
	Advance Check		
Fixed Price	Automated Clearinghouse		
14. Assistance Amount		15. HUD Accounting and Appropriation Data	
Previous HUD Amount	\$ 0.00	15a. Appropriation Number	15b. Reservation number
HUD Amount this action	\$ 491,322.48	8618/190144	FHEO-06-18-01
Total HUD Amount	\$ 491,322.48	Amount Previously Obligated	\$ 0.00
Recipient Amount	\$ 0.00	Obligation by this action	\$ 491,322.48
Total Instrument Amount	\$ 491,322.48	Total Obligation	\$ 491,322.48

16. Description:

This instrument authorizes the following funds to be obligated to the Agency.

Fund Code	Description	Amount Obligated in this Action	
TIN	Case Processing (Carryover Funds)	\$ 0.00	
TIN	Case Processing (Current Funds) (125)	\$ 322,900.00	
TIN	Post-Cause Supplement (Carryover)	\$ 0.00	
TIN	Post-Cause Supplement (Current Funds)	\$ 0.00	
ADC	Administrative Costs	\$ 140,042.48	
TRG	Training	\$ 28,380.00	
PA1 Partnership		\$ 0.00	
SEE	Special Enforcement Effort	\$ 0.00	
	Total	\$ 491,322.48	

The Cooperative Agreement/Amendment is comprised of the following documents:

- 1. Cover Page HUD-1044
- 2. 2018 Contributions Agreement
- 3. Appendix A: FY2018 Statement of Work
- 4. Attachment A: FY2018Criteria for Processing
- 5. Attachment B: FY2018 Standards for Timeliness
- 6. Attachment C: Payment Amounts for FHAP Case Processing
- 7. Attachment D: eLOCCS Security Procedures

The performance period for this Agreement begins July 1, 2017 and ends June 30, 2018.

The funds obligated by this instrument expire on September 30, 2023.

The recipient must comply with all rules and regulations in accordance with the Fair Housing Assistance Program regulations (24 CFR § 115), the Memorandum of Understanding between the Recipient and HUD (including all subsequent addenda), and the FY2018 FHAP Guidance.

17. Recipient is required to sign and return three (3) copies of this document to the HUD Administering Office		18. Recipient is not required to sign this document.	
19. Recipient (By Name)		20. HUD (By Name)	
Angela Rush, Administrator			
Signature & Title	Date (mm/dd/yyyy)	Signature & Title	Date (mm/dd/yyyy)

form HUD-1044 (8/90)