



**STATE OF IOWA
FLOOD MITIGATION PROGRAM
PROGRESS REPORT**

PERIOD COVERED BY THIS REPORT: 10/1/2016 to 3/31/2016
 LOCAL CONTACT NAME: Calvin Miller
 GOVERNMENTAL ENTITY: City of Des Moines & DMWRA
 ADDRESS: 400 Robert D. Ray Drive
 Des Moines, IA 50309
 TELEPHONE NUMBER: 515-283-4748
 PROJECT TITLE: Des Moines-WRA Flood Mitigation Project
 AGREEMENT NUMBER: 2015-1
 ACTIVITY COMPLETION TIMEFRAME: 12/4/2013 to 12/31/2033

	FEDERAL	LOCAL	STATE	TOTAL
TOTAL FUNDS APPROVED:	\$ 130,270,434	\$ 67,239,013	\$ 111,100,273	\$ 308,609,720
TOTAL FUNDS EXPENDED TO DATE:	\$ 117,615,015	\$ 59,723,007	\$ 1,630,030	\$ 178,968,052
PROJECT OVERRUN/ (UNDERRUN):	\$ (12,655,419)	\$ (7,516,006)	\$ (109,470,243)	\$ (129,641,668)
The percentage of actual work that has been completed at the end of the reporting period (not a % of funds expended)				56%
The estimated cost of the project at completion (which may even exceed the awarded amount)				\$ 312,000,000

Type of Expense & Funding Source	Budget (from Application)	Federal/ Local/State	Total Expended to Date	Remaining Balance
Acquisitions	\$ 72,424			
Phase I & Phase II Acquisitions complete		Local	\$ 377,164	
TOTAL			\$ 377,164	\$ (304,740)
Management Costs	\$ 3,136,814			
Phase I & Phase II complete		Local	\$ 9,041,876	
TOTAL			\$ 9,041,876	\$ (5,905,062)
Construction:	\$ 237,825,824			
Phase I Construction complete		CDBG	\$ 11,567,708	
		Army Corp of Engineers	\$ 13,108,000	
		Federal DOT	\$ 2,849,000	
		State DOT	\$ 726,071	
		I-JOBS	\$ 7,476,588	
		SRF - Clean Water	\$ 90,090,307	
		In-Kind Contribution	\$ 4,058,540	
		Local	\$ 20,586,381	
Phase III Construction in Progress:				
Downtown Closures		State FMP	\$ 846,715	
TOTAL			\$ 151,309,309	\$ 86,516,515

Design	\$ 34,384,638			
Phase I design complete		Local	\$ 15,898,402	
Phase II Design complete		Local	\$ 1,557,985	
Phase III design in progress. See Below:				
Red Bridge Re-Elevation		State FMP	\$ 115,960	
Stantec Consultant Services - Hydraulic Modeling, Ext		State FMP	\$ 367,356	
DM River Levee Improvement Phase I		State FMP	\$ 300,000	
TOTAL			\$ 18,239,702	\$ 16,144,936
City Financing Interest:	\$ 29,115,510			
		NA	\$ -	
			\$ -	
TOTAL			\$ -	\$ 29,115,510
WRA Financing Interest:	\$ 4,074,510			
		NA	\$ -	
			\$ -	
TOTAL			\$ -	\$ 4,074,510
Total Project Budget Summary	\$ 308,609,720		\$ 178,968,052	\$ 129,641,668
FUNDING SOURCE:	FEDERAL (from Application)	LOCAL (from Application)	STATE (from Application)	Total Expended to Date
CDBG	\$ 11,517,038			\$ 11,567,708
US Army Corp of Engineers	\$ 14,808,000			\$ 13,108,000
Federal DOT	\$ 2,849,000			\$ 2,849,000
Iowa DOT		\$ 726,071		\$ 726,071
I-Jobs		\$ 7,476,588		\$ 7,476,588
SRF- Clean Water	\$ 101,096,396			\$ 90,090,307
Local In-Kind Contribution		\$ 4,058,540		\$ 4,058,540
Local		\$ 54,977,814		\$ 47,461,808
Iowa Flood Mitigation Program			\$ 111,100,273	\$ 1,630,030
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Total Project Funding Source	\$ 130,270,434	\$ 67,239,013	\$ 111,100,273	\$ 178,968,052
Indebtedness Incurred (Bonds, etc.)	Rate of Interest	Length of Term (start & end)	Costs of Issuance	Net Proceeds
	0.00%		\$ -	\$ -
	0.00%		\$ -	\$ -
	0.00%		\$ -	\$ -
NON-PUBLIC INVESTMENT - Entity				Total to Date
				\$ -
				\$ -
				\$ -
Total Non-Public Investment				\$ -

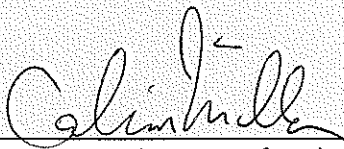
Project Status- entire project (Check One)	Description of significant activities this semi-annual term. Include comparison of actual accomplishments to the objectives identified in your application. Attach pictures and a narrative. Status changes or delays, please explain reason.
<input checked="" type="checkbox"/> On Schedule <input type="checkbox"/> Delayed <input type="checkbox"/> Canceled <input type="checkbox"/> Completed <input type="checkbox"/> Suspended	Please see attached.

Application Work Schedule (Milestones)			Milestone Status
#	Description:	Submitted Completion Date:	Actual Completion Date:
1	Phase 1	12/31/2015	7/1/2016
2	Phase 2	12/31/2016	
3	Phase 3	12/31/2019	
4	Phase 4	12/31/2024	
5			
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Person Completing this Report: Calvin Miller, Civil Engineer I

Date: 4/29/2016

I, the undersigned, hereby certify that the above information is accurate and true, and in accordance with the approved project plan and state and federal regulations and policies governing this award.


 Signature of Authorized Representative or Governmental Entity

Instructions to complete this form

Areas shaded are to be completed by State HSEMD Personnel.

Areas shaded are to be completed by the governmental entity or authorized administrator.

