SECTION 1: COVER PAGE	Instructions Help Files				
	21AH5312680	Release Date: 3/17/2021			
(1) Grant Number:		Export to XML			
(2) Recipient Program Year:	10/1 - 9/30	Import XML			
(3) Federal Fiscal Year:	2021				
V (4) IHBG-CARES/IHE	3G-ARP	apr_id			
(5) Initial Plan (Compl	ete this Section then proceed to Section 2)	or an Amended IHP			
(6) Annual Performan	ce Report (Complete items 27-30 and proce	eed to Section 3)			
(7) Tribe					
(8) TDHE					
(9) Name of Recipient:					
Puyallup Tribe of Indians					
(10) Contact Person:					
Bill Sterud					
(11) Telephone Number with	Area Code (999) 999-9999 :				
(253) 573-7800					
(12) Mailing Address:					
3009 East Portland Ave					
(13) City:	(14) State: (15)	Zip Code (99999 or 99999-9999):			
Tacoma	Washington	98404			
	ode (if available) (999) 999-9999 :				
(253) 680-5986					
(17) Email Address (if availal	ble):				
bill.sterud@puyalluptribe-nsn.gov					
(18) If TDHE, List Tribes Belo	ow:				
Puyallup Tribe of Indians Housir	ig Department				
(19) Tax Identification Numb	er:	91-0955402			
(20) DUNS Number:	146765938				
(21) CCR/SAM Expiration Da	(21) CCR/SAM Expiration Date (MM/DD/YYYY):				
(22) IHBG-CARES/ARP Amo	unt:	\$2,247,653			
Date Started Preparing for C	OVID-19	02/04/2020			
(23) Name of Authorized IHP	Joanne Gutierrez				

(24) Title of Authorized IHP Submitter:	Director
(25) Signature of Authorized IHP Submitter:	
(26) IHP Submission Date(MM/DD/YYYY) :	02/11/2022
(27) Name of Authorized APR Submitter:	Joanne Gutierrez
(28) Title of Authorized APR Submitter:	Housing Director
(29) Signature of Authorized APR Submitter:	
(30) APR Submission Date (MM/DD/YYYY):	03/16/2023

Certification: The information contained in this document is accurate and reflects the activities actually planned or accomplished during the program year. Activities planned and accomplished are eligible under applicable statutes and regulations.

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosure of information, including intentional disclosure, is subject to a civil money penalty not to exceed \$10,000 for each violation.

Section 3 - Navigation

Go	COVID-19 Prevention - 1 - PPE, cleaning, and supplies prevention of COVID-19
Go	COVID-19Respond - 1 - WallerRoad Site
Go	COVID-19Respond - 2 - Garden located behind Greatview site
Go	COVID-19Reimbursement - 1 - COVID related costs

APR: REPORTING ON PROGRAM YEAR PROGRESS

Complete the shaded section of text below to describe your completed program tasks and actual results. <u>Only report on</u> <u>activities completed during the 12-month program year</u>. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year. (NAHASDA § 404(b))

1.1. Program Name and Unique Identifier:	Unique Identifier	COVID-19 Prevention
COVID-19Prevention - 1 - PPE, clean	ing, and supplies prev	vention of COVID-19
1.2. Program Description (This program.):	should be the desc	cription of the planned
Funding for additional PPE, cleanin members of community	ng, and supplies for	prevention of COVID 19 for staff, clients, residents and
involving housing units as the output	it measure (excludi I housing in one ac	om the Eligible Activity list. For any activity ing operations and maintenance), do not ctivity, so that when housing units are meownership or rental.):
(26) Other COVID-19 Activities Authori	zed by Waivers or Al	ternateRequirements
		ne from the Outcome list. Each program e applies, create a separate program for
(12) Other – must provide description in	n boxes 1.4 (IHP) and	1.5 (APR) below
Describe Other Intended Outcom	e (Only if you seled	cted "Other" above):
Provide additional PPE, and supplies	for prevention of CO	VID 19 for staff, clients, residentsand members of community
1.5 Actual Outcome Number (In	n the APR identify th	he actual outcome from the Outcome list.):
(12)Other-must provide description i		
Describe Other Actual Outcome	(Only if you selecte	ed "Other" above.):
1.6 Who Will Be Assisted (Desc ∭Low-income Indian Households	cribe the types of ho	ouseholds that will be assisted under the program.): ndian HouseholdsNon-Indian Households
Low income Native American families	s in service area	
1.7. Types and Level of Assistand to each household, as applicable.):	e (Describe the t	types and the level of assistance that will be provided
		R in the 12-month program year. In accordance with planation of cost overruns or high unit costs.

1.9: Planned and Actual Outputs for 12-Month Program Year

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program		
	114			
APR: Actual Number of Units Completed	d APR: Actual	APR: Actual Number of Acres		
in Program Year	Number of	Purchased in Program Year		
	Households			
	Served in			
	Program Year			
	0			
1.10: APR: If the program is behind sch	hedule, explain why.	(24 CFR § 1000.512(b)(2))		

No additional supplies have been purchased due to COVID restrictions lifted within the tribe and housing department. the need to reaccess what precautions are needed to service our community, tenants, and workers for protecting against COVID 19 spread.

Add Program

Remove Program

2.1. Program Name and Unique Identifier:	Unique Identifier	COVID-19Respond

COVID-19Respond - 1 - WallerRoad Site

2.2. Program Description (*This should be the description of the planned*

program.):

Development and construction costs for Waller Road site. 6 ADA complexes with 2 1 or 2 bedroom units per complex for a total of 12 units, depending on funding and what is allowed with expansion of septic system and infrastructure to reduce over crowding and respond to COVID 19.

2.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(4) Construction of Rental Housing [202(2)]

2.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(1)Reduce over-crowding

Describe Other Intended Outcome (Only if you selected "Other" above):

2.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

(1)Reduce over-crowding

Describe Other Actual Outcome (Only if you selected "Other" above.):

2.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

Low-income Indian Households Non-low income Indian Households

☐Non-Indian Households

Low Income Indian households

2.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

2.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

2.9: Planned and Actual Outputs for 12-Month Program Year

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
12		
APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
0		
2.10: APR: If the program is behind sch	edule, explain why.	(24 CFR § 1000.512(b)(2))
further developing project, the A&E delayed council offices for approval. This project is m	contract signing and noving forward but d eing trained in policio	view of site, selection of A&Eservices to assist with d in the process of being routed through our tribal elayed to staffing and processing the documents esand procedures for tribe, HUD, and NAHASDA. prough the HUD ONAP offices.

Add Program Remove Program

3.1. Program Name and Unique Unique Identifier COVID-19Respond	2.1 Brogrom Name and Unique		
		Unique Identifier	COVID-19 Respond

COVID-19Respond - 2 - Garden located behind Greatview site

3.2. Program Description (*This should be the description of the planned*

program.):

Assist in further developing and construction of garden located behind Greatview site where residents can socially distance with safe and healthy activity near their residency of 27 units at Greatview and scattered sites to grow, plant, and gather indigenous plants and foods.

3.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or AlternateRequirements

3.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

Provide an outdoor space to grow, plant, and gather indigenous plants and foods in coordination with Greatview daycare, Tacomaschool district and other scattered housing sites located near Greatview 27 unit apartment site.

3.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Actual Outcome (Only if you selected "Other" above.):

3.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.): XLow-income Indian Households Non-low income Indian Households Non-Indian Households

Low Income Indian households

3.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

3.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

3.9: Planned and Actual Outputs for 12-Month Program Year

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
	27	
APR: Actual Number of Units Complete in Program Year	ed APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
	0	
3 10: APR: If the program is behind so	chedule explain why	(24 CFR § 1000 512(b)(2))

No MOU has been able to set up for further development of project due lack of meetings with the Tacoma Public School district since COVID-19. There have been no further meetings so the housing department will be following up on this issue to hopefully use these funds for its intentions if not reallocate funding. The workers at the site are still in the development phase of how the garden should be set up and how it should divide amongst the parties in MOU.

Add Program
Remove Program

4.1. Program Name and Unic Identifier:	Unique Identifier	COVID-19 Reimbursement			
COVID-19Reimbursement -1-COVID related costs					
4.2. Program Description program.):	(This should be the des	cription of the planned			

Incurred costs for a variety of COVID-19 related expenses for the period beginning February 4, 2020 and extending until expenses no longer needed to address COVID related issues. These costs were separately tracked in our accounting records and include the following:
A portion of normal operating expenses (primarily staff wages and fringe benefits).
Payroll expenses for staff required to shelter in place but provided with administrative leave.
Legal fees, etc...
Procurement of PPE and cleaning supplies for housing staff and operations.
iPad, equipment and cell phone purchases and related supplies for staff required to telework.
Payment for our web based program HDS Doorways
These expenses were paid for by Tribal funds. Federal funds (including program income and IHBG formula funds) were not used for these expenses.

4.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or AlternateRequirements

4.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

Recover COVID-19 related costs incurred from February 4th, 2020 to present

4.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Actual Outcome (Only if you selected "Other" above.):

4.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

Low-income Indian Households

Non-low income Indian Households

Non-Indian Households

Low Income Indian Households

4.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

Purchased equipment for all staff including IPhones, IPads, and Laptops to enable staff to telework and communicate with other tribal entities, staff and clients via phone call, text, Facetime, e-mail, or ZOOM. Purchased a larger mailbox and drop-box to allow social distance and safety for clients and staff to drop-off mail, packages, materials, and payments. Purchased more mail postage, envelopes, ink and supplies to do additional mail-out correspondence due to the increased need to communicate through mail. Reimbursed cost for staff to self-quarantine for a period of time, if needed, due to first-hand exposure. Reimbursed cost for staff to be at home and work on a flex schedule or permanently on a telework schedule due to minors in household not attending school in person but through ZOOM. Arranged to purchase the web-based program, "Housing DataSystem (HDS)" to allow staff to telework and better

service clients final stages of transition to this program are being done to start web access program. Access to PPE through Tribe and purchased when available.Extra garbage collection cans purchased due to more clientsstaying home due to quarantine and lock down periods.

4.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

4.9: Planned and Actual Outputs for 12-Month Program Year Planned Number Planned Number of Acres To Be Planned Number of Units to be of Households Completed in Year Under this Program Purchased in Year Under this Program To Be Served in Year Under this Program 114 APR: Actual Number of Units Completed APR: Actual APR: Actual Number of Acres in Program Year Purchased in Program Year Number of Households Served in **Program Year** 0 4.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2)) No funds have been used out of this funding for any of these purchases due to no need to access for COVID related costs. A majority of these purchases were made with first round of COVID funding.

Add Program Remove Program

SECTION 5: BUDGETS

NAHASDA §§ 102(b)(2)(C), 404(b)

(1) Sources of Funding (NAHASDA § 102(b)(2)(C)(i), (404(b)) (Complete the <u>non-shaded</u> portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month program year. APR Actual Sources of Funding -- Please complete the shaded portions of the chart below to describe your actual funds received. Only report on funds actually received and under a grant agreement or other binding commitment during the 12-month program year.)

		IHP				APR					
SOURCE	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(L)	(K)
	Estimated	Estimated	Estimated	Estimated	Estimated	Actual	Actual	Actual total	Actual funds	Actual	Actual
	amount on	amount to	total sources	funds to be	unexpended	amount on	amount	sources of	expended	unexpended	unexpended
	hand at	be received	of funds	expended	funds	hand at	received	funding	during 12-	funds	funds
	beginning of	during 12-	(A+B)	during 12-	remaining at	beginning of	during 12-	(F+G)	month	remaining at	obligated but
	program	month		month	end of	program	month		program	end of 12-	not expended
	year	program		program	program	year	program		year	month	at end of 12-
		year		year	year (C-D)		year			program year	month
										(H - I)	program year
IHBG-CARES/ARP Funds	\$ 0	\$2,247,653	\$2,247,653	\$2,247,653	\$0	\$0	\$2,247,653	\$2,247,653	\$0	\$2,247,653	\$0

TOTAL	\$0	\$2,247,653	\$2,247,653	\$2,247,653	\$0	\$0	\$2,247,653	\$2,247,653	\$0	\$2,247,653	\$0
TOTAL Columns C & H, 2 through 10			\$0					\$0			

Notes:

a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). For the APR, fill in columns F, G, H, I, J, and K (shaded columns).

b. Total of Column D should match the total of Column N from the Uses of Funding table below.

c. Total of Column I should match the Total of Column Q from the Uses of Funding table below.

d. For the IHP, describe any estimated leverage in Line 3 below (Estimated Sources or Uses of Funding). For the APR, describe actual leverage in Line 4 below.

(2) Uses of Funding (NAHASDA § 102(b)(2)(C)(ii)) (Note that the budget should not exceed the total funds on hand (Column C) and insert as many rows as needed to include all the programs identified in Section 3. Actual expenditures in the APR section are for the 12-month program) year

		IHP			APR	
PROGRAM NAME	(L) Prior and current year IHBG CARES/ARP (only) funds to be expended in 12- month program year	(M) Total all other funds to be expended in 12- month program year	(N) Total funds to be expended in 12-month program year (L+M)	(L) Total IHBG CARES/ARP (only) funds expended in 12-month program year	(P) Total all other funds expended in 12-month program year	(Q) Total funds expended in 12- month program year (O+P)
COVID-19 Prevention - 1 - PPE, cleaning, and supplies prevention of COVID-19	\$19,653		\$19,653	\$0		\$0
COVID-19 Respond - 1 - Waller Road Site	\$2,000,000		\$2,000,000	\$0		\$C
COVID-19 Respond - 2 - Garden located behind Greatview site	\$18,000		\$18,000	\$0		\$C

COVID-19 Reimbursement - 1 - COVID related costs	\$40,000		\$40,000	\$0		\$0
Planning and Administration	\$170,000		\$170,000	\$0		\$C
TOTAL	\$2,247,653	\$0	\$2,247,653	\$0	\$0	\$0

Notes:

- **a.** Total of Column L cannot exceed the IHBG funds from Column C, Row 1 from the Sources of Funding table in Line 1 above.
- **b.** Total of Column M cannot exceed the total from Column C, Rows 2-10 from the Sources of Funding table in Line 1 above.
- c. Total of Column O cannot exceed total IHBG funds received in Column H, Row 1 from the Sources of Funding table in Line 1 above.
- d. Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources of Funding table in Line 1 above.
- e. Total of Column Q should equal total of Column I of the Sources of Funding table in Line 1 above.

(3) Estimated Sources or Uses of Funding (NAHASDA § 102(b)(2)(C)). (Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses of Funding table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):

(4) APR (NAHASDA § 404(b)) (Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses of Funding table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):

SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE

NAHASDA § 102(b)(2)(D)

By signing the IHP, the recipient certifies its compliance with Title II of the Civil Rights Act of 1968 (25 USC Part 1301 et seq.), and ensures that the recipient has all appropriate policies and procedures in place to operate its planned programs. The recipient should not assert that it has the appropriate policies and procedures in place if these documents do not exist in its files, as this will be one of the items verified during any HUD monitoring review.

(1) In accordance with applicable statutes, the recipient certifies that:

It will comply with Title II of the Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, and other applicable federal statutes.

(2) In accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that:

There are households within its jurisdiction at or below 80 percent of median income.



(3) The following certifications will only apply where applicable based on program activities.

a. It will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD;



b. Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA;



c. Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA; and



d. Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA.



SECTION 8: IHP TRIBAL CERTIFICATION

NAHASDA § 102(c)

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP or IHP amendment on behalf of a tribe.

This certification must be executed by the recognized tribal government covered under the IHP.

(1) The recognized tribal government of the grant beneficiary certifies that:

(2) vill had an opportunity to review the IHP or IHP amendment and has authorized the submission of the IHP by the TDHE; or

(3) It has delegated to such TDHE the authority to submit an IHP or IHP amendment on behalf of the Tribe without prior review by the Tribe.

(4) Tribe:	Puyallup Tribe of Indians
(5) Authorized Official's Name and Title:	Bill Sterud, Puyallup Tribe of Indians, Council Chairman
(6) Authorized Official's Signature:	
(7) Date (MM/DD/YYYY):	

By signing the IHP, you certify whether you will use tribally determined wages, Davis-Bacon wages, or HUD determined wages. Check only the applicable box below.

(1) You will use tribally determined wage rates when required for IHBG-assisted construction or maintenance activities. The Tribe has appropriate laws and regulations in place in order for it to determine and distribute prevailing wages.

(2) You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.

(3) You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities described below.

(4) If you checked the box in Line 3, list the other activities that will be using tribally determined wage rates:

SECTION 12: AUDITS

24 CFR § 1000.544

This section is used to indicate whether a financial audit based on the Single Audit Act and 2 CFR Part 200 Subpart F is required, based on a review of your financial records.

Did you expend \$750,000 or more in total Federal awards during the APR reporting period?



If Yes, an audit is required to be submitted to the Federal Audit Clearinghouse and your Area Office of Native American Programs.

If No, an audit is not required.



Section 3.2 - Program Description

The program description summarizes each program that will be funded with IHBG resources during the 12-month program year. At a minimum, the recipient must describe what specific type of projects will be developed under the planned program. • In writing the program description, the recipient should determine how it wants to describe the planned activities that will benefit eligible families.

For example, assume that the recipient has chosen the eligible activity of "Tenant Based Rental Assistance" and an intended outcome that will "Assist Affordable Housing for College Students." The program description might then highlight that the recipient's program is designed to assist college-bound, eligible Native Americans to pay their rent while attending any university in the state. It might highlight that this program is designed to assist tribal members who wish to become certified teachers or medical professionals, because these professions are needed within the tribal community. The section might also state that the assistance is to be used to pay rent in private-market rental units in the areassurrounding the educational institution. The description might go on to say that the purpose of the program is to enable low-income tribal members to better afford higher education in professional fields that are important to the tribe's continued well-being.

• If a recipient intends to provide housing assistance to families whose incomes fall within 80 to 100 percent of the median income, this planned activity should be included asaseparate program.

• If a recipient wants to track two types of outcomes for a program it must identify each program separately. For example a recipient may have a program description of Tenant Based Rental Assistance for both College Housing Students and other Rental Assistance. If the recipient wants to track outcome (6) Assist affordable housing for low income households and outcome (8) Assist affordable housing for college students, it must have two programs for Tenant Based Rental Housing.

• If a recipient chooses to establish and maintain a Reserve Account for planning and administrative expenses, the recipient should include a program for this eligible activity in itsannual IHP. The program description should identify the actual amount of fundsset aside to establish or maintain the Reserve Account. The recipient must also ensure that the maximum amount of reserves, whether in one or more accounts, that a recipient may have available at any one time is calculated in accordance with 24 CFR§ 1000.239 and Program Guidance 2014-10R (Reserve Accounts for Administration and Planning). In Line 1.2, the recipient must describe how it determined the allowable reserve amount. NOTE: Planned or actual expenditures from a Reserve Account should be included in the allowable spending cap for planning and administrative expenses.

The One-Year Plan program descriptions should include any program that will receive IHBG resources during the upcoming 12month program year, even if some of the program tasks will take longer than 12 months to complete. • For example, assume the recipient is going to run a program that will construct 20 new rental units. However, during the coming program year the recipient will only acquire the land and develop the plans and specifications. • Even though the units will not be completed during the 12-month program year, the program must still be described in the IHP, and the IHP must still be determined to be compliant by HUD before the recipient can spend IHBG funds on these tasks.

In many cases, the recipient may be funding programs on an on-going basis year after year.

• For example, some recipients have an on-going program to modernize their 1937 Act rental units. In these instances, the activity should be listed in each One-Year Plan over the entire period of the program.

• In some cases, the program will stay the same year to year. The recipient can copy the program/activity description from one IHP to the next year's IHP.

• However, the recipient should be careful to update the budget (Section 5) and planned outputs table (Line 1.9) to reflect the actual volume of work anticipated in the coming program year.



Section 3.3 - Eligible Activity Number

Select one activity from the Eligible Activities list for each identified program. Select the eligible activity that best fits the program. Otherwise, the recipient may wish to establish separate programs or change the eligible activity in asubsequent year. For example: a housing construction program could be done in a phased approach and each phase would be aseparate program. Land acquisition and site preparation could a program and the project's housing construction could be another program. This approach makes it easier to plan and track a complex, multi-year project such as housing construction. Write the eligible activity number in the space provided and then write the text of the eligible activity in the space next to the number.

Eligible Activity Number: (4) Construction of Rental Housing

Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR the units are correctly identified as homeownership or rental. Combining homeownership and rental will cause the APR to be incorrect. However, for Eligible Activities 2 and 20 (Operations and Maintenance activities), include both homeownership and rental units in one program activity.)

Each of the eligible activities has a specific, measurable output. These output measures include the number of housing units constructed, rehabilitated, or acquired; number of acres of land purchased for the development of rental or homeownership units; number of householdsserved with variousservices and assistance; and the number of dollarsspent on crime prevention and safety, Model Activities, and infrastructure (roads, water/sewer, and utilities) to support housing.

Eligible activities and associated output measures may include those listed below. (Citations reference sections in NAHASDA):

Eligible Activity - Output Measure

(1) Modernization of 1937 Act Housing [202(1)] - Units (2) Operation of 1937 Act Housing [202(1)] - Units (3) Acquisition of Rental Housing [202(2)] - Units (4) Construction of Rental Housing [202(2)]- Units (5)Rehabilitation of Rental Housing [202(2)] - Units (6) Acquisition of Land for Rental Housing Development [202(2)] - Acres (7) Development of Emergency Shelters [202(2)] - Households (8) Conversion of Other Structures to Affordable Housing [202(2)] - Units (9) Other Rental Housing Development [202(2)] - Units (10) Acquisition of Land for Homebuyer Unit Development [202(2)] - Acres (11) New Construction of Homebuyer Units [202(2)] - Units (12) Acquisition of Homebuyer Units [202(2)] - Units (13) Down Payment/Closing Cost Assistance [202(2)] - Units (14) Lending Subsidies for Homebuyers (Loan) [202(2)] - Units (15) Other Homebuyer Assistance Activities [202(2)] - Units (16) Rehabilitation Assistance to Existing Homeowners [202(2)] - Units (17) Tenant Based Rental Assistance [202(3)] - Households (18) Other Housing Services [202(3)] - Households (19) Housing Management Services [202(4)] - Households (20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)] - Units (21) Crime Prevention and Safety [202(5)] - Dollars (22) Model Activities [202(6)] - Dollars (23) Expired, No longer available. - N/A (24) Infrastructure to Support Housing [202(2)] - Dollars

(25)Reserve Accounts [202(9)] N/A



Section 3.4 - Intended Outcome Number

Intended Outcome Number. Intended outcomesare the impacts that the recipient hopes to achieve through the implementation of the activities described in the IHP. There are 11 common outcomesand one 'other' outcome listed in the IHP/ APR form. Intended outcomes may include those listed below. This line is not applicable to aReserve Account.

(1) Reduce over-crowding (7) Create new affordable rental units

- (2) Assist renters to become homeowners (8) Assist affordable housing for college students
- (3) Improve quality of substandard units (9) Provide accessibility for disabled/elderly persons
- (4) Improve quality of existing infrastructure (10) Improve energy efficiency
- (5) Address homelessness (11)Reduction in crime reports
- (6) Assist affordable housing for low income households (12) Other must provide description in Line 1.4 (IHP) and Line 1.5 (APR)

Write the intended outcome number(s) in Line 1.4 and then write the text of the intended outcomes in the space next to the number. For example:

Intended Outcome Number: (2) Assist renters to become homeowners

Choose the intended outcome that most closely corresponds with the program description in Line 2. Another option for this line would be to choose one of the "other" activity categories listed in Line 1.3 (Activity Numbers 9, 15, or 18) and use it to describe an intended outcome as described below. If the recipient isstill unsure about how to categorize/describe an outcome for a program the recipient wishes to fund, the recipient should contact the Area ONAP for guidance. If a program meets more than one intended outcome, select the outcome that best matches the program type. An example for describing an intended outcome for an "other" activity category isshown below.

Intended outcome(s) Number: (18) Other Housing Services The intended outcome of this program is to provide self-sufficiency classes for residents of affordable housing projects.

If the intended outcome is categorized as "(12) Other," describe the nature of the outcome in ways that distinguish it from the intended outcomes in the list. In providing the explanation, it may become clear that the "Other" outcome actually fits one of the listed outcomes.

All activities that will use IHBG funds must be eligible under the statute and regulations. The recipient should ensure that any planned "other" intended outcomesare eligible under NAHASDA if it intends to fund them with IHBG resources. If the recipient is unsure about the eligibility of an activity, contact your Area ONAP. It may be necessary to propose a model activity for HUD review and approval.

Section 3.8 - APR

APR. Describe what the recipient wasable to accomplish during the past 12-month period as result of expending IHBG resources. If the recipient wishes to report on programs funded by other sources, it may do so. As noted above, programs that are partially funded by IHBG resources must be planned and reported. The recipient should be specific enough about the actual tasks and accomplishments so that the HUD reviewer can understand how IHBG resources were spent.

• For example, the recipient might report that it wasable to complete all its IHP activities because it constructed 10 new homes using IHBG fundsand all passed final inspection, rehabilitated 3 homes using IHBG program income, and/or completed the planning phase of a 13-unit subdivision using a Title VI loan.

• Another example might be that the recipient reports it wasable to initiate a housing rehabilitation program by completing the installation of new roofs on all identified units; however, it was unable to complete interior renovations on the units because of unanticipated plumbing repairs. Therefore, the recipient could not complete its rehabilitation program.

If the recipient established a Reserve Account during the reporting period, it must be described as an accomplishment. Also, any expenditures from the Reserve Account during the reporting period must be described as an accomplishment.

Provide an analysisand explanation of cost overruns or high unit costs, in accordance with 24CFR1000.512(b)(3). HUD publishes total development costs periodically. For current and prior total development cost limits, visit: http://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/ih/regs/notices. Specifically, NoticesPIH 2014-16 and 2010-47 provide, respectively, the current cost limits and additional information about total development costs.



Section 3.9 - Planned and Actual Outputs

Planned and Actual Outputs for 12-Month Program Year. The table starting on the following page identifies the basis for which an output is considered completed and can be counted. Refer to this table when estimating the planned number of outputs and reporting on the actual number of outputs for each activity. On the IHPside of Line 1.9, the recipient must estimate the number of IHBG-assisted units to be completed, households to be served, and/or acres to be purchased for IHBG-assisted housing development for each planned activity during the upcoming 12-month program year.

NOTE: If the planned output is dollarsspent (i.e., Crime Prevention and Safety, Model Activities, or Infrastructure to Support Housing), skip Line 1.9 and enter these planned expenditures in Column L and Column M, if applicable, of the Uses of Funding Table in Section 5.

• In completing thissection of the IHP for activities related to unit construction, rehabilitation, or acquisition, the recipient should estimate the number IHBG-assisted units that will be completed during upcoming the 12-month program year. If the recipient estimates that the construction/rehab/acquisition will be started in the coming 12 months but will be completed in a future program year, that unit should not be listed on Line 1.9 (Planned and Actual Outputs for the 12-Month Program Year).

• The recipient should enter the number of IHBG-assisted units ONLY. When estimating the number of IHBG-assisted units to be completed, identify whole units only. For example, if a project includes 5 units and half the project is IHBG-assisted, the number of IHBG-assisted units would be 3 rather than 2.5.

• For assistance to households, the recipient should estimate the total number of households that will be assisted by that particular activity during the upcoming12-month program year. In some cases, these households may also be assisted by other programs offered by the recipient and listed in the IHP. Each program should be counted separately and the recipient is not required to deduct the number of households assisted under more than one program.

• This line is not applicable to a Reserve Account.

On the APRside of Line 1.9, enter the actual number of IHBG-assisted units completed, householdsassisted, and/or acres purchased for IHBG-assisted housing development during the 12-month program year. Use the same guidelines described in the bulleted itemsabove when defining the actual number of outputs. NOTE: If the actual output is dollarsspent (i.e., Crime Prevention and Safety, Model Activities, Self-Determination Program, or Infrastructure to Support Housing), skip Line 1.9 and enter these actual expenditures in Column O and Column P, if applicable, of the Uses of Funding Table in Section 5. Accuracy in reporting actual outputs is very important. If there are any questions, please contact your Area ONAP for assistance. For the IHP and APR, rely on the table below to determine how and when to count outputs of eligible activities. The first column lists all eligible activities, the second column identifies the output measure for each eligible activity, and the third column identifies when to consider an output as completed for each eligible activity.



Section 5(1) - IHP

Return

Sources of Funding. For the IHP, this table identifies the estimated or anticipated sources of funding for the upcoming 12-month program year. The table is intended to cover all of the funds to be expended on IHBG-assisted activities during the One-Year Plan period. As noted above, the recipient is not required to list other sources of leveraged funds (Rows 7-10) unless those funds will be combined with IHBG in a project.

The Sources of Funding table must include the amounts of private loans or tribal loans that will be used for NAHASDA-eligible activities, which will later be reimbursed with IHBG funds. For example, assume that a tribe lends \$100,000 for the acquisition of land that will be used to develop affordable housing for low-income Native American families. At a later time, the recipient will use its IHBG grant to repay this loan. The \$100,000 of assistance must be listed asasource of funds in the chart as "non-federal funds." The recipient is cautioned that all such transactions must follow all applicable NAHASDA and other federal rules, such as environmental review, labor standards, relocation/acquisition, etc.

For the IHP, fill Columns A, B, C, D, and E, as described below.

Column A (Estimated Amount on Hand at Beginning of Program Year): This column should show the amount of fundsalready sitting in an account for the recipient (whether at U.S. Treasury, in a local investment account, or cash on hand). This includesall "carry over" IHBG funds from previous years. The recipient is required to include all sources that will be used to leverage projects or programs with IHBG resources. In addition, the recipient is required to include program income, 1937 Act program funds that remain with the TDHE or tribe and have not yet been spent, as well as remaining 1937 Act reserves, both of which must be used for eligible affordable housing activities. The types of leveraged non-IHBG funds include:

• "ICDBG," the Indian Community Development Block Grant is a competitive grant program available to tribes and administered by HUD;

• "Other Federal Program Funds" might include funds from the U.S. Department of Agriculture, Indian Health Service, Bureau of Indian Affairs or any other federal agency;

• "LIHTC," the Low Income Housing Tax Credit isan IRS program that works through state agencies and provides developers with tax credits in return for funding affordable housing; and

• "Non-Federal Funds" could be any other type of funds that will be used for projects or programs in combination with IHBG resources, including tribal contributions, tribal loans, private funds, non-program income, or assistance from nonprofits.

• Note: Estimated, expected leveraged funding must be described in Line 3.

Column B (Estimated Amount to be Received During 12-Month Program Year): This column should show the new funding to be received, including the total of the new IHBG grant for the FFY and any funds that are expected to be received at any point during the 12 months (including program income), if those funds are associated with a program or activity outlined in the plan.

Column C (Estimated Total Sources of Funds): This column should show the sum of the funds on hand from Column A and the new funds received from Column B.

Column D (Estimated Funds to be Expended During 12-Month Program Year): This column should show the amount of funds from Column C that the recipient anticipates expending during the upcoming 12-month program year. The amount in Column D must never exceed the amount in Column C. The amount in Column D should be directly related to the 12-month activities listed in the One-Year Plan. Note: The total for Column D should match the total of Column N in Line 2 (Uses of Funding table).

Column E (Estimated Unexpended FundsRemaining at theEnd of the Program Year): This column should show the amount of funds that the recipient anticipates will be left over at the end of the 12-month program year. The calculation is based on the amount of available fundsand the amount budgeted to be spent, or the amount in Column C minus the amount in Column D.

With HUD approval, the recipient is permitted to draw down IHBG funds and invest those funds for a maximum five-year period in asecure, approved type of investment. (For additional information, see Notice PIH 2010-33, extended by Notice PIH 2011-43.) The Estimated Sources of Funding table does not have aseparate row for IHBG investments as a source of funds. For the purposes of the IHP, invested IHBG funds are treated exactly the same as if the IHBG funds were in the recipient's LOCCS account.

Hypothetical Example: Assume that a recipient has \$200,000 of IHBG funds currently in an investment account, it hasanother \$250,000 of existing IHBG assistance in its LOCCSaccount at HUD and it anticipates receiving another \$800,000 in IHBG grant funds during the year. It intends to expend \$100,000 of the existing investments in the next program year and it will invest another \$300,000 during the program year. In total, the recipient plans to expend \$700,000 on eligible affordable housing activities during its program year, of which \$100,000 will come from the investment account and \$600,000 will come from its LOCCSaccount.

• The decision to invest an additional \$300,000 of IHBG funds would have no effect on Column A. The estimated amount of IHBG on hand at the beginning of the year would be \$450,000 (\$250,000 in LOCCS and \$200,000 in investments), regardless of whether these funds are in LOCCS, or in an approved investment.

The amount of funds expected to be received during the program year at Column B,Row 1 would be the \$800,000 in new IHBG grants. Any interest anticipated or actually earned on the investments during the program year would be reported on theRow 2 for "IHBGProgram Income."
Thus, the estimated total sources of IHBG fundsat Column C would be \$1,250,000 (\$800,000 plus \$450,000).

• In Column D the recipient would indicate the \$700,000 IHBG funds it intends to expend on eligible activities during the program year, regardless of whether the funds are drawn from LOCCS or from an investment account.

• In this example, the IHBG carryover would be \$550,000 (\$1,250,000 - \$700,000). Of thisamount, the recipient would know that \$400,000 is in an investment account (\$200,000 originally invested, minus \$100,000 of investments withdrawn, plus \$300,000 of new investments) and \$150,000 will remain in its LOCCS account (\$1,250,000 total available, minus \$700,000 expended, minus \$400,000 in investments), but this would not be separately listed in the Sources of Funding table. In Column E, if the recipient plans to leave funds in an approved investment and plans that those funds will remain at the end of the program year, or if the recipient plans to add new investments during the year, then those would be indicated together with the other IHBG fundsasa part of the estimated unexpended funds, in Column E.

• Regardless of the decisions regarding investments, the recipient's IHP must clearly indicate how the \$700,000 will be used during the upcoming 12month program year.



Sources of Funding. For the APR, the recipient reports on the actual sources of funding received and expended during the program year. Fill Columns F, G, H, I, J, and K.

NOTE: Funds used for Title VI loan repayments should not be included in the Sources of Funding table; rather, Title VI loan repayments should be shown on the Loan Repayment line in the Uses of Funding table.

Column F(Actual Amount on Hand at Beginning of Program Year): This column should show the amount of fundsactually onhand at the beginning of the program year covered by the APR. Examples of "funds on hand" would be funds undisbursed from the recipient's LOCCS account, funds that are in the recipient's bank account, or any funds that are available to the recipient that have not yet been expended. In addition, "funds on hand" includes any IHBG amounts invested pursuant to 24 CFR1000.58.

Column G(Actual Amount Received During 12-Month Program Year): This column should show the funds that were actually received under a grant agreement or other firm commitment during the previous 12-month program year. The recipient must report on any funds received that were used in conjunction with IHBG resources. Describe actual leveraged funding received in Line 4.

Note that the IHBG program income wasan estimate in the IHP; for the APRit should be an accurate accounting of the entire amount of program income received in the previous 12-month program year. Thus, the recipient must track the receipt and expenditure of program income throughout the year so that it can provide an accurate accounting of the total amount received in Row 2. It is not sufficient to only report on the program income "on hand" at the end of the program year. Rather, the recipient must account for all program income earned throughout the year, including that program income that hasalready been disbursed for an activity.

Column H (Actual Total Sources of Funding): This column should show the total amount of actual funding available during the previous 12-month program year or the sum of Columns Fand G.

Column I (Actual FundsExpended During 12-Month Program Year): This column should show the actual funds expended during the previous 12-month program year. The amount should include any funds actually drawn down from LOCCS or other accounts, but not commitments or obligations for which funds have not yet been spent. Do not include IHBG deposits to HUD-approved investment accounts. Note: The total of Column I should match the total of Column Q in Line 2 (Uses of Funding table)

Column J(Actual Unexpended FundsRemaining at theEnd of the Program Year): This column should show the amount of unspent funds based on the amount of fundsactually available less the amount spent during the program year, or the amount in Column H minus the amount in Column I.

Column K(Actual Unexpended Funds Obligated but not Expended at End of 12-Month Program Year): This column should show the amount of funds that have been obligated by the recipient through asigned contract or other legally binding agreement but have not yet been expended in the previous 12-month program year. For a definition of fund obligation, see Notice PIH 2000-26 (TDHEs) at http://www.hud.gov/offices/pih/publications/notices/00/pih2000-26.pdf. This notice provides recipients with guidance regarding what constitutes obligation of grant funds. NOTE:Effective January 2, 2013, the IHBG regulations no longer include the two-year, 90 percent fund obligation requirement. However, the recipient must continue to report in Column K the amount of funds that have been obligated but not expended.

NOTE: Funds used for Title VI loan repayments should not be included in the Sources of Funding table; rather, Title VI loan repayments should be shown on the Loan Repayment line in the Uses of Funding tab



Return

Uses of Funding. For the IHP, this table shows how the anticipated fundsare planned to be used during the upcoming 12month program year. The table is organized by the programs identified by the recipient in Section 3. Each intended program name and unique identifier from Section 3, Line 1.1 should appear as a row on this table. For the IHP, enter each program name and associated unique identifier (Line 1.1.) from Section 3 (Program Descriptions) and fill Columns L, M, and N, as described below.

• It is not acceptable to show a use of funds that does not correspond to a planned one-year program.

• If the Area ONAP cannot readily tie a planned use of funds to astated one-year program, HUD will notify the recipient that the IHP must be revised prior to a determination that the IHP is in compliance with NAHASDA.

• For the purposes of the Uses of Funding table, IHBG (only) refers to the grant amount. Any IHBG program income, Title VI funds, or Title VI program income should be included with "All Other Funds" in Column M.

•See Section 6, Line 4 for information on calculating planning and administrative expenses.

If the recipient plans to use some of its IHBG funds during the upcoming 12-month program year to repay an existing Title VI loan or a private loan, then that planned repayment must be listed on the Loan Repayment row at the bottom of the Uses of Funding table. If the recipient lists a loan repayment, it must describe at Line 3 the associated loan and the eligible activity the loan repayment supports. The recipient must ensure that all IHBG and other federal requirements were followed at the time that the project was initially funded. The recipient should not repay any loan with IHBG resources if the program was not previously listed in an IHP that HUD determined to be in compliance with NAHASDA.

Column L (Prior and Current Year IHBG (Only)Funds to beExpended in 12-Month Program Year): This column should show the cumulative, previous FFY allocations of IHBG funds plus the current year IHBG funds that are dedicated to the planned activities. The total in Column L must not exceed the IHBG funds from Columns A and B, Row 1 in Line 2 (Estimated Sources of Funding table). The recipient's planning and administrative expenses cannot exceed the planning and administrative spending cap without HUD approval.

Column M (Total All Other Funds to be Expended in the 12-Month Program Year): This column should show the planned expenditure of other, non-IHBG funds during the upcoming 12-month period. The total of Column M must not exceed the total from Column C, Rows 2-10 in Line 1 (Sources of Funding table).

Column N (Total Funds to be Expended in 12-Month Program Year): This column should show the sum of the IHBG-budgeted expenditures and the non-IHBG budgeted expenditures over the upcoming 12-month program year, or Column L plus Column M. The total of Column N should equal the total of Column D in Line 1 (Sources of Funding table).



Return

Uses of Funding. For the APR, the recipient reports on the actual expenditures during the program year by program. This section should only include actual funds expended, not commitments or planned draws. It would not include amounts drawn down and placed in investments.

If the recipient is showing actual expenditures for a program or eligible activity that was not included in the IHP found in compliance by HUD, it must submit an amended IHP before the APR can be accepted.

For the APR, the recipient will report on the actual uses of funding received during the previous 12-month program year. Fill Columns O, P, and Q. NOTE: For the purposes of the Uses of Funding table, IHBG (only) refers to the grant amount. Any IHBG program income, Title VI funds, or Title VI program income should be included with "All Other Funds" in Column P.

Column O (Total IHBG (Only) FundsExpended in 12-Month Program Year): This column should show the IHBG funds that were expended in the previous 12-month program year. If the recipient borrowed and repaid a loan or a portion of a loan in the same year using IHBG funds, show the repayment of the principal amount in the IHBG program line in the Uses of Funding table and report loan interest payments and loan expenses in the Loan Repayment line in the Uses of Funding table.

The Administrative and Planning spending cap must be based either on the actual expenditures incurred during the 12-month period or the actual grant award amount, and not on the amount shown in the IHP. These expenditures should be reported on the Planning and Administration row.

The total amount of IHBG funds expended cannot exceed the total amount in Column H,Row 1 of Line 1 (Sources of Funding table).

Column P(Total All Other FundsExpended in 12-Month Program Year): This column should show all other funds that were expended in the previous 12-month program year. Other funds include any program income, Title VI, and all non-IHBG funds used to leverage IHBG projects, such as any LIHTC or ICDBG funds in an IHBG-funded project. The total of Column Pcannot exceed the total of Column H, Rows 2-10 in Line 1 (Sources of Funding table).

Column Q (Total FundsExpended in 12-Month Program Year): This column should show the total funds expended during the previous 12-month program year. It is the sum of Column O and Column P. The total for Column Qshould equal the total of Column I in Line 1 (Sources of Funding table).



Return

Useful Life/Affordability Period(s). Sections 205(a)(2) and 209 of NAHASDA and 24 CFR§ 1000.142 require that housing units that are assisted with IHBG resources remain affordable to low-income families over a period known as the "useful life" of the unit. Each recipient must determine the useful life timeframe for the units that will be assisted with IHBG resources during the One-Year Plan period. The useful life provisions apply to all housing unitsassisted with IHBG resources except for Mutual Help homes developed under the U.S. Housing Act of 1937 (see 24 CFR§ 1000.145). See Recipient Guidance 2013-06(R) for further information on useful life and binding commitments.

New construction or acquisition of newly constructed housing ... 20 years

The dollar rangesand/or the corresponding number of years may differ from those shown above depending upon local conditions. The recipient may choose to assign a longer affordability period in order to ensure the availability of a larger continuing affordable housing supply for low-income families.

If the recipient chooses to use some other method of assigning the affordability period, the IHPshould describe how the method provides for an affordability period with appropriate consideration given to any unique local conditions. In setting a useful life, a specific number of years should be given for the affordability period, not a range of years (e.g., 30 to 40 years) or a general statement. The designated affordability period should in no way be contingent upon the continuation of IHBG resources.

A description of the recipient's plan or system for determining the useful life of the housing it assists with IHBG resources must be provided in the IHP. A record of the current, specific useful life for HUD-assisted housing units bould be maintained in the recipient's files and available for review.



Model Housing and Over-Income Activities. A Model Activity is one that is related to affordable housing, but is not specifically described as eligible in NAHASDA. (See NAHASDASection 202(6), and 24 CFR§ 1000.108.) Line 2 is only applicable if the recipient intends to fund a Model Activity or if it wishes to serve Native American households whose incomes exceed 100 percent of the median income or anticipates expending more than 10 percent of its IHBG to serve families whose incomes fall between 80 percent and 100 percent of the median.

The recipient must get HUD approval if it wants to serve householdsabove 100 percent of median or if it wants to spend more than 10 percent of its IHBG funds to assist householdsat between 80 percent and 100 percent of median income.

If the recipient wishes to implement a Model Activity under Section 202(6) of NAHASDA, or if it wishes to serve non-low-income households (as identified in Section 201(b) of NAHASDA and 24 CFR§ 1000.108), those activities may be described in Line 2 or as aseparate submission. If the recipient has not already included a completed Section 3 with the Model Activity request the recipient must complete the IHP portions of Section 3 (Program Descriptions) for each approved Model Activity by submitting an IHP amendment. The amended IHP, including the approved model activity, must be used when submitting the APR.

Any proposed Model Activity must be approved by HUD before incurring any expenses and beginning any work on that activity. • For more information on Model Activities, refer to Recipient Guidance 2013-09 at http://portal.hud.gov/hudportal/HUD?src=/ program_offices/public_indian_housing/ih/codetalk/nahasda/guidance

• For additional information on assisting non-low-income households, refer to PIH Notice 2014-02 at: http://portal.hud.gov/ hudportal/HUD?src=/program_offices/public_indian_housing/ih/regs/notices



Section 6(4) - Anticipated Planning and Admin Expenses Return

NAHASDASection 102(b)(2)(C)(ii) and 24 CFR § 1000.238 specify spending caps for administrative and planning expenses, as shown below. HUD will publish an upcoming guidance that will provide further information on spending caps. See PIH Notice 2002-29 for further information on IHBG administrative and planning expenses requirements.

HUD recommends that a recipient consistently apply either the annual grant amount or annual expenditure amount in calculating the spending cap. A recipient may request HUD approval to exceed the 20 or 30 percent spending cap.

Recipients that receive in excess of \$500,000 may use up to 20 percent of the annual expenditures of grant funds or up to 20 percent of the annual grant amount, whichever is greater. The 20 percent cap also would apply to a recipient that receives IHBG funds on behalf of one or more beneficiaries if each beneficiary qualifies for the 20 percent spending cap.

Recipients that receive or expend \$500,000 or less may use up to 30 percent of the annual expenditures of grant funds or up to 30 percent of the annual grant amount, whichever is greater. The 30 percent cap also would apply to a recipient that receives IHBG funds on behalf of one or more beneficiaries if each beneficiary qualifies for the 30 percent spending cap.

If a recipient receives IHBG funds on behalf of one or more beneficiaries and there is a blend of spending cap maximum samong the beneficiaries, the recipient must describe if the estimated spending cap was based on a flat percentage or, if the percentage was higher for some beneficiary allocations than for others. If a different percentage was applied to each beneficiary, identify the percentage applied to each beneficiary allocation.

If the recipient applies the same percentage cap to all its beneficiary grant allocations, the recipient should state the grant amount or expenditure amount, the cap percentage applied, and the actual dollar amount of the cap.

If the recipient appliesa different cap percentage for each beneficiary, the following information must be provided:

- 1) Name of each beneficiary
- 2) Amount of each beneficiary allocation
- 3) Applicable percentage cap for each beneficiary allocation
- 4) Actual dollar amount of each cap
- 5) Combined cap dollar amount

The calculation for the budgeted administrative and planning expense must be included on Line 4 in Section 6 of the IHP.

A recipient may use IHBG funds for expenses related to the planning and administration of affordable housing activities funded with non-IHBG funds. The total amount of IHBG fundsspent on planning and administration for both IHBG and non-IHBG funded activities may not exceed the recipient's allowable spending cap, except with HUD approval. The use of IHBG funds for planning and administration of activities funded with non-IHBG funds must comply with the IHBG restrictions on using funds for planning and administration, in addition to any requirement on administrative and planning expenses imposed by the non-IHBG funds (not including non-IHBGspending limits).

The following isan example of a recipient's calculation of the maximum planning and administrative expenses when multiple grant beneficiaries are included in the grant.



Section 6(6) - Expanded Formula Area - Verification ...

Return

Expanded Formula Area – Verification of Substantial Housing Services. Thissection is only required if the recipient expanded its Formula Area after Federal Fiscal Year 2003 in accordance with 24 CFR § 1000.302 Formula Area (2).

The recipient must annually demonstrate that it provides Substantial Housing Services in that expanded formula area. If the recipient wasapproved for expansion after Federal Fiscal Year 2003 but before May 21, 2007, the effective date of the regulations, then it must demonstrate compliance in accordance with the provision 24 CFR§ 1000.302 Substantial Housing Services (1). If the recipient wasapproved for an expansion on or after May 21, 2007, it must demonstrate compliance in accordance with the provision (24 CFR§ 1000.302 Substantial Housing Services (1) or (2)) in which it was originally approved. If the recipient cannot demonstrate compliance with the provision under which it was initially approved, then the recipient must resubmit a Formula Area expansion request to the IHBGFormula Customer Service Center for consideration.

In thissection of the IHP, the recipient must list its expanded Formula Area name. For example, if an expansion of the Formula Area has been approved by HUD to include fee simple land in two counties, this box must indicate the name of each the county.

If the recipient wasapproved in accordance with 24 CFR§ 1000.302 Substantial Housing Services (1), then the recipient must then indicate the amount of IHBG funds and funds from other sources that the recipient plans to spend in that expanded area during the upcoming 12-month program year for all American Indian and Alaska Native (AIAN) households and for only those AIAN households with incomes 80 percent of median income or lower. In this case, the recipient does not need to report the number of tribal members residing within each Formula Area expansion.

If the recipient wasapproved in accordance with 24 CFR§ 1000.302 Substantial Housing Services (2), the recipient must only indicate IHBG funds planned for that timeframe and those income categories. Furthermore, the recipient must annually document the number of tribal members residing within each Formula Area expansion.