Coquille Indian Housing Authority

2678 Mexeye Loop • Coos Bay, OR 97420

Indian Housing Plan

for the fiscal year ending

SEPTEMBER 30, 2021

(541) 888-6501 • (800) 988-6501 • FAX (541) 888-8266

INDIAN HOUSING PLAN/ANNUAL PERFORMANCE REPORT

(NAHASDA §§ 102(b)(1)(A) and 404(a)(2))

This form meets the requirements for an Indian Housing Plan (IHP) and Annual Performance Report (APR) required by the United States Department of Housing and Urban Development. In addition to these requirements, a tribe or tribally designated housing entity (TDHE) may elect to prepare a more comprehensive IHP. If a tribe or TDHE elects to prepare a more comprehensive IHP, the required elements of this IHP must still be submitted on the prescribed HUD form. The information requested does not lend itself to confidentiality.

Regulatory and statutory citations are provided throughout this form as applicable. Recipients are encouraged to review these citations when completing the IHP and APR sections of the form.

Under the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA) (25 U.S.C. 4101 et seq.), HUD will provide grants, loan guarantees, and technical assistance to Indian tribes and Alaska Native villages for the development and operation of low income housing in Indian areas. Grants will be made to eligible recipients under the Indian Housing Block Grant (IHBG) program. To be eligible for the grants, recipients must submit an IHP that meets the requirements of the Act. The recipient is required to submit the IHP to HUD at least 75 days prior to the start of its 12-month program year (NAHASDA § 102(a)(1)). The APR is due no later than 90 days after the end of the recipient's program year (24 CFR § 1000.514).

The IHP and the APR (previously two separate forms) are now combined into one form. The sections pertaining to the IHP are submitted **before** the beginning of the 12-month program year, leaving the APR (shaded) sections blank. If the IHP has been updated or amended, use the most recent version when preparing the APR. After the 12-month program year, enter the results from the 12-month program year in the shaded sections of the form to complete the APR. More details on how to complete the IHP and APR sections of the form can be found in the body of this form. In addition, a separate IHP and APR report form guidance is available.

FORM COMPLETION OPTIONS: The IHP/APR form may be completed either in hard copy or electronically. Hard copy versions may be completed either by hand or typewriter. Alternatively, the form may be completed electronically as it is a Word document. It is recommended that the form be completed electronically because it is more efficient to complete, submit, and review the form. Furthermore, electronic versions of the form may be submitted to HUD as an email attachment. To document official signatures on the electronic version, you should sign a hard copy of the pages and either fax that signed page or email it as an attachment to your Area Office of Native American Programs. The sections of the IHP that require an official signature are Sections 1 and 8, and Sections 15 and 16, if applicable. For the APR, Section 1 requires an official signature.

Public reporting burden for the collection of information is estimated to average 62 hours, 25 hours for the IHP and 37 hours for the APR. This includes the time for collecting, reviewing, and reporting the data. The IHP data is used to verify that planned activities are eligible, expenditures are reasonable, and recipient certifies compliance with related requirements. The APR data is used to audit the program accurately and monitor recipient progress in completing approved activities, including reported expenditures, outputs, and outcomes. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

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SECTION 1: COVER PAGE

(1) Grant Number: 55IH4102770

(2) Recipient Program Year: 10/01/2020 – 09/30/2021

(3) Federal Fiscal Year: 10/01/2020 – 09/30/2021

(4) ☒ **Initial Plan** (Complete this Section then proceed to Section 2)

(5) ☐ **Amended Plan** (Complete this Section, Section 8 if applicable, and Section 16)

(6) ☐ **Annual Performance Report** (Complete items 27-30 and proceed to Section 3)

(7) ☐ **Tribe**

(8) ☒ **TDHE**

(9) Name of Recipient: Coquille Indian Housing Authority		
(10) Contact Person: Anne F. Cook, Executive Director		
(11) Telephone Number with Area Code: (541) 888-6501		
(12) Mailing Address: 2678 Mexeye Loop		
(13) City: Coos Bay	**(14) State**: Oregon	**(15) Zip Code**: 97420
(16) Fax Number with Area Code (if available): (541) 888-8266		
(17) Email Address (if available): annecook@coquilleiha.org		
(18) If TDHE, List Tribes Below: Coquille Indian Tribe 3050 Tremont Street North Bend, OR 97459 Telephone number: (541) 756-0904 Fax number: (541) 756-0847		

(19) Tax Identification Number: 93-1133051
(20) DUNS Number: 944212935
(21) CCR/SAM Expiration Date: 04/17/2021
(22) IHBG Fiscal Year Formula Amount: $1,111,887 (preliminary allocation)
(23) Name of Authorized IHP Submitter: Anne F. Cook
(24) Title of Authorized IHP Submitter: Executive Director
(25) Signature of Authorized IHP Submitter: Anne F. Cook
(26) IHP Submission Date: 07/09/2020
(27) Name of Authorized APR Submitter:
(28) Title of Authorized APR Submitter:
(29) Signature of Authorized APR Submitter:
(30) APR Submission Date:

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.

ONE YEAR PLAN & ANNUAL PERFORMANCE REPORT

SECTION 2: HOUSING NEEDS

(NAHASDA § 102(b)(2)(B))

(1) Type of Need: Check the appropriate box(es) below to describe the estimated types of housing needs and the need for other assistance for low income Indian families (column B) and all Indian families (column C) inside and outside the jurisdiction.

(A) Type of Need	Check All That Apply	
	(B) Low income Indian Families	(C) All Indian Families
(1) Overcrowded Households	☒	☒
(2) Renters Who Wish to Become Owners	☒	☒
(3) Substandard Units Needing Rehabilitation	☒	☒
(4) Homeless Households	☒	☒
(5) Households Needing Affordable Rental Units	☒	☒
(6) Student Housing	☒	☒
(7) Disabled Households Needing Accessibility	☒	☒
(8) Units Needing Energy Efficiency Upgrades	☒	☒
(9) Infrastructure to Support Housing	☒	☒
(10)Other (specify below)	☐	☐

(2) Other Needs (*Describe the "Other" needs below. Note: this text is optional for all needs except "Other."):*

(3) Planned Program Benefits *(Describe below how your planned programs and activities will address the needs of low income families identified above. Also describe how your planned programs will meet the needs for the various types of housing assistance. NAHASDA § 102(b)(2)(B):*

CIHA owns and operates 64 affordable housing units on Coquille Tribal Lands including 48 rentals, 1 emergency housing unit, and 15 homebuyer units. Low Rent program participants are transitioned to the Home Grant and Occupancy (HomeGO) homebuyer program as they become qualified. In addition, the Monthly Housing Assistance Program (MHAP) offers 64 tenant-based rental assistance slots to low income Native American and Alaska Native households within the Tribe's five-county service area and Coquille households nationwide.

Work to construct an accessible single-family home and duplex continues and will provide 3 new NAHASDA low income rentals.

Awareness and utilization of the Section 184 Indian Housing Loan Guarantee Program is promoted regularly at Tribal events. Application to the program is facilitated for qualified low income Coquille and other Native American and Alaska Native families within the Tribe's five-county service area, as well as access to Individual Development Accounts, homebuyer education, credit counseling, and other services.

(4) Geographic Distribution (*Describe below how the assistance will be distributed throughout the geographic area and how this geographic distribution is consistent with the needs of low income families. NAHASDA § 102(b)(2)(B)(i)):*

CIHA provides IHBG-funded services within the Coquille Indian Tribe's five-county service area, which includes Coos, Curry, Douglas, Jackson, and Lane Counties. The distribution of assistance fluctuates but generally mirrors the distribution of the Tribal population within the service area. The majority of CIHA's services are concentrated on Coquille Tribal Lands in Coos County.

A limited number of Tribally-funded tenant-based rental assistance slots are available to low income Tribal families nationwide.

SECTION 3: PROGRAM DESCRIPTIONS

Planning and Reporting Program Year Activities

For the IHP, the purpose of this section is to describe each program that will be operating during the 12-month program year. Each program must include the eligible activity, its planned outputs, intended outcome, who will be assisted, and types and levels of assistance. Each of the eligible activities has a specific, measurable output. The first column in the table below 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. Copy and paste text boxes 1.1 through 1.10 as often as needed so that all of your planned programs are included. For the APR, the purpose of this section is to describe your accomplishments, actual outputs, actual outcomes, and any reasons for delays.

Eligible Activity May Include *(citations below all reference sections in NAHASDA):*

Eligible Activity	Output Measure	Output Completion
(1) Modernization of 1937 Act Housing [202(1)]	Units	All work completed and unit passed final inspection
(2) Operation of 1937 Act Housing [202(1)]	Units	Number of units in inventory at Program Year End (PYE)
(3) Acquisition of Rental Housing [202(2)]	Units	When recipient takes title to the unit
(4) Construction of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(5) Rehabilitation of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(6) Acquisition of Land for Rental Housing Development [202(2)]	Acres	When recipient takes title to the land
(7) Development of Emergency Shelters [202(2)]	Households	Number of households served at any one time, based on capacity of the shelter
(8) Conversion of Other Structures to Affordable Housing [202(2)]	Units	All work completed and unit passed final inspection
(9) Other Rental Housing Development [202(2)]	Units	All work completed and unit passed final inspection
(10) Acquisition of Land for Homebuyer Unit Development [202(2)]	Acres	When recipient takes title to the land
(11) New Construction of Homebuyer Units [202(2)]	Units	All work completed and unit passed final inspection
(12) Acquisition of Homebuyer Units [202(2)]	Units	When recipient takes title to the unit
(13) Down Payment/Closing Cost Assistance [202(2)]	Units	When binding commitment signed
(14) Lending Subsidies for Homebuyers (Loan) [202(2)]	Units	When binding commitment signed
(15) Other Homebuyer Assistance Activities [202(2)]	Units	When binding commitment signed

(16) Rehabilitation Assistance to Existing Homeowners [202(2)]	Units	All work completed and unit passed final inspection
(17) Tenant Based Rental Assistance [202(3)]	Households	Count each household once per year
(18) Other Housing Services [202(3)]	Households	Count each household once per year
(19) Housing Management Services [202(4)]	Households	Count each household once per year
(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]	Units	Number of units in inventory at PYE
(21) Crime Prevention and Safety [202(5)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(22) Model Activities [202(6)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(23) Self-Determination Program [231-235]		
Acquisition	Units	When recipient takes title to the unit
Construction	Units	All work completed and unit passed final inspection
Rehabilitation	Units	All work completed and unit passed final inspection
Infrastructure	Dollars	Dollars spent (report in Uses of Funding Table only)
(24) Infrastructure to Support Housing [202(2)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(25) Reserve Accounts [202(9)]	N/A	N/A

Outcome May Include:

(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 boxes 1.4 (IHP) and 1.5 (APR)

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

1.1.	**Program Name and Unique Identifier:** **Modernization of 1937 Act Housing: Accessibility Modifications to Rental Units** – 2101.1
1.2.	**Program Description** *(This should be the description of the planned program.)*: Modification of rental units to comply with Section 504 accessibility standards.
1.3.	**Eligible Activity Number** *(Select one activity from the Eligible Activity list. 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.):* (1) Modernization of 1937 Act Housing [202(1)]
1.4.	**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.):* (9) Provide accessibility for elderly/disabled persons
	Describe Other Intended Outcome *(Only if you selected "Other" above.):*
1.5.	**Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.)*:

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

1.6. Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native Americans and Alaska Natives.

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

Vacated rental units in substandard condition will be modernized and rehabilitated to Section 504 accessibility standards. Work will be performed by Housing Authority staff or contractors at no cost to residents. Level of assistance is estimated to be $85,000 or less per unit.

1.8. 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.):*

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	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
3	N/A	N/A			

1.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

2.1. Program Name and Unique Identifier:

Modernization of 1937 Act Housing: Conversion of Rental Units to Homebuyer Units – 2101.2

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

Transition from the rental program to the lease-purchase program for qualified families upon successful completion of homebuyer education and financial readiness requirements.

2.3. Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(1) Modernization of 1937 Act Housing [202(1)]

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.):*

(2) Assist renters to become homeowners

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.)*:

Describe Other Intended 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. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Coquille Tribal members residing in rental program units.

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

Qualified families will be transitioned from the rental program to the lease-purchase program upon successful completion of homebuyer education and financial readiness requirements. Families may choose to make modest improvements to the unit to be financed as part of the home purchase. Work may be performed by contractors or, if qualified, by the participant. The improvement allowance will be calculated to ensure that the participant's monthly payment does not exceed 30% of the family's adjusted income and is capped at $15,000 per unit.

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	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
2	N/A	N/A			

2.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

3.1. Program Name and Unique Identifier:

Operation and Maintenance of 1937 Housing Act Units – 2102

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

Operation and maintenance of 1937 Housing Act units, community facilities, and common areas.

3.3. Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(2) Operation of 1937 Act Housing [202(1)]

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.):*

(6) Assist affordable housing for low income households

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

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

Describe Other Intended 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. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native Americans and Alaska Natives residing in 1937 Housing Act units.

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

Activities include:

a. Maintaining a 95% occupancy rate in rental units.
b. Performing routine and periodic maintenance as scheduled.
c. Performing emergency and non-routine maintenance as needed.
d. Preparing units for re-occupancy in a timely manner.
e. Reducing water and maintenance requirements, incorporating indigenous plants and materials, and improving the overall appearance of the front yard of one rental unit.
f. Maintaining and making minor improvements to community facilities and common areas.

Work will be performed by Housing Authority staff or contractors, generally at no cost to residents. Yard improvements are capped at $2.00 per square foot. Costs to remedy damage or failure to perform required maintenance tasks will be assessed to residents in accordance with policy.

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	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
58	N/A	N/A			

3.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

4.1.	**Program Name and Unique Identifier:** **Construction of Rental Housing: Development of Accessible Rental Units** – 2103
4.2.	**Program Description** *(This should be the description of the planned program.)*: Construction of rental units compliant with Section 504 accessibility standards.
4.3.	**Eligible Activity Number** *(Select one activity from the Eligible Activity list. 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)]
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.):* (7) Create new affordable rental units
	Describe Other Intended Outcome *(Only if you selected "Other" above.):*
4.5.	**Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.)*:

Describe Other Intended 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. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native Americans and Alaska Natives.

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

Development of single-family and duplex rental units compliant with Section 504 accessibility standards on vacant lots within the housing community. Work will be performed by Housing Authority staff or contractors at no cost to residents. Level of assistance will not exceed HUD-established total development cost limits.

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 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	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
3	N/A	N/A			

4.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

5.1.	**Program Name and Unique Identifier:** **Tenant Based Rental Assistance: Monthly Housing Assistance Program** – 2109.1
5.2.	**Program Description** *(This should be the description of the planned program.)*: Assistance to eligible low income Native Americans and Alaska Natives to pay rent in private market rental units.
5.3.	**Eligible Activity Number** *(Select one activity from the Eligible Activity list. 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.):* (17) Tenant Based Rental Assistance [202(3)]
5.4.	**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.):* (6) Assist affordable housing for low income households
	Describe Other Intended Outcome *(Only if you selected "Other" above.):*
5.5.	**Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.)*:

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

5.6. Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native Americans and Alaska Natives. Tribally-funded assistance is available to Coquille Tribal members only.

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

Activities include:

a. Providing financial assistance to eligible low income Native Americans and Alaska Natives to pay rent in private market rental units.
b. Maintaining a 100% utilization rate.

Subsidy will be paid to participant upon receipt of documentation that the full month's rent has been paid to the landlord. The standard subsidy rate will be supplemented if necessary to ensure participant pays no more than 30% of family adjusted income for rent, capped at fair market.

5.8. 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.):*

6.9. 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	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
N/A	64	N/A			

6.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

7.1.	**Program Name and Unique Identifier:** **Housing Services** – 2109.2
7.2.	**Program Description** *(This should be the description of the planned program.)*: Provision of housing-related services to program participants, applicants, contractors, and others participating or seeking to participate in affordable housing activities.
7.3.	**Eligible Activity Number** *(Select one activity from the Eligible Activity list. 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.):* (18) Other Housing Services [202(3)]
7.4.	**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.):* (6) Assist affordable housing for low income households
	Describe Other Intended Outcome *(Only if you selected "Other" above.):*
7.5.	**Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.)*:

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

7.6. Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native American and Alaska Native housing program applicants and participants.

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

Activities include:

a. Providing materials and instruction in housekeeping practices and living habits that reduce maintenance costs, improve housekeeping, and promote resident safety.
b. Providing compliance and performance incentives to program participants.
c. Counseling current and prospective homebuyers on maintenance and financial responsibilities.
d. Providing support for meetings and activities of the Residents Association.
e. Maintaining partnerships with Tribal and other community social and support services providers and referring applicants and participants as necessary.
f. Promoting and facilitating employment opportunities, financial literacy, emergency preparedness, homebuyer education, participation in Individual Development Account savings programs and other financial assistance programs for first-time homebuyers, access to the Section 184 and VA Native American Direct Loan programs, and other programs and services that enhance participant self-sufficiency.
g. Providing rental space at a reduced rate to Tribal programs and community partners that directly promote the self-sufficiency of program participants

Services will be provided by Housing Authority staff or other service providers at minimal or no cost to applicants or participants.

7.8. 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.):*

7.9. 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	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
N/A	131	N/A			

7.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

8.1.	**Program Name and Unique Identifier:** **Housing Management Services** – 2110.1
8.2.	**Program Description** *(This should be the description of the planned program.)*: Management of affordable housing programs.
8.3.	**Eligible Activity Number** *(Select one activity from the Eligible Activity list. 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.):* (19) Housing Management Services [202(4)]
8.4.	**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.):* (6) Assist affordable housing for low income households
	Describe Other Intended Outcome *(Only if you selected "Other" above.):*
8.5.	**Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.)*:

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

8.6. Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native American and Alaska Native housing program applicants and participants.

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

Activities include:

a. Managing rental and homebuyer programs.
b. Screening applications to determine program eligibility.
c. Maintaining a waiting list of qualified low income Native American and Alaska Native families and making placement when assistance becomes available.
d. Conducting annual and interim recertifications of family income and composition.
e. Inspecting rental units at least once per year and homebuyer units at least every three years, and documenting and monitoring the correction of deficiencies.

Work will be performed by Housing Authority staff at no cost to residents.

8.8. 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.):*

8.9. 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	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
N/A	131	N/A			

8.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

9.1.	**Program Name and Unique Identifier:** **Operation and Maintenance of NAHASDA Units** – 2110.2
9.2.	**Program Description *(This should be the description of the planned program.)*:** Operation and maintenance of NAHASDA units and community facilities.
9.3.	**Eligible Activity Number** *(Select one activity from the Eligible Activity list. 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.):* (20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]
9.4.	**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.):* (6) Assist affordable housing for low income households
	Describe Other Intended Outcome *(Only if you selected "Other" above.):*
9.5.	**Actual Outcome Number** *(In the APR identify the actual outcome from the Outcome list.)*:

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

9.6. Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native Americans and Alaska Natives residing in NAHASDA units.

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

Activities include:

a. Maintaining a 95% occupancy rate in rental units.
b. Performing routine and periodic maintenance as scheduled.
c. Performing emergency and non-routine maintenance as needed.
d. Preparing units for re-occupancy in a timely manner.
e. Reducing water and maintenance requirements, incorporating indigenous plants and materials, and improving the overall appearance of the front yard of one rental unit.
f. Maintaining and making minor improvements to community facilities and common areas.

Work will be performed by Housing Authority staff or contractors, generally at no cost to residents. Yard improvements are capped at $2.00 per square foot. Costs to remedy damage or failure to perform required maintenance tasks will be assessed to residents in accordance with policy.

9.8. 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.):*

9.9. 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	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
6	N/A	N/A			

9.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3, etc. The programs under the second eligible activity would be numbered as 2.1, 2.2, 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 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.

10.1. Program Name and Unique Identifier:

Crime Prevention and Safety – 2111

10.2. Program Description *(This should be the description of the planned program.)*:

Provision of safety, security, and law enforcement measures and activities appropriate to protect residents of affordable housing from crime.

10.3. Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(21) Crime Prevention and Safety [202(5)]

10.4. 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.):*

(11) Reduction in crime reports

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

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

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

10.6. Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):*

Low income Native American and Alaska Native rental and homebuyer program participants.

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

Activities include:

a. Maintaining an agreement with Tribal Police to provide services to the low income housing community.
b. Providing security monitoring and electronic surveillance of housing facilities.
c. Installing informational, directional, and traffic control signage and devices in the housing community as needed.

Services will be provided by Tribal Police, Housing Authority staff, contractors, or other service providers at no cost to residents.

10.8. 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.):*

10.9. 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	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
N/A	N/A	N/A			

10.10. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

SECTION 4: MAINTAINING 1937 ACT UNITS, DEMOLITION, AND DISPOSITION

(1) Maintaining 1937 Act Units (NAHASDA § 102(b)(2)(A)(v)) *(Describe specifically how you will maintain and operate your 1937 Act housing units in order to ensure that these units will remain viable.)*:

Maintenance, modernization and rehabilitation, and special projects work is performed by two full-time employees, supplemented as needed by temporary staffing or service contractors.

CIHA has a comprehensive ongoing preventative maintenance program to prevent and correct deterioration of its housing units and other facilities. An inspection of each unit is performed at least once per year and more often as warranted. Counseling sessions are conducted to instruct tenants on maintenance, housekeeping, and safety issues at move-in and thereafter as needed.

CIHA staff continues to improve policies and procedures for recruitment, selection, orientation, training, and counseling of residents.

Tribal Police have been involved in serving eviction papers to residents who have damaged their homes. The Tribal Court has issued orders of eviction, where warranted, and has required some tenants who have damaged their homes to make restitution.

(2) Demolition and Disposition (NAHASDA § 102(b)(2)(A)(iv)(I-III)) *(Describe any planned demolition or disposition of 1937 Act housing units. Be certain to include the timetable for any planned demolition or disposition and any other information required by HUD with respect to the demolition or disposition.)*:

There is no demolition or disposition planned.

SECTION 5: BUDGETS

(1) Sources of Funding (NAHASDA § 102(b)(2)(C)(i) and 404(b)) *(Complete the **non-shaded** 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) Estimated amount on hand at beginning of program year**	**(B) Estimated amount to be received during 12-month program year**	**(C) Estimated total sources of funds (A + B)**	**(D) Estimated funds to be expended during 12-month program year**	**(E) Estimated unexpended funds remaining at end of program year (C minus D)**	**(F) Actual amount on hand at beginning of program year**	**(G) Actual amount received during 12-month program year**	**(H) Actual total sources of funding (F + G)**	**(I) Actual funds expended during 12-month program year**	**(J) Actual unexpended funds remaining at end of 12-month program year (H minus I)**	**(K) Actual unexpended funds obligated but not expended at end of 12-month program year**
1. IHBG Funds	60,000	1,111,887	1,171,887	1,171,887	0						
2. IHBG Program Income	0	335,000	335,000	335,000	0						
3. Title VI											
4. Title VI Program Income											
5. 1937 Act Operating Reserves											
6. Carry Over 1937 Act Funds											
LEVERAGED FUNDS											
7. ICDBG Funds											
8. Other Federal Funds: IHBG-C		1,274,985	1,274,985	1,274,985	0						
9. LIHTC											
10. Non-Federal Funds	54,000	578,953	632,953	594,953	38,000						
TOTAL	114,000	3,300,825	3,414,825	3,376,825	38,000						

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 Table** on the following page.

c. Total of Column I should match the Total of Column Q from the Uses Table on the following page.

d. For the IHP, describe any estimated leverage in Line4 below (Estimated Sources or Uses of Funding). **For the APR, describe actual leverage in Line 5 below (APR).**

(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		
		(L)	(M)	(N)	(O)	(P)	(Q)
PROGRAM NAME (tie to program names in Section 3 above)	**Unique Identifier**	**Prior and current year IHBG (only) funds to be expended in 12-month program year**	**Total all other funds to be expended in 12-month program year**	**Total funds to be expended in 12-month program year (L + M)**	**Total IHBG (only) funds expended in 12-month program year**	**Total all other funds expended in 12-month program year**	**Total funds expended in 12-month program year (O + P)**
Accessibility Modifications to Rental Units	2101.1	15,000	611,370	626,370			
Conversion of Rental Units to Homebuyer Units	2101.2	30,000	0	30,000			
Operation and Maintenance of 1937 Housing Act Units	2102	366,887	207,437	574,324			
Development of Accessible Rental Units	2103	20,000	1,063,615	1,083,615			
Tenant Based Rental Assistance	2109.1	220,000	176,000	396,000			
Housing Services	2109.2	20,000	0	20,000			
Housing Management Services	2110.1	230,000	45,000	275,000			
Operation and Maintenance of NAHASDA Units	2110.2	30,000	0	30,000			
Crime Prevention and Safety	2111	30,000	0	30,000			
Planning and Administration	[redacted]	210,000	0	210,000			
Loan repayment – describe in 4 below	[redacted]	0	101,516	101,516			
TOTAL		1,171,887	2,204,938	3,376,825			

Notes:

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

(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 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.):*

2101.1 – Accessibility Modifications to Rental Units

FY 2020 IHBG Competitive Grant funds were awarded for this project. Leverage includes IHBG and non-program funds.

2102 – Operation and Maintenance of 1937 Housing Act Units

Program income is used to support this activity.

2103 – Development of Accessible Rental Units

FY 2020 IHBG Competitive Grant funds were awarded for this project. Leverage includes IHBG and non-program funds.

2109.1 – Tenant Based Rental Assistance

Estimated Tribal and program income contributions during the period total $176,000.

2110.1 – Housing Management Services

Program income is used to support this activity.

Loan Repayment

Replacement of the Authority's Projects and Maintenance Operations and Storage Facility was approved as a Model Activity in the Authority's FY 2015 Indian Housing Plan. The project was completed in FY 2018. Program and non-program income are used to repay bond and loan proceeds borrowed for construction.

(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 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 6: OTHER SUBMISSION ITEMS

(1) Useful Life/Affordability Period(s) (NAHASDA § 205, 24 CFR § 1000.142) *(Identify the useful life of each housing unit to be constructed, acquired, or rehabilitated with IHBG funds in the 12-month period. Exclude Mutual Help units.)*

The useful life of the properties is dependent upon the amount of IHBG funds invested in the property per occurrence as shown in the following schedule:

IHBG Funds Invested	Affordability Period
up to $5,000	6 months
$5,001 to $7,500	1 year
$7,501 to $10,000	2 years
$10,001 to $12,500	3 years
$12,501 to $15,000	4 years
$15,001 to $17,500	5 years
$17,501 to $20,000	6 years
$20,001 to $22,500	7 years
$22,501 to $25,000	8 years
$25,001 to $27,500	9 years
$27,501 to $30,000	10 years
$30,001 to $32,500	11 years
$32,501 to $35,000	12 years
$35,001 to $37,500	13 years
$37,501 to $40,000	14 years
$40,001 to $42,500	15 years
$42,501 to $45,000	16 years
$45,001 to $47,500	17 years
$47,501 to $50,000	18 years
$50,001 to $52,500	19 years
over $52,500	20 years

(2) Model Housing and Over-Income Activities (NAHASDA § 202(6), 24 CFR § 1000.108) *(If you wish to undertake a model housing activity or wish to serve non-low income households during the 12-month program year, those activities may be described here, in the program description section of the 1-year plan, or as a separate submission.):*

(3) Tribal and Other Indian Preference (NAHASDA § 201(b)(5), 24 CFR § 1000.120)

If preference will be given to tribal members or other Indian families, the preference policy must be described. This information may be provided here or in the program description section of the 1-year plan.

Does the Tribe have a preference policy? Yes ☒ No ☐

If yes, describe the policy.

CIHA's order of preference is to first serve members of the Coquille Indian Tribe, then members of the Confederated Tribes of the Coos, Lower Umpqua, and Siuslaw Indians, then other Native Americans and Alaska Natives. Homebuyer programs on Coquille Tribal Lands, Tribally-funded tenant-based rental assistance, and Tribally-funded first-time homebuyer assistance are available to Coquille Tribal members only.

(4) Anticipated Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238)

Do you intend to use more than 20% of your current grant for Planning and Administration?

Yes ☐ No ☒

If yes, describe why the additional funds are needed for Administration. For a recipient administering funds from multiple grant beneficiaries with a mix of grant or expenditure amounts, for each beneficiary state the grant amount or expenditure amount, the cap percentage applied, and the actual dollar amount of the cap.

(5) Actual Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238

Did you expend more than 20% of your current grant for Planning and Administration?

Yes ☐ No ☐

If yes, did you receive HUD approval to exceed the 20% cap on Planning and Administration costs?

Yes ☐ No ☐

If you did not receive approval for spending more than 20% of your current grant on planning and administration costs, describe the reason(s) for exceeding the 20% cap. (See Section 6, Line 5 of the Guidance for information on carry-over of unspent planning and administration expenses.)

(6) Expanded Formula Area – Verification of Substantial Housing Services (24 CFR § 1000.302(3))

If your Tribe has an expanded formula area, (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the Tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the Tribe have an expanded formula area?

Yes ☐ No ☒ If no, proceed to Section 7.

If yes, list each separate geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there.

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year:

Total Expenditures on Affordable Housing Activities for:		
	All AIAN Households	**AIAN Households with Incomes 80% or less of Median Income**
IHBG funds:		
Funds from other Sources:		

(7) APR: For each separate formula area expansion, list the actual amount of IHBG and other funds expended for all AIAN households and for only AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

Total Expenditures on Affordable Housing Activities for:		
	All AIAN Households	**AIAN Households with Incomes 80% or less of Median Income**
IHBG funds:		
Funds from other Sources:		

SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE
(NAHASDA § 102(b)(2)(D))

By signing the IHP, you certify that you have all required policies and procedures in place in order to operate any planned IHBG programs.

(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.

Yes ☒ No ☐

(2) To be eligible for minimum funding 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.

Yes ☐ No ☐ Not Applicable ☒

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

(a) The recipient 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.

Yes ☒ No ☐ Not Applicable ☐

(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.

Yes ☒ No ☐ Not Applicable ☐

(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.

Yes ☒ No ☐ Not Applicable ☐ 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.

Yes ☒ No ☐ Not Applicable ☐

SECTION 8: IHP TRIBAL CERTIFICATION
(NAHASDA § 102(c))

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP 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) ☒ It had an opportunity to review the IHP 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 and amendments on behalf of the Tribe without prior review by the Tribe.

(4)	Recipient:	Coquille Indian Tribe
(5)	Authorized Official's Name and Title:	Brenda Meade, Chairperson
(6)	Authorized Official's Signature:	
(7)	Date (MM/DD/YYYY):	06/25/2020

COQUILLE INDIAN TRIBE
3050 Tremont Street North Bend, OR 97459
Phone: (541) 756-0904 Fax: (541) 756-0847
www.coquilletribe.org

RESOLUTION
CY20064

APPROVING SUBMISSION OF THE FY2021 INDIAN HOUSING PLAN TO THE U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

WHEREAS, the Coquille Indian Tribe ("Tribe") is a federally recognized Indian tribe pursuant to the Coquille Indian Restoration Act of June 28, 1989, 25 U.S.C. § 715, et seq. ("the Act"); AND

WHEREAS, the Tribe is governed by the Coquille Tribal Council pursuant to the Tribal Constitution adopted by eligible voters of the Tribe on August 27, 1991, and approved by the Secretary of the Interior on September 9, 1991; and the Tribal Council is empowered to establish Tribal policies, enact Tribal laws and act for the Tribe; AND

WHEREAS, the Coquille Indian Tribe is eligible for federal services and benefits including housing and related programs under the Native American Housing Assistance and Self-Determination Act ("NAHASDA"); AND

WHEREAS, the Coquille Indian Tribe has established the Coquille Indian Housing Authority as its Tribally Designated Housing Entity ("TDHE"); AND

WHEREAS, the Housing Authority Board of Commissioners and staff have developed an Indian Housing Plan for the Fiscal Year 2021 as required by NAHASDA; AND

WHEREAS, the Housing Authority Board of Commissioners has presented the Fiscal Year 2021 Indian Housing Plan attached hereto as Exhibit A to the Coquille Tribal Council for review and approval; NOW

THEREFORE, BE IT RESOLVED, that the Tribal Council of the Coquille Indian Tribe hereby approves the Fiscal Year 2021 Indian Housing Plan for submission to the U.S. Department of Housing and Urban Development and requests that it be approved; AND

THEREFORE, BE IT FINALLY RESOLVED, that the Tribal Council Chairperson, or in her absence or unavailability, the Tribal Council Vice Chairperson, is authorized to sign any documents necessary to give this resolution full force and effect.

Resolution CY20064
Approving Submission of the FY 2021 Indian Housing Plan to the U.S. Department of Housing and Urban Development
Page 2

CERTIFICATION

The foregoing Resolution was duly adopted at the Tribal Council Meeting held on the Coquille Indian Tribe Reservation in North Bend, Oregon, on June 25, 2020 with the required quorum present by a vote of
5 For; 0 Against; 0 Absent; 0 Abstaining.

Brenda Meade,
Chairperson

Linda Mecum,
Secretary-Treasurer

Cc: Anne Cook, CIHA

SECTION 9: TRIBAL WAGE RATE CERTIFICATION

(NAHASDA §§ 102(b)(2)(D)(vi) and 104(b))

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.

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

(4) List the activities using tribally determined wage rates:

SECTION 10: SELF-MONITORING

(NAHASDA § 403(b), 24 CFR § 1000.502)

(1) Do you have a procedure and/or policy for self-monitoring, including monitoring sub-recipients?

Yes ☐ No ☐

(2) Pursuant to 24 CFR § 1000.502 (b) where the recipient is a TDHE, the grant beneficiary (Indian Tribe) is responsible for monitoring programmatic compliance. Did the Tribe monitor the TDHE?

Yes ☐ No ☐ Not Applicable ☐

(3) Did you complete an annual compliance assessment?

Yes ☐ No ☐

(4) **Self-Monitoring Results** *(Describe the results of the monitoring activities, including inspections for this program year.):*

SECTION 11: INSPECTIONS

NAHASDA § 403(b))

(1) Inspection of Units *(Use the table below to record the results of the inspections of assisted housing.)*

Results of Inspections							
(A) Activity			**(B) Total number of units (Inventory)**	**(C) Units in standard condition**	**(D) Units needing rehabilitation**	**(E) Units needing to be replaced**	**(F) Total number of units inspected**
1.	**1937 Housing Act Units:**						
	a.	Rental					
	b.	Homeownership					
	c.	Other					
1937 Act Subtotal							
2.	**NAHASDA Units:**						
	a.	Rental					
	b.	Homeownership					
	c.	Rental Assistance					
	d.	Other					
NAHASDA Subtotal							
Total							

Note: *Total of column F should equal the sum of columns C+D+E.*

(2) Did you comply with your inspection policy: Yes ☐ No ☐

(3) If no, why not:

SECTION 12: AUDITS

24 CFR §§ 1000.544 and 548

This section is used to indicate whether an Office of Management and Budget (OMB) Circular A-133 audit is required, based on a review of your financial records.

Did you expend $500,000 or more in total Federal awards during the previous fiscal year ended?

Yes ☐ No ☐

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 13: PUBLIC AVAILABILITY

NAHASDA § 408, 24 CFR § 1000.518

(1) Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518)?

Yes ☐ No ☐

(2) If you are a TDHE, did you submit this APR to the Tribe (24 CFR § 1000.512)?

Yes ☐ No ☐ Not Applicable ☐

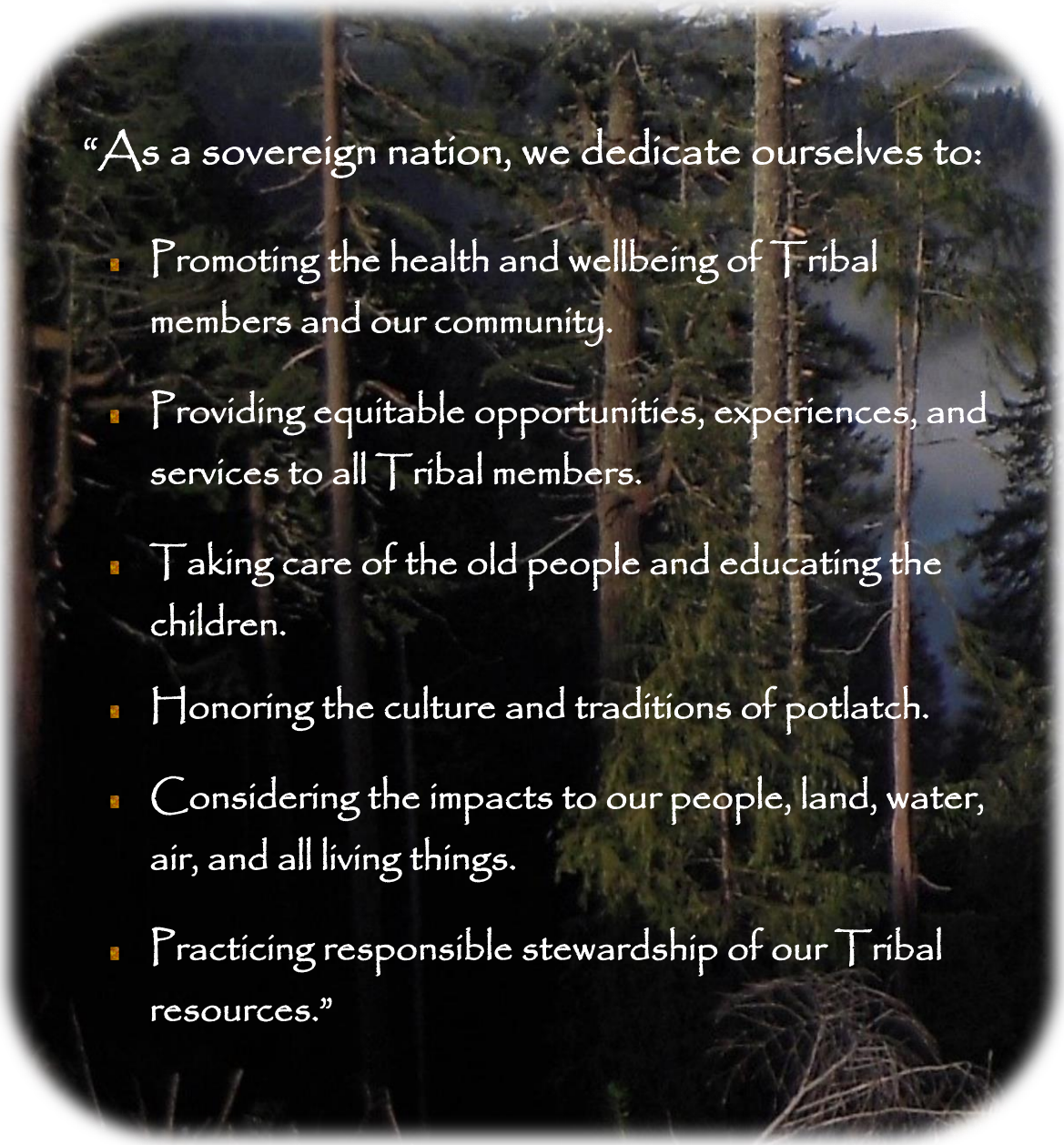
(3)	If you answered "No" to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so.
(4)	Summarize any comments received from the Tribe and/or the citizens (NAHASDA § 404(d)):

SECTION 14: JOBS SUPPORTED BY NAHASDA
(NAHASDA § 403(b))

Use the table below to record the number of jobs supported with IHBG funds each year.

Indian Housing Block Grant Assistance (IHBG)		
(1)	Number of **Permanent** Jobs Supported	
(2)	Number of **Temporary** Jobs Supported	
(3)	Narrative *(optional)*:	

Striving for excellence
and to honor Coquille Tribal values
in all that we do.



"As a sovereign nation, we dedicate ourselves to:

- Promoting the health and wellbeing of Tribal members and our community.
- Providing equitable opportunities, experiences, and services to all Tribal members.
- Taking care of the old people and educating the children.
- Honoring the culture and traditions of potlatch.
- Considering the impacts to our people, land, water, air, and all living things.
- Practicing responsible stewardship of our Tribal resources."

Coquille Indian Housing Authority
2678 Mexeye Loop Coos Bay, OR 97420
(541) 888-6501 www.coquilleiha.org