

Automated Indian Housing Plan/Annual Performance Report Version 1.0

The automated version of the IHP/APR simplifies the completion of the form by providing drop-down menus, check boxes, auto-filling data fields, columns and rows that total automatically, text fields that expand to accommodate narratives of any size, data quality checks, and other enhancements.

This version also features comment boxes that provide additional information on almost all elements of the form. Wherever there is a small red triangle in the corner of a cell, there is a comment box. Simply place the cursor over the cell with a red triangle and the comment box will appear. There is no requirement to read the comments, they are merely provided to make it easier to understand and complete the form. The comments were extracted from Program Guidance 2013- 04 (Revised Guidance for the Indian Housing Plan/Annual Performance Report).

For full functionality it is recommended that Excel 2007 or higher be used.

Saving the Form

The automated form contains macros that must be enabled in order for the form to be fully functional. To retain the macros, save the document to another location (such as your desktop) and open the form from that location. Select "Save As" in the Office Button and select "Excel Macro-Enabled Workbook." This step only needs to be done when first saving the form, subsequent saves will automatically retain the macros.

Completing the Form

Click the tabs at the bottom starting with "Section 1" and fill out all applicable information in the yellow or green fields. Yellow fields are the IHP and green fields are the APR. IHP fields will turn white when completed and APR fields will turn gray when completed. If any of the yellow or green fields don't apply, enter "N/A".

The tab for each section of the form will turn from red to blue once all the required fields in an IHP or APR are completed. If one or more fields in a tab are not completed, the tab will remain red. If this occurs, review all the fields and identify where information or data still needs to be entered. Once all the fields are completed, the tab will turn blue. In the tables, enter a 0 (zero) if there are no units or dollar amounts for that cell; otherwise, the tab will not turn from red to blue.

Once a text field is completed it is necessary to click anywhere outside the field in order for the text to be accepted. If pasting text from a Word document into a text field, it is necessary to click in the text field before pasting. Use the scroll bar to navigate through a section, rather than the Enter key.

Section 3 (Program Descriptions) Instructions

Fill out all the information for the first program that plans to use IHBG funds. To fill out and describe additional programs, click the "**Add New Program**" button. This will create an additional tab for the new program, and the new tab will be identified as 3.2,.3.3, etc. To delete a program, click the "**Remove This Program**" button, and the program tab will be deleted. The addition of a new program in Section 3 will automatically create a new row for the program in Line 2 (Uses of Funding) of Section 5. Similarly, the deletion of a program in Section 3 will automatically delete the row in Line 2.

Section 5 (Budgets) and Section 11 (Inspections) Data Quality Assurance

Line 2 (Uses of Funding) has several instances where data must not exceed data provided in Line 1 (Sources of Funding). For example, it is not possible to expend more IHBG funds than are budgeted. If there is a data mismatch, the corresponding cell in the "TOTAL" row of Line 2 will turn red. Correct the data in the table(s) until the cell is no longer red and becomes purple.

In Section 11 (Inspections) if the number of housing units inspected exceeds the number of housing units, the cell(s) in the "Total Number of Units Inspected" column will turn red. Correct the data until the cell(s) becomes blue.

Printing the Form

In addition to retaining an electronic version of the automated form, it is possible to retain a hard copy for filing. To print all sections of the form, select "Print" in the Office Button and check "Entire Workbook" in the "Print What" portion of the Print window. To print a specific section of the form, select "Print" in the Office Button and check "All" in the "Print Range" portion of the Print window.

Submitting the Form

Once the automated IHP or APR is completed, it may be submitted to your Area Office of Native American Programs as an email attachment or sent by fax or regular mail. It is recommended that the form be submitted as an email attachment in order for the form to retain its automated capabilities.

To document official signatures, print and sign hard copies of the pages that require signatures, and send the signed pages as an email attachment or by fax or regular mail. The sections of the IHP that require the signature of the authorized official are Sections 1 and 8, and

Sections 15 and 16, if applicable. For the APR, Section 1 requires an official signature.

General Instructions

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 at http://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/ih/codetalk/nahasda/guidance.

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.

Form HUD-52737 (06/17/2013)

SECTION 1: COVER PAGE

(1) Grant Number: 55IH2726660

(2) Recipient Program Year: 10/1 - 9/30

(3) Federal Fiscal Year: 2017

(4) Initial Plan (Complete is Section then proceed to Section 2)

(5) Amended Plan (Complete to 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: Leech Lake Housing Authority		
(10) Contact Person: Toni McClanahan		
(11) Telephone Number with Area Code: (218) 335-8280		
(12) Mailing Address: PO Box 938 611 Elm Ave		
(13) City: Cass Lake	(14) State: MN	(15) Zip Code: 56633
(16) Fax Number with Area Code (if available): (218) 335-8367		
(17) Email Address (if available): tonim@midconetwork.com		
(18) If TDHE, List Tribes Below: Leech Lake Band of Ojibwe		
(19) Tax Identification Number:		410913364
(20) DUNS Number:		826542164
(21) CCR/SAM Expiration Date:		June 15, 2017

(22) IHBG Fiscal Year Formula Amount:	\$4,294,718
(23) Name of Authorized IHP Submitter:	Toni McClanahan
(24) Title of Authorized IHP Submitter:	Finance Officer
(25) Signature of Authorized IHP Submitter:	
(26) IHP Submission Date:	
(27) Name of Authorized APR Submitter:	Harry J. Entwistle
(28) Title of Authorized APR Submitter:	Executive Director
(29) Signature of Authorized APR Submitter:	
(30) APR Submission Date:	December 29, 2017

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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(2) Renters Who Wish to Become Owners	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(3) Substandard Units Needing Rehabilitation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(4) Homeless Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(5) Households Needing Affordable Rental Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(6) College Student Housing	<input type="checkbox"/>	<input type="checkbox"/>
(7) Disabled Households Needing Accessibility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(8) Units Needing Energy Efficiency Upgrades	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(9) Infrastructure to Support Housing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(10) Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>

(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 address the various types of housing assistance needs. NAHASDA § 102(b)(2)(B)):

The Leech Lake Housing Authority's mission is to develop affordable homes and housing opportunities for Native American Families on the Leech Lake Reservation; to provide efficient and sensitive services that lead to self sufficient tenants / home owners and healthy and safe communities.

Leech Lake Housing Authority (LLHA) administrates low income housing rental stock, homeownership units and Low Income Housing Tax Credit (LIHTC) units. These programs, while providing housing to over 520 families, cannot meet the current need of the Leech Lake Band of Ojibwe tribal members. The LLHA's various housing programs are accessible to interested families via an application process with a component waiting list for applicant's who cannot be served immediately at the time of application. LLHA currently has over 350 families on our waiting list.

In FY 2017, we plan to develop (2) additional rental units for low income families. In addition, we have made an application to our state Housing Finance Agency for (24) units of low income housing with (4) units specifically for the use of our homeless population. The application does not call for the use of NAHASDA funds; however, once the project is in operation, NAHASDA funds will help support operations. If the project is funded, future IHP's will reflect that support.

(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)):*

Located in rural north central MN near and in the town of Cass Lake, the Leech Lake Band of Ojibwe has an enrollment of over 10,000 tribal members with almost 5,000 living on the 677,099 acre reservation. The reservation is located in (4) adjacent counties. The Tribal Government Center is located in Cass Lake, MN along with the Indian Health Services and outpatient clinic, Leech Lake Tribal College, the Leech Lake Tribal Justice Center, the Leech Lake Housing Authority offices and many other tribal programs.

The Leech Lake Reservation is divided into (3) Tribal Districts which are represented on the Tribal Council by an elected Council member from each district. Within the (3) districts are (11) distinct tribal communities which have an elected Local Indian Council.

The Leech Lake Housing Authority distributes its services over all (3) districts and within each of the (16) communities. LLHA attends the LLBO Tribal Council briefings and meetings, the Local Indian Council meetings and holds community meetings of its own to maintain communication with our communities in order to stay abreast of and serve the needs within the communities as they develop.

SECTION 3: PROGRAM DESCRIPTIONS

[102(b)(2)(A)], [233(a)], [235(c)], [404(b)], 24 CFR §1000.512(b)(2) and (3)

Planning and Reporting Program Year Activities

In this section, the recipient must provide a description of its planned eligible activities, and intended outcomes and outputs for the One-Year IHP. The recipient can select any combination of activities eligible under NAHASDA and intended outcomes and outputs that are based on local needs and priorities. There is no maximum or minimum number of eligible activities or intended outcomes and outputs. Rather, the One-Year IHP should include a sufficient number of eligible activities and intended outcomes to fully describe any tasks that the recipient intends to fund in whole or in part with IHBG resources during the coming program year.

Subtitle B of NAHASDA authorizes recipients to establish a program for self-determined housing activities involving construction, acquisition, rehabilitation, or infrastructure relating to housing activities or housing that will benefit the low-income households served by the Indian tribe. A recipient may use up to 20 percent of its annual allocation, but not more than \$2 Million, for this program. Section 233(a) of NAHASDA requires a recipient to include its planned self-determination program activities in the IHP, and Section 235(c) requires the recipient to report the expenditures, outputs, and outcomes for its self-determination program in the APR. For more information, see PIH Notice 2010-35 (Demonstration Program - Self-Determined Housing Activities for Tribal Governments) at http://portal.hud.gov/hudportal/documents/huddoc?id=DOC_8814.pdf

The One-Year IHP is not required to include eligible activities or intended outcomes and outputs that will not receive IHBG resources. For example, the recipient may be planning to apply for Low Income Housing Tax Credits (LIHTC) from its state. If those tax credit projects will not receive IHBG resources, they are not required to be described in the IHP. However, the recipient may wish to include non-IHBG activities in the IHP to provide tribal members with a more complete picture of housing activities.

If an activity will receive partial funding from an IHBG resource, it must be described in the IHP.

For example, if the recipient uses IHBG-funded staff persons to manage, inspect, or maintain an LIHTC-funded rental project, that project would be considered an IHBG-assisted project and the related activities must be described in the IHP.

Planning and Administrative expenses and loan repayments should not be identified as programs in the IHP. That is why there are dedicated rows in the Uses of Funding budget for these expenses. Instead, describe anticipated planning and administrative expenses in Section 6, Line 4 of the IHP, and describe actual planning and administration expenses in Section 6, Line 5 of the APR. Report the planned and actual amount of planning and administrative expenses in the dedicated row of the Uses of Funding budget (Section 5, Line 2). Please note that Reserve Accounts to support planning and administration is an eligible activity and should be identified as a program in the IHP, and any planned or actual expenditure from the Reserve Account would be reported by its program name in the Uses of Funding table.

With regard to loan repayments made with IHBG funds, describe planned loan repayments in Section 5, Line 4 of the IHP, and describe actual loan repayments in Section 5, Line 5 of the APR. Report the planned and actual amount of loan repayments in the dedicated row of the Uses of

Funding budget (Section 5, Line 2), except as noted in the following instructions for Column O in the Uses of Funding table. Column O 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 on the actual expenditures incurred during the 12-month period, 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).

For the IHP, complete the **unshaded** sections to describe the planned activities, outcomes and outputs in the coming 12-month program year. The recipient must complete Lines 1.1 through 1.4, Lines 1.6 and 1.7, and Line 1.9 for each eligible activity or program planned for the One-Year IHP. For the APR, complete the shaded sections to describe actual accomplishments, outcomes, and outputs for the previous 12-month program year. In particular, complete Lines 1.5, 1.8, 1.9, and 1.10 for each program included in the IHP.

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 Service [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) below

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, homebuyer1, 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.

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:	Operation of 1937 Act Housing 2017-1	
1.2. Program Description <i>(This should be the description of the planned program.):</i>		
This program will provide maintenance to the Housing Authority units on a routine and preventative maintenance basis. The routine maintenance schedule will be driven by tenant requests, self-monitoring activities, community input and the annual inspection process.		
1.3. Eligible Activity Number <i>(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.):</i>		2
1.4. Intended Outcome Number <i>(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.):</i>		3
Describe Other Intended Outcome (Only if you selected "Other" above):		
1.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>		3
Describe Other Actual Outcome (Only if you selected "Other" in above):		
1.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
This program will serve families residing in LLHA managed units. These households must meet the income guidelines set by our programs, which is below 80% AMI. While preference is given to Leech Lake Band members and other federally recognized tribes, assistance will be provided for caregivers of minor Leech Lake Band members who reside in LLHA units.		

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

The types of assistance that will be provided by this program are as follows:

- Routine maintenance - Any repairs needed to correct deficiencies or replace items based on normal wear and tear to maintain the integrity of the unit.
- Non-routine maintenance - Address damage to units that is not normal wear and tear through coordination with the Housing Services department to establish Correction Action Plans (CAP) for tenants who extensively damage units on an ongoing basis which is considered Tenant Abuse.
- Preventative maintenance - Maintenance Technicians will perform seasonal preventative maintenance services such as furnace filter replacements and air exchanger cleaning to ensure proper function of the housing systems.
- Pest Control - Administrate an Intergrated Management Plan to address pest infestations. The plan will include public education on the identification and prevention of pests as well as extermination services.
- Tenant Education - Provide tenant education on the topic of preventative maintenance. This class will held as the demand dictates. The class is available to all LLHA tenants and private home owners but will be required for any tenant who placed on a CAP.

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.*

Preventative Maintenance

A Preventative Maintenance Technician (PMT) has been hired to perform preventative maintenance on all of the existing LLHA housing stock. This will consist of cleaning air exchangers, furnaces, exhaust vents, refrigerator coils, updating fire extinguishers, smoke alarms, and carbon monoxide detectors. Two hundred and fifty-two (252) units have been serviced by the PMT.

Routine Maintenance

The LLHA Maintenance Department receives a large number of maintenance requests on a daily/weekly basis and through referrals from our quarterly and yearly inspections. Work orders are usually created due to normal wear and tear by the occupant. Appliances replaced during this reporting year: Refrigerators: 41, Ranges: 50

Furnaces replaced during this reporting period due to inefficiency or non operational: 22 Total number of work orders completed in the reporting year: Low Rent: 999 Mutual Help: 173

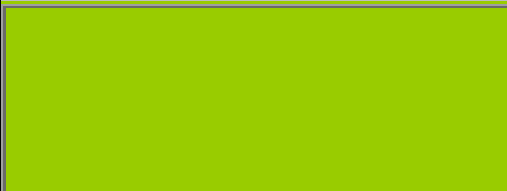
Non Routine Maintenance

These are issues in the unit that are not considered normal wear, but have been caused by the occupant. These issues are normally considered tenant abuse. When we receive a referral on a unit for tenant abuse, we conduct a home visit with the occupants to go over any possible lease violations. The Housing Services Department can place the client on a Corrective Action Plan (CAP) to help resolve any lease violations.

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
427		
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
427		

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



2.1. Program Name and Unique Identifier:	Construction of Rental Housing 2017-2	
2.2. Program Description <i>(This should be the description of the planned program.):</i>		
This program plans to construct (2) additional units of affordable rental housing.		
2.3. Eligible Activity Number <i>(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.):</i>	4	
2.4. Intended Outcome Number <i>(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.):</i>	7	
Describe Other Intended Outcome (Only if you selected "Other" above):		
2.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	7	
Describe Other Actual Outcome (Only if you selected "Other" above):		
2.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
Low income Native American families whose income falls within 80 percent AMI guidelines.		
2.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
<ul style="list-style-type: none"> • Development of (2) units of low income housing through a continued collaboration with the Leech Lake Tribal College. The units will focus on energy efficient technologies such as solar energy and passive heat. The materials needed for construction will be provided through the IHBG and the labor will be provided by the Tribal College. Housing systems such as electrical and plumbing are installed by the LLHA. This collaboration provides the tribal college students with construction experience through the building process and with internships provided by the Housing Authority. 		
2.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		
The footings and foundation were installed, new cement slab was poured, and the house was set on the foundation. Site grading was completed, and a new electrical main was installed as well as temporary power for the site. Exterior windows were installed and so was the exterior rigid foam insulation. Interior walls were constructed and the rough electrical and plumbing was completed.		
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
2		
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
1		

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

The unit is currently sixty-five percent completed. The building process was hindered due to the project utilizing student carpenters who are learning their trade during the academic year and enrollment being down for the carpentry program. We have also tried partnering with YouthBuild, but have the same scheduling issues. Furthermore, LLHA has been trying to hire local carpenters for our renovation crews. Currently, we have four (4) crews of three (3), which we typically have six (6) crews. Should we still have a problem hiring skilled labor, we will contract out the balance of the work.

3.1. Program Name and Unique Identifier:	Housing and Management Services 2017-3	
3.2. Program Description <i>(This should be the description of the planned program.):</i>		
<p>This program administrates the tenancy of LLHA's managed units through tenant file maintenance and lease compliance monitoring. The program employs Tenant Advocates, a Collection Specialist, a Waiting List Administrator, Tax Credit Compliance Specialist, Housing Inspectors and a Housing Services Coordinator. Each position has specific functions to ensure the success of our program participants as well as the program itself.</p>		
3.3. Eligible Activity Number <i>(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.):</i>	19	
3.4. Intended Outcome Number <i>(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.):</i>	6	
Describe Other Intended Outcome (Only if you selected "Other" above):		
3.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>		6
Describe Other Actual Outcome (Only if you selected "Other" above):		
3.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
<p>This program will assist families residing in LLHA managed units. These households must meet the income guidelines set by the program which is below 80% AMI. While preference is given to Leech Lake Band members and members of other federally recognized tribes, assistance will also be provided to caregivers of minor Leech Lake Band members who reside in LLHA units.</p>		
3.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		

The Waiting List Administrator will provide application intake and processing services to assist tenants with successfully applying for housing and maintain waiting list by updating applicants' application as per the Admissions Policy.

Tenant Advocates will provide assistance to tenants to foster compliance with lease agreements. This assistance will be conducted through home visits, phone contacts and Corrective Action Plan (CAP) monitoring. The Advocates will provide referral services on an as needed basis to program such as Family Preservation, county Social Services, Mental Health and financial assistance programs. Limited transportation services are provided for travel if the outcome of the travel is directly contacting to maintaining the client's housing. Advocates can assist the tenant in completing the recertification process, collect rental payments and attend court proceedings.

Housing Inspectors will conduct unit inspections on no less than a 2 year cycle. Home maintenance, mold growth prevention and pest control education will be provided by the Inspectors during the inspection. If needed, referrals will be generated by the Inspectors to the Tenant Advocates and or maintenance department as part of the inspection process.

The Housing Management program will conduct community outreach efforts to encourage positive tenant and public relations. This outreach will take the form of community meetings to obtain feedback on the effectiveness of the program, hosting satellite office hours in the community centers for tenants who are unable to travel to the Housing offices, sponsoring elder specific activities, providing access to financial literacy and preventative maintenance classes and conducting events to promote tenant's participation in a safe and healthy community.

3.8. APR: *Describe the accomplishments for the APR in the 12-month program year.*

The waiting list average for the program year is 483 applicants.

Tenant Advocates assist tenants to promote lease compliance during the program year. The Advocates help with phone calls, home visits, referral services, CAP (Corrective Action Plans) monitoring, limited transportation for directly maintaining the clients housing situation, recertifications in programs, collection of rental payments and attend court proceedings. Follow through with referral services on as needed basis to programs such as Family Preservation, ICWA, Homeless Program, and County and Tribal Social Services.

Occupancy and Collections (a Tax Credit Specialist, Housing Services Coordinator & Collections Specialist) Management conducts community outreach meetings to encourage positive tenant and public relations, and to ensure the education of literacy, gain feedback with surveys, updates from Lease changes, and other specific activities that encourages positive relations. The LLHA sponsors bi-weekly tenant orientation classes for financial literacy and preventative maintenance, and expectations of their lease agreements.

Housing Inspectors currently conduct yearly inspections, versus two year inspections noted above in 3.7. Monitoring home maintenance, mold growth prevention, and pest control education. If needed, referrals are generated to the advocates, occupancy and/or the maintenance department for further follow up as part of the inspection process.

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
	800	
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
	909	

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

4.1. Program Name and Unique Identifier:	Crime Prevention and Safety 2017-4	
4.2. Program Description <i>(This should be the description of the planned program.):</i>		
Design strategies to reduce crime and increase safety in our housing communities		
4.3. Eligible Activity Number <i>(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.):</i>	21	
4.4. Intended Outcome Number <i>(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.):</i>	11	
Describe Other Intended Outcome (Only if you selected "Other" above):		
4.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	11	
Describe Other Actual Outcome (Only if you selected "Other" above):		
4.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
Low income Native American families whose income is less than 80% AMI		
4.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		

Leech Lake Housing Authority will enforce lease agreements to create safe and secure communities and make efforts to engage the community to participate in community based activities to strengthen community identity and ownership. We will collaborate with the Leech Lake Tribal Police Department to increase communication on the status of the communities and develop corrective policies when needed.

We will continue to operate safety lighting in the communities and plan to replace outdated lighting with newer LED technology to increase the energy efficiency of the existing units. We will be installing additional lighting along a walking path in the District 2 community which provides access to a small store.

The lack of healthy and safe activity venues for the youth in our communities contributes to youth crimes such as gang activity, drug and alcohol abuse and vandalism. Many times, it is LLHA property that is vandalized. It is vital to provide constructive alternatives to unhealthy and destructive behaviors - not only for the young person's well being but for the protection of other community members and LLHA housing stock that is needed now and in the future. LLHA will be upgrading and maintaining playgrounds and basketball courts within the housing communities to provide the youth with these healthy venues. We will be supporting the Cass Lake Boys & Girls Club by contributing to their curriculum and supporting their efforts in local youth development. We will support youth focused events sponsored by the Leech Lake Band of Ojibwe District offices by providing staff time to carry out the goals of the events.

4.8. APR: *Describe the accomplishments for the APR in the 12-month program year.*

The LLHA continues to work with LLDPS by their staff attending our weekly staff meetings and by us receiving the Incident Reports that are LLHA based. Continued enforcement of the Drug and Alcohol Free policies set in our communities, and participation in events to increase the communities' awareness and to assist to develop what corrective actions are needed.

The LLHA has added eight (8) new LED street lighting in District I, and added thirteen (13) LED street lights in District III.

The LLHA worked on acknowledging clean, safe, debris free yards with incentives that get the communities involved, We enforced lease agreements when corrective actions were needed, and assisted them with working on a CAP (Corrective Action Plan) that involves the whole household.

Two (2) basketball courts were striped in District I.

Assisted with the installation of an upgraded playground equipment for the Prescott Community in District I.

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
	569	

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
	793	

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

The installation of additional LED lighting along a walking path in District 2 was not installed this fall do to an early frost. The utility provider won't schedule the installation until this spring.

The LLHA hasn't made a monetary contribution to the Boy's and Girl's Club of the Leech Lake Area for this reporting period.

5.1. Program Name and Unique Identifier:	Modernization of 1937 Act Housing 2017-5	
5.2. Program Description <i>(This should be the description of the planned program.):</i> This program will conduct modernization activities on LLHA managed units.		
5.3. Eligible Activity Number <i>(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.):</i>	1	
5.4. Intended Outcome Number <i>(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.):</i>	3	
Describe Other Intended Outcome (Only if you selected "Other" above): 		
5.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	3	
Describe Other Actual Outcome (Only if you selected "Other" above): 		
5.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
Native American families residing in LLHA managed units whose income falls below 80% AMI.		
5.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
<ul style="list-style-type: none"> • Renovate and rehab units that are in substandard condition. Units scheduled for modernization will be determined by the inspection process. • Conduct mold remediation and provide tenant education on mold prevention during the inspection process. • Collaborate with the LLBO Air Quality Specialist to promote awareness of the importance of maintaining good indoor air quality to alleviate negative health effects on people suffering from asthma and COPD. • Promote awareness of radon and its effects on human health by attending community events and hosting a booth to disseminate information. Conduct radon testing and remediation when unacceptable radon levels are present in LLHA units. • Procure and manage contract service work for various projects in either modernization or rehabilitation of substandard units. 		
5.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		

Renovated sixty-three (63) 37' Act Housing units that were in substandard condition.

Conducted mold remediation on twenty-six (26) 37' Act Housing units.

Tenant education on mold prevention was provided to clients during our routine inspection process.

LLBO Air Quality Specialist tested two hundred and seventeen (217) Housing units in the past program year and replaced and/or installed sixteen (16) mitigation systems. Provided outreach information to clients during testing process and promoted radon awareness at various community functions.

5.9: 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
75		
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
89		

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

6.1. Program Name and Unique Identifier:	Operation of LIHTC Units 2017-6	
6.2. Program Description <i>(This should be the description of the planned program.):</i>		
This program will provide operation and maintenance of Low Income Housing Tax Credit Units along with tenant assistance for program compliance.		
6.3. Eligible Activity Number <i>(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.):</i>	20	
6.4. Intended Outcome Number <i>(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.):</i>	6	
Describe Other Intended Outcome (Only if you selected "Other" above):		
6.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>		6
Describe Other Actual Outcome (Only if you selected "Other" above):		
6.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
Low income Native American families whose income that fall within program guidelines.		
6.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
<ul style="list-style-type: none"> • Assure compliance with all state regulations for file compliance and physical unit conditions. • Conduct quarterly unit inspections and make needed repairs to maintain the unit in standard conditions. • Process yearly tenant recertifications. • Encourage adherence to all policies and lease agreements with active tenant advocacy and promote awareness via a monthly tenant newsletter. • Administrate the tenant incentive program which acknowledges positive program participation. • Conduct community meetings to address concerns of the participants and gain feedback on the program's success. 		
6.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		

Renovated seventy-six (76) LIHTC units during this reporting period.

Conducted mold remediation on five (5) LIHTC units.

Unit inspections are conducted on a quarterly basis, which translates into seven hundred and eighty (780) inspections per year.

LLBO Air Quality Specialist tested ninety-two (92) LIHTC units in the past program year.

The Maintenance Department completed six hundred and forty-seven (647) work orders on LIHTC units.

The Tax Credit Compliance Specialist remains in compliance by attending yearly state trainings to ensure program compliance, tenant file compliance, and physical unit conditions are being monitored and compliant.

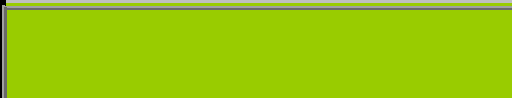
Tenant incentives for participating and acknowledgement of positive program participation. Such as keeping yards clean, upkeep of households, and by updating yearly recertifications.

Conduct and assist with local community meetings to address community concerns and gain feedback on housing services through surveys conducted in the communities.

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
195		
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
195		

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



7.1. Program Name and Unique Identifier:	Homeless Resource Program 2017-07	
7.2. Program Description (This should be the description of the planned program.):		
Provide assistance to homeless individuals to overcome homelessness and obtain housing		
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.):	17	
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.):	5	
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.):	5	
Describe Other Actual 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 <u>separate</u> program within this section.):		
Individuals who are experiencing long term homelessness whose income is below 80% AMI		
7.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):		
<p>LLHA will continue its collaboration with the transitional housing project known as Conifer Estates which is located in Bemidji, MN. This project provides housing for a maximum of two years for homeless individuals and provides the opportunity to overcome issues which have prevented the individual from maintaining permanent housing. LLHA supports (5) units within the project for the particular use of Leech Lake band members. LLHA provides rental deposit assistance and monthly rent subsidy for the clients who reside in these units.</p> <p>LLHA has formed a collaboration with a permanent supportive housing project known as Park Place which will be located in Bemidji, MN. The project has been funded by LIHTC and will soon be in the construction phase. This project will serve long term homeless individuals who also deal with chronic alcohol and substance abuse. This project will provide housing with case management services and will have no limit on the time that housing can be provided. LLHA will support (5) units within the project for the particular use of Leech Lake band members in the form of rental deposit and monthly rental subsidy assistance.</p>		

7.8. APR: Describe the accomplishments for the APR in the 12-month program year.

LLHA Homeless Resource Program has assisted seven (7) households in Conifer Estates in obtaining housing in the form of security deposit and rental assistance. After the client is housed, the Homeless Resource Program continues to provide services through case management, referrals to outside resources, and transportation if needed to and from those resources.

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
	10	
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
	7	

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

The construction of Park Place wasn't completed until mid-November 2017.

8.1. Program Name and Unique Identifier:	VASH 2017-8	
8.2. Program Description <i>(This should be the description of the planned program.):</i>		
This program will provide rental assistance to Native American Veterans who are experiencing homelessness.		
8.3. Eligible Activity Number <i>(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.):</i>	17	
8.4. Intended Outcome Number <i>(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.):</i>	5	
Describe Other Intended Outcome (Only if you selected "Other" above):		
8.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	12	
Describe Other Actual Outcome (Only if you selected "Other" above):		
Please refer to 8.8 and 8.10		
8.6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
Native American Veterans who are experiencing homelessness who income is below 80% AMI		
8.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
LLHA will administrate the VASH vouchers for homeless Veterans who have applied for and been approved by the Veterans Administration case worker.		
8.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		
Zero (0) Veterans were served with Tribal HUD-VASH in this reporting period.		
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
	20	

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	

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

This outcome was caused by the length of time needed to employ a Case Manager with the required program credentials through the Veterans Administration. LLHA has been in contact with both the Veterans Administration and HUD EWONAP during the reporting time period. Good news, a Case Manager has been hired by the Veterans Administration!

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

NAHASDA §§ 102(b)(2)(A)(v), 102(b)(2)(A)(iv)(I-III)

(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.):*

a Routine maintenance and Non-Routine maintenance will be driven by tenant reporting, inspection process or community input. Preventative maintenance will be scheduled seasonally by the Maintenance Supervisor to address routine seasonal maintenance needed to keep unit systems in optimal working order.

All unit systems are maintained by the LLHA staff: HVAC, electrical, plumbing, structural components such as walls, doors, windows, roofs, appliances.

(2) Demolition and Disposition (NAHASDA § 102(b)(2)(A)(iv)(I-III), 24 CFR 1000.134) Describe any planned demolition or sale of 1937 Act or NAHASDA-assisted housing units. If the recipient is planning on demolition or disposition of 1937 Act or NAHASDA-assisted housing units, be certain to include the timetable for any planned demolition or disposition and any other information that is required by HUD with respect to the demolition or disposition.

No demolitions or disposals are specifically planned.

SECTION 5: BUDGETS

NAHASDA §§ 102(b)(2)(C), 404(b)

(1) Sources of Funding (NAHASDA § 102(b)(2)(C)(i), (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.)**

SOURCE	IHP					APR					
	(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-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 - I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	\$4,762,761	\$4,294,718	\$9,057,479	\$4,326,200	\$4,731,279	\$4,880,203	\$4,017,920	\$8,898,123	\$3,610,029	\$5,288,094	\$141,143
2. IHBG Program Income	\$0	\$338,040	\$338,040	\$338,040	\$0	\$1,069,446	\$367,201	\$1,436,647	\$162,072	\$1,274,575	
3. Title VI			\$0		\$0			\$0		\$0	
4. Title VI Program Income			\$0		\$0			\$0		\$0	
5. 1937 Act Operating Reserves			\$0		\$0			\$0		\$0	
6. Carry Over 1937 Act Funds			\$0		\$0			\$0		\$0	
LEVERAGED FUNDS											
7. ICDBG Funds			\$0		\$0			\$0		\$0	
8. Other Federal Funds	\$159,022	\$159,022	\$318,044	\$167,022	\$151,022	\$213,623	\$33,152	\$246,775	\$10,829	\$235,946	\$47,739

9. LIHTC		\$335,000	\$335,000	\$335,000	\$0	\$373,588	\$373,588	\$373,588	\$0		
10. Non-Federal Funds	\$343,855	\$90,000	\$433,855	\$343,855	\$90,000	\$273,889	\$150,000	\$423,889	\$243,759	\$180,130	
TOTAL	\$5,265,638	\$5,216,780	\$10,482,418	\$5,510,117	\$4,972,301	\$6,437,161	\$4,941,861	\$11,379,022	\$4,400,277	\$6,978,745	\$188,882
TOTAL Columns C & H, 2 through 10			\$1,424,939					\$2,480,899			

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.*)

PROGRAM NAME	IHP			APR		
	(L)	(M)	(N)	(O)	(P)	(Q)
	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)
Operation of 1937 Act Housing 2017-1	\$1,807,700	\$338,040	\$2,145,740	\$1,489,054	\$157,849	\$1,646,903
Construction of Rental Housing 2017-2	\$130,000		\$130,000	\$23,373	\$7,628	\$31,001

Housing and Management Services 2017-3	\$440,000		\$440,000	\$467,216	\$100	\$467,316
Crime Prevention and Safety 2017-4	\$68,000		\$68,000	\$58,400		\$58,400
Modernization of 1937 Act Housing 2017-5	\$1,117,000		\$1,117,000	\$910,495		\$910,495
Operation of LIHTC Units 2017-6	\$70,000	\$335,000	\$405,000		\$373,588	\$373,588
Homeless Resource Program 2017-07	\$60,000	\$343,855	\$403,855	\$34,366	\$248,574	\$282,940
VASH 2017-8		\$167,022	\$167,022			\$0
Planning and Administration	\$633,500		\$633,500	\$627,125	\$2,509	\$629,634
Loan repayment - describe in 3 & 4 below			\$0			\$0
TOTAL	\$4,326,200	\$1,183,917	\$5,510,117	\$3,610,029	\$790,248	\$4,400,277

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):*

Leveraged funds - The Homeless Resource Program is primarily funded with State funds from the Department of Health and Human Services, specifically LTH, ESP and HYA funds. The LTH funds are disbursed through a Tribal Collaborative. When application was made for the LTH funds, LLHA reported that \$60,000 in IHBG funds were to be used as matching funds along with \$20,000 in ESP funds and \$60,000 in HYA funds.

The \$60,000 in IHBG funds are used to provide rental assistance and rental deposit assistance as stated in the "Levels of Assistance" portion of Program 2017-7 of this IHP.

Add Bullet

(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.):*



Add Bullet

SECTION 6: OTHER SUBMISSION ITEMS

[102(b)(2)(C)(ii)], [201(b)(5)], [202(6)], [205(a)(2)], [209], 24 CFR §§ 1000.108, 1000.120, 1000.142, 1000.144

(1) Useful Life/Affordability Period(s) (NAHASDA § 205, 24 CFR § 1000.142) *(Describe your plan or system for determining the useful life/affordability period of the housing it assists with IHBG and/or Title VI funds must be provided in the IHP. A record of the current, specific useful life/affordability period for housing units assisted with IHBG and/or Title VI funds (excluding Mutual Help) must be maintained in the recipient's files and available for review for the useful life/affordability period.):*

Leech Lake Housing Authority has elected to set the Useful life / Affordability Period at 25 years. It is the intention that all current Low Rent units will remain affordable for the entire life span of the unit.

(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.):*

Not applicable

(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.

Tribal and Indian Preference are given in the following areas of our operations:

- Housing Applicants - Leech Lake Band member applicants receive 20 additional preference points and members of other federally recognized tribes receive 5 preference points on their applications for housing.
- Employment - Employment applicants are given additional points during the interview process if the applicant is a Leech Lake Band member (5 pts) or member of another federally recognized tribe (3pts)
- Contracting - Indian preference is given for the purposes of selecting subcontractors. Bids from Indian owned businesses are allowed a 10% variance from non-Indian owned businesses.

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

Do you intend to exceed your allowable spending cap for Planning and Administration? Yes No

If yes, describe why the additional funds are needed for Planning and 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 exceed your spending cap for Planning and Administration?

Yes No

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

If you did not receive approval for exceeding your spending cap on planning and administration costs, describe the reason(s) for exceeding the 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.

The 2010 US Census reported 488 American Indians in Beltrami County. Service costs provided to this population is shared 50/50 with the Red Lake Band of Chippewa.

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:	\$60,000.00	\$60,000.00
Funds from Other Sources:	\$0.00	\$0.00

(7) APR: *If answered "Yes" in Line 6, for each separate formula area, 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:		\$34,366.00
Funds from Other Sources:		

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 the 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 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:	
(5) Authorized Official's Name and Title:	
(6) Authorized Official's Signature:	
(7) Date (MM/DD/YYYY):	

SECTION 9: TRIBAL WAGE RATE CERTIFICATION

NAHASDA §§ 102(b)(2)(D)(vi), 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 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) List the activities using tribally determined wage rates:

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SECTION 10: SELF-MONITORING

NAHASDA § 403(b), 24 CFR §§ 1000.26, 85.37, 85.40

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

Yes No

(2) Pursuant to 24 CFR § 1000.502(b) where the recipient is a TDHE, did the TDHE provide periodic progress reports including the self-monitoring report, Annual Performance Report, and audit reports to the Tribe?

Yes No Not Applicable

(3) Did you conduct self-monitoring, including monitoring sub-recipients?

Yes No

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

Self Monitoring Policy and checklists were developed this past program year, but due to administrative changes this hasn't been implemented as of yet. We are in the process of scheduling a staff training regarding our Self Monitoring Policy and Procedure requirements.

While the RTC was not furnished with self-monitoring results, we do provide formal quarterly progress reports to the Tribal Council on the Housing Authority's activities during the given quarter. Furthermore, the Executive Director attends weekly Tribal Council briefings and Tribal Council meetings to maintain open lines of communication on all housing related concerns.

SECTION 11: INSPECTIONS

NAHASDA § 403(b)

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

Activity		Results of Inspections				Total number of units inspected
		Total Number of Units (Inventory)	Units in standard condition	Units needing rehabilitation	Units needing to be replaced	
(a)		(b)	(c)	(d)	(e)	(f)
1	1937 Housing Act Units:					
	a. Rental	232	68	147	1	216
	b. Homeownership	33	3	7	0	10
	c. Other	76	13	63	0	76
1937 Act Subtotal		341	84	217	1	302
2	NAHASDA assisted units:					
	a. Rental	26	8	18	0	26
	b. Homeownership	51	3	2	0	5
	c. Rental Assistance	0	0	0	0	0
	d. Other	0	0	0	0	0
NAHASDA Subtotal		77	11	20	0	31
Total		418	95	237	1	333

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

(3) If no, why not:

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SECTION 12: AUDITS

24 CFR § 1000.544

This section is used to indicate whether an Office of Management and Budget 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 APR reporting period?

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(s) (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.

The APR wasn't submitted to the RTC due to no scheduled Tribal Council meetings between the completion of the APR and the submittal date. The APR will be presented to the Tribal Council at the beginning of the New Year. Note: Quarterly reports of the LLHA activity are submitted to the Tribal Council at the duration of each quarter.

The APR as of January 2, 2017 will be posted on the LLHA web page.

(4) Summarize any comments received from the Tribe(s) and/or the citizens (NAHASDA § 404(d)).

All public comments will be reviewed and considered by the TDHE and can be forwarded to EWONAP if requested.

SECTION 14: JOBS SUPPORTED BY NAHASDA

NAHASDA § 404(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	69
(2) Number of Temporary Jobs Supported	16

(3) Narrative (optional):

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SECTION 15: IHP WAIVER REQUESTS

NAHASDA § 101(b)(2)

THIS SECTION IS ONLY REQUIRED IF THE RECIPIENT IS REQUESTING A WAIVER OF AN IHP SECTION OR A WAIVER OF THE IHP SUBMISSION DUE DATE.

A waiver is valid for a period not to exceed 90 days. Fill out the form below if you are requesting a waiver of one or more sections of the IHP. **NOTE:** This is NOT a waiver of the IHBG program requirements but rather a request to waive some of the IHP submission items.

(1) List below the sections of the IHP where you are requesting a waiver and/or a waiver of the IHP due date.

(List the requested waiver sections by name and section number):

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(2) Describe the reasons that you are requesting this waiver *(Describe completely why you are unable to complete a particular section of the IHP or could not submit the IHP by the required due date.):*

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(3) Describe the actions you will take in order to ensure that you are able to submit a complete IHP in the future and/or submit the IHP by the required due date. *(This section should completely describe the procedural, staffing or technical corrections that you will make in order to submit a complete IHP in the future and/or submit the IHP by the required due date.):*

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(4) Recipient:

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(5) Authorized Official's Name and Title:

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(6) Authorized Official's Signature:

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(7) Date (MM/DD/YYYY):

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SECTION 16: IHP AMENDMENTS

24 CFR §1000.512

Use this section for IHP amendments only.

This section is only filled out if the recipient is making an official amendment to an IHP that was previously determined to be in compliance by HUD, and the recipient is required to send the amended IHP to HUD for review. The recipient may amend its IHP at any time during the Program Year.

There are only two instances when an IHP amendment must be submitted to HUD for review and determination of compliance:

- (1) When the recipient is adding a new activity that was not described in the current One-Year Plan that was determined to be in compliance by HUD; or
- (2) When the recipient is reducing the amount of funds budgeted to protect and maintain the viability of housing assisted under the 1937 Act.

The recipient is not required to submit an amended IHP to HUD:

If the revision simply alters the IHBG budget, including moving funds among planned tasks, or if it deletes a planned activity, *unless* the re-programmed funds from the budget amendment or task deletion will be used for a new task not currently in an IHP determined by HUD to be in compliance, *or unless* the change is to reduce the budget supporting 1937 Act units.

NOTES:

If Line 2 in Section 8 (IHP Tribal Certification) is checked in the current IHP, a new certification must be signed and dated by the authorized tribal official and submitted with the IHP Amendment.

Section 1 (Cover Page) is recommended but not required with an IHP Amendment submission.

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 Service [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

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. Program Name and Unique Identifier:		
2. Program Description <i>(This should be the description of the planned program.):</i>		
3. Eligible Activity Number <i>(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.):</i>		
4. Intended Outcome Number <i>(Select one outcome from the Outcome list.):</i>		
Describe Other Intended Outcome (Only if you selected "Other" above):		
5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>		
Describe Other Actual Outcome (Only if you selected "Other" in above):		
6. Who Will Be Assisted <i>(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 <u>separate</u> program within this section.):</i>		
7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		
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

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



(11) Amended 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.**)

SOURCE	IHP					APR					
	(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-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 - I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds			\$0		\$0			\$0		\$0	
2. IHBG Program Income			\$0		\$0			\$0		\$0	
3. Title VI			\$0		\$0			\$0		\$0	
4. Title VI Program Income			\$0		\$0			\$0		\$0	
5. 1937 Act Operating Reserves			\$0		\$0			\$0		\$0	
6. Carry Over 1937 Act Funds			\$0		\$0			\$0		\$0	
LEVERAGED FUNDS											
7. ICDBG Funds			\$0		\$0			\$0		\$0	
8. Other Federal Funds			\$0		\$0			\$0		\$0	
9. LIHTC			\$0		\$0			\$0		\$0	
10. Non-Federal Funds			\$0		\$0			\$0		\$0	
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

TOTAL Columns C & H, 2 through 10	\$0	\$0
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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.**

(12) Amended Uses of Funding (NAHASDA § 102(b)(2)(C)(ii)) *(Note that the budget should not exceed the total funds on hand 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.**)*

PROGRAM NAME	IHP			APR		
	(L) Prior and current year IHBG (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)	(O) Total IHBG (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)
			\$0			\$0
Planning and Administration			\$0			\$0
Loan repayment			\$0			\$0
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Notes:

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

(13) 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):*

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(14) 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.):*

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(15) Recipient:	
(16) Authorized Official's Name	
(17) Authorized Official's Signature:	I certify that all other sections of the IHP approved on
	are accurate and reflect the activities planned.
(18) Date (MM/DD/YYYY):	