

For Recipient's Use:

2013 IHP/APR**Pueblo de Cochiti Housing Authority****Pueblo de Cochiti**

INDIAN HOUSING PLAN/ANNUAL PERFORMANCE REPORT

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

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

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.

NOTE: Grants awarded under the American Recovery and Reinvestment Act (Recovery Act) are excluded from this process. Grants under the Recovery Act continue to use the stand alone APR (HUD-52735-AS).

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

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Note: The page numbers in the Table of Contents can update automatically as the IHP or APR is completed. To update the page numbers, right-click anywhere in the table, select “Update Field” and select “update page numbers only.”

SECTION 1: COVER PAGE

(1) Grant Number: **55IH3501240**

(2) Recipient Program Year: **2013**

(3) Federal Fiscal Year: **2013**

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

(5) Amended Plan (Complete this Section and Section 16)

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

(7) Tribe

(8) TDHE

(9) Name of Recipient: Pueblo de Cochiti Housing Authority		
(10) Contact Person: Rick Tewa		
(11) Telephone Number with Area Code: 505-465-0264		
(12) Mailing Address: PO Box 98		
(13) City: Cochiti Pueblo	(14) State: New Mexico	(15) Zip Code: 87072
(16) Fax Number with Area Code (if available): 505-465-0281		
(17) Email Address (if available): ricktewa@cochitihousing.org		

(18) If TDHE, List Tribes Below: Pueblo de Cochiti

(19) Tax Identification Number: 85-0446350

(20) DUNS Number: 142913008

(21) CCR Expiration Date: 01/16/2013

(22) IHBG Fiscal Year Formula Amount: \$307,404

(23) Name of Authorized IHP Submitter: Rick Tewa

(24) Title of Authorized IHP Submitter: Executive Director

(25) Signature of Authorized IHP Submitter:

(26) IHP Submission Date: 10/15/12

(27) Name of Authorized APR Submitter:

(28) Title of Authorized APR Submitter:

(29) Signature of Authorized APR Submitter:

(30) APR Submission Date:

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

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

ONE YEAR PLAN & ANNUAL PERFORMANCE REPORT

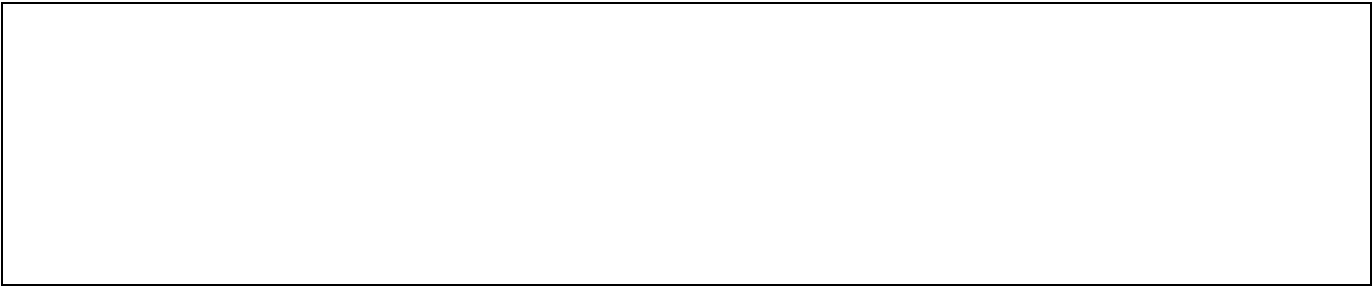
SECTION 2: HOUSING NEEDS (NAHASDA § 102(b)(2)(B))

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

(A) Type of Need	Check All That Apply	
	(B) Low-Income Indian Families	(C) All Indian Families
(1) Overcrowded Households	<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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>

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

1. Construct a warehouse facility to accommodate maintenance tools, supplies and materials for PdCHA housing program.
2. Provide new youth activity equipment area to deter vandalism, gangs and social problems within the community.

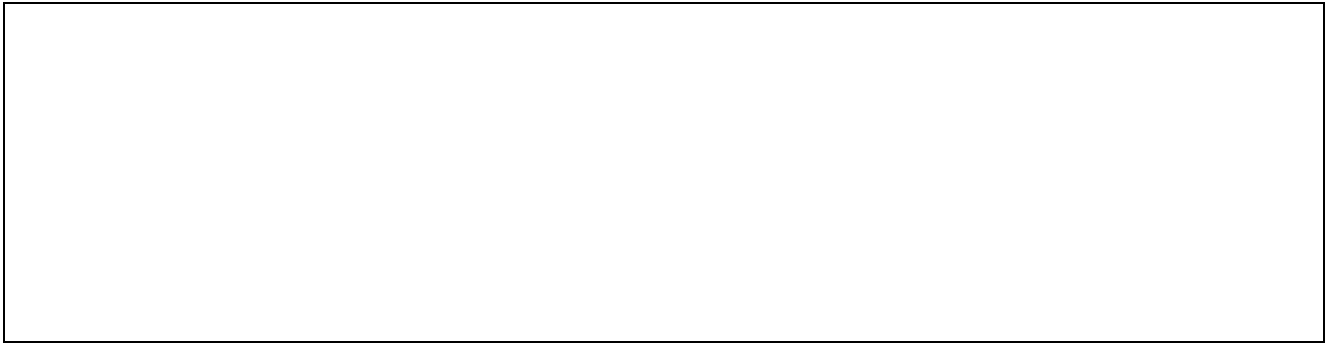


(3) Planned Program Benefits. *(Describe below how your planned programs and activities will address the needs of low income families identified above. Also describe how your planned programs will address the various types of housing assistance needs. NAHASDA § 102(b)(2)(B):*

The PdCHA will continue to focus on its 11 low rent CAS units by providing maintenance and rehabilitation services as needed. During this 2013 program year efforts will be made to modernize the all vacant units to prepare them for occupancy of low income Native American families.

Utilizing leveraged IHBG and 2010 ICDBG funds the PdCHA will rehabilitate 6-7 private homes and reconstruct 2 adobe homes with the community

(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):* The service area for the Pueblo de Cochiti Housing Authority is the Pueblo de Cochiti Reservation. Assistance will be provided to the 42 Current Assisted Stock under management. Focus will also placed on rehabilitating efforts for low income households, elderly and disabled tribal members living on the reservation.



SECTION 3: PROGRAM DESCRIPTIONS

Planning and Reporting Program Year Activities

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

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

Eligible Activity	Output Measure	Eligible Activity	Output Measure
(1) Modernization of 1937 Act Housing [202(1)]	Units	(13) Down Payment/Closing Cost Assistance [202(2)]	Units
(2) Operation of 1937 Act Housing [202(1)]	Units	(14) Lending Subsidies for Homebuyers (Loan) [202(2)]	Units
(3) Acquisition of Rental Housing [202(2)]	Units	(15) Other Homebuyer Assistance Activities [202(2)]	Units
(4) Construction of Rental Housing [202(2)]	Units	(16) Rehabilitation Assistance to Existing Homeowners [202(2)]	Units
(5) Rehabilitation of Rental Housing [202(2)]	Units	(17) Tenant Based Rental Assistance [202(3)]	Households
(6) Acquisition of Land for Rental Housing Development [202(2)]	Acres	(18) Other Housing Services [202(3)]	Households
(7) Development of Emergency Shelters [202(2)]	Households	(19) Housing Management Services [202(4)]	Households
(8) Conversion of Other Structures to Affordable Housing [202(2)]	Units	(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]	Units
(9) Other Rental Housing Development [202(2)]	Units	(21) Crime Prevention and Safety [202(5)]	Dollars
(10) Acquisition of Land for Homebuyer Unit Development [202(2)]	Acres	(22) Model Activities [202(6)]	Dollars
(11) New Construction of Homebuyer Units [202(2)]	Units	(23) Self-Determination Program [231-235]	Units/Dollars
(12) Acquisition of Homebuyer Units [202(2)]	Units	(24) Infrastructure to Support Housing [202(2)]	Dollars

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

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

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

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

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

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

1.1 Program Name and Unique Identifier: CAS Management

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

PdCHA will utilize the grant funds under the 2013 housing plan to continue the mutual help and rental programs. PdCHA will operate the current programs, enforcing the agreements signed with each program recipient and ensuring compliance with the housing policies per NAHASDA and PdCHA policies and requirements.

For continued occupancy, participants in both programs are required to abide by their respective agreements and that includes the annual re-certification, inspection, and paying the rent or house payments as scheduled. The homebuyers are required to perform the required maintenance on their homes and the PdCHA maintains regular routine maintenance on rental units.

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

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

1.4 Intended Outcome Number *(Select one outcome from the Outcome list.):*

(3) improve quality of substandard units

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

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

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

Funds will support the annual activities of the PdCHA housing program to ensure sound fiscal management, human resources management, planning and development of maintenance programs, and staff with supportive services of a fee accountant and will support the cost of maintenance, associated utility costs, insurance, work order systems, inventory controls, tracking, purchasing supplies/materials, services, equipment, tenant relations, contracting, equipment/vehicle maintenance, Board meetings, training, billing receivables, subcontract activity reporting, legal assistance, pest control, and preventive maintenance activities. The housing participants will not have any financial obligation to pay for any of these services as mandated under NAHASDA.

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

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

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program	APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
40	-	-			

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

2.1 Program Name and Unique Identifier: MODERNIZATION OF CAS UNITS

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

For the FY 2013 the PdCHA's will modernizes 3 Rental and 2 MH CAS units which were acquired through evictions under its 2010 ICDBG grant. The units will be brought up to a safe, decent and sanitary level for the next LMI applicant on the waiting list. Units will need upgrading, weatherization and renovation for normal wear and tear items. Examples of needed

modifications could include; replacement of interior/exterior doors; furnace and ductwork on some units, floor tile replacement, drywall repair-tape and texture, re-painting throughout, possible window replacements, re-stucco, exterior trim painting, replace interior light fixtures with EnergyStar, replace bathroom/kitchen fixtures, carpet replacement/cleaning, and possible replacement of water heaters and appliances with EnergyStar products, if needed.

The PdCHA has also implemented its Green Built Concept to meet the mandates of HUD and will do its part to reduce emissions and energy usage and utilize green technologies and products in its modernization project, where possible.

2013 IHBG funds will be utilized as leveraged with other funding sources for additional monies for housing modernization services.

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

(1) MODERNIZATION OF 1937 ACT HOUSING [202(1)]

2.4 Intended Outcome Number (Select one outcome from the Outcome list.):

(3) Improve quality of substandard units

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

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

Low – Moderate Income Families.

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

Modernization of each vacant CAS unit will average about \$25,000 per unit. These units will be modernized for the next eligible approved family on the waiting list. Families will be required to make monthly payments not to exceed 30% of adjusted income.

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

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

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program	APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
5	-	-			

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

3.1 Program Name and Unique Identifier: REHABILITATION PROGRAM

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

The PdCHA will leverage its 2011 & 2012 IHBG funds with its 2010 ICDBG to rehabilitate 6-7 existing homes within the Pueblo for low income families, elders, and handicapped tribal members.

Examples of needed modifications could include; replacement of interior/exterior doors; furnace and ductwork on some units, floor tile replacement, drywall repair-tape and texture, re-painting, window replacements, roofing, re-stucco, exterior trim painting, replace interior light fixtures with EnergyStar products, replacement of bathroom/kitchen cabinets and fixtures, and replacement of water heaters and appliances with EnergyStar products, if needed.

2013 IHBG funds will be utilized as leveraged with other funding sources for additional monies for housing rehabilitation services.

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

(16) Rehabilitation Assistance to Existing Homeowners [202(2)]

3.4 Intended Outcome Number (*Select one outcome from the Outcome list.*):

(3) Improve quality of substandard units

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

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

6 - 7 LMI families who are below the 80% median income level will be assisted under this activity in the 2010 ICDBG grant period.

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

Rehabilitation of each vacant CAS units will average about \$25,000 per unit. The HUD-assisted units will be modernized for the next eligible approved family on the waiting list with families required to make monthly payments not to exceed 30% of adjusted income. Rehabilitation of each private home will average about \$25,000 per unit.

Examples of modifications could include; replacement of interior/exterior doors; furnace and ductwork on some units, floor tile replacement, drywall repair-tape and texture, re-painting,

window replacements, roofing, re-stucco, exterior trim painting, replace interior light fixtures with EnergyStar products, replacement of bathroom/kitchen cabinets and fixtures, and replacement of water heaters and appliances with EnergyStar products, if needed.

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

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

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program	APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
6-7	-	-			

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

4.1 Program Name and Unique Identifier: **NEW HOME CONSTRUCTION**

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

During the FY2013 the PdCHA will demolish and re-construct two adobe homes utilizing 2010 ICDBG & leveraged IHBG grant funds for two LMI families.

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

(11) NEW CONSTRUCTION OF HOMEBUYER UNITS [202(2)]

4.4 Intended Outcome Number (Select one outcome from the Outcome list.):

(3) IMPROVE QUALITY OF SUBSTANDARD UNITS

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

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

2 LMI families who are below the 80% median income level will be assisted under this activity.

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

Each home will be demolished and re-constructed utilizing adobe construction and energy efficient and green built products. Each will receive approximately \$117,000 in assistance. This is a grant under ICDBG and the participant will not have any financial obligation to pay back unless the homeowner sells the home with a fifteen year period. Homeowners are responsible for maintaining the home and PdCHA will do annual inspections for the first five years.

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

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

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program	APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
2	-	-			

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

5.1 Program Name and Unique Identifier: SELF-MAINTENANCE CAPACITY PROGRAM

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

The PdCHA will provide its participants with counseling and hands-on training on various routine maintenance and safety topics. The PdCHA will provide up to four tenant workshop during the 12 month period to tenants and community members on home maintenance and repair.

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

(18) OTHER HOUSING SERVICE [202(3)]

5.4 Intended Outcome Number (Select one outcome from the Outcome list.):

(3) Improve quality of substandard units

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

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

CAS LMI families who are below the 80% median income level will be assisted under this activity.

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

CAS households will be invited to attend four workshops during the FY on home routine and non-routine maintenance and repair at no cost to the families.

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

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	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
	42	-			

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

6.1 Program Name and Unique Identifier: **MAINTENANCE WAREHOUSE DEVELOPMENT**

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

The PdCHA plans to utilizing IHBG funds to construct a 30' X 40' Maintenance Warehouse for workspace support the Force Account crews, tool crib, and project material and supply inventory storage. Currently the PdCHA does not have adequate space to store its materials, supplies and tools. The lack of a secured covered facility leaves no other choice but to leave these items expose to the elements and subject them to deterioration and/or theft.

Additionally the work crews do not have adequate space to perform work tasks with adequate space and ventilation. The storage area will assist in the opportunity of buying materials in larger quantities to take advantage of discounts for bulk buying. Anticipated Cost is \$25,000

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

(22) MODEL ACTIVITIES [202(6)]

6.4 Intended Outcome Number (Select one outcome from the Outcome list.):

(12) Other – Maintenance Warehouse Construction

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

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

The construction of the warehouse will assist the PdCHA to better serve the CAS and community by having supplies and materials readily available for routine and non-routine maintenance issues, renovation of CAS units, and rehabilitation and construction of homes.

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

Once the warehouse is constructed it will help the PdCHA assist LMI households within the Pueblo de Cochiti.

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

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

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program	APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
-	52	-			

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

7.1 Program Name and Unique Identifier: **CAS Residential Youth and Family Park**

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

The PdCHA plans to utilizing 2013 IHBG funds to develop and construct a Residential Youth and Family area within the CAS housing complex to provide playground equipment and family social area to deter crime and increase family unity. Currently the PdCHA housing area does not have adequate facilities for youth ages 3 – 10 years of age space and for family gatherings. The lack of a close designated play and park area requires the residents to frequently visit sites 10 miles away or further. This puts a burden on those families that do not have adequate transportation and young children must cross busy streets in the Pueblo to get to a play facility. This area would provide a more centralized place that young children could go without fear of oncoming traffic and that parents can frequent with their children thus increasing family unity. Anticipated Cost is \$25,000

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

(10) Acquisition of Land for Homebuyer Unit Development

7.4 Intended Outcome Number *(Select one outcome from the Outcome list.):*

(12) Other – Establishing a family activity area.

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

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

The project will assist all the tenants under the CAS program and better serve the CAS tenants of which all are low income.

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

Once the recreation area project is completed assistance will be given to LMI households within the Pueblo de Cochiti CAS housing complex and make a safer environment for the youth. Level of assistance will be \$25,000 for a 40 managed units.

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

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

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program	APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
-	-	1			

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

NOTE: Remember to complete all the text boxes in Section 3 for each IHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.10 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

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

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

The PdCHA will provide the necessary routine and non-routine maintenance to existing rental units to ensure long term viability. During the FY2013 the PdCHA will renovation 3 rental units and 2 MH units with funding from 2010 ICDBG for LMI. Participants in the Mutual Help program will be expected to be in compliance with their MHOA and accept responsibility for maintaining their units.

The PdCHA will continue to operate its mutual help and rental program under its signed agreements with its residents. The agreements define the responsibilities of all parties involved with respect to counseling, payments, maintenance, etc. The PdCHA continues to meet its 1937 Act responsibility by way of direct contact with tenants and homebuyers on an individual basis throughout the year. The Executive Director and Administrative Assistant provide housing counseling and assistance and also carryout the responsibility for collecting and maintaining annual records on its residents under the PdCHA's administration.

Residents under the Mutual Help program are required to maintain their home, thus annual maintenance inspections are scheduled for these Mutual Help residents to address normal wear and tear of maintenance items and tenant damages. If maintenance issues or damages are found during the inspections the tenant is given 30 days to correct the defect, and if it is not corrected the PdCHA will make the correctdion and charge the homeowner for the repairs.

Maintenance Technicians fulfill the PdCHA's responsibility for the daily operation and maintenance of the CAS rental units. A yearly maintenance schedule was developed and implemented on a regular basis for preparing the rental units for changing seasons; e.g., turning on or off the air conditioning/heaters, closing dampers, maintaining water heaters, and preparing and fulfilling maintenance orders for other items that come up intermittently. Funds for the maintenance of the rental units come from rental fees paid by the residents combined with funds from the NAHASDA grant.

For all CAS homes, mutual help and rentals, under management, the PdCHA uses its IHBG grant funding to carry insurance from AMERIND for major damage coverage on the homes.

(2) Demolition and Disposition (NAHASDA § 102(b)(2)(A)(iv)(I-III), 24 CFR 1000.134) *(Describe any planned demolition or disposition of 1937 Act housing units. Be certain to include the timetable for any planned demolition or disposition and any other information required by HUD with respect to the demolition or disposition.)*: No CAS units are planned for demolition or disposition in 2012. During the 2012-13 program years two private homes will be demolished and reconstructed under the PdCHA 2010 ICDBG grant.

SECTION 5: BUDGETS

(1) Planned Grant-Based Budget for Eligible Programs (In the table below show how you plan to spend the total amount of the Fiscal Year's formula allocation using either the estimated allocation amount or the final formula allocation. This table should include only activities planned to be implemented with IHBG funds only. Do not include program income or funding from any other source.)

Eligible Activity	Planned IHBG Budget
(1) Indian Housing Assistance	\$159,364
(2) Development	\$61,560
(3) Housing Services	\$
(4) Housing Management Services	\$
(5) Crime Prevention and Safety Activities	\$
(6) Model Activities	\$25,000
(7) Planning and Administration	\$61,480
TOTAL	\$307,404

(2) Estimated Sources of Funding (NAHASDA § 102(b)(2)(C)(i)) (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 minus D)	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F + G)	(I) Actual funds expended during 12-month program year	(J) Actual unexpended funds remaining at end of 12-month program year (H minus I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	\$347,628	\$307,404	\$655,032	\$488,637	\$166,395						
2. IHBG Program Income											
3. Title VI											
4. Title VI Program Income											
5. 1937 Act Operating Reserves											
6. Carry Over 1937 Act Funds											
LEVERAGED FUNDS											
7. ICDBG Funds	\$431,000	0.00	\$431,000	\$431,000	0.00						
8. Other Federal Funds	\$290,000	0.00	\$290,000	\$21,000	\$269,000						
9. LIHTC											
10. Non-Federal Funds											
TOTAL	\$1,068,628	\$307,404	\$1,376,032	\$940,637	\$435,395						

- Notes:**
- a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). **For the APR, fill in columns F, G, H, I, J, and K (shaded columns).**
 - b. Total of Column D should match the total of Column N from the **Uses Table** on the following page.
 - c. **Total of Column I should match the Total of Column Q from the Uses Table on the following page.**
 - d. For the IHP, describe any estimated leverage in Line 4 below (Estimated Sources or Uses of Funding). For the APR, describe actual leverage in Line 5 below (APR).

(3) 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 (tie to program names in Section 3 above)	Unique Identifier	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)
Modernization of 1937 Act	1	20,000		20,000			
Operation of 1937 Act	2	144,000		144,000			
New Construction of Homebuyer Units	11	61,560	244,927	306,487			
Rehab Assistance to Existing Homeowners	16	40,000	171,073	211,073			
Other Housing Services	18	4,597		4,597			
Model Activity	22	25,000		50,000			
Acquisition of Land for homebuyer Development	10	25,000					
Planning and Administration		168,480	36,000	204,480			
Loan repayment – describe in 4 and 5 below.							
TOTAL		\$488,637	\$452,000	\$940,637			

Notes:

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

e. Total of Column Q should equal total of Column I of the Sources Table on the previous page.

(4) Estimated Sources or Uses of Funding (NAHASDA § 102(b)(2)(C)). *(Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses Table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):* **Other Federal funding (\$290,000) will be used from HUD - Community Challenge Planning Grant which is a three year grant for a total amount of \$293,023.00 for three years.**

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

SECTION 6: OTHER SUBMISSION ITEMS

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

CDBG PRIVATE LMI - 35

CAS RENTAL UNITS - 3

CAS VACANT UNITS - 2

IHBG Funds Invested	Minimum Useful Life
Less than \$15,000	5 years
\$15,000 to \$40,000	10 years
Over \$40,000	15 years
New Construction/acquisition	20 years

Programs participants utilizing IHBG funds will sign a binding agreement that states that they will comply with NAHASDA program requirements during the useful life of the unit.

(2) Model Housing and Over-Income Activities (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.):*

1) The PdCHA is planning to utilizing 2012 IHBG funds to construct a 30' X 40' Maintenance Warehouse for workspace support for the Force Account crews, tool crib, and project material and supply inventory storage. Currently the PdCHA does not have adequate space to store its materials, supplies and tools. The lack of a secured covered facility leaves no other choice but to leave these items expose to the elements and subject them to deterioration and/or theft. Additionally the work crews do not have adequate space to perform work tasks with adequate space and ventilation. The storage area will assist in the opportunity of buying materials in larger quantities to take advantage of discounts for bulk buying. Estimated cost is anticipated to be \$25,000.

(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. Preference for housing assistance will be provided to Pueblo de Cochiti tribal membership according to NAHASDA guidelines and Cochiti Tribal Resolution CP 95-0

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

Do you intend to use more than 20% of your current grant for Planning and Administration? Yes No

If yes, describe why the additional funds are needed for Planning and Administration. **Additional funding over the 20% is a carryover from prior years unspent P&A and is broken down as follows:**

Admin Award	Budgeted		Used	Balance
2010	\$ 35,291.76	Carry Over	\$ 35,291.76	\$ -
2011	\$ 56,577.00	Carry over	\$ 10,980.00	\$ 45,597.00
2012	\$ 61,403.00	Awarded	\$ -	\$ 61,403.00
2013	\$ 61,480.00	Estimated	\$ -	\$ 61,480.00
				\$168,480.00

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

Did you expend more than 20% of your current grant for Planning and Administration? Yes No

If yes, did you receive HUD approval to exceed the 20% cap on Planning and Administration costs? Yes No

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

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

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

Yes No If no, proceed to Section 7.

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

--

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

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

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

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

SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE

(NAHASDA § 102(b)(2)(D))

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

(1) In accordance with applicable statutes, the recipient certifies that It will comply with title II of the Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, and other applicable federal statutes.

Yes No

(2) To be eligible for minimum funding in accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that there are households within its jurisdiction at or below 80 percent of median income.

Yes No Not Applicable

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

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

Yes No Not Applicable

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

Yes No Not Applicable

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

Yes No Not Applicable and

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

Yes No Not Applicable

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

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP on behalf of a tribe. This certification must be executed by the recognized tribal government covered under the IHP.

- (1) The recognized tribal government of the grant beneficiary certifies that:
- (2) It had an opportunity to review the IHP and has authorized the submission of the IHP by the TDHE; or
- (3) It has delegated to such TDHE the authority to submit an IHP on behalf of the Tribe without prior review by the Tribe.

(4) Tribe:	Pueblo de Cochiti
(5) Authorized Official's Name and Title:	Phillip Quintana
(6) Authorized Official's Signature:	
(7) Date (MM/DD/YYYY):	

SECTION 9: TRIBAL WAGE RATE CERTIFICATION
(NAHASDA §§ 102(b)(2)(D)(vi) and 104(b))

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

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

SECTION 10: SELF-MONITORING

(NAHASDA § 403(b), 24 CFR § 1000.502)

(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.):*

SECTION 11: INSPECTIONS

(NAHASDA § 403(b))

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

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

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

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

(3) If no, why not:

SECTION 12: AUDITS

This section is used to indicate whether an audit is required, based on a review of your financial records.

Did you expend less than \$500,000 in total Federal awards during the previous fiscal year ended?

Yes No

If Yes, an audit is not required. If No, an audit is required to be submitted to the Federal Audit Clearinghouse and your Area Office of Native American Programs.

SECTION 13: PUBLIC ACCOUNTABILITY

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

Check one: Yes No

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

Check one: Yes No Not Applicable

(3) If you answered "No" to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so.

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

SECTION 14: JOBS SUPPORTED BY NAHASDA
(NAHASDA § 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	
(2) Number of Temporary Jobs Supported	

(3) Narrative (optional):

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):

(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.):*

(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.):*

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

SECTION 16: IHP AMENDMENTS

(24 CFR § 1000.232)

Use this section for IHP amendments only.

Fill out the text below to summarize your IHP amendment. This amendment is only required to be submitted to the HUD Area Office of Native American Programs when (1) the recipient is adding a new activity that was not described in the current One-Year Plan that has been determined to be in compliance by HUD or (2) to reduce the amount of funding that was previously budgeted for the operation and maintenance of 1937 Act housing under NAHASDA § 202(1). All other amendments will be reflected in the APR and do not need to be submitted to HUD.

Once HUD determines the IHP amendment to be in compliance, the recipient should add the IHP amendment to Section 3 of the previously approved IHP and replace the previous Uses of Funding table (Section 5, Line 3) with the amended Uses of Funding table.

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 adequately describe the new program that is planned.</i>):
(3) Eligible Activity Number (<i>Select one activity from the Eligible Activities list in Section 3.</i>):
(4) Intended Outcome Number (<i>Select one Outcome from the Outcome list in Section 3.</i>):
(5) Actual Outcome Number (<i>Select one Outcome from the Outcome list in Section 3.</i>):
(6) Who Will Be Assisted (<i>This should adequately describe the types of households who will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median income should be included as a <u>separate</u> Program within this Section.</i>):

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

(8). APR: (Describe the accomplishments for the APR in the 12-month program year.):

(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 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 (tie to program names in Section 3 above)	Unique Identifier	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)
Planning and Administration							
Loan repayment – describe in 4 and 5 below.							
TOTAL							

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

(12) Recipient:	
(13) Authorized Official's Name and Title:	
(14) Authorized Official's Signature:	
(15) Date (MM/DD/YYYY):	