**SECTION 1: COVER PAGE**

(1) Grant Number: 55IH5302900

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

(3) Federal Fiscal Year: 2018

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

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

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

☑ (7) Tribe

☑ (8) TDHE

(9) Name of Recipient:

Colville Indian Housing Authority (CIHA)

(10) Contact Person:

Dale R. Schrock, Jr.

(11) Telephone Number with Area Code (999) 999-9999:

509.634.2160

(12) Mailing Address:

P.O. Box 528

(13) City: Nespelem

(14) State: Washington

(15) Zip Code (99999 or 99999-9999):

99155

(16) Fax Number with Area Code (if available) (999) 999-9999:

509.634.2335

(17) Email Address (if available):

dale.schrock@colvilletribes.com

(18) If TDHE, List Tribes Below:

Confederated Tribes of the Colville Reservation

(19) Tax Identification Number: 27-5137188

(20) DUNS Number:

078769803

(21) CCR/SAM Expiration Date (MM/DD/YYYY):

2/24/2018

(22) IHBG Fiscal Year Formula Amount: $4,290,335

(23) Name of Authorized IHP Submitter:

Dale R. Schrock, Jr.
(24) Title of Authorized IHP Submitter: Interim Executive Director
(25) Signature of Authorized IHP Submitter: 
(26) IHP Submission Date (MM/DD/YYYY): 
(27) Name of Authorized APR Submitter: Douglas R. Marconi Sr.
(28) Title of Authorized APR Submitter: Executive Director
(29) Signature of Authorized APR Submitter: 
(30) APR Submission Date (MM/DD/YYYY): 01-31-2019

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

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

<table>
<thead>
<tr>
<th>(A) Type of Need</th>
<th>(B) Low-Income Indian Families</th>
<th>(C) All Indian Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Overcrowded Households</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(2) Renters Who Wish to Become Owners</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(3) Substandard Units Needing Rehabilitation</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(4) Homeless Households</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(5) Households Needing Affordable Rental Units</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(6) College Student Housing</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(7) Disabled Households Needing Accessibility</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(8) Units Needing Energy Efficiency Upgrades</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(9) Infrastructure to Support Housing</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>(10) Other (specify below)</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

(2) Other Needs. (Describe the "Other" needs below. Note: this text is optional for all needs except "Other."):  
Crime Prevention: Assist in gang prevention and youth activities that are alcohol and drug free events.

(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 2018 plan will continue addressing maintenance and rehabilitation needs of low rent units. CIHA will continue reviewing current policies and procedures; make recommended changes to the Board of Commissioners as necessary to keep the policies updated and employees remain in compliance. Pre develop Small Houses projects in two Districts. Improve family play areas with a playground put in one of our districts. Assist Elders of privately owned homes; making the homes more liveable, assessible, and increase the life of the home by providing rehabilitation assistance grants. Provide down payment assistance funds within the state of Washington. Provide rental assistance to help families move into market rentals within the state of Washington. Provide financial literacy, homebuyer education, credit repair and budgeting to families working toward homeownership using outside resources (Tribal Credit/HUD 184). Crime prevention and safety coordination with Tribal police working in service areas.
(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 Colville Indian Reservation, and within the service area
Communities include: Omak, Malott, Coulee Dam, Nespelem, Keller and Inchelium.
Counties: Okanogan County, Ferry County, Stevens County, Grant County and Douglas County.
Rental and Down Payment Assistance will be provided within the state of Washington.
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](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 theUses 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.
<table>
<thead>
<tr>
<th>Eligible Activity</th>
<th>Output Measure</th>
<th>Output Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Modernization of 1937 Act Housing [202(1)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(2) Operation of 1937 Act Housing [202(1)]</td>
<td>Units</td>
<td>Number of units in inventory at Program Year End (PYE)</td>
</tr>
<tr>
<td>(3) Acquisition of Rental Housing [202(2)]</td>
<td>Units</td>
<td>When recipient takes title to the unit</td>
</tr>
<tr>
<td>(4) Construction of Rental Housing [202(2)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(5) Rehabilitation of Rental Housing [202(2)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(6) Acquisition of Land for Rental Housing Development [202(2)]</td>
<td>Acres</td>
<td>When recipient takes title to the land</td>
</tr>
<tr>
<td>(7) Development of Emergency Shelters [202(2)]</td>
<td>Households</td>
<td>Number of households served at any one time, based on capacity of the shelter</td>
</tr>
<tr>
<td>(8) Conversion of Other Structures to Affordable Housing [202(2)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(9) Other Rental Housing Development [202(2)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(10) Acquisition of Land for Homebuyer Unit Development [202(2)]</td>
<td>Acres</td>
<td>When recipient takes title to the land</td>
</tr>
<tr>
<td>(11) New Construction of Homebuyer Units [202(2)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(12) Acquisition of Homebuyer Units [202(2)]</td>
<td>Units</td>
<td>When recipient takes title to the unit</td>
</tr>
<tr>
<td>(13) Down Payment/Closing Cost Assistance [202(2)]</td>
<td>Units</td>
<td>When binding commitment signed</td>
</tr>
<tr>
<td>(14) Lending Subsidies for Homebuyers (Loan) [202(2)]</td>
<td>Units</td>
<td>When binding commitment signed</td>
</tr>
<tr>
<td>(15) Other Homebuyer Assistance Activities [202(2)]</td>
<td>Units</td>
<td>When binding commitment signed</td>
</tr>
<tr>
<td>(16) Rehabilitation Assistance to Existing Homeowners [202(2)]</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>(17) Tenant Based Rental Assistance [202(3)]</td>
<td>Households</td>
<td>Count each household once per year</td>
</tr>
<tr>
<td>(18) Other Housing Service [202(3)]</td>
<td>Households</td>
<td>Count each household once per year</td>
</tr>
<tr>
<td>(19) Housing Management Services [202(4)]</td>
<td>Households</td>
<td>Count each household once per year</td>
</tr>
<tr>
<td>(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]</td>
<td>Units</td>
<td>Number of units in inventory at PYE</td>
</tr>
<tr>
<td>(21) Crime Prevention and Safety [202(5)]</td>
<td>Dollars</td>
<td>Dollars spent (report in Uses of Funding table only)</td>
</tr>
<tr>
<td>(22) Model Activities [202(6)]</td>
<td>Dollars</td>
<td>Dollars spent (report in Uses of Funding table only)</td>
</tr>
<tr>
<td>(23) Self-Determination Program [231-235]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acquisition</td>
<td>Units</td>
<td>When recipient takes title to the unit</td>
</tr>
<tr>
<td>Construction</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>Units</td>
<td>All work completed and unit passed final inspection</td>
</tr>
<tr>
<td>Infrastructure</td>
<td>Dollars</td>
<td>Dollars spent (report in Uses of Funding table only)</td>
</tr>
<tr>
<td>(24) Infrastructure to Support Housing [202(2)]</td>
<td>Dollars</td>
<td>Dollars spent (report in Uses of Funding table only)</td>
</tr>
<tr>
<td>(25) Reserve Accounts [202(9)]</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**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.
1.1. Program Name and Unique Identifier:

201801 Operating and Maintenance 1937 Act units

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

Establish and maintain systems which ensure sound fiscal management, human resource management, planning and development of maintenance programs. Funds support the cost of maintenance office and shop; associated utility costs; insurance, work order system; inventory control; tracking; purchasing supplies, materials, services, and equipment; tenant relations; contracting, equipment/vehicle maintenance; board meetings; training; billing; receivables; subcontract activity; reporting; legal assistance; pest control; routine and preventative main tenance activities; CIHA maintenance staff and subcontractors will perform the work.

Non Routine Maintenance will be performed on existing houses guided by our inspections and cost analysis and in accordance with the International Building codes. This will include 43 2 (LR), 43 3 (LR), 43 5 (LR), 43 7 (LR), 43 9 (LR), and 43 12 (LR) units. As identified, the removal of asbestos containing material removal from units. CIHA will partner with other Tribal/Federal agencies as required and beneficial to the CIHA for the implementation of infrastructure supporting housing projects.

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

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

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

(3) Improve quality of substandard units

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

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

(6) Assist affordable housing for low income households

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

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

Low Income Native American 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.):

Maintenance, maintenance, non routine maintenance and preventative maintenance at no extra cost to current CIHA tenants. Non routine maintenance activities on CIHA owned and operated units will be identified through inspections to provide and sustain safe, sanitary and decent housing.
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.

We have accomplished the described program activities related to the operation and maintenance of our current assisted stock as planned during this planned year.

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

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
</tr>
</thead>
</table>

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APR: Actual Number of Units Completed in Program Year

<table>
<thead>
<tr>
<th>APR: Actual Number of Households Served in Program Year</th>
</tr>
</thead>
</table>

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1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))
2.1. Program Name and Unique Identifier:
1802 Rehabilitation 1937 Act Units

2.2. Program Description *(This should be the description of the planned program.)*:
Leverage of NAHASDA funding with Low Income Housing Tax Credit (LIHTC) funds for moderate or substantial rehabilitation activities for 37 Act housing units identified through inspections in the Keller and Inchelium districts.

2.3. Eligible Activity Number *(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.)*:
(5) Rehabilitation of Rental Housing [202(2)]

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

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

2.5 Actual Outcome Number *(In the APR identify the actual outcome from the Outcome list.)*:
(3) Improve quality of substandard units

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

2.6 Who Will Be Assisted *(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median must be included as a separate program within this section.)*:
Low income Native American families residing within the Keller and Inchelium districts.

2.7. Types and Level of Assistance *(Describe the types and the level of assistance that will be provided to each household, as applicable.)*:
Moderate or substantial rehabilitation activities of 31 CIHA owned and operated units as identified through inspections to provide and sustain safe, sanitary and decent housing.

2.8. APR: *Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.*
Substantial completion of 17 rental unit rehabilitations within budget.
### 2.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### APR: Actual Number of Units Completed

<table>
<thead>
<tr>
<th>APR: Actual Number of Units Completed in Program Year</th>
<th>APR: Actual Number of Households Served in Program Year</th>
<th>APR: Actual Number of Acres Purchased in Program Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

remaining three units scheduled to be completed by March 2019
3.1. Program Name and Unique Identifier:

2018 03 Crime Prevention and Safety

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

Support alcohol and drug free related activities involving youth. Improve and/or upgrade street lighting and signage within the CIHA developed subdivisions. Security Upgrades to Office and Vehicle Bull Pen

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

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

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

(11) Reduction in crime reports

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


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

(11) Reduction in crime reports

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


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

Low Income Native American families residing within CIHA owned and operated affordable housing developments.

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

Grant awards up to $500 to community events that are alcohol and drug free, involving youth. Improve and/or upgrade roadway street lighting for community safety. Increased security monitoring of each facility.

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

CIHA was proud to provide 4 grants for drug and alcohol free community events this award year. By distributing these grants CIHA supported a pow-wow, rodeo, parade, and assisted a volunteer-based local Parent Committee in providing a safe outdoor play space. All of these events encourage cultural pride, healthy lifestyles, and community fellowship.
3.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
</tr>
</thead>
</table>

| APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year | APR: Actual Number of Acres Purchased in Program Year |

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

CIHA receives administrative Information Technology Services from the IT Department of the Colville Tribe. This includes network, server, and TCOM services. This arrangement requires CIHA to collaborate with the CCT IT department on special projects such as surveillance systems to ensure network compatibility with existing infrastructure. The CCT IT Director position was vacant for an extended period, and CIHA was unable to make progress on the security surveillance project until August 2018. We were able to secure cost estimates for Phase I of the project, but due to timelines we did not feel confident we could satisfy the requisite Procurement requirements prior to fiscal year end.
4.1. Program Name and Unique Identifier:

184 Modernization ICDBG Mold Remediation Match

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

Modernization of CIHA owned units; remediation and prevention within 100 identified units.

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

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

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

(3) Improve quality of substandard units

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

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

(3) Improve quality of substandard units

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

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

Low income Native American families residing in CIHA owned units.

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

Mold remediation to CIHA owned and operated units indentified through inspections; removing and preventing mold.

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

We accomplished this program activity as we modernized and conducted remediation and prevention to 151 units
### 4.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>180</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### APR: Actual Number of Units Completed in Program Year

<table>
<thead>
<tr>
<th>APR: Actual Number of Units Completed</th>
<th>APR: Actual Number of Households Served in Program Year</th>
<th>APR: Actual Number of Acres Purchased in Program Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>151</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

*completed within goal of 180 for multi-year duration of the grant*
5.1. Program Name and Unique Identifier:

18.5 Development Elder Minor Home Repair

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

Provide minor rehabilitation repairs to Elder homeowners not under the management of the CIHA to assure safe, sanitary, decent and accessible conditions.

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

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

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

(3) Improve quality of substandard units

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

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

(3) Improve quality of substandard units

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

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

Low Income Elder Native American families who are enrolled members of the Confederated Tribes of the Colville Reservation.

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

Assistance will be in the form of a grant and is capped at $10,000 per project, and limited to once in a lifetime assistance. Medical and health circumstances could qualify a family for additional rehabilitation assistance. Other project activities included roofing, HVAC and handicap accessibility improvements.

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

We accomplished this planned program activity as we provided assistance to 5 eligible families during the plan year.
### 5.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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</thead>
<tbody>
<tr>
<td>13</td>
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</table>

**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

<table>
<thead>
<tr>
<th>5</th>
</tr>
</thead>
</table>

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

Program served fewer households than anticipated because we experienced some staff turnover related to intake and project coordination for this program and project management.
6.1. Program Name and Unique Identifier:
18 6 Down Payment Assistance (up to 80% of median income)

6.2. Program Description
(This should be the description of the planned program):
Down payment assistance to low income families using other financial resources to finance a principal place of residence in the state of Washington.

6.3. Eligible Activity Number
(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):
(13) Down Payment/Closing Cost Assistance [202(2)]

6.4. Intended Outcome Number
(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):
(2) Assist renters to become homeowners

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

6.5 Actual Outcome Number
(In the APR identify the actual outcome from the Outcome list.):
(2) Assist renters to become homeowners

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

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 must be included as a separate program within this section.):
Low income Native American members of the Confederated Tribes of the Colville Reservation who have incomes up to 80% of the median income.

6.7. Types and Level of Assistance
(Describe the types and the level of assistance that will be provided to each household, as applicable.):
Assistance will be in the form of a loan (forgiven after the useful life term has expired) and is capped at $10,000; with a once in a lifetime assistance. Families must be in compliance with the CIHA Down Payment Assistance Policy and all financial institutions requirements.

6.8. 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.
CIHA provided 5 down payment assistance loans to eligible low-income families.
6.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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<tr>
<td>8</td>
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</tbody>
</table>

APR: Actual Number of Units Completed in Program Year

APR: Actual Number of Acres Purchased in Program Year

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

5
7.1. Program Name and Unique Identifier:
187 Development Down Payment Assistance (80-100% of Median Income)

7.2. Program Description (This should be the description of the planned program):
Down Payment assistance to families within 80-100% of the median income who meet eligibility criteria to finance a home using other financial resources such as Tribal Credit or 184 loan program.

7.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):
(13) Down Payment/Closing Cost Assistance [202(2)]

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.):
(2) Assist renters to become homeowners

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.):
(2) Assist renters to become homeowners

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 must be included as a separate program within this section.):
Low income Native American members of the Confederated Tribes of the Colville Reservation who have incomes between 80% and 100% of the median income. Loan amount is limited in accordance with 24 CFR 1000.110 (2) based on the income of a family at 80%/Income of non low income family.

7.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):
Assistance will be in the form of a loan (forgiven after the useful life term has expired) and is capped at $10,000; with a once in a lifetime assistance.
Families must be in compliance with the CIHA Down Payment Assistance Policy and all financial institutions requirements.

7.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.
No down payment assistance loans were issued to applicants in the 80->100% median income range.
### 7.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of <strong>Units</strong> to be Completed in Year Under this Program</th>
<th>Planned Number of <strong>Households</strong> To Be Served in Year Under this Program</th>
<th>Planned Number of <strong>Acres</strong> To Be Purchased in Year Under this Program</th>
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<tbody>
<tr>
<td>6</td>
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</table>

**APR:** Actual Number of **Units** Completed in Program Year

<table>
<thead>
<tr>
<th>APR: Actual Number of <strong>Households</strong> Served in Program Year</th>
<th>APR: Actual Number of <strong>Acres</strong> Purchased in Program Year</th>
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</table>

### 7.10: APR:

*If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*
8.1. Program Name and Unique Identifier: 18.8 Housing Services

8.2. Program Description (This should be the description of the planned program):
The provision of housing related services for affordable housing, such as housing counseling in connection with rental or homeowner assistance, activities related to the provision of self sufficiency, and other services related to assisting owners, tenants, contractors, and other entities, participating or seeking to participate in other housing activities. Activities for residents of affordable housing that reduce or eliminate the use of drugs. Coordinate and participate in the Firewise Communities program. Also includes Tenant Compliance when they become non compliant to program requirements and policies. Provide assistance with deposit, first and last month’s rent to allow eligible families to move into a rental unit within the state of Washington.

8.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):
(18) Other Housing Services [202(3)]

8.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):
(6) Assist affordable housing for low income households

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

8.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):
(6) Assist affordable housing for low income households

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

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

8.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):
Housing counseling, provision of self sufficiency, assistance to residents of affordable housing in obtaining other federal, state and local assistance, assistance that reduces or eliminates the use of drugs, rental and homeowner education, credit repair and budgeting, annual home fair and firewise community support. Rental Assistance will be in the form of a grant and is capped at $1,500; with a once in a lifetime assistance. Families must be in compliance with the CIHA Admission and Occupancy Policies and Rental Assistance Policy.

8.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.
We accomplished this program activity as we provided adequate and qualified staff to provide all of the housing services and activities as defined.
### 8.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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<table>
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<th>APR: Actual Number of Units Completed in Program Year</th>
<th>APR: Actual Number of Households Served in Program Year</th>
<th>APR: Actual Number of Acres Purchased in Program Year</th>
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<tbody>
<tr>
<td>200</td>
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</table>

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

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9.1. Program Name and Unique Identifier:

189 Housing Management Services

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

The provision of management services for affordable housing, including preparation of work specifications, operation and maintenance of NAHASDA developed units and management of affordable housing projects.

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

(19) Housing Management Services [202(4)]

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

(6) Assist affordable housing for low income households

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

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

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

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

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

Low income Native American Families.

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

Ensure viability of housing stock and provide safe and decent housing for families served.

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

We accomplished this program activity as planned including operating and maintaining the rental units developed with IHBG funds.
### 9.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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<table>
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<th>APR: Actual Number of Units Completed in Program Year</th>
<th>APR: Actual Number of Households Served in Program Year</th>
<th>APR: Actual Number of Acres Purchased in Program Year</th>
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<tbody>
<tr>
<td>144</td>
<td>144</td>
<td>144</td>
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</table>

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

---
10.1. Program Name and Unique Identifier:
1810 Community Center Operations

10.2. Program Description (This should be the description of the planned program):
Operating assistance for the Buttercup and Eagle Nest Community Centers. Operating assistance includes utilities and maintenance of the buildings and grounds.

10.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):
(18) Other Housing Services [202(3)]

10.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):
(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):
Operating assistance for two community centers that house staff and hold community functions for families of affordable housing assisted by CIHA.

10.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):
(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

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

10.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):
CIHA staff placed in the Inchelium (Buttercup) and Omak/Malott (Eagles Nest) districts will have work space provided in the centers for community functions and activities held in the community centers.

10.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.
We accomplished this program activity as planned as our community centers were used for community functions along with CIHA activities.
## 10.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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<table>
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<th>APR: Actual Number of Units Completed in Program Year</th>
<th>APR: Actual Number of Households Served in Program Year</th>
<th>APR: Actual Number of Acres Purchased in Program Year</th>
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<tr>
<td>150</td>
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</table>

### 10.10: APR:

*If the program is behind schedule, explain why.* (24 CFR § 1000.512(b)(2))
11.1. Program Name and Unique Identifier: 18 11 HUD VASH Supportive Housing Program VASH 2015 01

11.2. Program Description (This should be the description of the planned program): This program is designed to provide subsidized rental assistance to Native American Veterans who are in need of supportive services and are homeless or at risk of homelessness. All participants are required to be screened by the Veterans Administration (VA) to confirm eligibility for this program prior to participation. The program will be implemented in accordance with the Colville Indian Housing Authority HUD VASH Implementation Plan. The rental assistance will target available units in the area, whether privately or tribally owned.

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

(17) Tenant Based Rental Assistance [202(3)]

11.4. 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) Address homelessness

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

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

(5) Address homelessness

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

11.6 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 must be included as a separate program within this section.):

Native American Veterans who are homeless or at risk of being homeless that have been deemed eligible and referred to the program by the THVASH Caseworker. Family incomes may not exceed 80 percent of the local area median income.

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

Eligible Veterans will receive a rent subsidy so that their payments do not exceed 30 percent of their monthly adjusted gross income.

11.8. 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.

We continue to make substantial progress in achieving our objective of assisting eligible veterans as we provided rental assistance to 7 veterans during this plan year. We also received and reviewed several more additional applications for assistance that we plan to award during the next plan year.
### 11.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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<table>
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<th>APR: Actual Number of Units Completed in Program Year</th>
<th>APR: Actual Number of Households Served in Program Year</th>
<th>APR: Actual Number of Acres Purchased in Program Year</th>
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<tr>
<td>7</td>
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</table>

### 11.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))
12.1. Program Name and Unique Identifier:

1812 Development Playground

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

Develop 1 playground in District community

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

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

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

(11) Reduction in crime reports

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

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

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

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

12.6 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 must be included as a separate program within this section):

Low income Native American family children.

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

Safe updated playground equipment

12.8. 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.

We are in final plan stage for land use approval and moving on to design phase this plan year.

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

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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</table>

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

12.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))
13.1. Program Name and Unique Identifier:  
18 13 Development  Colville Home IV Triplex

13.2. Program Description  *(This should be the description of the planned program.)*:  
Leverage of NAHASDA funding with Low Income Housing Tax Credit (LIHTC) funds for new construction of 9 LIHTC homes in 3 triplex structures.

13.3. Eligible Activity Number  *(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.)*:  
(4) Construction of Rental Housing [202(2)]

13.4. Intended Outcome Number  *(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.)*:  
(1) Reduce over-crowding

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

13.5 Actual Outcome Number  *(In the APR identify the actual outcome from the Outcome list.)*:  
(6) Assist affordable housing for low income households

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

13.6 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 must be included as a separate program within this section.)*:  
Very Low Income Native American families who desire to live in the Nespelem District

13.7. Types and Level of Assistance  *(Describe the types and the level of assistance that will be provided to each household, as applicable.)*:  
Development of 9 new rental units; three 3 bedroom units and six 2 bedroom units.

13.8. 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.*

We plan to have certificates of occupancy at the end of January 2019.
13.9: Planned and Actual Outputs for 12-Month Program Year

<table>
<thead>
<tr>
<th>Planned Number of Units to be Completed in Year Under this Program</th>
<th>Planned Number of Households To Be Served in Year Under this Program</th>
<th>Planned Number of Acres To Be Purchased in Year Under this Program</th>
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</table>

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

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

All new units plan to be substantially completed by March 2019.
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.):

Existing rental and mutual help managed units will continue being maintained according to policies. Units will be inspected; work orders generated from the inspections; repairs scheduled and completed; if charges to tenants are required, they will be charged to the tenants account and collected. Non routine maintenance activities in homes will adhere to the international building codes, Tribal codes and conform to the Colville Tribes housing master plans.

(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 units are planned for demolition and/or disposition.
### 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.)

<table>
<thead>
<tr>
<th>SOURCE</th>
<th>IHP</th>
<th>APR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(A) Estimated amount on hand at beginning of program year</td>
<td>(F) Actual amount on hand at beginning of program year</td>
</tr>
<tr>
<td></td>
<td>(B) Estimated amount to be received during 12-month program year</td>
<td>(G) Actual amount received during 12-month program year</td>
</tr>
<tr>
<td></td>
<td>(C) Estimated total sources of funds (A+B)</td>
<td>(H) Actual total sources of funding (F+G)</td>
</tr>
<tr>
<td></td>
<td>(D) Estimated funds to be expended during 12-month program year</td>
<td>(I) Actual funds expended during 12-month program year</td>
</tr>
<tr>
<td></td>
<td>(E) Estimated unexpended funds remaining at end of program year (C-D)</td>
<td>(J) Actual unexpended funds remaining at end of 12-month program year (H-I)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(K) Actual unexpended funds obligated but not expended at end of 12-month program year</td>
</tr>
<tr>
<td>1. IHBG Funds</td>
<td>$2,500,000</td>
<td>$3,217,776</td>
</tr>
<tr>
<td></td>
<td>$3,957,674</td>
<td>$3,859,748</td>
</tr>
<tr>
<td></td>
<td>$4,847,363</td>
<td>$7,977,524</td>
</tr>
<tr>
<td></td>
<td>$1,610,311</td>
<td>$3,992,636</td>
</tr>
<tr>
<td></td>
<td>$211,856</td>
<td>$3,064,888</td>
</tr>
<tr>
<td>2. IHBG Program Income</td>
<td>$0</td>
<td>$304,136</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$304,136</td>
</tr>
<tr>
<td>3. Title VI</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0</td>
</tr>
<tr>
<td>4. Title VI Program Income</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0</td>
</tr>
<tr>
<td>5. 1937 Act Operating Reserves</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0</td>
</tr>
<tr>
<td>6. Carry Over 1937 Act Funds</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0</td>
</tr>
</tbody>
</table>

**LEVERAGED FUNDS**

|                                |                                   |                                   |
| 7. ICDBG Funds                | $0                                | $0                                |
|                                | $240,000                          | $356,590                          |
|                                | $240,000                          | $356,590                          |
|                                | $0                                | $0                                |
| 8. Other Federal Funds        | $0                                | $0                                |
|                                | $157,000                          | $157,000                          |
|                                | $157,000                          | $41,953                           |
|                                | $0                                | $115,047                          |

Page 35 of 51
<table>
<thead>
<tr>
<th>9. LIHTC</th>
<th></th>
<th></th>
<th></th>
<th>$0</th>
<th>$5,642,211</th>
<th>$5,642,211</th>
<th>$5,642,211</th>
<th>$0</th>
<th>$0</th>
<th>$3,257,890</th>
<th>$3,257,890</th>
<th>$3,257,890</th>
<th>$0</th>
<th>$0</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Non-Federal Funds</td>
<td></td>
<td></td>
<td></td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
<td>$2,500,000</td>
<td>$9,996,885</td>
<td>$12,498,885</td>
<td>$10,886,574</td>
<td>$1,610,311</td>
<td>$3,374,776</td>
<td>$7,778,364</td>
<td>$11,153,145</td>
<td>$7,994,135</td>
<td>$3,159,005</td>
<td>$211,856</td>
</tr>
<tr>
<td>TOTAL Columns C &amp; H, 2 through 10</td>
<td></td>
<td></td>
<td></td>
<td>$6,039,211</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

Notes:


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.)

<table>
<thead>
<tr>
<th>PROGRAM NAME</th>
<th>IHP</th>
<th>(L) Prior and current year IHBG (only) funds to be expended in 12-month program year</th>
<th>(M) Total other funds to be expended in 12-month program year</th>
<th>(N) Total funds to be expended in 12-month program year (L+M)</th>
<th>(O) Total IHBG (only) funds expended in 12-month program year</th>
<th>(P) Total all other funds expended in 12-month program year</th>
<th>(Q) Total funds expended in 12-month program year (O+P)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018 01 Operating and Maintenance 1937 Act units</td>
<td></td>
<td>$2,573,583</td>
<td>$0</td>
<td>$2,573,583</td>
<td>$1,999,841</td>
<td>$0</td>
<td>$1,999,841</td>
</tr>
<tr>
<td>18 02 Rehabilitation 1937 Act Units</td>
<td></td>
<td>$206,469</td>
<td>$2,642,211</td>
<td>$2,848,680</td>
<td>$193,219</td>
<td>$0</td>
<td>$193,219</td>
</tr>
<tr>
<td>2018 03 Crime Prevention and Safety</td>
<td></td>
<td>$65,000</td>
<td>$0</td>
<td>$65,000</td>
<td>$12,949</td>
<td>$0</td>
<td>$12,949</td>
</tr>
<tr>
<td>Project</td>
<td>Outcome 1</td>
<td>Outcome 2</td>
<td>Total 1</td>
<td>Total 2</td>
<td>Total 3</td>
<td>Total 4</td>
<td></td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------</td>
<td>-----------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>18 4 Modernization</td>
<td>$114,000</td>
<td>$240,000</td>
<td>$354,000</td>
<td>$114,139</td>
<td>$356,590</td>
<td>$470,729</td>
<td></td>
</tr>
<tr>
<td>ICDBG Mold Remediation Match</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 5 Development Elder Minor</td>
<td>$90,000</td>
<td>$0</td>
<td>$90,000</td>
<td>$48,661</td>
<td>$0</td>
<td>$48,661</td>
<td></td>
</tr>
<tr>
<td>Home Repair</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 6 Down Payment Assistance</td>
<td>$40,000</td>
<td>$0</td>
<td>$40,000</td>
<td>$28,613</td>
<td>$0</td>
<td>$28,613</td>
<td></td>
</tr>
<tr>
<td>(up to 80% of median income)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 7 Development Down Payment</td>
<td>$40,000</td>
<td>$0</td>
<td>$40,000</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Assistance (80 100% of Median Income)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 8 Housing Services</td>
<td>$140,000</td>
<td>$0</td>
<td>$140,000</td>
<td>$379,181</td>
<td>$13,300</td>
<td>$392,481</td>
<td></td>
</tr>
<tr>
<td>18 9 Housing Management Services</td>
<td>$666,242</td>
<td>$0</td>
<td>$666,242</td>
<td>$294,750</td>
<td>$4,499</td>
<td>$299,249</td>
<td></td>
</tr>
<tr>
<td>18 10 Community Center Operations</td>
<td>$30,500</td>
<td>$0</td>
<td>$30,500</td>
<td>$17,418</td>
<td>$0</td>
<td>$17,418</td>
<td></td>
</tr>
<tr>
<td>18 11 HUD VASH</td>
<td>$0</td>
<td>$157,000</td>
<td>$157,000</td>
<td>$0</td>
<td>$41,953</td>
<td>$41,953</td>
<td></td>
</tr>
<tr>
<td>Supportive Housing Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015 01</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 12 Development Playground</td>
<td>$75,000</td>
<td>$0</td>
<td>$75,000</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Project</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
<td>F</td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>18 13 Development Colville Home IV Triplex</td>
<td>$206,469</td>
<td>$3,000,000</td>
<td>$3,206,469</td>
<td>$199,715</td>
<td>$3,630,932</td>
<td>$3,830,647</td>
<td></td>
</tr>
<tr>
<td>Planning and Administration</td>
<td>$600,100</td>
<td>$0</td>
<td>$600,100</td>
<td>$634,150</td>
<td>$24,225</td>
<td>$658,375</td>
<td></td>
</tr>
<tr>
<td>Loan repayment - describe in 3 &amp; 4 below</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$4,847,363</strong></td>
<td><strong>$6,039,211</strong></td>
<td><strong>$10,886,574</strong></td>
<td><strong>$3,922,636</strong></td>
<td><strong>$4,071,499</strong></td>
<td><strong>$7,994,135</strong></td>
<td></td>
</tr>
</tbody>
</table>

**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):

**HUD VASH:** This program is designed to provide subsidized rental assistance to Native American Veterans who are in need of supportive services and are homeless or at risk of homelessness. All participants are required to be screened by the Veterans Administration (VA) to confirm eligibility for this program prior to participation. The program will be implemented in accordance with the Colville Indian Housing Authority HUD VASH Implementation Plan dated March 1, 2016. The rental assistance will target available units in the area, whether privately or tribally owned. These program dollars will assist in a planned supportive housing project.

**LIHTC CH#4:** This is a renovation/new development project planned to begin in August of 2017.
(4) APR (NAHASDA § 404(b)) (Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses of Funding table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):
SECTION 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, 1000.238, 1000.302

(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.):

The useful life of our homeownership units built prior to FY 2010 is the term of the lease agreement, which will be 25 years. The useful life of our Rental units built prior to FY 2010 is 25 years. The useful life for all housing activities for fiscal year 2010 and there after will adhere to the following tiered schedule with an inserted sectional sliding scale per the affordability period in conjunction with the IHBG funds invested.

IHBG Funds Invested Affordability Period
Under $5,000 6 Months
$5,000 – $15,000 5 Years
$15,001 – $40,000 10 Years
Over $40,000 15 Years
New construction or acquisition of newly constructed housing 20 Years
IHBG funds provided in the form of a grant or loan, to purchase, construct or rehabilitate a residence will include binding commitments by either agreements and/or contracts enforcing the provisions of our useful life schedule and restrictions, additionally, if the reasonable affordability period is less than one year, a binding commitment is required; however, it is not necessary to record the written use restriction for purposes of complying with NAHASDA.*

(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.):

No model activities planned during this program year.

(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.

Colville Tribal members will be given preference over other members of federally recognized tribes.

(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.
(6) 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? [Yes ☐ No ☑]

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.
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:

<table>
<thead>
<tr>
<th>Total Expenditures on Affordable Housing Activities for:</th>
<th>All AIAN Households</th>
<th>AIAN Households with Incomes 80% or Less of Median Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHBG Funds:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds from Other Sources:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(7) APR: If answered "Yes" in Line 6, for each separate formula area, list the 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.

<table>
<thead>
<tr>
<th>Total Expenditures on Affordable Housing Activities for:</th>
<th>All AIAN Households</th>
<th>AIAN Households with Incomes 80% or Less of Median Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHBG Funds:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds from Other Sources:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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.
   Yes ☐ No ☐

(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.
   Yes ☐ No ☐ Not Applicable ☐

(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;
      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; and
      Yes ☐ No ☐ Not Applicable ☐

   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 or IHP amendment on behalf of a tribe.

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

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

2. [ ] It had an opportunity to review the IHP or IHP amendment and has authorized the submission of the IHP by the TDHE; or

3. [X] 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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(4) Tribe:</td>
<td>Confederate Tribes of the Colville Indian Reservation</td>
</tr>
<tr>
<td>(5) Authorized Official’s Name and Title:</td>
<td>Rodney Cawston, Chair, Colville Business Council</td>
</tr>
<tr>
<td>(6) Authorized Official’s Signature:</td>
<td></td>
</tr>
<tr>
<td>(7) Date (MM/DD/YYYY):</td>
<td></td>
</tr>
</tbody>
</table>
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) If you checked the box in Line 3, list the other activities that will be using tribally determined wage rates:

N/A
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 corrective actions planned or taken.):
   No concerns to correct as a result of self-monitoring activity.
## SECTION 11: INSPECTIONS

NAHASDA § 403(b)

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>Total Number of Units (Inventory)</th>
<th>Units in standard condition</th>
<th>Units needing rehabilitation</th>
<th>Units needing to be replaced</th>
<th>Total number of units inspected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(a)</td>
<td>(b)</td>
<td>(c)</td>
<td>(d)</td>
<td>(e)</td>
</tr>
<tr>
<td>1 1937 Housing Act Units:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Rental</td>
<td>259</td>
<td>229</td>
<td>30</td>
<td>0</td>
<td>259</td>
</tr>
<tr>
<td>b. Homeownership</td>
<td>15</td>
<td>15</td>
<td>0</td>
<td>0</td>
<td>15</td>
</tr>
<tr>
<td>c. Other</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1937 Act Subtotal</td>
<td>274</td>
<td>244</td>
<td>30</td>
<td>0</td>
<td>274</td>
</tr>
<tr>
<td>2 NAHASDA assisted units:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Rental</td>
<td>49</td>
<td>49</td>
<td>0</td>
<td>0</td>
<td>49</td>
</tr>
<tr>
<td>b. Homeownership</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>c. Rental Assistance</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>d. Other</td>
<td>65</td>
<td>65</td>
<td>0</td>
<td>0</td>
<td>65</td>
</tr>
<tr>
<td>NAHASDA Subtotal</td>
<td>114</td>
<td>114</td>
<td>0</td>
<td>0</td>
<td>114</td>
</tr>
<tr>
<td>Total</td>
<td>388</td>
<td>358</td>
<td>30</td>
<td>0</td>
<td>388</td>
</tr>
</tbody>
</table>

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

(3) If no, why not:
SECTION 12: AUDITS
24 CFR § 1000.544

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

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

[ ] 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.

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

Suggested preparation of an executive summary for clearer non-technical reading and understanding of APR.
### 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.

<table>
<thead>
<tr>
<th>Indian Housing Block Grant Assistance (IHBG)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Number of Permanent Jobs Supported</td>
<td>36</td>
</tr>
<tr>
<td>(2) Number of Temporary Jobs Supported</td>
<td>20</td>
</tr>
</tbody>
</table>

(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):