

SECTION 1: COVER PAGE

(1) Grant Number: 55-IH36-57160

(2) Recipient Program Year: 1/1 - 12/31

(3) Federal Fiscal Year: 2015

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

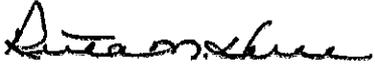
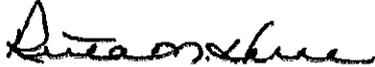
(5) Amended Plan (Complete this Section, Section 8 if applicable, and Section 16)

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

(7) Tribe

(8) TDHE

(9) Name of Recipient: Akwasasne Housing Authority		
(10) Contact Person: Retha M. Herne		
(11) Telephone Number with Area Code: 518-358-9020		
(12) Mailing Address: 378 State Route 37; Suite A		
(13) City: Hogansburg	(14) State: New York	(15) Zip Code: 13655
(16) Fax Number with Area Code (if available): 518-358-2958		
(17) Email Address (if available): Rherne@aha-nsn.gov		
(18) If TDHE, List Tribes Below: St. Regis Mohawk Tribe		
(19) Tax Identification Number:		16-1387585
(20) DUNS Number:		1966-61334
(21) CCR/SAM Expiration Date:		January 15, 2015

(22) IHBG Fiscal Year Formula Amount:	\$2,194,204.00
(23) Name of Authorized IHP Submitter:	Retha M. Herne
(24) Title of Authorized IHP Submitter:	Executive Director
(25) Signature of Authorized IHP Submitter:	
(26) IHP Submission Date:	16-Oct-14
(27) Name of Authorized APR Submitter:	Retha M. Herne
(28) Title of Authorized APR Submitter:	Executive Director
(29) Signature of Authorized APR Submitter:	
(30) APR Submission Date:	18-Mar-16

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

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

ONE YEAR PLAN & ANNUAL PERFORMANCE REPORT

SECTION 2: HOUSING NEEDS

NAHASDA § 102(b)(2)(B)

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

(A) Type of Need	Check All That Apply	
	(B) Low-Income Indian Families	(C) All Indian Families
(1) Overcrowded Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(2) Renters Who Wish to Become Owners	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(3) Substandard Units Needing Rehabilitation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(4) Homeless Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
(5) Households Needing Affordable Rental Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(6) College Student Housing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(7) Disabled Households Needing Accessibility	<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>
(10) Other (specify below)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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

<ul style="list-style-type: none"> ➤ Homebuyer Education ➤ Maintenance Counseling ➤ Family Self Sufficiency Support Services ➤ Green Living Education ➤ Home Improvement Program Referrals ➤ Crime Prevention and Services to Children 	
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(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)):*

In 2015, the Akwesasne Housing Authority (TDHE) will continue to address the short term and long term housing needs of its beneficiary, the St. Regis Mohawk Tribe. The AHA will continue providing effective planning and administration of affordable housing programs for eligible tribal members. The TDHE's emphasis will continue in the areas of preparing and/or modifying written policies and procedures to ensure staff and tenant compliance with NAHASDA rules and regulations.

Planned benefits are:

1. Homeownership - The AHA will finalize warranty and punch list items on its homeownership dwellings that were completed in 2014 and scheduled for their one year inspections. These activities will work towards alleviating housing needs numbers (1), (2), (4), (9), and (10).
2. Safe and Affordable Rentals - The AHA will continue to plan its affordable rental projects in 2015. Supportive housing for seniors, veterans, and families in crisis will be the focus and we will see continued efforts to leverage available funds as we progress. These activities will serve to alleviate housing needs numbers (1), (4), (5), (6), (7), (8), (9), and (10).
3. Tenant Assistance - The AHA will effectively manage the Tenant Assistance Program, promoting self sufficiency and providing short term (2 year) rental housing assistance and associated counseling services. Planned program activities will work towards alleviating housing needs numbers (1), (5), (6), and (10).
4. Improvement of Standards of Living - AHA will make our community more liveable by removing substandard living conditions. Planned program activities will work towards alleviating housing needs numbers (1), (2), (3), (4), (5), (6), (7), (8), (9), and (10).
5. Staff Capacity Building and Economic Self Sufficiency - The AHA will employ up to 25 employees and provide adequate support and safety while carrying out eligible housing activities on behalf of the citizens in our service area. By building the capacity of individuals, their families, and the community through housing-related services, the AHA will promote self-sufficiency through job training, competitive salary/benefits packages, and Native preference in hiring. Planned program activities will work towards alleviating housing needs numbers (1), (2), (3), (4), (5), (7), (8), (9), and (10).
6. Empowerment of Program Participants - AHA will continue to increase the knowledge of its program participants through teaching and promoting program policies, providing educational workshops on home maintenance/repair, managing individual family self sufficiency plans, referring individuals, families and elders to appropriate community resources and enforcing tenant homebuyer agreements, and providing green living education and opportunities for energy efficiency home improvement programs. Planned program activities will work towards alleviating housing needs numbers (1), (2), (3), (4), (5), (6), (7), (9), and (10) .
7. Crime Prevention - With AHA's annual assistance to the Akwesasne Boys & Girls Club, Akwesasne Chapter, this funding will serve to alleviate housing need number (10).

(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)):*

Services will be provided in the following geographical service areas:

1) Within the boundaries of the St. Regis Mohawk Reservation – AHA will assist residents within this service area with: (a) homeownership opportunities; (b) tenant assistance; (c) rental housing; (d) educational and supportive services; (e) assistance with youth crime prevention; and (f) referral and informational services.

2) Within the balances of Franklin and throughout St. Lawrence Counties – AHA will assist tribal members within this service area with: (a) tenant assistance, (b) educational and supportive services; (c) assistance with youth crime prevention; and (d) informational services.

SECTION 3: PROGRAM DESCRIPTIONS

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

Planning and Reporting Program Year Activities

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

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

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

nousing activities.

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

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

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

With regard to loan repayments made with IHBG funds, describe planned loan repayments in Section 5, Line 4 of the IHP, and describe actual loan repayments in Section 5, Line 5 of the APR. Report the planned and actual amount of loan repayments in the dedicated row of the Uses of Funding budget (Section 5, Line 2), except as noted in the following instructions for Column O in the Uses of Funding table. Column O should show the IHBG funds that were expended in the previous 12-month program year. If the recipient borrowed and repaid a loan or a portion of a loan in the same year using IHBG funds, show the repayment of the principal amount in the IHBG program line in the Uses of Funding table and report loan interest payments and loan expenses in the Loan Repayment line in the Uses of Funding table. The Administrative and Planning spending cap must be based on the actual expenditures incurred during the 12-month period, and not on the amount shown in the IHP. These expenditures should be reported on the Planning and Administration row. The total amount of IHBG funds expended cannot exceed the total amount in Column H, Row 1 of Line 1 (Sources of Funding table).

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

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

Eligible Activity	Output Measure	Output Completion
(1) Modernization of 1937 Act Housing [202(1)]	Units	All work completed and unit passed final inspection

(2) Operation of 1937 Act Housing [202(1)]	Units	Number of units in inventory at Program Year End (PYE)
(3) Acquisition of Rental Housing [202(2)]	Units	When recipient takes title to the unit
(4) Construction of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(5) Rehabilitation of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(6) Acquisition of Land for Rental Housing Development [202(2)]	Acres	When recipient takes title to the land
(7) Development of Emergency Shelters [202(2)]	Households	Number of households served at any one time, based on capacity of the shelter
(8) Conversion of Other Structures to Affordable Housing [202(2)]	Units	All work completed and unit passed final inspection
(9) Other Rental Housing Development [202(2)]	Units	All work completed and unit passed final inspection
(10) Acquisition of Land for Homebuyer Unit Development [202(2)]	Acres	When recipient takes title to the land
(11) New Construction of Homebuyer Units [202(2)]	Units	All work completed and unit passed final inspection
(12) Acquisition of Homebuyer Units [202(2)]	Units	When recipient takes title to the unit
(13) Down Payment/Closing Cost Assistance [202(2)]	Units	When binding commitment signed
(14) Lending Subsidies for Homebuyers (Loan) [202(2)]	Units	When binding commitment signed
(15) Other Homebuyer Assistance Activities [202(2)]	Units	When binding commitment signed
(16) Rehabilitation Assistance to Existing Homeowners [202(2)]	Units	All work completed and unit passed final inspection
(17) Tenant Based Rental Assistance [202(3)]	Households	Count each household once per year
(18) Other Housing Service [202(3)]	Households	Count each household once per year
(19) Housing Management Services [202(4)]	Households	Count each household once per year
(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]	Units	Number of units in inventory at PYE
(21) Crime Prevention and Safety [202(5)]	Dollars	Dollars spent (report in Uses of Funding table only)
(22) Model Activities [202(6)]	Dollars	Dollars spent (report in Uses of Funding table only)
(23) Self-Determination Program [231-235]		
Acquisition	Units	When recipient takes title to the unit
Construction	Units	All work completed and unit passed final inspection
Rehabilitation	Units	All work completed and unit passed final inspection

Infrastructure	Dollars	Dollars spent (report in Uses of Funding table only)
(24) Infrastructure to Support Housing [202(2)]	Dollars	Dollars spent (report in Uses of Funding table only)
(25) Reserve Accounts [202(9)]	N/A	N/A

Outcome May Include:

(1) Reduce over-crowding	(7) Create new affordable rental units
(2) Assist renters to become homeowners	(8) Assist affordable housing for college students
(3) Improve quality of substandard units	(9) Provide accessibility for disabled/elderly persons
(4) Improve quality of existing infrastructure	(10) Improve energy efficiency
(5) Address homelessness	(11) Reduction in crime reports
(6) Assist affordable housing for low income households	(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

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

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3 etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3 etc.

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

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

1.1. Program Name and Unique Identifier:	2015-1: CAS Management	
1.2. Program Description <i>(This should be the description of the planned program.):</i> This program is designed to preserve and maintain the housing stock of the AHA built under the Housing Act of 1937. The AHA will ensure the viability of Mutual-help and Low Rent housing units through regular inspections, work order follow up and continued enforcement of program policies. This program will provide salaries and fringes for repair workers, materials costs for planned repairs and operational costs associated with the maintenance of 1937 Act units.		
1.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	2	
1.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	3	
Describe Other Intended Outcome (Only if you selected "Other" above): 		
1.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>		3
Describe Other Actual Outcome (Only if you selected "Other" in above): 		
1.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i> Low Income Mutual-help and Low Rent Participants and their Families.		
1.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		

Households will receive counseling and maintenance remediation when problem areas are identified through regular inspections. These instances will be tracked through AHA's HDS work order system and complaints monitoring will follow through to completion whether it be direct action by the AHA or stricter enforcement of tenant policies. Board of Commissioners will regularly meet and make decisions based on facts presented with the interest of preserving all 1937 Act housing stock.

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.

The AHA worked with the homebuyers and tenants in all 1937 Act housing throughout 2015 in areas of specific individual needs. Annual inspections, recertifications, work order follow through, maintenance referrals, and program agreement counseling sessions were part of the program year's sessions. The Board of Commissioners held regular monthly meetings and effectively reviewed any tenant items needing their attention and direction.

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
159		
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
159		

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

N/A

2.1. Program Name and Unique Identifier:	2015-2: Development - Homeownership	
2.2. Program Description <i>(This should be the description of the planned program.):</i> This program will finalize minimal construction/warranty obligations on remaining new dwellings in 2015. Dwellings are constructed under the New York State Building Code and the force account method of construction is used.		
2.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	11	
2.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	2	
Describe Other Intended Outcome (Only if you selected "Other" above): 		
2.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	2	
Describe Other Actual Outcome (Only if you selected "Other" above): 		
2.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i> Eligible low income families.		
2.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i> The Mutual-help homeownership model was used to provide new homes to families that met all eligibility criteria for this program including income levels up to 80% of the median income for the nation. The remaining punch list and warranty inspections and any required work to finalize the units at their one year warranty periods will be completed this year.		
2.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i> The one year warranty period punchlist were completed in 2015.		
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
4		
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
4		
2.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))		
Contract and warranty schedules were completed in 2015.		

3.1. Program Name and Unique Identifier:	2015-3: Development (Supportive Housing) - Sunrise Acres Phase 3
3.2. Program Description <i>(This should be the description of the planned program.):</i> <p>The AHA will continue its plans to expand the Sunrise Acres Elderly Complex in 2015 to accommodate the growing wait list of our community's eligible senior and disabled target population in need of supportive housing. Plans are still in place to construct twelve (12) single bedroom units of senior supportive housing, with communal space. This may necessitate the reconfiguration of road access and renovation of the contiguous Administration Building to accommodate the plans. Two existing units may need to be demolished to make room for this project.</p>	
3.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	4
3.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	9
Describe Other Intended Outcome (Only if you selected "Other" above): 	
3.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	9
Describe Other Actual Outcome (Only if you selected "Other" above): 	
3.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i> Low income elderly and disabled tribally enrolled members	
3.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i> Rental units will be provided to eligible elderly and disabled tribal members with incomes at or below 80% of the area median income. Rents charged will be no more than 30% of tenants' adjusted net income.	
3.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>	

The AHA focused attention on other sources of funding due to the specialized nature of supportive housing and the need for alternative and renewable solutions to make these projects sustainable. The construction is planned for Spring 2016.

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
12		
APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
0		

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

Funding applications has necessitated an extended lead time to ensure meticulous well written submissions. This involved several meetings with key stakeholders. Funding sources include New York State Homeless Housing, New York State HOME funds, Department of Energy, New York State Energy Research and Development, Title VI, HUD's ICDBG, and the Enterprise Community Partners. Some of these sources were new to our Tribe, therefore required more indepth research, networking, legal and administrative planning. Unused funds under this program will be rolled into the 2016 activities. The AHA began to develop plans and specifications for the project and with the awarding of additional property by the St. Regis Mohawk Tribe later in 2015, the AHA was able to make these plans without the need to demolish two of these units as was anticipated.

4.1. Program Name and Unique Identifier:	2015-4: Housing Services - Tenant Assistance	
4.2. Program Description <i>(This should be the description of the planned program.):</i>		
<p>The Tenant Assistance Program is a short term (2 year limit) rental subsidy program designed with a family self-sufficiency component built into it. Families will learn to plan for a life goal that is consistent with the program mission, and will be administered through scheduled one-on-one meetings with the Housing Services Advocate and participate in regular classes planned to meet their goals. Active participation is required by the recipient of such assistance in order to remain in the program.</p>		
4.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	17	
4.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	6	
Describe Other Intended Outcome (Only if you selected "Other" above): <div style="border: 1px solid black; height: 30px; width: 100%;"></div>		
4.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	6	
Describe Other Actual Outcome (Only if you selected "Other" above): <div style="border: 1px solid black; height: 30px; width: 100%;"></div>		
4.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i>		
Low Income Eligible Families		
4.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
Rental subsidies will be provided to active participants who remain in compliance with program rules. 100% of rents will be paid for the first year of assistance and a sliding scale for the second year will be used to complete the program and self-sufficiency goals for the eligible families.		
4.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		

The AHA provided rental assistance and family self sufficiency planning to eligible program participants throughout 2015. Thirty four (34) families were assisted this year due to enrollment overlaps and ending dates of program terms. Families are required to complete a self sufficiency plan through individual training and service plans. The goals are tracked periodically and families are required to participate in mandatory financial literacy training and to meet with housing staff for problem resolution. The tenant assistance program (TAP) provides tenants with an overall plan with goals and timelines to target barriers they may have to become self reliant, self sufficient. These goals could include education, employment opportunities and homeownership.

This year's goals were reached and under budget.

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
	28	
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
	34	

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

N/A

5.1. Program Name and Unique Identifier:	2015-5: Other Housing Services - Akwesasne Boys & Girls Club
5.2. Program Description <i>(This should be the description of the planned program.):</i> <p>The AHA will enter into an assistance agreement with the Akwesasne Boys & Girls Club for the program year. This assistance will directly benefit low income children and families who are active members of the Club. This activity will serve to promote safety and education as an alternative to crime related mischief related to youths.</p>	
5.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	18
5.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	12
Describe Other Intended Outcome <i>(Only if you selected "Other" above):</i> <p>Protecting and educating youth by providing financial assistance to the Akwesasne Chapter of the Boys & Girls Club.</p>	
5.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	12
Describe Other Actual Outcome <i>(Only if you selected "Other" above):</i> <p>The outcome of protecting and educating youth by providing financial assistance to the Akwesasne Boys & Girls Club was reached as planned.</p>	
5.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):</i> <p>Low income youth and their families.</p>	
5.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i> <p>Important after school academic, cultural, health and physical education activities will be provided in a positive and safe environment to at least 300 member children and their families per year. Direct programming will be provided to the Club in the form of materials, supplies, and salaries for youth workers.</p>	
5.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>	

AHA continued its support to the Akwesasne Boys & Girls Club in 2015. The Club received \$50,000 in funding to supplement its direct programming and was provided these funds supported by a sub recipient agreement. The AHA also supports the Club through a rent free lease for its property.

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
	300	
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
	300	

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

N/A

6.1. Program Name and Unique Identifier:	2015 - 6: Housing Management Services - Administration	
6.2. Program Description <i>(This should be the description of the planned program.):</i>		
<p>This program is designed to promote supportive services to all NAHASDA-assisted housing participants. The Housing Services Department will focus on conducting trainings throughout the year, along with partnering with tribal and outside organizations in providing these services. Participant agreement training and maintenance workshops will continue as needed. We will actively participate in the community's fire safety and educational programs, and will concentrate on individualized self-sufficiency plans, with an added focus on maintaining green and sustainable system amenities. Funding from HUD's Resident Opportunity Support Services (ROSS) grant called STEP (Support for Elderly Program) will continue in its third year in 2015. This program will assist elderly residents with gracefully aging in place. This program is supported through HUD's ROSS, Service Coordinators Program for the next year. Costs will cover all Housing Services staff, benefits, and materials necessary to carry out these activities.</p>		
6.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	19	
6.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	6	
Describe Other Intended Outcome (Only if you selected "Other" above): 		
6.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	6	
Describe Other Actual Outcome (Only if you selected "Other" above): 		
6.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i>		
Mutual-help, Low Rent, and Low Rent Elderly families.		
6.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
Assistance provided will be support for programs and services to Mutual-help, Low Rent, and Low Rent Elderly families under NAHASDA-assisted and ROSS-assisted STEP programs of the AHA.		

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

NAHASDA-assisted homebuyers and and ROSS assisted tenants were assisted as planned under this program.

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
	111	
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
	111	

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

The AHA provided support services to all its NAHASDA assisted participants in 2015. These services include working with Sunrise Acres elderly residents, through quarterly meetings with all forty one residents in areas of fire safety, proper maintenance of their energy saving appliances and home units. The homebuyers were assisted in areas of inspection, annual and interim recertifications, educational sessions in areas of need. As well as one on one sessions regarding their agreements. The continued involvement of the Board of Commissioners is key to solve extreme problems and also collection remedies. All department staff and benefits are covered under this program.

7.1. Program Name and Unique Identifier:	2015 - 7: Housing Management Services - Sunrise Modernization Project
7.2. Program Description <i>(This should be the description of the planned program.):</i> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>This program will address some important health and safety issues within the Sunrise Acres Elderly Complex's aging units. Work will include sidewalk replacements, new roofs, insulation, replacement of fuel tanks and slabs, and removal of an in ground fuel oil tank.</p> </div>	
7.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	5
7.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	6
Describe Other Intended Outcome (Only if you selected "Other" above): <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>	
7.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	6
Describe Other Actual Outcome (Only if you selected "Other" above): <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>	
7.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i>	
<div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Low income elderly residents of Sunrise Acres.</p> </div>	
7.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Improvement of building envelopes, increased energy efficiency and replacement of worn systems within the older dwellings of Sunrise Acres.</p> </div>	
7.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>	
<div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Improvements and replacements were made to the Sunrise Acres Elderly Complex's aging units. New roofing was installed, replacement of sidewalks and removal of in ground fuel tank to replaced with a more efficient heating unit.</p> </div>	
7.9: Planned and Actual Outputs for 12-Month Program Year	

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
10		
APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
10		
7.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))		
N/A		

8.1. Program Name and Unique Identifier:	2015 - 8: Housing Management Services - Fleet & Equipment	
8.2. Program Description <i>(This should be the description of the planned program.):</i>		
<p>This program will serve to sustain force account and maintenance operations of AHA properties/projects by providing for the purchase of a heavy duty plow truck and a manlift hoist. These purchases will ensure safety and efficiency in its construction and maintenance operations.</p>		
8.3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>	20	
8.4. Intended Outcome Number <i>(Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):</i>	6	
<p>Describe Other Intended Outcome (Only if you selected "Other" above):</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		
8.5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>	6	
<p>Describe Other Actual Outcome (Only if you selected "Other" above):</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		
<p>8.6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i></p>		
<p>All low income housing participants benefiting from current eligible projects in place, including maintenance and new construction activities.</p>		
<p>8.7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i></p>		
<p>New equipment purchase is necessary to keep current and future projects on schedule, and to handle the increase in maintenance operations. The type of assistance is in support of current force account method of construction benefiting low income housing recipients..</p>		
<p>8.8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i></p>		

The AHA purchased the heavy duty plow truck in order to keep on schedule with current maintenance operations. The manlift hoist was not purchased, it was deemed more cost effective to rent this equipment due to less usage than originally anticipated. The funds were diverted to the heavy duty plow truck costs and the purchase of a paint striping equipment. The purchase of equipment benefits low income housing recipients.

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

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

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

N/A

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

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

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

a The AHA will provide necessary routine and preventative maintenance to its existing 1937 Act elderly rentals in 2015 to ensure long term viability.

Participants in the Mutual-help Program will be expected to remain in compliance with their MHOAs and accept responsibility for maintaining their units.

Referrals to outside agencies for energy efficiency upgrades through low interest loans will be encouraged in 2015.

(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.

Under Program 2015-3, there may be the need for demolishing one 1937 Act duplex at Sunrise Acres to make room for the Phase 3 expansion. The timetable for demolition would be Spring 2015, at the beginning of the construction phase of the project. This may be necessary for both building placement and street access. There are no plans for demolition or disposition of NAHASDA-assisted housing units in 2015.

SECTION 5: BUDGETS

NAHASDA §§ 102(b)(2)(C), 404(b)

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

SOURCE	IHP					APR					
	(A) Estimated amount on hand at beginning of program year	(B) Estimated amount to be received during 12-month program year	(C) Estimated total sources of funds (A+B)	(D) Estimated funds to be expended during 12-month program year	(E) Estimated unexpended funds remaining at end of program year (C-D)	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F+G)	(I) Actual funds expended during 12-month program year	(J) Actual unexpended funds remaining at end of 12-month program year (H - I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	\$1,654,017	\$2,194,204	\$3,848,221	\$3,848,221	\$0	\$2,020,330	\$2,061,165	\$4,081,495	\$1,317,115	\$2,764,380	\$334,489
2. IHBG Program Income		\$308,724	\$308,724	\$308,724	\$0	\$0	\$378,593	\$378,593	\$378,593	\$0	
3. Title VI			\$0		\$0			\$0		\$0	
4. Title VI Program Income			\$0		\$0			\$0		\$0	
5. 1937 Act Operating Reserves			\$0		\$0			\$0		\$0	
6. Carry Over 1937 Act Funds			\$0		\$0			\$0		\$0	
LEVERAGED FUNDS											
7. ICDBG Funds			\$0		\$0			\$0		\$0	
8. Other Federal Funds	\$57,022	\$50,000	\$107,022	\$107,022	\$0	\$58,017	\$50,000	\$108,017	\$108,017	\$0	
9. LIHTC			\$0		\$0			\$0		\$0	
10. Non-Federal Funds	\$250,000		\$250,000	\$250,000	\$0	\$250,000		\$250,000	\$117,360	\$132,640	
TOTAL	\$1,961,039	\$2,552,928	\$4,513,967	\$4,513,967	\$0	\$2,328,347	\$2,489,758	\$4,818,105	\$1,921,085	\$2,897,020	\$334,489
TOTAL Columns C & H, 2 through 10			\$665,746					\$736,610			

Notes:

- a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). For the APR, fill in columns F, G, H, I, J, and K (shaded columns).
- b. Total of Column D should match the total of Column N from the **Uses of Funding** table below.
- c. Total of Column I should match the Total of Column Q from the **Uses of Funding** table below.
- d. For the IHP, describe any estimated leverage in Line 3 below (Estimated Sources or Uses of Funding). For the APR, describe actual leverage in Line 4 below.

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

PROGRAM NAME	IHP			APR		
	(L) 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)
2015-1: CAS Management	\$603,382	\$0	\$603,382	\$455,900		\$455,900
2015-2: Development - Homeownership	\$2,100	\$0	\$2,100	\$497		\$497
2015-3: Development (Supportive Housing) - Sunrise Acres Phase 3	\$2,245,212	\$250,000	\$2,495,212	\$92,268	\$117,360	\$209,628
2015-4: Housing Services - Tenant Assistance	\$155,000	\$0	\$155,000	\$136,844		\$136,844
2015-5: Other Housing Services - Akwesasne Boys & Girls Club	\$50,000	\$0	\$50,000	\$50,000		\$50,000
2015 - 6: Housing Management Services - Administration	\$174,332	\$57,022	\$231,354	\$133,032	\$58,017	\$191,049
2015 - 7: Housing Management Services - Sunrise Modernization Project	\$129,000	\$0	\$129,000	\$106,674		\$106,674
2015 - 8: Housing Management Services - Fleet & Equipment	\$94,000	\$0	\$94,000	\$0		\$0
Planning and Administration	\$395,195	\$358,724	\$753,919	\$343,033	\$427,460	\$770,493
Loan repayment - describe in 3 & 4 below			\$0			\$0
TOTAL	\$3,848,221	\$665,746	\$4,513,967	\$1,318,248	\$602,837	\$1,921,085

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):*

The AHA was eligible and will receive remaining ROSS-Service Coordinator grant funds in the amount of \$57,022 to carry out activities relative to Program 2015-6. This will finalize the three year funding contract with HUD's ROSS Grant. Program income generated from NAHASDA-assisted units is a source of income the AHA will utilize to meet its operating expenses. The AHA was also awarded a \$50,000 grant from the Enterprise Community Partners for the purposes of capacity building in the area of supportive housing.

Add Bullet

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

The AHA's ROSS and Enterprise grants were closed out and completed as planned.

Add Bullet

SECTION 6: OTHER SUBMISSION ITEMS

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

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

Homeownership Dwellings - Each NAHASDA-assisted home constructed with IHBG funds have a useful life of twenty-five (25) years. Each property is subject to a rent to own agreement, similar to the Mutual-help & Occupancy Agreement, and will ensure an affordability period based on the amortization schedule (pro-rated recovery amount). The properties under these programs are considered "restricted fee" lands under the jurisdiction of the St. Regis Mohawk Tribe, and their laws and authorities. The binding commitments are the rent-to-own agreements in place coupled with the Tribal Quit Claim deeds which guarantee that if default were to occur, the AHA has the authority to transfer these lands to another eligible participant. If an event such as a foreclosure/eviction takes place, the AHA determines a renewed useful life based on any rehab that takes place prior to the move-in of the next eligible family. Each unit is inspected on an annual basis by qualified housing staff, ensuring that the useful life is maintained and up to date.

Rental Dwellings - Each NAHASDA-assisted dwelling that is rehabilitated with IHBG funds have a useful life of twenty (20) years. After such time, these units would receive other rehabilitation as necessary, expanding the time period of affordability based on funds expended.

(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 or assistance to over income families are planned for the 2015 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.

The St. Regis Mohawk Tribe and AHA provides preference to housing, funded under NAHASDA to enrolled tribal members whose enrollment status can be verified. If there are no other enrolled St. Regis Mohawk Tribal members waiting for housing, these units may be awarded to other Native Americans, whose enrollment can be verified.

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

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

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

--

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

Did you exceed your spending cap for Planning and Administration?

Yes No

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

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

(6) Expanded Formula Area - Verification of Substantial Housing Services (24 CFR § 1000.302(3)) *If your tribe has an expanded formula area (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the tribe have an expanded formula area?*

Yes No **If no, proceed to Section 7.**

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

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: If answered "Yes" in Line 6, for each separate formula area, list the actual amount of IHBG and other funds expended for all AIAN households and for only AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

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

SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE

NAHASDA § 102(b)(2)(D)

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

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

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

Yes No

(2) In accordance with 24 CFR 100.328, 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 This certification must be executed by the recognized tribal government covered under the IHP.

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

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

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

(4) Tribe:	St. Regis Mohawk Tribe
(5) Authorized Official's Name and Title:	Tribal Chiefs, Beverly Cook, Eric Thompson, Ronald Lafrance
(6) Authorized Official's Signature:	Signatures on File
(7) Date (MM/DD/YYYY):	10/15/2014

SECTION 9: TRIBAL WAGE RATE CERTIFICATION

NAHASDA §§ 102(b)(2)(D)(vi), 104(b)

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

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

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

Force account construction of new homes for eligible tribal members, sub-contractors involving labor for such, and renovation projects under this grant will use tribally determined wage rates as adopted by the St. Regis Mohawk Tribe by TCR #2014-18. These rates are recertified annually by tribal council resolution.

SECTION 10: SELF-MONITORING

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

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

Yes No

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

Yes No Not Applicable

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

Yes No

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

The results of the self monitoring indicated a need to work with the appropriate local governments in supportive housing networks and to provide quarterly financial statements to Board of Commissioners. The AHA will adopt the the Records & Information Management Policy and an official Grievance Policy for tenants, homebuyers and participants by board resolution. We will provide training for self monitoring and customer service for key staff. We will also ensure that policies are easily accessible to the public and host an annual service orientation. The inspection procedures have improved immensely in 2015. The only area needing further improvement is follow up of inspections. The remedies are provided in our Action Plan for 2016 and are on file with the Executive Department of the AHA.

SECTION 11: INSPECTIONS

NAHASDA § 403(b)

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

Activity		Results of Inspections				Total number of units inspected
		Total Number of Units (Inventory)	Units in standard condition	Units needing rehabilitation	Units needing to be replaced	
(a)		(b)	(c)	(d)	(e)	(f)
1	1937 Housing Act Units:					
	a. Rental	70	70	0	0	70
	b. Homeownership	67	64	3	0	67
	c. Other	0	0	0	0	0
1937 Act Subtotal		137	134	3	0	137
2	NAHASDA assisted units:					
	a. Rental	20	20	0	0	20
	b. Homeownership	89	89	0	0	89
	c. Rental Assistance	0	0	0	0	0
	d. Other	0	0	0	0	0
NAHASDA Subtotal		109	109	0	0	109
Total		246	243	3	0	246

(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 an Office of Management and Budget Circular A-133 audit is required, based on a review of your financial records.

Did you expend \$500,000 or more in total Federal awards during the APR reporting period?

Yes No

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

If No, an audit is not required.

SECTION 13: PUBLIC AVAILABILITY

NAHASDA § 408, 24 CFR § 1000.518

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

Yes No

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

Yes No Not Applicable

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

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

There were no comments received from the Tribe or the citizens.

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	20
(2) Number of Temporary Jobs Supported	0

(3) Narrative (optional):
<input type="text"/>

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):

Not applicable

(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 §1000.512

Use this section for IHP amendments only.

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

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

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

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

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

NOTES:

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

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

Eligible Activity	Output Measure	Output Completion
(1) Modernization of 1937 Act Housing [202(1)]	Units	All work completed and unit passed final inspection
(2) Operation of 1937 Act Housing [202(1)]	Units	Number of units in inventory at Program Year End (PYE)
(3) Acquisition of Rental Housing [202(2)]	Units	When recipient takes title to the unit
(4) Construction of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection

(5) Rehabilitation of Rental Housing [202(2)]	Units	All work completed and unit passed final inspection
(6) Acquisition of Land for Rental Housing Development [202(2)]	Acres	When recipient takes title to the land
(7) Development of Emergency Shelters [202(2)]	Households	Number of households served at any one time, based on capacity of the shelter
(8) Conversion of Other Structures to Affordable Housing [202(2)]	Units	All work completed and unit passed final inspection
(9) Other Rental Housing Development [202(2)]	Units	All work completed and unit passed final inspection
(10) Acquisition of Land for Homebuyer Unit Development [202(2)]	Acres	When recipient takes title to the land
(11) New Construction of Homebuyer Units [202(2)]	Units	All work completed and unit passed final inspection
(12) Acquisition of Homebuyer Units [202(2)]	Units	When recipient takes title to the unit
(13) Down Payment/Closing Cost Assistance [202(2)]	Units	When binding commitment signed
(14) Lending Subsidies for Homebuyers (Loan) [202(2)]	Units	When binding commitment signed
(15) Other Homebuyer Assistance Activities [202(2)]	Units	When binding commitment signed
(16) Rehabilitation Assistance to Existing Homeowners [202(2)]	Units	All work completed and unit passed final inspection
(17) Tenant Based Rental Assistance [202(3)]	Households	Count each household once per year
(18) Other Housing Service [202(3)]	Households	Count each household once per year
(19) Housing Management Services [202(4)]	Households	Count each household once per year
(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]	Units	Number of units in inventory at PYE
(21) Crime Prevention and Safety [202(5)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(22) Model Activities [202(6)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(23) Self-Determination Program [231-235]		
Acquisition	Units	When recipient takes title to the unit
Construction	Units	All work completed and unit passed final inspection
Rehabilitation	Units	All work completed and unit passed final inspection
Infrastructure	Dollars	Dollars spent (report in Uses of Funding Table only)
(24) Infrastructure to Support Housing [202(2)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(25) Reserve Accounts [202(9)]	N/A	N/A

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

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

1. Program Name and Unique Identifier:		
2. Program Description <i>(This should be the description of the planned program.):</i>		
3. Eligible Activity Number <i>(Select one activity from the Eligible Activity list. Do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):</i>		
4. Intended Outcome Number <i>(Select one outcome from the Outcome list.):</i>		
Describe Other Intended Outcome (Only if you selected "Other" above):		
5. Actual Outcome Number <i>(In the APR identify the actual outcome from the Outcome list.):</i>		
Describe Other Actual Outcome (Only if you selected "Other" in above):		
6. Who Will Be Assisted <i>(Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a <u>separate</u> program within this section.):</i>		
7. Types and Level of Assistance <i>(Describe the types and the level of assistance that will be provided to each household, as applicable.):</i>		
8. APR: <i>Describe the accomplishments for the APR in the 12-month program year.</i>		
9. Planned and Actual Outputs for 12-Month Program Year		

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

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

SOURCE	IHP					APR					
	(A) Estimated amount on hand at beginning of program year	(B) Estimated amount to be received during 12-month program year	(C) Estimated total sources of funds (A+B)	(D) Estimated funds to be expended during 12-month program year	(E) Estimated unexpended funds remaining at end of program year (C-D)	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F+G)	(I) Actual funds expended during 12-month program year	(J) Actual unexpended funds remaining at end of 12-month program year (H - I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds			\$0		\$0			\$0		\$0	
2. IHBG Program Income			\$0		\$0			\$0		\$0	
3. Title VI			\$0		\$0			\$0		\$0	
4. Title VI Program Income			\$0		\$0			\$0		\$0	
5. 1937 Act Operating Reserves			\$0		\$0			\$0		\$0	
6. Carry Over 1937 Act Funds			\$0		\$0			\$0		\$0	
LEVERAGED FUNDS											
7. ICDBG Funds			\$0		\$0			\$0		\$0	
8. Other Federal Funds			\$0		\$0			\$0		\$0	
9. LIHTC			\$0		\$0			\$0		\$0	
10. Non-Federal Funds			\$0		\$0			\$0		\$0	
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

TOTAL Columns C & H, 2 through 10	\$0	\$0
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Notes:

- a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). **For the APR, fill in columns F, G, H, I, J, and K (shaded columns).**
- b. Total of Column D should match the total of Column N from the **Uses of Funding table below.**
- c. **Total of Column I should match the Total of Column Q from the Uses of Funding table below.**

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

PROGRAM NAME	IHP			APR		
	(L) Prior and current year IHBG (only) funds to be expended in 12-month program year	(M) Total all other funds to be expended in 12-month program year	(N) Total funds to be expended in 12-month program year (L+M)	(O) Total IHBG (only) funds expended in 12-month program year	(P) Total all other funds expended in 12-month program year	(Q) Total funds expended in 12-month program year (O+P)
			\$0			\$0
Planning and Administration			\$0			\$0
Loan repayment			\$0			\$0
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Notes:

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

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



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

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