

# Section 1: Cover Page

- (1) Grant Number: 55IH4026900
- (2) Recipient Program Year: 10/01/2022 - 09/30/2023
- (3) Federal Fiscal Year: 2023
- (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: Seminole Nation Housing Authority
- (10) Contact Person: Cooper, Tandy
- (11) Telephone Number with Area Code (999) 999-9999: 405-257-6604
- (12) Mailing Address: PO Box 1493 101 S. Hitchite Avenue
- (13) City: Wewoka
- (14) State: OK
- (15) Zip Code (99999 or 99999-9999): 74884
- (16) Fax Number with Area Code (999) 999-9999: 405-257-3961
- (17) Email Address [executivedirector@hasnok.org](mailto:executivedirector@hasnok.org)
- (18) If TDHE, List Tribes Below:
  - ☒ Seminole Nation
- (19) Tax Identification Number: 730793515
- (20) UEI Number: WTN6VX341GZ8
- (21) CCR/SAM Expiration Date (MM/DD/YYYY): 12/14/2023
- (22) IHBG Fiscal Year Formula Amount: \$2,049,829
- (23) Name of Authorized IHP Submitter: STONE, REBECCA
- (24) Title of Authorized IHP Submitter: Executive Director
- (25) Signature of Authorized IHP Submitter: STONE, REBECCA
- (26) IHP Submission Date (MM/DD/YYYY): 10/14/2022
- (27) Name of Authorized APR Submitter: Tandy Cooper
- (28) Title of Authorized APR Submitter: Interim Executive Director
- (29) Signature of Authorized APR Submitter: Tandy Cooper
- (30) APR Submission Date (MM/DD/YYYY):

**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	X	X
(2) Renters Who Wish to Become Owners	X	X
(3) Substandard Units Needing Rehabilitation	X	X
(4) Homeless Households	X	X
(5) Households Needing Affordable Rental Units	X	X
(6) College Student Housing	X	X
(7) Disabled Households Needing Accessibility	X	X
(8) Units Needing Energy Efficiency Upgrades	X	X
(9) Infrastructure to Support Housing	X	
(10) Other (specify below)		

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

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

HASNOK will focus on providing affordable and safe housing for members of our service area. We will continue to provide maintenance of units under our management. We will assess housing management, maintenance, and other residential service needs, and provide services accordingly. HASNOK programs will benefit low-income families by providing rental units and rental assistance for new tenants who we hope to be able to educate and mentor into being homeowners. The Rehabilitation Program for privately owned homes will provide a safe and secure living environment for homeowners. Down payment assistance will be provided for tribal members obtaining commercial loans for homes. Youth activities will be planned through our Boys and Girls Club that was chartered December 20, 2021.

**(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)*:

HASNOK'S primary service area is Seminole County, Oklahoma. Seminole County is one of the most economically depressed counties in the state. The majority of the community requires assistance. The rental assistance program serves Indian families who reside within Seminole County. All assistance is based upon a waiting list of eligible families. The Rehabilitation Program serves low-income homeowners in Seminole County, as well as, an area extending twenty (20) miles from the Seminole County boundaries. Because many Seminole Nation families live outside of Seminole County, we expect to support those families through the efforts of the down payment and closing cost assistance program which includes the entire State of Oklahoma. Our Boys and Girls Club site is situated in Seminole County, but has an online presence for participation of school age children nationwide.



# Section 3: Program Descriptions

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

## 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 [https://www.hud.gov/sites/documents/DOC\\_8814.PDF](https://www.hud.gov/sites/documents/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 nonIHBG activities in the IHP to provide tribal members with a more complete picture of housing activities.

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

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

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

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)

<b>Eligible Activity</b>	<b>Output Measure</b>	<b>Output Completion</b>
(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

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 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. (NAHASDA § 404(b))

### 1.1. Program Name and Unique Identifier: 2023-01:MODERNIZATION OF 1937 ACT UNITS

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

This program is to provide modernization of Mutual Help and Rental Units. Work orders will be initiated to complete identified repairs. Modernization will be completed on units which will be conveying in the near future. Modernization will be done on rental units in need of upgrades and improvements.

#### 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.):

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

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

(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.):

(3) Improve quality of substandard units

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.):

Current tenants and future tenants residing in 1937 Act units (low-income families) will be assisted.

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

Modernization of 1937 Act Mutual Help units will be maintained to help keep them affordable and in good repair.

#### 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.):

Modernization for conveyance. Maintenance upkeep on move outs of units.

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

Planned Number of Units to be Completed in Year Under this Program: 10	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 10	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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



**1.1. Program Name and Unique Identifier: 2023-02:OPERATIONS OF 1937 HOUSING ACT UNITS**

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

This program is to provide for the operations and oversight of all purchases, procurement, and contract management related to the maintenance of 1937 Act units, as well as, the tenant accounts receivable associated with the units. Actual unit maintenance is also included in this activity.

**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.):*

(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):*

Accountability will be ensured through this activity. Purchases will be made according to policy. Procurement procedures will be followed. Oversight and management of executed contracts on work completed on 1937 Act units will be maintained. Actual maintenance and operations of 1937 Act units will be the outcome of this activity.

**1.5 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):*

**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.):*

Current and future tenants residing in 1937 Act units, who are low-income families will be assisted.

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

Tenants will be assisted through the overall financial operations and maintenance associated with maintaining the 1937 Act units.

**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.):*

Inspections were completed on units and we provided maintenance upkeep. The cost of materials have increased as well contractors prices.

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

Planned Number of Units to be Completed in Year Under this Program: 34	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 34	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

---



**1.1. Program Name and Unique Identifier: 2023-03:DEVELOPMENT - LAND ACQUISITION FOR RENTAL**

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

Approximately 5 acres of land will be purchased for the construction of low income rental housing.

**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.):*

(6) Acquisition of Land for Rental Housing Development [202(2)]

**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.):*

(5) Address homelessness

**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.):*

(7) Create new affordable rental units

**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.):*

Qualified applicants will have the opportunity to rent newly constructed units developed for low income families on the land acquired.

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

Approximately 5 acres of land or city lots will be purchased for future housing development. Development and new construction of rental units will be the ultimate outcome. Rental payments will not exceed 30% of the adjusted gross income. Preference will be given to Seminole tribal members.

**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.):*

No land available, still searching.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 5
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

No land available, still searching. \$588 needs to adjusted.

**1.1. Program Name and Unique Identifier: 2023-04:DOWN PAYMENT/CLOSING COST ASSISTANCE**

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

The Down Payment/Closing Cost Assistance program will assist qualified Indian families interested in purchasing a house. Preference will be given to Seminole Tribal members. Applicants must qualify for financing through a financial institution, be a first-time homebuyer, and meet income guidelines. The maximum level of funding is \$15,000.

**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.):*

(13) Down Payment/Closing Cost Assistance [202(2)]

**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.):*

(2) Assist renters to become homeowners

**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.):*

(2) Assist renters to become homeowners

**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 Indian families who are first-time homebuyers will be assisted. Seminole Tribal members will receive preference.

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

This program is open to low-income families throughout the State of Oklahoma. Assistance cannot exceed \$15,000 or 10% of the cost of the house, whichever is less.

**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.):*

For FY 2023 we completed 4 Down Payment/Closing Cost. We did get one reimbursement due to the applicant sold out before the 5 year term.

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

Planned Number of Units to be Completed in Year Under this Program: 3	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 4	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

---



**1.1. Program Name and Unique Identifier: 2023-06:DEVELOPMENT - REHABILITATION ASSISTANCE TO EXISTING HOMEOWNERS**

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

The Rehabilitation Program will assist low-income homeowners living in Seminole County or within the area extending twenty (20) miles from the exterior boundaries of Seminole County, with essential repairs that effect life, safety, or health to private homeowners. The rehab will not exceed \$20,000 (if the homeowner receives more than \$5,000 worth of service he/she must have homeowner insurance.). This program will also allow for the installation of storm shelters for HASNOK lease-purchase participants and other low-income homeowners who can pay one-half the cost up front. This program will cover the other one-half.

**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.):*

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

**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.):*

(3) Improve quality of substandard units

**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.):*

Income eligible families in need of essential home repairs that will benefit life, safety, or health of privately-owned homeowners will be assisted. Assistance will also allow for the installation of storm shelters for HASNOK lease-purchase participants and other low-income homeowners who can pay one-half the cost up front. This program will cover the other one-half.

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

Rehab assistance will be provided to five homeowners with repairs not to exceed \$25,000. Assistance may only be received once in three years. If homeowner receives more than \$5,000 worth of assistance, he/she must have homeowner insurance. Assistance will also allow for the installation of storm shelters for HASNOK lease-purchase participants and other low-income homeowners who can pay one-half the cost up front. This program will cover the other one-half.

**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.):*

3 units were completed in FY 2023.

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

Planned Number of Units to be Completed in Year Under this Program: 4	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 3	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

No other applicants qualified.



**1.1. Program Name and Unique Identifier: 2023-07:HOUSING MANAGEMENT SERVICES**

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

Housing Management Services provide work orders for maintenance, upkeep, lease monitoring, conveying stock, interim recertifications, data collection, reporting, tenant selection, file maintenance, management of rental assistance, and affordable 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.):

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

**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.):

(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):

Housing Management Services provide support to tenants through regular inspections, record keeping, recertifications, file maintenance, tenant selection, etc.

**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.):

HASNOK tenants and low-income Indian applicants will be assisted.

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

General oversight of existing stock, staff time processing applications, tenant selection, and management of rental assistance. Administrative/management services will be provided.

**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.):

Served 250 households

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 250	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 250	APR: Actual Number of Acres Purchased in Program Year: 0

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

---

**1.1. Program Name and Unique Identifier: 2023-08:OTHER HOUSING SERVICES****1.2. Program Description***(This should be the description of the planned program.):*

Other Housing Services such as housing counseling in accordance with rental or homeownership. Related services could include residential supports such as youth activities (Boys and Girls Club), education programs, drug and crime prevention, community activities, life skills, credit/budgeting classes, maintenance classes, gardening, social and cultural classes, etc.

**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.):*

(18) Other Housing Services [202(3)]

**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.):*

(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):*

Other Housing Services not only helps prepare renters to be homeowners, but gives tenants the residential supports they need to be good, responsible tenants and members of the community. Other Housing Services in both small and progressive ways has the potential of increasing the quality of life for tenants. A Boys and Girls Club will provide much needed activities for many of our rural low-income children who are susceptible to substance abuse and other detrimental activities.

**1.5 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):***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 families will be assisted, both current and prospective tenants.

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

New and prospective homeowners are required to complete four courses: budgeting, housekeeping, maintenance, and compliance policy training before or immediately after move-in. Drug awareness, bullying, and crime prevention activities will be conducted for youth residing in HASNOK units. Tenants who receive rental assistance also have the opportunity to attend budgeting/counseling sessions. The Boys and Girls Club is a great opportunity to assist youth learning life skills, financial literacy, health and wellness, cultural awareness, and meaningful life skills.

**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.):*

Elderly meals were served to tenants. Tenants participated in "How Can We Help" new QR code/App training that was provided to tenants to assist tenants report issues in their neighborhood and maintenance issues. Food vouchers were provided to the tenants. Back to School Luau was held, Great Futures Banquet was held. BGC staff completed trainings, club members received informational training from the JOM department.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 300	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 418	APR: Actual Number of Acres Purchased in Program Year: 0

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



**1.1. Program Name and Unique Identifier: 2023-09:TENANT BASED RENTAL ASSISTANCE**

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

The Tenant Based Rental Assistance program will provide \$220 monthly rental assistance payments to low-income Indian households residing in Seminole County and \$350 rental assistance to tenants of Seminole Tiny Homes. Assistance cannot exceed three years unless the person is disabled, elderly or near elderly.

**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.):*

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

**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.):*

(6) Assist affordable housing for low income households

**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.):*

Rental assistance payments will be provided for eligible low-income Indian families. Preference will be given to Seminole tribal members.

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

Payments of \$220 and \$350 per month will be provided to a landlord to assist with rent. Households will be limited to receiving assistance for no more than three (3) years, unless the renter is disabled, elderly, or near elderly. Other funding will be used to assist the first three quarters of the year.

**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 assisted 41 tenants

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 45	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 38	APR: Actual Number of Acres Purchased in Program Year: 0

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

Some tenants were going to be exceeding the 3 years term limit. And the community we serve, the rental units will not pass inspection. Also some tenants passed away.



**1.1. Program Name and Unique Identifier: 2023-10:TENANT BASED RENTAL ASSISTANCE (80 - 100%)**

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

The Tenant Based Rental Assistance program for households with 80 - 100% of the median income will provide \$150 monthly rental assistance payments to eligible Indian households residing in Seminole County and \$300 to tenants of Seminole Tiny Homes. Assistance cannot exceed three years unless the person is disabled, elderly, or near elderly.

**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.):*

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

**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.):*

(6) Assist affordable housing for low income households

**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.):*

(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):*

No qualified applicants

**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.):*

Rental assistance payments will be provided for eligible Indian families who fall between 80 - 100% of the median income. Preference will be given to Seminole tribal members.

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

Payments of \$150 and \$300 per month will be provided to a landlord to assist with rent. Households will be limited to receiving assistance for no more than three (3) years unless the renter is disabled, elderly, or near elderly.

**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.):*

Review this portion of assistance.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 2	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

no assistance was given due to no qualified applicants.

**1.1. Program Name and Unique Identifier: 2023-11:OPERATIONS AND MAINTENANCE OF NAHASDA-ASSISTED UNITS**

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

HASNOK will provide routine and non-routine repairs and maintenance to ensure compliance with HQS at a minimum. Maintenance work orders will be completed via referral from occupants and inspections.

**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.):*

(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]

**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.):*

(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):*

Provide inspections and routine and non routine repairs and maintenance to ensure compliance with HQS.

**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.):*

Current and future tenants residing in NAHASDA units will be assisted.

**1.7. 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 provided by Housing Maintenance staff or contractors for essential home repair needs identified by the inspection reports, work orders, homeowner requests, or health and safety requirements. Tenants will be responsible for repairs due to tenant damage based on the actual cost.

**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.):*

Completed work orders, completed routine maintenance on units.

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

Planned Number of Units to be Completed in Year Under this Program: 160	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 215	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

---



**1.1. Program Name and Unique Identifier: 2023-12:LIHTC and TINY HOME OPERATIONS**

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

HASNOK will provide routine and non-routine repairs and maintenance to ensure compliance with HQS at a minimum. Maintenance work orders will be completed via referral from occupants and inspections. The HASNOK will provide assistance to the LIHTC program per the HAP Agreement and the new 184 Tiny Home project.

**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.):*

(20) Operation and Maintenance of NAHASDA-Assisted Units [202(4)]

**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.):*

(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):*

Provided inspections, routine and non routine repairs and maintenance to ensure compliance.

**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.):*

Current and future tenants residing in LIHTC units will be assisted, as well as, elderly tenants of the Tiny Home project.

**1.7. 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 provided by Housing Maintenance staff or contractors for essential home repair needs identified by the inspection reports, work orders, homeowner requests, or health and safety requirements. Tenants will be responsible for repairs due to tenant damage based on the actual cost.

**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.):*

Repaired and Inspected aerobic systems, home repairs from work orders.

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

Planned Number of Units to be Completed in Year Under this Program: 43	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 43	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

---



**1.1. Program Name and Unique Identifier: 2023-13:COMMUNITY GARDENS****1.2. Program Description***(This should be the description of the planned program.):*

Community gardens will be maintained at four cluster sites: a low-rent site, an elderly low-rent site, and two home ownership sites. The purpose will be to grow fresh produce, increase healthier lifestyles, and build a sense of community. The gardens will also provide fresh produce for families.

**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.):*

(22) Model Activities [202(6)]

**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.):*

(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):*

The gardens will help provide fresh food for tenants, increase healthy lifestyles, and build a sense of community. Ultimately, the gardens will provide fresh produce for families to alleviate the need for families to interact in crowds at grocery stores and allow them more self-sufficiency while maintaining social distance.

**1.5 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):*

To produce fresh produce and create healthy life styles and build a sense of community

**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 tenants and homeowners, both current and prospective will be assisted.

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

The low income tenants and homeowners will be provided education and experience with horticulture. They will grow and harvest their own food. they will increase/improve a healthy lifestyle. And they will cooperate and build a better sense of community with their neighbors while social distancing from the public.

**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 planted at one site

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

Plants were not available in our area and when they did arrive,, it was out of season.

**1.1. Program Name and Unique Identifier: 2023-14:CRIME PREVENTION AND SAFETY**

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

HASNOK tenants, homeowners and other low-income families will be provided the opportunity to obtain assistance financing fences for security, as well as, yard lights. Applicants for this program will be required to provide one-half the cost for their requested crime prevention and safety item; this program will cover the other one-half to obtain the item. Speed bumps will also be installed at cluster sites to promote slower and safer driving.

**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.):*

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

**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.):*

(11) Reduction in crime reports

**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.):*

(11) Reduction in crime reports

**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 tenants and homeowners, both current and prospective will be assisted, as well as, other low-income homeowners.

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

Low income homeowners will be provided one-half the cost of yard lights, storm shelters and property fences to improve crime prevention and safety.

**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.):*

Assisted 2 with fencing and 2 with security lights

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

---



**1.1. Program Name and Unique Identifier: 2023-17:DEVELOPMENT - NEW RENTAL CONSTRUCTION**

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

This activity is for the construction of a rental unit for eligible low-income families who meet the NAHASDA guidelines. Applicants must meet income guidelines, selection criteria, and comply with HASNOK housing program policies.

**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.):*

(4) Construction of Rental Housing [202(2)]

**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.):*

(7) Create new affordable rental 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.):*

(1) Reduce over-crowding

**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.):*

A low-income family who meets the selection criteria of the HASNOK policies with preference given to Seminole Tribal Members.

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

A rental unit will be built that will provide safe, secure, and affordable housing for a low-income family who isn't ready for homeownership.

**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 completed one two bedroom rental unit.

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

Planned Number of Units to be Completed in Year Under this Program: 1	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 1	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

---

# Section 4: Maintaining 1937 Act Units, Demolition, and Disposition

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.)

1937 Act units will be inspected for necessary repairs and maintenance will be provided according to the inspection policy of the HASNOK on an annual basis and to create work orders for immediate minor repairs. A detailed inspection will be completed for major or structural repairs. The Maintenance staff will continue to change air filters and check the working order of smoke detectors, interior electrical devices, fixtures, and appliances on a regular schedule in the low rent units. Rental units will be maintained/rehabbed after move-out to bring the unit up to standard for the next move-in. Mutual Help units will also be inspected to ensure homes are being maintained by the homeowners in an affordable condition. Should it be determined that there are areas of repair needed, the repairs will be addressed and brought up to standard. The goal is to keep all 1937 Act units maintained and in an affordable condition.

**(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 demolition or disposition of any 1937 Act units is planned for 2023.



# 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				
	(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)
1. IHBG Funds	\$1,401,786.00	\$2,049,829.00	\$3,451,615.00	\$2,500,941.00	\$950,674.00
2. IHBG Program Income	\$0.00	\$445,500.00	\$445,500.00	\$0.00	\$445,500.00
3. Title VI	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4. Title VI Program Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5. 1937 Act Operating Reserves	\$0.00		\$0.00	\$0.00	\$0.00
6. Carry Over 1937 Act Funds	\$0.00		\$0.00	\$0.00	\$0.00
7. ICDBG Funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8. Other Federal Funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9. LIHTC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10. Non-Federal Funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$1,401,786.00	\$2,495,329.00	\$3,897,115.00	\$2,500,941.00	\$1,396,174.00
TOTAL Columns C and H( 2 through 10 )			\$445,500.00		

  

SOURCE	APR					
	(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 to be expended during 12-month program year	(J) Actual unexpended funds remaining at end of program year (H-I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	\$1,991,128.00	\$2,054,620.00	\$4,045,748.00	\$2,182,333.00	\$1,863,415.00	
2. IHBG Program Income	\$323,253.00	\$497,188.00	\$820,441.00		\$820,441.00	
3. Title VI			\$0.00		\$0.00	
4. Title VI Program Income			\$0.00		\$0.00	
5. 1937 Act Operating Reserves			\$0.00		\$0.00	
6. Carry Over 1937 Act Funds			\$0.00		\$0.00	
7. ICDBG Funds			\$0.00		\$0.00	
8. Other Federal Funds			\$0.00		\$0.00	
9. LIHTC			\$0.00		\$0.00	
10. Non-Federal Funds			\$0.00		\$0.00	
Total	\$2,314,381.00	\$2,551,808.00	\$4,866,189.00	\$2,182,333.00	\$2,683,856.00	
TOTAL Columns C and H( 2 through 10 )			\$820,441.00			

## Notes:

- 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).
- Total of Column D should match the total of Column N from the **Uses of Funding** table below.
- 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 **Uses of Funding table 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)
2023-01: MODERNIZATION OF 1937 ACT UNITS	\$166,304.00	\$0.00	\$166,304.00	\$73,670.00	\$0.00	\$73,670.00
2023-02: OPERATIONS OF 1937 HOUSING ACT UNITS	\$220,000.00	\$0.00	\$220,000.00	\$230,088.00	\$0.00	\$230,088.00
2023-03: DEVELOPMENT - LAND ACQUISITION FOR RENTAL	\$100,000.00	\$0.00	\$100,000.00	\$588.00	\$0.00	\$588.00
2023-04: DOWN PAYMENT/ CLOSING COST ASSISTANCE	\$45,000.00	\$0.00	\$45,000.00	\$55,700.00		\$55,700.00
2023-06: DEVELOPMENT - REHABILITATION ASSISTANCE TO EXISTING HOMEOWNERS	\$250,000.00	\$0.00	\$250,000.00	\$30,007.00		\$30,007.00
2023-07: HOUSING MANAGEMENT SERVICES	\$330,000.00	\$0.00	\$330,000.00	\$333,266.00	\$0.00	\$333,266.00
2023-08: OTHER HOUSING SERVICES	\$265,000.00	\$0.00	\$265,000.00	\$79,787.00	\$0.00	\$79,787.00
2023-09: TENANT BASED RENTAL ASSISTANCE	\$145,320.00	\$0.00	\$145,320.00	\$133,830.00	\$0.00	\$133,830.00
2023-10: TENANT BASED RENTAL ASSISTANCE (80 - 100%)	\$5,400.00	\$0.00	\$5,400.00	\$0.00	\$0.00	\$0.00
2023-11: OPERATIONS AND MAINTENANCE OF NAHASDA- ASSISTED UNITS	\$275,000.00	\$0.00	\$275,000.00	\$578,376.00	\$0.00	\$578,376.00
2023-12: LIHTC and TINY HOME OPERATIONS	\$25,000.00	\$0.00	\$25,000.00	\$7,401.00	\$0.00	\$7,401.00
2023-13: COMMUNITY GARDENS	\$2,000.00	\$0.00	\$2,000.00	\$218.00	\$0.00	\$218.00
2023-14: CRIME PREVENTION AND SAFETY	\$25,000.00	\$0.00	\$25,000.00	\$9,630.00	\$0.00	\$9,630.00
2023-17: DEVELOPMENT - NEW RENTAL CONSTRUCTION	\$299,245.00	\$0.00	\$299,245.00	\$279,126.00	\$0.00	\$279,126.00
Loan repayment - describe in 3 & 4 below	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Planning and Administration	\$347,672.00	\$0.00	\$347,672.00	\$370,646.00	\$0.00	\$370,646.00
TOTAL	\$2,500,941.00	\$0.00	\$2,500,941.00	\$2,182,333.00	\$0.00	\$2,182,333.00

**Notes:**

- Total of Column L cannot exceed the IHBG funds from Column C, Row 1 from the Sources of Funding table in Line 1 above.
- Total of Column M cannot exceed the total from Column C, Rows 2-10 from the Sources of Funding table in Line 1 above.
- 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.
- Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources of Funding table in Line 1 above.
- 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):  
**Not entered in EPIC**

**(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.):

**Less than \$5,000 - 5 months \$5,001 - \$25,000 - 3 years Lease Purchase or Acquisition - 25 years**

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

**One non-low income activity and one model activity are planned for this year. Each is described separately. 2023-??, Tenant Based Rental Assistance (80-100%) to provide \$150 or \$300 depending on site for up to two non-low income rental assistance applicants. 2023-?? Community Gardens will provide a healthy community activity for tenants which will help provide food and support continued social distancing.**

**(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**

If yes, describe the policy. **Indian Preference is outlined in HASNOK policies: 1. Enrolled full-blood Seminole tribal members, 2. Enrolled Seminole tribal members, 3. Members of other Indian 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? **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? **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 § 1200.302(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 § 1200.302 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? **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:

### Expanded Formula Area:

Geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there :

All AIAN Households - IHBG Funds : **\$0.00**

AIAN Households with Incomes 80% or Less of Median Income - IHBG Funds : **\$0.00**

All AIAN Households - Funds from Other Sources : **\$0.00**

AIAN Households with Incomes 80% or Less of Median Income - Funds from Other Sources : **\$0.00**

**(7) APR:** : If answered "Yes" in Field 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.

All AIAN Households - IHBG Funds : **\$0.00**



AIAN Households with Incomes 80% or Less of Median Income - IHBG Funds : **\$0.00**

All AIAN Households - Funds from Other Sources :**\$0.00**

AIAN Households with Incomes 80% or Less of Median Income - Funds from Other Sources : **\$0.00**

# 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**

**(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: **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**

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**

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

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**



## 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

(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: **No**

(5) Authorized Official's Name and Title:

(6) Authorized Official's Signature:

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

## Section 9: Tribal Wage Rate Certification

NAHASDA §§ 102(b)(2)(D)(vi), 104(b)

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

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

(2) ☒ You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.

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

(4) If you checked the box in Line 3, list the other activities that will be using tribally determined wage rates:



# 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**
- (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**
- (3) Did you conduct self-monitoring, including monitoring sub-recipients? **Yes**
- (4) Self-Monitoring Results. *(Describe the results of the monitoring activities, including corrective actions planned or taken.):*  
**Self Monitoring was completed in August 2023. The DPA Policy had an outdated table depicting the applicable TDC limits. The policy was updated with current TDC limits and passed by the HASNOK BOC. Low Rent Policy was revised regarding utility allowances, Tiny Homes Policy was revised in accordance with NAHASDA requirements. A checklist was developed for the Crime Prevention and Safety activity as well as a policy.**

# Section 11: Inspections

NAHASDA § 403(b)

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

Activity (A)	Total Number of Units (B)	Units in Standard Condition (C)	Units Needing Rehabilitation (D)	Units Needing to be Replaced (E)	Total Number of Units Inspected (F=C+D+E)
<b>1937 Housing Act Units:</b>					
a. Rental	33	0	0	0	0
b. Homeownership	3	0	3	0	3
c. Other	0	0	0	0	0
<b>1937 Act Subtotal:</b>	36	0	3	0	3
<b>NAHASDA Associated Units:</b>					
a. Rental	36	0	1	0	1
b. Homeownership	101	0	0	0	0
c. Rental Assistance	38	0	0	0	0
d. Other	43	0	0	0	0
<b>NAHASDA Act Subtotal:</b>	218	0	1	0	1
<b>Total:</b>	254	0	4	0	4

(2) Did you comply with your inspection policy: **Yes**

(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**

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.

Audit Due Date : **07/01/2024**

# 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**

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

(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)).

**No Comments**

# 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) Indian Housing Block Grant Assistance (IHBG)	20
(2) Number of Temporary Jobs Supported	0

(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: **Seminole Nation Housing Authority**

(5) Authorized Official's Name and Title:

(6) Authorized Official's Signature:

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