

# Section 1: Cover Page

- (1) Grant Number: 55IT5310700
- (2) Recipient Program Year: 01/01/2023 - 12/31/2023
- (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:** Nisqually Indian Tribe
- (10) **Contact Person:** Frank III, Willie
- (11) **Telephone Number with Area Code** (999) 999-9999: 360-456-5221
- (12) **Mailing Address:** 4820 She Nah Num Drive SE
- (13) **City:** Olympia
- (14) **State:** WA
- (15) **Zip Code** (99999 or 99999-9999): 98513-9105
- (16) **Fax Number with Area Code** (999) 999-9999: 360-407-0125
- (17) **Email Address** Frank.willie@nisqually-nsn.gov
- (18) **If TDHE, List Tribes Below:**
- (19) **Tax Identification Number:** 910872090
- (20) **UEI Number:** MFECT5J3PK93
- (21) **CCR/SAM Expiration Date** (MM/DD/YYYY): 01/18/2025
- (22) **IHBG Fiscal Year Formula Amount:** \$769,253
- (23) **Name of Authorized IHP Submitter:** Jasmine McDonald
- (24) **Title of Authorized IHP Submitter:** Housing Director
- (25) **Signature of Authorized IHP Submitter:**
- (26) **IHP Submission Date** (MM/DD/YYYY): 11/08/2023
- (27) **Name of Authorized APR Submitter:**
- (28) **Title of Authorized APR Submitter:**
- (29) **Signature of Authorized APR Submitter:**
- (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.

|  | Check All That Apply           |                         |
|--|--------------------------------|-------------------------|
| (A) Type of Need                               | (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                    |                                |                         |
| (7) Disabled Households Needing Accessibility  | X                              | X                       |
| (8) Units Needing Energy Efficiency Upgrades   | X                              | X                       |
| (9) Infrastructure to Support Housing          |                                |                         |
| (10) Other (specify below)                     |                                |                         |

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

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

The Nisqually Indian Tribal Housing (NITH) strategy will continue to focus on the operations, maintenance, and rehabilitation of its low-income units. During fiscal year of 2023 NITH will continue to assess its management and housing needs and adjust its management capacity accordingly. NITH emphasis will be on updating and improving existing policies to ensure NITH is fair, consistent, and compliant in its administration of all its housing programs. NITH's fiscal year 2023 IHP will ensure the following benefits: NITH will acquire and rehabilitate affordable housing units as they become available on the Nisqually Reservation, thereby housing more tribal member households, reducing the number of Tribal members on the waiting list and addressing homelessness. NITH will make communities more livable by eliminating substandard conditions, increase the value of existing homes through regular maintenance, rehabilitation, and modernization, promote ecofriendly housing construction and provide healthier communal areas. NITH will improve the physical quality and management accountability of assisted housing through the enforcement of maintenance policies and will assist all eligible participants with basic home maintenance guidance. NITH Resident Occupancy Specialists will provide a comprehensive housing

counseling approach including assisting all eligible participants with credit counseling, budgeting, and foreclosure prevention. NITH will assist households with community outreach to meet the needs of affordable rental units of the Tribal Trust land. NITH will assist the Nisqually youth program plan activities to promote alcohol, drug, and crime free projects. NITH will work with the Nisqually Emergency Management Department to develop a reservation wide Housing disaster plan.

**(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 on and near the Nisqually Indian Reservation, Pierce and Thurston counties to include eligible federally recognized tribal members residing in, and out, of the standard NITH service area.

# 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: 2023-1:Operation & Maintenance of 37 Act Units

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

This program is for the Operation and Maintenance of existing 1937 Act units.

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.):

(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.):

Low Income Native American Families.

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

Assistance will include but is not limited to: (For rental Units only) interior and exterior maintenance, payment of utilities (electricity and garbage service) and property insurance, wages and fringe benefits for the NITH maintenance supervisor, maintenance specialists and ground maintenance specialists.

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.):

Accomplishments consisted of the daily operations and general maintenance and ground maintenance of 10-37 Act Elders units. Driven by tenant requests and as the result of annual inspections, 27 work orders were produced in FY 2023. NITH maintenance staff provided interior and exterior maintenance as needed for the 10- 37 Act rental units. Repair and replacement examples consisted of repair/replacement of kitchen and bathroom faucets, bathroom fans, heat pump diagnostic and repair, septic system pumping, diagnostic and repair, drain field repair, window blind replacement, window repair/replacement, kitchen and clothes washing/drying appliance repair and replacement, electrical repairs, chimney inspection and sweeping, as needed, roof cleaning and moss prevention, smoke detector battery replacement and HVAC filter cleanings. NITH contracted to have new chain link fencing installed at 2205 Lashi St. SE, 12032 Swa Wa Ct. SE. and 12046 Swa Wa Ct. SE.

NITH paid for the background screening and individual drug screening of all prospective adult 37 Act rental tenants as well as for the electricity on vacant rental units during unit turns, and residential garbage service throughout the year for all 37 Act rental units. NITH provided pest control services, completed dwelling drug analysis of all rental units at move-out or prior to move-in, contracted with the Lacey Fire District #3 for EMS and Fire Services and insured dwellings with AMERIND Insurance. Hand and power tools needed to complete repairs and seasonal workwear, wages, and fringe benefits for the NITH maintenance supervisor, maintenance specialists and ground maintenance specialists were also expensed under this portion of the operating grant. NITH also provided new Apple iPads tablets to maintenance staff to monitor and track work order data in a more timely and efficient nature.

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

|  |   |   |
|--|---|---|
| Planned Number of Units to be Completed in Year Under this Program: 11 | 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))):

Construction of one new 37 Act unit was not yet approved for occupancy by the end of FY 2023.

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**1.1. Program Name and Unique Identifier: 2023-10:Community Homeless Services**

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

Provide rental assistance dollars for Nisqually Community Services Department to place homeless or near to homeless Native American families with children that are first-time renters, difficult to serve renters (previous evictions/no existing/bad credit) into local economy apartments by providing additional deposits/ first month/last month rent and paying fees for applications. NITH will not provide the counseling, only funding.

**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.):*

(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.):*

(5) Address homelessness

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

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

Low income Native American families with children that are homeless or to prevent homelessness.

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

Provide rental assistance dollars for Nisqually Community Services Department to place homeless or near to homeless Native American families with children that are first-time renters, difficult to serve renters (previous evictions/no existing/bad credit) into local economy apartments by providing additional deposits/ first month/last month rent and paying fees for applications. Up to \$3,000.00/household.

**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.):*

NITH assisted 17 low-income Native American households with rental assistance to prevent eviction/homelessness or to assist with first/last/security deposit to obtain permanent housing.

**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: 10 | 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: 17              | 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))):*

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**1.1. Program Name and Unique Identifier: 2023-11:Construction of a New NAHASDA Unit**

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

Construction of an additional NAHASDA unit located at 12318 Squalli-absch Rd.

**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.):*

(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.):*

Low-Income Native American families.

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

Begin construction on 1 new NAHASDA home starting in FY 2023 located at 12318 Squalli-absch Rd. Home will be 1,877 sq. ft., 3 bedroom, 2 bathroom, garage attached.

**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.):*

Began groundwork and foundation work on 1 new NAHASDA home to be constructed at 12318 Squalli-absch Rd. SE. Home will be completed in FY 2024

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

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

The RFP process was extremely lengthy and delayed the start of construction. Ground and foundation work were just beginning at the end of FY 2023. Construction will be completed in FY 2024.

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**1.1. Program Name and Unique Identifier: 2023-2:Operation & Maintenance of NAHASDA Units**

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

This program is for the Operation and Maintenance of NAHASDA units.

**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.):*

(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.):*

Low Income Native American Families.

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

Assistance will include but is not limited to: (For rental Units only) interior and exterior maintenance, payment of utilities (electricity and garbage service) and property insurance, wages and fringe benefits for the NITH maintenance supervisor, maintenance specialists and ground maintenance specialists.

**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.):*

Accomplishments consisted of the daily operations and general maintenance and ground maintenance of 7-NAHASDA units. Driven by tenant requests and as the result of annual inspections, 12 work orders were produced in FY 2023. NITH maintenance staff provided interior and exterior maintenance as needed for the 7-NAHASDA rental units. Repair and replacement examples consisted of repair/replacement of kitchen and bathroom faucets, bathroom fans, heat pump diagnostic and repair, septic system pumping, diagnostic and repair, drain field repair, window blind replacement, window repair/replacement, kitchen and clothes washing/drying appliance repair and replacement, electrical repairs, chimney inspection and sweeping, as needed, roof cleaning and moss prevention, smoke detector battery replacement and HVAC filter cleanings. NITH contracted to have new chain link fencing installed at 12030 Swa Wa Ct. SE.

NITH paid for the background screening and individual drug screening of all prospective adult NAHASDA rental tenants as well as for the electricity on vacant rental units during unit turns, and residential garbage service throughout the year for all NAHASDA rental units. NITH provided pest control services, completed dwelling drug analysis of all rental units at move-out or prior to move-in, contracted with the Lacey Fire District #3 for EMS and Fire Services and insured dwellings with AMERIND Insurance. Hand and power tools needed to complete repairs and seasonal workwear, wages, and fringe benefits for the NITH maintenance supervisor, maintenance specialists and ground maintenance specialists were also expensed under this portion of the operating grant. NITH also provided new Apple iPads tablets to maintenance staff to monitor and track work order data in a more timely and efficient nature.

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

|   |   |   |
|---|---|---|
| Planned Number of Units to be Completed in Year Under this Program: 7 | 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: 7              | 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))):*

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1.1. Program Name and Unique Identifier: 2023-3:Housing Services

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

To provide housing related services and administration of housing programs related to low-income 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.):

(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.):

(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.):

Low Income Native American Families

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

Eligible activities include, but are not limited to: Counseling and training courses will include the following topics: Family self-sufficiency, prospective homeownership and loan processing, renter and homeowner energy efficiency auditing, rental and homeowner housing education seminars/workshops, youth activities for residents that reduce or eliminate the use of drugs; travel for youth for the purpose of participating in sporting events, sporting and recreation equipment, educational and cultural programs related to drug and alcohol abuse.

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.):

Housing Services funding assisted in paying the wages and fringe benefits of the NITH Resident Occupancy Specialists who provide eligibility determination, complete tenant selection as well as perform HQS inspections and requested maintenance requests for our 37 ACT and NAHASDA rental units. ROS's also determined eligibility for homeless prevention services and low-income and non-low-income homeowner rehabilitation and counseled homeowners on seeking and selecting contractors for home repairs/rehabilitation. Outcomes were determined based on Resident Occupancy case notes from 17 HUD rental unit inspections conducted and other notes pertaining to program eligibility and tenant selection with at least 32 additional Households. ROSs also advised additional households determined ineligible for HUD rentals/programs, with other program information for rental assistance or other Nisqually Tribal Community, Social, Elder and Thurston and Pierce County housing resources. NITH partnered with a variety of other Tribal Departments, provided funding for and staff participated in numerous drug and alcohol-free community events in 2023.

In particular, NITH partnered with NIT Cultural Program and NIT Youth Services by paying for professional services totaling \$15,000.00 for 6-months of youth related activities provided by Manaia Designs and Productions for an afterschool program and on-line web-site activities for Nisqually Community elementary and high school age students and their families. This after-school and on-line program was started in 2022 and continues today to involve Nisqually Tribal youth, youth from surrounding tribes and the community at-large in active engagement with their cultural and artist roots. At each event, NITH staff provided countless community members with Housing related applications, information, and resources. We also provided give-away items and raffle prizes. No food or food related supplies were purchased with HUD funding. (see flyers attached)

Here are other dates and events NITH provided funding for:

|                   |   |
|-------------------|---|
| 3/30/2023         | Easter Celebration                                      |
| 4/20/2023         | Earth Day Celebration                                   |
| 5/23/2023         | Pulling Together for Success Community Resource meeting |
| 06/28/23-07/03/23 | Community Cafe  |
| 6/30/2023         | Pride and Health Fair                                   |
| 8/3/2023          | Nisqually National Night Out                            |

|                   |   |
|-------------------|---|
| 08/07/23-08/21/23 | Summer-Clean-up (Rez wide Dumpsters)                    |
| 8/23/2023         | Pulling Together for Success Community Resource meeting |
| 9/13/2023         | NIT Fall Health Fair                                    |
| 09/25/23-09/30/23 | Fall-Clean-up (Rez wide Dumpsters)                      |
| 10/26/2023        | Nisqually Trunk-or Treat                                |
| 11/7/2023         | Pulling Together for Success Community Resource meeting |
| 11/18/2023        | Writing with Rez Dogs Workshop                          |
| 12/14/2023        | Community Christmas Party                               |

**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: 20 | 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: 150             | 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: 2023-4:Housing Management Services

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

Management services for all affordable housing programs.

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.):

(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.):

Low Income Native American Families

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

Eligible activities include, but are not limited to: Partial wages and fringe benefits for NITH Housing Director, Compliance and Internal Auditor, Resident Services Coordinator, and Resident Occupancy Specialists, to complete eligibility determination and tenant selection for rental units, inspections of rental units, requesting maintenance for rental units, and the development and delivery of counseling and training courses related to assisting tenants, homeowners, contractors, and other entities, participating in, or seeking to participate in, other affordable housing related activities.

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.):

Housing Management Services Funding primarily pays the wages and fringe benefits of the NITH Director, Compliance and Internal Auditor and the Administrative Assistant who provide oversight and assistance to the Resident Occupancy Specialists when completing eligibility determination, tenant selection, etc. The Housing Director and the Compliance/Internal Auditor prepared the HUD IHP, administered all housing related programs, prepared the annual APR, handle tenant grievances that cannot be settled with the ROS's, and assisted in evaluating what other HUD/Tribal programs clients are eligible for whether it be low-income or over-income homeowner rehabilitation. Outcomes were determined based on Resident Occupancy case notes from 17 inspections conducted and other notes discussing other program eligibility and tenant selection with at least 40-50 additional Households.

Housing Management Services funding also pays for the security of the housing department offices and maintenance workshop and all related office and first aid supplies.

NITH also sponsored a Homebuyer Event on October 19, 2023, and expensed the facilitation of that event to Housing Management Services funding. No food, or food related supplies, were purchased with HUD funding.

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: 20 | 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: 50              | 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: 2023-5:Modernization of 37 Act Housing**

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

Modernization of 1937 Act rental units.

**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.):*

Low Income Native American Families

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

Rehabilitation will be identified through annual inspections and upon the recommendation of the Housing Maintenance Supervisor and Resident Occupancy Specialists. Activities will include, but are not limited to: sheet rock repair and replacement, interior painting, flooring, cabinets, appliances, windows, doors, trim package, HVAC units, electrical, plumbing and septic upgrades, exterior siding and paint, Dead (or potentially dangerous to property) tree removal and privacy fencing.

**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.):*

NIT Housing maintenance staff completed rehabilitation on 2- 37 Act rental units in FY 2023: 12619 and 12637 Elders Ln. SE. 12619 Elders Ln. SE was fully rehabilitated and modernized with new flooring, new kitchen cabinets with countertops, interior painting, interior and exterior doors, new windows , upgraded lighting, updated bathroom toilet/sink/fixtures, all kitchen and washing appliances, new wood burning stove, electrical outlets, and smoke/carbon monoxide detectors. 12637 Elders Ln. SE was fully rehabilitated and modernized with new flooring, new kitchen cabinets with countertops, interior painting, interior and exterior doors, new windows, upgraded lighting, updated bathroom toilet/sink/fixtures, kitchen and washing appliances, new wood burning stove, new heat pump, electrical outlets, and smoke/carbon monoxide detectors. This unit was heavily damaged by nicotine and required extra painting and a new heat pump.

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

|   |   |   |
|---|---|---|
| Planned Number of Units to be Completed in Year Under this Program: 2 | 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: 2              | 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: 2023-6:Rehabilitation of NAHASDA rental units**

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

Rehabilitation of NAHASDA rental units.

**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.):*

(5) Rehabilitation 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.):*

(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.):*

Low Income Native American Families

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

Rehabilitation will be identified through annual inspections and upon the recommendation of the Housing Maintenance Supervisor and Resident Occupancy Specialists. Activities will include, but are not limited to: sheet rock repair and replacement, interior painting, flooring, cabinets, appliances, windows, doors, trim package, HVAC units, electrical, plumbing and septic upgrades, exterior siding and paint, Dead (or potentially dangerous to property) tree removal and privacy fencing.

**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.):*

NIT Housing maintenance staff and local contractors completed rehabilitation on 3-NAHASDA units in FY 2023.

The roof was replaced on units 11940, 11942 and 11944 25th Ave SE

11940 25th Ave. SE was fully rehabilitated and modernized with new flooring, new kitchen cabinets with countertops, interior painting, interior and exterior doors, upgraded lighting, updated bathroom bathtub and shower surround/toilet/sink/fixtures, all kitchen and washing appliances, new window blinds, Cadet and other electrical heaters, new water heater, electrical outlets, and smoke/carbon monoxide detectors.

Full rehabilitation for 11942 25th Ave SE began in FY 2023 but will not be completed until FY 2024.

**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: 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))):*

---



**1.1. Program Name and Unique Identifier: 2023-7:Rehabilitation Assistance for Existing Homeowners**

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

This program will be for the interior and/or exterior rehabilitation assistance for existing homeowners not under the management of the Tribal Housing Department

**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.):*

Low Income Native American Homeowner Families

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

Rehabilitation will be identified through home inspections/evaluation by NITH staff and independent housing contractors. Activities will include, but are not limited to: roofing, insulation, siding, exterior painting, gutters, sheet rock, flooring, cabinets, windows, doors, trim package, major plumbing and electrical repair, HVAC units, wood/pellet stoves and limited appliances. This program has a one-time maximum of \$20,000 per unit/family.

**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.):*

NITH Assisted 8 low-income households with Homeowner Rehabilitation work that involved:

1-Kitchen remodel

1-Crawlspace clean-out and new exterior doors

1-New 499’ fence

1-Kitchen remodel

1-Primary bathroom remodel

1- Mold inspection and remediation, new windows and sliding glass door, kitchen cabinets and flooring.

1-New roof, front door replacement and installation of new kitchen cabinets/countertops

1-Final plumbing, wood stove installation and kitchen countertops installation on remodel that started 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: 5 | 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: 8              | 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: 2023-8:Rehabilitation Assistance for Existing Homeowners (80-100% MI)**

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

This program will be for the interior and/or exterior rehabilitation assistance for existing homeowners (80-100%) not under the management of the Tribal Housing Department

**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.):*

Native American Homeowner Families between 80-100% LMI

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

Rehabilitation will be identified through home inspections/evaluation by NITH staff and contractors. Activities will include, but not limited to: roofing, insulation, siding, exterior painting, gutters, sheet rock, flooring, cabinets, windows, doors, trim package, major plumbing and electrical repair, HVAC units, wood/pellet stoves and limited appliances. This program has a maximum of \$10,000 per unit/family per 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.):*

NITH Assisted 6 homeowner households (80-100% AMI) with Homeowner Rehabilitation work that involved:

- 1-New dishwasher
- 1-Exterior painting and flooring replacement
- 1-Emergency water damage remediation and home repair
- 1-Installed new A/C unit and air scrubber
- 1-Bathroom shower remodel
- 1-New heat pump, dishwasher, and range.

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

|   |   |   |
|---|---|---|
| Planned Number of Units to be Completed in Year Under this Program: 5 | 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: 6              | 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: 2023-9:Construction/Replacement of NAHASDA Unit**

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

Continued construction of new NAHASDA home located at 12326 Squalli-absch Rd., to replace totally demolished unit.

**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.):*

(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.):*

Low Income Native American Households

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

Complete construction on 1 new NAHASDA home to replace totally demolished home on Swa Wa Ct. SE. New home construction located at 12326 Squalli-absch Rd. Home will be 1,877 sq. ft., 3 bedroom, 2 bathroom, garage attached.

**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.):*

Started construction on 1 new **37 Act home** to replace totally demolished home on Swa Wa Ct. SE. New home construction located at 12326 Squalli-absch Rd. Home is 1,877 sq. ft., 3 bedroom, 2 bathroom, garage attached. Was listed incorrectly as NAHASDA home on the IHP.

**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: 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))):*

Unit completed and ready for occupancy in March 2024.

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# 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.)

NITH will provide necessary maintenance to existing 1937 Act rental units to ensure long term viability. Assistance will be provided as necessary and allowable under established policy and procedure. NITH provides insurance for all rental assets.

**(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:

N/A in FY 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)<br>Estimated amount on hand at beginning of program year | (B)<br>Estimated amount to be received during 12-month program year | (C)<br>Estimated total sources of funds (A+B) | (D)<br>Estimated funds to be expended during 12-month program year | (E)<br>Estimated unexpended funds remaining at end of program year (C-D) |  |
| 1. IHBG Funds                         | \$800,000.00   | \$769,253.00  | \$1,569,253.00                                | \$1,345,000.00   | \$224,253.00   |  |
| 2. IHBG Program Income                | \$50,000.00  | \$50,000.00   | \$100,000.00                                  | \$50,000.00  | \$50,000.00  |  |
| 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                                 | \$850,000.00   | \$819,253.00  | \$1,669,253.00                                | \$1,395,000.00   | \$274,253.00   |  |
| TOTAL Columns C and H( 2 through 10 ) |  |   | \$100,000.00                                  |  |  |  |
| SOURCE                                | APR  |   |   |  |  |  |
|                                       | (F)<br>Actual amount on hand at beginning of program year    | (G)<br>Actual amount received during 12-month program year          | (H)<br>Actual total sources of funding (F+G)  | (I)<br>Actual funds to be expended during 12-month program year    | (J)<br>Actual unexpended funds remaining at end of program year (H-I)    | (K)<br>Actual unexpended funds obligated but not expended at end of 12- month program year |
| 1. IHBG Funds                         | \$1,009,271.87   | \$760,732.00  | \$1,770,003.87                                | \$1,083,258.26   | \$686,745.61   |  |
| 2. IHBG Program Income                | \$93,878.31  | \$43,572.40   | \$137,450.71                                  | \$60,762.82  | \$76,687.89  |  |
| 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                                 | \$1,103,150.18   | \$804,304.40  | \$1,907,454.58                                | \$1,144,021.08   | \$763,433.50   |  |
| TOTAL Columns C and H( 2 through 10 ) |  |   | \$137,450.71                                  |  |  |  |

## 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)<br>Prior and current year IHBG (only) funds to be expended in 12-month program year | (M)<br>Total all other funds to be expended in 12-month program year | (N)<br>Total funds to be expended in 12-month program year (L+M) | (O)<br>Total IHBG (only) funds expended in 12-month program year | (P)<br>Total all other funds expended in 12-month program year | (Q)<br>Total funds expended in 12-month program year (O+P) |
| <b>2023-1: Operation &amp; Maintenance of 37 Act Units</b>                    | \$110,000.00  | \$0.00   | \$110,000.00   | \$144,794.37   | \$0.00   | \$144,794.37   |
| <b>2023-10: Community Homeless Services</b>                                   | \$40,000.00   | \$0.00   | \$40,000.00  | \$41,447.00  | \$0.00   | \$41,447.00  |
| <b>2023-11: Construction of a New NAHASDA Unit</b>                            | \$300,000.00  | \$0.00   | \$300,000.00   | \$0.00   | \$0.00   | \$0.00   |
| <b>2023-2: Operation &amp; Maintenance of NAHASDA Units</b>                   | \$70,000.00   | \$0.00   | \$70,000.00  | \$76,330.07  | \$0.00   | \$76,330.07  |
| <b>2023-3: Housing Services</b>   | \$100,000.00  | \$0.00   | \$100,000.00   | \$207,140.23   | \$0.00   | \$207,140.23   |
| <b>2023-4: Housing Management Services</b>                                    | \$150,000.00  | \$0.00   | \$150,000.00   | \$153,282.83   | \$0.00   | \$153,282.83   |
| <b>2023-5: Modernization of 37 Act Housing</b>                                | \$40,000.00   | \$0.00   | \$40,000.00  | \$92,926.44  | \$0.00   | \$92,926.44  |
| <b>2023-6: Rehabilitation of NAHASDA rental units</b>                         | \$60,000.00   | \$0.00   | \$60,000.00  | \$53,660.67  | \$0.00   | \$53,660.67  |
| <b>2023-7: Rehabilitation Assistance for Existing Homeowners</b>              | \$100,000.00  | \$0.00   | \$100,000.00   | \$125,462.45   | \$0.00   | \$125,462.45   |
| <b>2023-8: Rehabilitation Assistance for Existing Homeowners (80-100% MI)</b> | \$0.00  | \$50,000.00  | \$50,000.00  | \$0.00   | \$60,762.82  | \$60,762.82  |
| <b>2023-9: Construction/Replacement of NAHASDA Unit</b>                       | \$300,000.00  | \$0.00   | \$300,000.00   | \$158,875.93   | \$0.00   | \$158,875.93   |
| <b>Loan repayment - describe in 3 &amp; 4 below</b>                           | \$0.00  | \$0.00   | \$0.00   | \$0.00   | \$0.00   | \$0.00   |
| <b>Planning and Administration</b>  | \$75,000.00   | \$0.00   | \$75,000.00  | \$29,338.27  | \$0.00   | \$29,338.27  |
| <b>TOTAL</b>  | \$1,345,000.00  | \$50,000.00  | \$1,395,000.00   | \$1,083,258.26   | \$60,762.82  | \$1,144,021.08   |

**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):  
N/A

**(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.):  
**N/A**

# Section 6: Other Submission Items

[102(b)(2)(C)(ii)], [201(b)(5)], [202(6)], [205(a)(2)], [209], 24 CFR §§ 1000.108, 1000.120, 1000.142, 1000.238, 1000.302

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

**The useful life of our rental units built prior to 2022 is 25 years. The useful life for all housing activities for FY 2022 and thereafter will adhere to the following tiered schedule with a sliding scale: IHBG Funds Invested Affordability Period: Under \$5,000..... 6 months\$5,000 to \$15,000 ..... 5 years\$15,001 to \$100,000 ..... 10yearsOver \$100,000..... 15 yearsNew construction/acquisition of newly constructed housing.....20yearsIHBG funds provided in the form of a grant or loan, to purchase, construct of rehabilitate a residence will include binding commitments by either agreements and/or contracts enforcing the provision of our useful life schedule and restrictions: for homeowners; rehabilitation, the useful life will be for a period of five (5) years with 20%of the balance forgivable per year.**

**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.):

N/A

**(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.**The Nisqually Tribe exercises preference in providing housing services and housing to low-income Native American families. Specifically, the Tribe gives preference to Nisqually Tribal Members on the Housing waiting lists. In the event, either by appointment or successionship or some other legitimate means, other tribal families are living in the home and/or approved residents by the tribe, then the tribal housing program will provide equality in services to such members, under the direction of the governing body.**

**(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? **Not Applicable**
- (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.):*  
**We conducted NAHASDA Program: Internal Monitoring on Organization and Structure.**

# 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) |
|---------------------------|---------------------------|---------------------------------|----------------------------------|----------------------------------|---|
| 1937 Housing Act Units:   |                           |                                 |                                  |                                  |   |
| a. Rental                 | 10                        | 9                               | 0                                | 1                                | 10  |
| b. Homeownership          | 0                         | 0                               | 0                                | 0                                | 0   |
| c. Other                  | 0                         | 0                               | 0                                | 0                                | 0   |
| 1937 Act Subtotal:        | 10                        | 9                               | 0                                | 1                                | 10  |
| NAHASDA Associated Units: |                           |                                 |                                  |                                  |   |
| a. Rental                 | 7                         | 7                               | 0                                | 0                                | 7   |
| b. Homeownership          | 0                         | 0                               | 0                                | 0                                | 0   |
| c. Rental Assistance      | 0                         | 0                               | 0                                | 0                                | 0   |
| d. Other                  | 0                         | 0                               | 0                                | 0                                | 0   |
| NAHASDA Act Subtotal:     | 7                         | 7                               | 0                                | 0                                | 7   |
| Total:                    | 17                        | 16                              | 0                                | 1                                | 17  |

(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 : **09/30/2024**

# 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): **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)).

**Waiting for 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) | 10 |
| (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: **Nisqually Indian Tribe**

(5) Authorized Official's Name and Title:

(6) Authorized Official's Signature:

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