



RESOLUTION #: 4/176/11

Approve the 2010 Annual Performance Report as attached to be submitted to the Department of Housing and Urban Development

BE IT RESOLVED BY THE TRIBAL COUNCIL OF THE SAUK SUIATTLE INDIAN TRIBE IN THE STATE OF WASHINGTON

WHEREAS, the Sauk-Suiattle Tribal Council is the governing body of the Sauk-Suiattle Indian Tribe of authority of the Constitution and By-Laws as approved by the Secretary of the Interior on September 17, 1975 and in accordance with the Indian Reorganization Act of June 18, 1934; and

WHEREAS, the Sauk-Suiattle Indian Tribal Council is the duly elected governing body of the Sauk-Suiattle Indian Tribe; and

WHEREAS, the Sauk-Suiattle Indian Tribal Council is charged with the responsibility for the protection of the health, welfare and safety of the members of the Sauk-Suiattle Indian Tribe; and

WHEREAS the Department of Housing and Urban Development requires the submission of an Annual Performance Report, and

WHEREAS the Sauk-Suiattle Indian Tribe Housing Department has prepared the 2010 Annual Performance Report, now

THEREFORE BE IT RESOLVED that the Sauk-Suiattle Tribal Council approves the 2010 Annual Performance Report as attached via a phone poll to be submitted to the Department of Housing and Urban Development, now

BE IT FURTHER RESOLVED, that the Sauk-Suiattle Tribal Council will ratify the above resolution at the next regular meeting, now

BE IT FURTHER RESOLVED, that the Sauk-Suiattle Tribal Council does not waive, alter, or otherwise diminish its sovereign immunity, whether express or implied, by virtue of the enactment of this resolution or any administrative or legal action which may arise directly or indirectly from the same, nor does the Sauk-Suiattle Tribal Council waive, alter, or otherwise diminish any rights, privileges, remedies, or services guaranteed by the Point Elliot Treaty; now

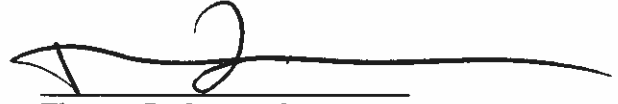
BE IT FINALLY RESOLVED, that the Sauk-Suiattle Tribal Council authorizes the Tribal Council Chairman to sign all documents on behalf of the Sauk-Suiattle Tribe and in his absence, the Vice-Chairperson of the Sauk-Suiattle Tribal Council is authorized to sign all documents.

CERTIFICATION

The above resolution was duly approved via a phone poll of the Sauk-Suiattle Tribal Council on April 26, 2011 at which time a majority was obtained by a vote of: 5 For 0 Against: 1 Abstain: 1 Absent.

  
Janice W. Mabee, Chairman

ATTEST:

  
Thomas DeCoteau, Secretary

# Annual Performance Report Cover Sheet

1. APR is submitted by (mark one)    Tribe     THDE

2. Reporting period for which this APR is prepared: from: 01/01/2010 to: 12/31/2010  
(mm/dd/yy) (mm/dd/yy)

3. Recipient Name and Address

Sauk-Suiattle Tribe, 5318 Chief Brown Lane, Darrington, WA 98241

<p>4. Name of Contact Person</p> <p>Aron Harris Jim Thomas</p>	<p>Title</p> <p>Housing Assistant CEO</p>	<p>Telephone no. (include Area Code)</p> <p>(363)436-0131</p>
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<p>If APR is submitted by the TDHE</p> <p>5. Enter the name of each tribe included in this APR</p>		
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<p>5. Name of official authorized to submit APR</p> <p>Janice W. Mabee</p>	<p>Title</p> <p>Chairman</p>
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<p>Signature</p> <p><i>Janice W Mabee</i></p>	<p>Date</p> <p>4-27-11</p>
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**Certification:** The information contained in this report is accurate and reflects the activities actually accomplished during the reporting period. Activities planned and accomplished are eligible under applicable statutes and regulations and were included in the applicable one year activities in the corresponding Indian Housing Plan.

**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 civil money penalty not to exceed \$10,000 for each violation.

For HUD use only

<p>Date APR is received by HUD</p>	<p>Time</p>	<p>logged in by</p>
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# PART I - REPORTING ON THE ONE-YEAR INDIAN HOUSING PLAN (IHP)

One separate Part I (that includes Tables I and II) must be submitted for **each** open grant.

Grant Number:

Enter the date HUD notified you that your IHP was found in compliance: 06/05/2008  
(mm/dd/yy)

Is this the final APR for this grant? Check one: Yes  No

Each year, you develop goals and objectives and performance objectives in the IHP that describe the use of your IHBG funds. At the end of the program year, you report on the progress made towards achievement of them.

- Please report on **each** of the one-year goals and objectives **and** report on each of the performance objectives identified in the IHP for this reporting period only in a format as follows:

**Note:** Goals and Objectives should be reported from inception to the present while the performance objectives should be reported for the reporting period only.

GOAL # 1		Goal as identified in the IHP: Modernization/Maintenance Goals: Provide additional modernization services up to existing homeownership units
	Objective #_1____	Objective as identified in the IHP: Complete modernization services to existing homeownership units
	Performance Objective #_1____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Develop and implement a long-range modernization and rehabilitation plan. Evaluate exteriors and rehabilitate and weatherize 37 act units, including sheathing, wrapping, and new hardiplank siding.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: 5 units have been sheathed wrapped and sided utilizing other funding sources.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

<b>GOAL # 2</b>		Goal as identified in the IHP: Provide debt services for rental home acquisition.
	Objective # <u>  2  </u>	Objective as identified in the IHP: Make monthly loan payments
	Performance Objective # <u>  2  </u>	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Provide loan payment of approximately \$60,000.00 a year
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Made loan payments.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

<b>GOAL # 3</b>		Goal as identified in the IHP: Housing Services Goal: Provide on-going Tribal Base Rental Assistance to low-income families
	Objective # <u>  3  </u>	Objective as identified in the IHP: Continue on-going Tribal Base Rental Assistance Program
	Performance Objective # <u>  3  </u>	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Provide funding to continue on-going Tribal Base Rental Assistance to low-income families.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Assisted 3 families with Tribal Base Rental Assistance
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 4		Goal as identified in the IHP: Housing Management Services Goals: Continue providing housing management services and staff support for the Sauk-Suiattle Indian Tribe.
	Objective # __4__	Objective as identified in the IHP: To provide on-going housing management services and staff support for the Sauk-Suiattle Indian Tribe.
	Performance Objective # __4__	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: To provide on-going housing management services and staff support for the Sauk-Suiattle Indian Tribe.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Continued to provide on-going housing management services and staff support for the Sauk-Suiattle Indian Tribe.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 5		Goal as identified in the IHP: Model Activity Goals: Provide support funds for new rental housing for on-going maintenance service.
	Objective # __5__	Objective as identified in the IHP: Support new rental housing and maintenance service.
	Performance Objective # __5__	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Provided funding for maintenance of new rental housing.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Provided funding for maintenance on new rental housing.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 6		Goal as identified in the IHP: Planning and Administration Goals: Strengthen the standards of the SSTH and Support administrative services. Seek additional funding to assist housing development.
	Objective #__6__	Objective as identified in the IHP: Support administrative services with indirect cost and to provide service in developing additional housing project needs.
	Performance Objective #__6__	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Support staff's educational and training opportunities to enhance their skills. Continue to seek funding under the 501(c)(3) program, seek funding with the Bureau of Indian Affairs, IHS, HUD 184 Program, and any other housing sources available.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Provided Training opportunities to staff to enhance their skills, continually seek additional funding sources.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

Repeat this format for each one year goal and objective(s) and performance objective(s) in the IHP for this grant.

2. Are you on schedule to complete the 5-year goals identified in your IHP?

Check one:      Yes  No

3. If the answer to #2 is no, explain causes for delays and how you plan to modify your program to meet your 5-year goals and objectives.

4. How would you change your programs in general as a result of your experience with the implementation of NAHASDA?

I would not change the programs at this time.

Grant Number:

08IT5313880

**Table I - Sources of Funds**

Sources of Funds for IHBG Activities	Planned Amount (from the IHP)	Amount Actually Awarded
(a)	(b)	(c)
1. HUD Resources		
a. NAHASDA Block Grant	\$338,092.00	\$338,092.00
b. NAHASDA Program Income		
c. NAHASDA Title VI (Federal Guarantee)		
d. Section 184 Loan Guarantee		
e. Indian Community Development Block Grant		
f. Drug Elimination		
g. Prior year funds		
h. Other <b>(explain in narrative)</b>		
2. Existing Program Resources		
a. 1937 Housing Act Programs		
b. Other HUD Programs		
3. Other Federal or State Resources		
a. BIA Home Improvement Program		
b. Other <b>(explain in narrative)</b>		
4. Private Resources		
a. Tribe		
b. Financial Institution		
c. Other <b>(explain in narrative)</b>		
5. Other <b>(explain in narrative)</b>		
<b>Total Resources</b>	<b>\$338,092.00</b>	<b>\$338,092.00</b>

Narrative:

1. If column c is less than column b, explain why the planned funds were not realized.

Grant Number:

08IT5313880

**Table II - Uses of Funds**

Activity (a)	Budgeted Amount (from the IHP) (b)	Grant (IHBG) funds expended (c)	Other funds expended (d)	Total funds expended from all sources (c + d) (e)	IHBG funds obligated (f)	Percentage of IHBG Grant Amount Obligated (g)
1. Indian Housing Assistance (1937 Housing Act units)						
a. Modernization	60,495.00	2,465.00		2,465.00		
b. Operating	30,000.00	18,427.85		18,427.85		
2. Development						
a. Rental						
i. Construction of new units						
ii. Acquisition	49,000.00	49,578.26		49,578.26		
iii. Rehabilitation						
b. Homeownership						
i. Construction of new units						
ii. Acquisition						
iii. Rehabilitation						
3. Housing Services	20,000.00	43,754.11		43,754.11		
4. Housing management services	54,177.60	26,641.93		26,641.93		
5. Crime Prevention & Safety						
6. Model Activities	56,801.00	125,205.96		125,205.96		
7. Planning & administration	67,618.40	68,021.49		68,021.49		
8. Reserves						
9. Other						
<b>Total</b>	<b>338,092.00</b>	<b>334,094.60</b>		<b>334,094.60</b>		

**Table II (continued)**

Activity (a)	Number of units planned (from the IHP) (g)	Cumulative				
		Number of units completed (h)	Number of units started not completed (i)	low-income Indian families (j)	non low-income Indian families (k)	non-Native American (l)
1. Indian Housing Assistance (1937 Act units)						
a. Modernization	17	0		5		
b. Operating	17	17		17		
2. Development						
a. Rental						
i. Construction of new units						
ii. Acquisition	Partial loan payment on 8 units previously acquired					
iii. Rehabilitation						
a. Homeownership						
i. Construction of new units						
ii. Acquisition						
iii. Rehabilitation						
3. Housing Services						
4. Housing Management Services						
5. Crime Prevention & Safety						
6. Model Activities	8 Maintenance	8		8		
7. Planning & administration						
8. Reserves						
9. Other						
<b>Total</b>	<b>42</b>	<b>25</b>		<b>30</b>		

Narrative:

1. Column (a), line item #8, Reserves: Identify the purpose for the funds you placed in this category. N/A
  
2. Explain any unexpected cost overruns associated with IHBG funds. We overspent the planning and administration by \$403.09 and would like to request a variance for this amount.

3. Investments: Date HUD approved: \_\_\_\_\_  
(mm/dd/yy)

Amount approved for investment: \$ \_\_\_\_\_

Amount of IHBG funds (principal only) invested as of this reporting period end date:

\$ \_\_\_\_\_

# PART I - REPORTING ON THE ONE-YEAR INDIAN HOUSING PLAN (IHP) *Open Grant #2*

One separate Part I (that includes Tables I and II) must be submitted for *each* open grant.

Grant Number: 09IT5312880

Enter the date HUD notified you that your IHP was found in compliance: \_\_\_\_\_  
(mm/dd/yy)

Is this the final APR for this grant? Check one: Yes  No

Each year, you develop goals and objectives and performance objectives in the IHP that describe the use of your IHBG funds. At the end of the program year, you report on the progress made towards achievement of them.

1. Please report on each of the one-year goals and objectives **and** report on each of the performance objectives identified in the IHP for this reporting period only in a format as follows:

**Note:** Goals and Objectives should be reported from inception to the present while the performance objectives should be reported for the reporting period only.

<b>GOAL # 1</b>		Goal as identified in the IHP: Modernization/Maintenance Goals: Weatherize '37 Act housing as needed
	Objective # <u>1</u>	Objective as identified in the IHP: Weatherize '37 Act housing as needed
	Performance Objective # <u>1</u>	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Weatherize up to (5) '37 Act houses
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: 18 houses received weatherization updates from other funding sources.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 2		Goal as identified in the IHP: Housing Services Goals: Tribal Base Rental Assistance (TBRA)—Review Policies and expand program to serve more Tribal Members
	Objective # __2__	Objective as identified in the IHP: Tribal Base Rental Assistance (TBRA)—Review Policies and expand program to serve more Tribal Members.
	Performance Objective # __2__	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Provide rental vouchers for up to ten (10) families
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Currently there are (4) families utilizing vouchers and (4) more vouchers have been issued
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 3		Goal as identified in the IHP: Housing Management Services Goals: Install and Implement HDS system, train staff to track housing data/information related to maintenance, inspections, family information etc.
	Objective # __3__	Objective as identified in the IHP: Install and Implement HDS system, train staff to track housing data/information related to maintenance, inspections, family information etc.
	Performance Objective # __3__	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Install and Implement HDS system, train staff to track housing data/information related to maintenance, inspections, family information etc.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: HDS installed, Account statements being issued, tracking family information, inspections, and work orders etc.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 4		Goal as identified in the IHP: Model Activity Goals: Rehabilitate and weatherize rental units as a supplement to the 08 stimulus funding
	Objective # <u>4</u>	Objective as identified in the IHP: Rehabilitate and weatherize rental units as a supplement to the 08 stimulus funding.
	Performance Objective # <u>4</u>	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Rehabilitate and weatherize two (2) rental units
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: All units have been inspected. Rehabilitation has begun on (2) units and should be complete by June 2011
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 5		Goal as identified in the IHP: Development Goals: Provide Debt Service for Rental Home acquisition.
	Objective # _____	Objective as identified in the IHP: Make monthly loan payments.
	Performance Objective # _____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Provide loan payments of approx \$60,000.00 a year.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Loan payments were made on time.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 6		Goal as identified in the IHP: Planning & Administration Goals: Increase effectiveness of Housing staff through continued training.
	Objective #_6____	Objective as identified in the IHP: Staff attends training.
	Performance Objective #_6____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Staff attends training.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Staff attended training.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

Repeat this format for each one year goal and objective(s) and performance objective(s) in the IHP for this grant.

2. Are you on schedule to complete the 5-year goals identified in your IHP?

Check one:      Yes  No

3. If the answer to #2 is no, explain causes for delays and how you plan to modify your program to meet your 5-year goals and objectives.

4. How would you change your programs in general as a result of your experience with the implementation of NAHASDA?

I would not change the programs at this time.

Grant Number:

09IT5312880

**Table I - Sources of Funds**

Sources of Funds for IHBG Activities	Planned Amount (from the IHP)	Amount Actually Awarded
(a)	(b)	(c)
1. HUD Resources		
a. NAHASDA Block Grant	370,542.00	370,542.00
b. NAHASDA Program Income		
c. NAHASDA Title VI (Federal Guarantee)		
d. Section 184 Loan Guarantee		
e. Indian Community Development Block Grant		
f. Drug Elimination		
g. Prior year funds		
h. Other (explain in narrative)		
2. Existing Program Resources		
a. 1937 Housing Act Programs		
b. Other HUD Programs		
3. Other Federal or State Resources		
a. BIA Home Improvement Program		
b. Other (explain in narrative)		
4. Private Resources		
a. Tribe		
b. Financial Institution		
c. Other (explain in narrative)		
5. Other (explain in narrative)		
<b>Total Resources</b>	370,542.00	370,542.00

Narrative:

1. If column c is less than column b, explain why the planned funds were not realized.

Grant Number: 09IT5312880

**Table II - Uses of Funds**

Activity (a)	Budgeted Amount (from the IHP) (b)	Grant (HBG) funds expended (c)	Other funds expended (d)	Total funds expended from all sources (c + d) (e)	IHBG funds obligated (f)	Percentage of IHBG Grant Amount Obligated (g)
1. Indian Housing Assistance (1937 Housing Act units)						
a. Modernization	70,495.00	0.00				
b. Operating	25,000.00	2,488.16				
2. Development						
a. Rental						
i. Construction of new units						
ii. Acquisition	60,000.00	39,502.32				
iii. Rehabilitation	20,000.00	0.00				
b. Homeownership						
i. Construction of new units						
ii. Acquisition						
iii. Rehabilitation						
3. Housing Services	20,000.00	6,925.00				
4. Housing management services	50,000.00	7,819.29				
5. Crime Prevention & Safety						
6. Model Activities	50,938.00	18,125.77				
7. Planning & administration	74,109.00	80,298.66				
8. Reserves						
9. Other						
<b>Total</b>	<b>370,542.00</b>	<b>155,159.20</b>				

**Table II (continued)**

Activity (a)	Number of units planned (from the IHP) (g)	Cumulative				
		Number of units completed (h)	Number of units started not completed (i)	low-income Indian families (j)	non low-income Indian families (k)	non-Native American (l)
2. Indian Housing Assistance (1937 Act units)						
c. Modernization	17	17		17		
d. Operating						
3. Development						
b. Rental						
iv. Construction of new units						
v. Acquisition	Loan payment on 8 units previously required					
vi. Rehabilitation	2		2			
b. Homeownership						
iv. Construction of new units						
v. Acquisition						
vi. Rehabilitation						
10. Housing Services						
11. Housing Management Services						
12. Crime Prevention & Safety						
13. Model Activities	8 Maintenance	8		8		
14. Planning & administration						
15. Reserves						
16. Other						
<b>Total</b>	<b>27</b>	<b>8</b>	<b>2</b>	<b>8</b>	<b>8</b>	

Narrative:

1. Column (a), line item #8, Reserves: Identify the purpose for the funds you placed in this category.

2. Explain any unexpected cost overruns associated with IHBG funds. Planning & administration funds were overspent and will be corrected in 1<sup>st</sup> QTR 2011.

3. Investments: Date HUD approved: \_\_\_\_\_  
(mm/dd/yy)

Amount approved for investment: \$ \_\_\_\_\_

Amount of IHBG funds (principal only) invested as of this reporting period end date:

\$ \_\_\_\_\_

# PART I - REPORTING ON THE ONE-YEAR INDIAN HOUSING PLAN (IHP) *Open Grant #3*

One separate Part I (that includes Tables I and II) must be submitted for *each* open grant.

Grant Number: 08ST5313880

Enter the date HUD notified you that your IHP was found in compliance: 3/17/2009  
(mm/dd/yy)

Is this the final APR for this grant? Check one: Yes  No

Each year, you develop goals and objectives and performance objectives in the IHP that describe the use of your IHBG funds. At the end of the program year, you report on the progress made towards achievement of them.

- Please report on *each* of the one-year goals and objectives and report on each of the performance objectives identified in the IHP for this reporting period only in a format as follows:

**Note:** Goals and Objectives should be reported from inception to the present while the performance objectives should be reported for the reporting period only.

<b>GOAL # 1</b>		Goal as identified in the IHP: Attic Insulation of the Jimmy Price Rental Units
	Objective # _____	Objective as identified in the IHP:
	Performance Objective # _____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP:
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: This activity was completed on 9/20/2010
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

<b>GOAL # 2</b>		Goal as identified in the IHP: Heater replacement to existing homeowners
	Objective # _____	Objective as identified in the IHP:
	Performance Objective # _____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP:
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: This activity is 95% complete. Need to finish drywall repairs.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

<b>GOAL # 3</b>		Goal as identified in the IHP: Rehabilitation of Rental Housing
	Objective # _____	Objective as identified in the IHP:
	Performance Objective # _____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP:
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: This activity is in progress and should be complete by June 2011
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

Repeat this format for each one year goal and objective(s) and performance objective(s) in the IHP for this grant.

2. Are you on schedule to complete the 5-year goals identified in your IHP?

Check one:      Yes  No

3. If the answer to #2 is no, explain causes for delays and how you plan to modify your program to meet your 5-year goals and objectives.

4. How would you change your programs in general as a result of your experience with the implementation of NAHASDA? NAHBG has had a favorable impact on our program as we are a small tribe, with limited funding. This has allowed us to perform additional much needed work on some of our units which might have otherwise been deferred.

Grant Number:

08ST5313880

**Table I - Sources of Funds**

Sources of Funds for IHBG Activities	Planned Amount (from the IHP)	Amount Actually Awarded
(a)	(b)	(c)
1. HUD Resources		
a. NAHASDA Block Grant		145,083.00
b. NAHASDA Program Income		
c. NAHASDA Title VI (Federal Guarantee)		
d. Section 184 Loan Guarantee		
e. Indian Community Development Block Grant		
f. Drug Elimination		
g. Prior year funds		
h. Other (explain in narrative)		
2. Existing Program Resources		
a. 1937 Housing Act Programs		
b. Other HUD Programs		
3. Other Federal or State Resources		
a. BIA Home Improvement Program		
b. Other (explain in narrative)		
4. Private Resources		
a. Tribe		
b. Financial Institution		
c. Other (explain in narrative)		
5. Other (explain in narrative)		
<b>Total Resources</b>		145,083.00

Narrative:

1. If column c is less than column b, explain why the planned funds were not realized.

Grant Number:

08SI5313880

**Table II - Uses of Funds**

Activity (a)	Budgeted Amount (from the IHP) (b)	Grant (IHBG) funds expended (c)	Other funds expended (d)	Total funds expended from all sources (c + d) (e)	IHBG funds obligated (f)	Percentage of IHBG Grant Amount Obligated (g)
1. Indian Housing Assistance (1937 Housing Act units)						
a. Modernization	37,400.00	23,444.10				
b. Operating						
2. Development						
a. Rental						
i. Construction of new units						
ii. Acquisition						
iii. Rehabilitation						
b. Homeownership						
i. Construction of new units						
ii. Acquisition						
iii. Rehabilitation						
3. Housing Services						
4. Housing management services						
5. Crime Prevention & Safety						
6. Model Activities	85,808.00	59,164.54				
7. Planning & administration	21,875.00	12,625.26				
8. Reserves						
9. Other						
<b>Total</b>	<b>145,083.00</b>	<b>95,233.90</b>				

**Table II (continued)**

Activity (a)	Number of units planned (from the IHP) (g)	Cumulative							
		Number of units completed (h)	Number of units started not completed (i)	low-income Indian families (j)	non low-income Indian families (k)	non-Native American (l)			
4. Indian Housing Assistance (1937 Act units)									
e. Modernization	17		17	17					
f. Operating									
5. Development									
c. Rental									
vii. Construction of new units									
viii. Acquisition									
ix. Rehabilitation									
c. Homeownership									
vii. Construction of new units									
viii. Acquisition									
ix. Rehabilitation									
17. Housing Services									
18. Housing Management Services									
19. Crime Prevention & Safety									
20. Model Activities	8	8		8					
21. Planning & administration									
22. Reserves									
23. Other									
<b>Total</b>	<b>25</b>	<b>8</b>	<b>17</b>	<b>25</b>					



# PART I - REPORTING ON THE ONE-YEAR INDIAN HOUSING PLAN (IHP) *Open Grant #4*

One separate Part I (that includes Tables I and II) must be submitted for *each* open grant.

Grant Number:

Enter the date HUD notified you that your IHP was found in compliance: 7/08/2010  
(mm/dd/yy)

Is this the final APR for this grant? Check one: Yes  No

Each year, you develop goals and objectives and performance objectives in the IHP that describe the use of your IHBG funds. At the end of the program year, you report on the progress made towards achievement of them.

- Please report on each of the one-year goals and objectives **and** report on each of the performance objectives identified in the IHP for this reporting period only in a format as follows:

**Note:** Goals and Objectives should be reported from inception to the present while the performance objectives should be reported for the reporting period only.

GOAL # 1		Goal as identified in the IHP: Institute the job cost portion of work orders in HDS
	Objective #__1__	Objective as identified in the IHP: Job cost portion of work orders being utilized
	Performance Objective #__1__	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Maintenance and contractor cost inputted into HDS work orders.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective:
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities: No Activity. We will institute this addition in our work order procedures.

GOAL # 2		Goal as identified in the IHP: Rehabilitate and weatherize rental units as a supplement to the 08 Stimulus funding
	Objective #_1____	Objective as identified in the IHP: Rehabilitate and weatherize rental units as a supplement to the 08 Stimulus funding
	Performance Objective #_1____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Rehabilitate and weatherize rental units as a supplement to the 08 Stimulus funding.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective:
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities: No activity. We will continue to rehabilitate the rental units once the Stimulus funds have been expended.

GOAL # 3		Goal as identified in the IHP: Tenant Based Rental Assistance- Review policies to expand program to more Tribal Members.
	Objective #_1____	Objective as identified in the IHP: Tenant Based Rental Assistance- Review policies to expand program to more Tribal Members.
	Performance Objective #_1____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Tenant Based Rental Assistance- Review policies to expand program to more Tribal Members.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Policies have been updated with an implementation date of 7/1/2011.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

GOAL # 4		Goal as identified in the IHP: Develop a schedule of maintenance for '37 Act homes as well as provide maintenance and a maintenance facility.
	Objective # _____	Objective as identified in the IHP: Develop a schedule of maintenance for '37 Act homes as well as provide maintenance and a maintenance facility.
	Performance Objective # _____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Develop a schedule of maintenance for '37 Act homes as well as provide maintenance and a maintenance facility.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective:
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities: No Activity Maintenance will develop and implement a schedule, Housing administration will inquire about the facility and revise the IHP if needed.

GOAL # 5		Goal as identified in the IHP: Maintain and operate Emergency Shelter home.
	Objective # _____	Objective as identified in the IHP: Maintain and operate Emergency Shelter home.
	Performance Objective # _____	Performance objective relating to the above listed goal and its objective(s) as identified in the IHP: Maintain and operate Emergency Shelter home.
	Accomplishment(s)	Progress made toward completion of the goal and objective(s) as they relate to this performance objective: Policies have been approved and shelter is being used by a eligible Indian family.
	No accomplishment	If no progress was made, explain why not and describe what you will do to complete the activities:

Repeat this format for each one year goal and objective(s) and performance objective(s) in the IHP for this grant.

2. Are you on schedule to complete the 5-year goals identified in your IHP?

Check one:    Yes  No

3. If the answer to #2 is no, explain causes for delays and how you plan to modify your program to meet your 5-year goals and objectives.

4. How would you change your programs in general as a result of your experience with the implementation of NAHASDA?

I would not change the programs at this time.

Grant Number:

10IT5312880

**Table I - Sources of Funds**

<b>Sources of Funds for IHBG Activities</b>	<b>Planned Amount (from the IHP)</b>	<b>Amount Actually Awarded</b>
<b>(a)</b>	<b>(b)</b>	<b>(c)</b>
1. HUD Resources		
a. NAHASDA Block Grant		431,451.00
b. NAHASDA Program Income		
c. NAHASDA Title VI (Federal Guarantee)		
d. Section 184 Loan Guarantee		
e. Indian Community Development Block Grant		
f. Drug Elimination		
g. Prior year funds		
h. Other <b>(explain in narrative)</b>		
2. Existing Program Resources		
a. 1937 Housing Act Programs		
b. Other HUD Programs		
3. Other Federal or State Resources		
a. BIA Home Improvement Program		
b. Other <b>(explain in narrative)</b>		
4. Private Resources		
a. Tribe		
b. Financial Institution		
c. Other <b>(explain in narrative)</b>		
5. Other <b>(explain in narrative)</b>		
<b>Total Resources</b>		431,451.00

Narrative:

1. If column c is less than column b, explain why the planned funds were not realized.

Grant Number:

10IT5312880

**Table II - Uses of Funds**

Activity (a)	Budgeted Amount (from the IHP) (b)	Grant (HBG) funds expended (c)	Other funds expended (d)	Total funds expended from all sources (c + d) (e)	IHBG funds obligated (f)	Percentage of IHBG Grant Amount Obligated (g)
1. Indian Housing Assistance (1937 Housing Act units)						
a. Modernization						
b. Operating	20,000.00					
2. Development						
a. Rental						
i. Construction of new units						
ii. Acquisition	60,000.00					
iii. Rehabilitation						
b. Homeownership						
i. Construction of new units						
ii. Acquisition						
iii. Rehabilitation						
3. Housing Services	42,000.00					
4. Housing management services	10,000.00					
5. Crime Prevention & Safety						
6. Model Activities	213,161.00					
7. Planning & administration	86,290.00	15,453.13				
8. Reserves						
9. Other						
<b>Total</b>	<b>431,451.00</b>					

**Table II (continued)**

Activity (a)	Number of units planned (from the IHP) (g)	Number of units completed (h)	Number of units started not completed (i)	Cumulative		
				low-income Indian families (j)	non low-income Indian families (k)	non-Native American (l)
6. Indian Housing Assistance (1937 Act units)						
g. Modernization	17					
h. Operating						
7. Development						
d. Rental						
x. Construction of new units						
xi. Acquisition						
xii. Rehabilitation						
d. Homeownership						
x. Construction of new units						
xi. Acquisition						
xii. Rehabilitation						
24. Housing Services						
25. Housing Management Services						
26. Crime Prevention & Safety						
27. Model Activities	8					
28. Planning & administration						
29. Reserves						
30. Other						
<b>Total</b>	<b>25</b>					

Narrative:

1. Column (a), line item #8, Reserves: Identify the purpose for the funds you placed in this category.

2. Explain any unexpected cost overruns associated with IHBG funds.

3. Investments: Date HUD approved: \_\_\_\_\_  
(mm/dd/yy)

Amount approved for investment: \$ \_\_\_\_\_

Amount of IHBG funds (principal only) invested as of this reporting period end date:

\$ \_\_\_\_\_

## Part II - Reporting on Program Year Accomplishments

This Part is not grant specific. A single Part II consisting of Sections A through D (including Table III), is to be prepared and submitted at the end of each program year and will cover all open grants.

### SECTION A - MONITORING

**I. Self-Monitoring:** Sec 403(b) of the NAHASDA statute and §1000.502 of the program regulations require that the recipient **and** the tribe are to be involved in monitoring activities. You are responsible for monitoring your grant activities to ensure compliance with NAHASDA and its implementing regulations, and for monitoring the performance goals included under the IHP. In addition, if you are the TDHE, the tribe is responsible for monitoring your programmatic performance for compliance with the IHP, its stated goals and objectives, and the NAHASDA statute and its implementing regulations.

If you are a tribe reporting as the recipient, answer questions 1, 2 and 5. If you are a TDHE, answer all of the questions in this part.

1. Briefly describe the self monitoring systems and internal control procedures you used and those you implemented during the past year to assure that program activities comply with NAHASDA and its program regulations.  
Developed and followed internal policies, Developed and followed Tribal Employee Organizational chart, Continued to ensure files were up to date and standardized, Tribal budget process monitored by the finance department.

2. If you are a tribe or a TDHE reporting as the recipient:

a. List the activities you monitored:

Daily employee activities  
Budget  
Procurement practices  
Files

b. Describe the results of each monitoring activity:

Daily employee Time records kept  
Purchase Orders filed with finance requesting payment with job worked on  
Files were maintained in a standardized format

c. Describe any required corrective action:

N/A

3. If you are a TDHE (in addition to answering #2):
  - d. Describe the procedures the tribe used to monitor your affordable housing activities:
  - e. List your activities the tribe monitored:
  - f. Describe the results of the activities the tribe monitored:
  - g. Describe any corrective action required:
4. If you are a TDHE, describe any issues regarding your program activities that were referred to the tribe by HUD, an auditor, etc. and your responses to them.
5. Describe any monitoring activities you conducted of your sub-recipients.  
Monitored daily work of sub-contractors by SSIT employees, Ensured professional service contracts with a clearly defined scope of work were in place. Inspected final product to ensure work was completed as defined in the scope of work.

**II. Inspection of Units:** Per 403(b) of NAHASDA, a monitoring program must include an on-site inspection of all housing units assisted with NAHASDA funds and 1937 Housing Act funds. Use Table III to record the results of the assisted housing units inspected in this reporting period.

**Table III - Inspection of Assisted Housing**

Activity	Units Inspected					
	Total number of units	Total number of units Inspected (total d through g)	Number of units in standard condition	Number of units needing rehabilitation (costing less than \$20,000)	Number of units needing rehabilitation (more than \$20,000)	Number of units needing to be replaced
(a)	b.	c.	d.	e.	f.	g.
1. 1937 Housing Act funded units						
a. Mutual Help	15	14		14	1	0
b. Low Rent						
c. Turnkey III						
d. Other						
2. NAHASDA funded units						
a. Owned or managed by recipient						
b. Homeownership						
c. Rental	8	6		6	2	0
d. Temporary housing						
e. Other						
<b>Total</b>						

Narrative:

- Describe your plan of action for complying with your inspection policy: Continue to inspect all units on an annual basis
- If applicable, explain why all units were not inspected: 1 37 Act Home was not inspected as it was determined to be a health hazard due to extensive mold growing in the home. 2 Rental units not inspected as they were vacant and undergoing rehabilitation.
- Describe the process you use to perform inspections on units you do not own or manage which are assisted with IHBG funds: We travel to the unit once notified by the individual we are assisting and inspect the unit, if the unit passes we then sign the agreement and notify the individual we will assist with rent payment. When minor discrepancies are found we allow the owner to correct them and proceed as previously stated.
-



## SECTION C - Public Accountability:

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

Check one:      Yes      No  

2. If you are a TDHE, did you submit this APR to the tribe per 24 CFR 1000.512?

Check one:      Yes      No      N/A  

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.

This APR was not completed in time to submit for public comment, however it will be posted at submittal with all public comment received forwarded to HUD 2 weeks after posting.

4. Summarize any comments received from citizens:

5. Summarize any comments received from the tribe if applicable:

**SECTION D - Jobs Created by NAHASDA**

SUBMISSION OF THIS TABLE IS OPTIONAL . The information provided in this table may be used to respond to inquiries from Congress, other Federal agencies, and the public regarding the impact of the IHBG Program.

**Table IV - Jobs Created by NAHASDA**

	<b>Number of permanent positions created</b>	<b>Number of temporary positions created</b>	<b>Number of positions needed to implement NAHASDA</b>
(a)	(b)	(c)	(d)
Indian Housing Block Grant Assistance	1	5	6

**Narrative:**