

This monitoring plan is designed to assist a tribe or tribally designated housing entity to conduct self-monitoring of its performance and compliance with pertinent requirements and is virtually identical to the plan that the Office of Native American Programs uses.

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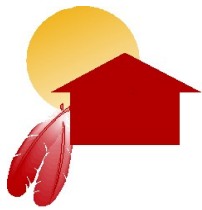
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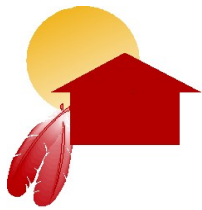
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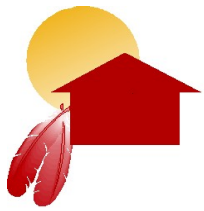
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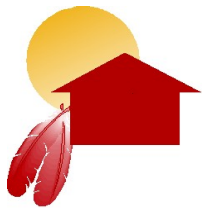
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<b>I. Purpose</b>				-
<p>IHBG recipients are required to complete an annual self-monitoring assessment of adherence to IHBG program requirements and applicable statutes. Self-monitoring activates the tribal self-determination framework envisioned under NAHASDA. Beneficiaries and recipients of assistance are expected to be accountable for their stewardship of NAHASDA resources. A self-monitoring system assists IHBG recipient to identify weak management practices that may lead to later consequences that could lessen the ability of the organization to provide affordable housing. Self-monitoring builds organizational capacity by learning from mistakes and successes to improve the way housing activities and programs operate.</p> <p>The following questions should assist the reviewer in evaluating the recipient’s self-monitoring process.</p>	<p>NAHASDA, Section 403(b)  24 CFR 85.40(a),  24 CFR 1000.502(a) and (b)</p>	<p>Program Guidance 2005-4 (Tribes/TD HEs)  IHP/APR</p>		Read & Noted
<b>II. Pre-Review Preparation</b>				-
A. If ONAP has entered into a Self-Monitoring Mutual Agreement (SMMA) with the tribe/TDHE, review the SMMA, as well as:				N/A – No SMMA in place in 2020 to date



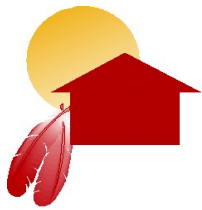
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1. The self-monitoring plan or policy or revised plan or policy.				Read & Noted
2. The latest self-monitoring assessment conducted and submitted by the tribe/TDHE and the results.				Read & Noted
3. The actions proposed or taken to correct any deficiencies noted in the assessment.				Read & Noted
<p>B. If available, review the following documents:</p> <ol style="list-style-type: none"> <li>1. Most recent IHP, approved IHP amendments, IHP amendments in process</li> <li>2. Policies and procedures (see section IV below for instructions on reviewing policies and procedures).</li> <li>3. Part II (Self-Monitoring) of latest APR.</li> <li>4. Previous monitoring findings in the areas of procurement, Indian preference, contract administration, and/or Section 3.</li> <li>5. Previous audit findings and/or work papers in the areas of procurement, Indian preference, contract administration, and/or Section 3.</li> <li>6. Corrective actions status for findings in any of these areas.</li> <li>7. Current enforcement actions.</li> <li>8. Valid complaints in the areas of procurement, Indian preference, contract</li> </ol>				<p>Read &amp; Noted</p> <p>2019 APR 2020 IHP 2019 Self-Monitoring Report</p>



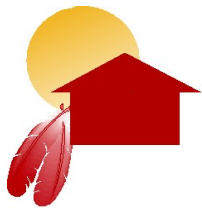
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administration, and/or Section 3. 9. Relevant correspondence				
<b>III. Review</b>				-
Under NAHASDA, both the recipient and the grant beneficiary have a role in reviewing the activities conducted and housing assisted to assess compliance with the requirements of NAHASDA. The sections below review each entity's role.  Review the sampling methods in the General Instructions.	NAHASDA, Section 403(b)  24 CFR 1000.502(a) and (b)	Program Guidance 2005-4 (Tribes/TD HEs)		Read & Noted
<b>IV. Recipient Responsibilities (TDHE or Tribe)</b>				-
A. If the tribe/TDHE has a Self-Monitoring Policy, the reviewer should examine the policy to assist in determining whether the tribe/TDHE's plan or process has been followed.	NAHASDA, Section 403(b)  24 CFR 1000.502(a) and (b)			Read & Noted
1. Is a self-monitoring plan or process in place?		See Attached		Yes, and policy was passed by Resolution 2013-12-009
2. Does the self-monitoring plan indicate there could be a conflict of interest in regards to the person conducting the self-monitoring?				No



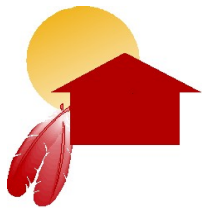
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3. Review the tribe/TDHE's self-monitoring assessments.				Read & Noted
4. Are self-monitoring assessments completed at least annually?				Yes
5. Are the self-monitoring assessments adequate?				Yes
a Is the tribe/TDHE providing monthly reports to the tribal council, tribal officials, or board of commissioners?				Yes, programmatic & fiscal reporting is given to Tribal Council at their monthly mneeting
b. Does the self-monitoring process include an analysis of the goals and objectives identified in the IHP?				Yes
c If so, does the assessment provide information concerning the status of the goals?				Yes
d Has an independent assessment been conducted?				Yes, an annual A133 audit is conducted annually. It last reviewed NAHASDA as a major program this year for 2019 operations.
B. Has the tribe/TDHE noted any deficiencies or areas of noncompliance with NAHASDA and other applicable regulations?	24 CFR 1000.508			None in 2020; In 2019 we identified a TBRA client that was unknowingly related to senior staff so declaration and posting of conflict of interest was not completed at time of application, but was completed once identified.



<b>TRIBE/TDHE NAME:</b>	<u>Regulatory/ Statutory Citation</u>	<u>Other Tools</u>	<u>Ref. Pg.</u>	<u>Remarks</u>
1. If so, does the tribe/TDHE have a corrective action plan or strategy in place to address those deficiencies or violations?				Yes, as a result, our client intake documents have been edited to declare those relationships that constitute a conflict as immediate family and a declaration of relationship conflict form has been added.
2. If deficiencies and corrective actions are identified in the Annual Performance Report (APR), test to confirm the statements.	24 CFR 1000.512 & 1000.514	IHP/APR See Attached		Reviewed and confirmed by reviewing the 2019 APR, and Self-Monitoring Results report.
3. Test for completion and effectiveness of corrective actions.		See Attached		Reviewed, corrective action was completed in November of 2019; the new forms and intake process started on January 1, 2020.
<p>C. Has the review identified deficiencies or areas of noncompliance that were not identified in the tribe/TDHE’s self-monitoring assessment?</p> <p>If yes, the reviewer should identify this as a programmatic concern citing that the tribe/TDHE’s self-monitoring process is not adequate to ensure compliance with applicable Federal requirements.</p> <p>If no deficiencies are identified, go to question 2.</p>	24 CFR 1000.518			No, in compliance in 2020 to date
1. Has the tribe/TDHE made progress from year to year in addressing deficiencies identified in the self-monitoring assessments?				Yes, in every case and has lead to stronger program procedures being implemented

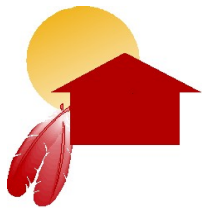


<b>TRIBE/TDHE NAME:</b>	<u>Regulatory/ Statutory Citation</u>	<u>Other Tools</u>	<u>Ref. Pg.</u>	<u>Remarks</u>
The most efficient way to determine progress over time is to design an exception chart, identifying by year, the problem, and corrective actions taken. Progress over time should result in fewer problems each year.				Read & Noted
2. Has the tribe/TDHE submitted self-monitoring summary results with the APR?				Yes, annually
a. Review Section 11 of the most recent APR for the tribe/TDHE’s description of its self-monitoring activities and results.		See Attached: Self-Monitoring Section of 2019 APR pg 11 of 12		Reviewed
b. Based on any deficiencies identified in the APR, determine areas to review.		See Attached 2019 APR		In 2019 APR, only area of deficiency was the immediate family member conflict of interest declaration & posting identified in the Admission & Occupancy packet.
3. Has the tribe/TDHE made the results of its self-monitoring assessment available to the public? (Determine this from either the APR or from management and staff interviews.)	24 CFR 1000.518	See Attached 2019 APR		2019 APR posting should have been posted in March for public review, but due to transition to work from home after Samish and Wa State declared a pandemic emergency, the posting was inaccessible by the public. It will now be posted on the website as well.

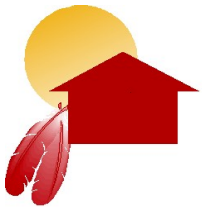


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<b>V. Tribe Responsibilities if TDHE is Recipient</b>				-
When the recipient is a TDHE, the tribe is responsible for monitoring programmatic and compliance requirements by requiring the TDHE to prepare periodic progress reports including the annual compliance assessment, the APR, and audit reports.				N/A in 2020
A. Has the tribe established a schedule for the TDHE to submit periodic progress reports and has the tribe provided the schedule to the TDHE?	24 CFR 1000.502(b)			N/A in 2020
B. If yes, is the TDHE submitting the periodic progress reports to the Tribe according to the schedule established?				N/A in 2020
C. Has the Tribe monitored the TDHE to determine whether the TDHE is meeting the programmatic and compliance requirements of the IHP and NAHASDA?	24 CFR 1000.508			N/A in 2020
1. If yes, has the Tribe identified any compliance concerns?	24 CFR 1000.510			N/A in 2020
2. If yes, has the TDHE addressed these concerns?				N/A in 2020
3. If the THDE has not addressed these concerns, include this issue in the				N/A in 2020

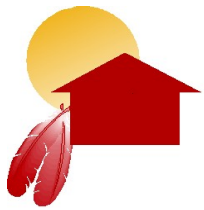




<b>TRIBE/TDHE NAME:</b>	<u>Regulatory/ Statutory Citation</u>	<u>Other Tools</u>	<u>Ref. Pg.</u>	<u>Remarks</u>
monitoring report to the TDHE.				
<b>VI. Subrecipients</b>				-
A. Are subrecipients contractually involved in the tribe/TDHE's IHBG activities?	24 CFR 85.37			N/A in 2020
1. If so, is the tribe/TDHE monitoring the subrecipients for compliance with the subrecipient agreement and applicable NAHASDA requirements?				N/A in 2020
2. Use the questions in Section V to evaluate the tribe/TDHE's monitoring of its subrecipients – this may cover area(s) that ideally should have been included in a contract and were not.				N/A in 2020
B. Are subrecipients included in the self-monitoring process?				N/A in 2020
<b>VII. Self-Monitoring Mutual Agreements</b>				-
A. Has ONAP entered into a SMMA with the tribe/TDHE? If so,				N/A in 2020
1. Has the self-monitoring plan and/or policy been revised since the SMMA was executed?				N/A in 2020



<b>TRIBE/TDHE NAME:</b>	<u>Regulatory/ Statutory Citation</u>	<u>Other Tools</u>	<u>Ref. Pg.</u>	<u>Remarks</u>
a. If so, does it still address all the items contained in the Program Guidance under the “Initial Review” section of the Guidance?				N/A in 2020
b. If not, the SMMA should be reviewed or ONAP may terminate the agreement.				N/A in 2020
2. If corrective actions were identified in the last self-monitoring assessment, have they been taken?				N/A in 2020
3. If so, have the deficiencies been corrected.				N/A in 2020
4. Has the review identified any programmatic concerns that were not identified in the tribe/TDHE’s last self-monitoring assessment?				N/A in 2020
a. If the programmatic concern(s) occurred after the date of the last self-monitoring assessment, the reviewer should identify this as a programmatic concern in the monitoring report.				N/A in 2020
b. If the programmatic concern occurred prior to the date of the last self-monitoring assessment, the reviewer should identify this as a programmatic concern in the				N/A in 2020



<b>TRIBE/TDHE NAME:</b>	<u>Regulatory/ Statutory Citation</u>	<u>Other Tools</u>	<u>Ref. Pg.</u>	<u>Remarks</u>
monitoring report and ONAP may terminate the agreement.				
<b>VIII. Summary</b>				-
Develop the monitoring report by summarizing the following: <ol style="list-style-type: none"> <li>1. Compliance with requirements</li> <li>2. Violations of the applicable statutes, regulations, or local laws and authorities</li> <li>3. Corrective actions that should be taken to address programmatic concerns</li> </ol>				Program in compliance and no areas of weakness found.  The corrective action plan begun in 2019 and declared in the 2019 APR and self-monitoring report regarding conflict of interest declaration and posting was completed and closed in 2019.

<b>Reviewer Name:</b>	<i>Sharon Paskewitz</i> 09-15-2020 <i>Sharon Paskewitz</i> 9/15/2020
<b>Review Date(s):</b>	9/10/2020 and 9/15/2020
<b>Supervisor Name:</b>	<i>Carney Thurston</i> 9/16/2020

Resolution No: 2002-04-023  
Date Approved: April 28, 2002  
Date Revised: December 13, 2013  
Resolution No:2013-12-009  
Subject: Self-Monitoring & Evaluation Policy

**SAMISH INDIAN NATION  
SELF-MONITORING AND EVALUATION POLICY**

**Samish Tribal Code §13.600  
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**SAMISH INDIAN NATION  
SELF-MONITORING AND EVALUATION POLICY**

**Samish Tribal Code §13.600  
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**§13.600**      **INTRODUCTION**

On September 26, 1996, President Clinton signed into law the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA). This law authorized or amended programs administered by the Office of Native American Programs. Program regulations which implement this law are found at 24 CFR part 1000.

**§13.601**      **MONITORING RESPONSIBILITIES**

The Samish Indian Nation ("Tribe") is responsible for monitoring grant activities to ensure compliance with applicable Federal requirements and monitoring performance goals under the Indian Housing Plan ("IHP"). Pursuant to § 1000.502(a), these responsibilities include self-monitoring and the monitoring of sub-recipients.

HUD responsibilities for reviewing recipients are set forth in § 1000.520 as referenced in § 1000.502(c). HUD monitoring will consist of on-site review and off-site review of records, reports and audits [§1000.502(d)]. Section 1000.520 requires HUD to review, at least annually, each recipient's performance to determine whether it has carried out its eligible activities in a timely manner, has carried out its eligible activities and certifications in accordance with the requirements and the primary objective of NAHASDA and with other applicable laws, and whether the recipient has a continuing capacity to carry out those activities in a timely manner.

**§13.602**      **ANNUAL MONITORING**

The Samish Indian Nation shall complete self-monitoring annually. The self-monitoring will be conducted by the Controller, Compliance Officer, and Housing Department Staff, as applicable, before the close of the program year. Applicable sections of the self-monitoring forms offered by HUD will be utilized to complete this internal monitoring.

**§13.603**      **REPORT OF SELF-MONITORING RESULTS**

A Self-Monitoring Results Report will be completed annually and submitted to Tribal Council for review. This report will outline each self-monitoring section completed, any issues or events of non-compliance found in that section, and the corrective plan for each issue or event.

## **2019 – OVERVIEW SELF-MONITORING RESULTS**

This year Samish has continued using the self-monitoring plans for recipients, as provided by HUD on their website one the Grant Oversight and Monitoring page, to complete our required annual self-monitoring. During this year we completed the following monitoring plans as applicable to current Samish NAHASDA programs and any areas of non-compliance or improvements needed are noted:

### **A. APR & IHP Compliance**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

### **B. Draft Lead-Based Paint**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

### **C. Environmental Review Compliance**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

**Comment:** Completed corrective action plan identified in 2018.

### **D. Organization & Structure**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

**Comments:** Housing Director will be working to implement a new procedure for evaluating criminal background check results in a standard way to create a more uniform system not reliant on the single case manager's interpretation; it is hoped this effort will better meet the needs of our community and also better identify criminal barriers in serving our community.

### **E. Procurement & Contract Administration**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

**Comments:** We do not currently directly address Indian Preference, Section 3, and protests and complaints, directly in our Finance Policy, but meet with requirements in our practices. A future revision of the Finance Policy is planned, and we will consider creating separate clauses within our Finance policy that specifically address these areas.

### **F. Section 504 Accessibility**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

### **G. IHBG Self-Monitoring**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

## **H. Admissions & Occupancy**

### **Issue:**

We identified a single failure in implementing procedure for a possible a conflict of interest for a Rental Assistance client that was the nephew of an employee. In this isolated occurrence, the client failed to disclose the conflict during their application process.

### **Corrective Action Plan/Taken:**

The conflict of interest procedures per our policy were followed and declaration was published once discovered. In order to ensure clarity in this process for the future, the program has now included the full definition of immediate family in both the application documents for the client to review prior to their declaration and in the e enrollment verification form.

### **Comments:**

Additionally, the Program will look offering clients rental insurance as an added benefit in 2020.

## **I. Financial & Fiscal Management (including Appendixes 1-8)**

**Issue:** No areas of non-compliance or improvement noted.

**Corrective Action Plan/Taken:** N/A

**Comments:**



Energy and Performance Information Center ( EPIC )

Grant Number: **55-IT-53-13870**  
 Report: **IHP Report for 2020**

OMB CONTROL NUMBER: 2577-0218  
 EXPIRATION DATE: 07/31/2019

**Cover Page**

**Grant Information:**

Grant Number	55-IT-53-13870
Recipient Program Year	01/01/2020-12/31/2020
Federal Fiscal Year	2020
Initial Indian Housing Plan (IHP):	Yes
Amended Plan	
Annual Performance Report (APR):	
Amended Plan	
Tribe:	Yes
TDHE:	

**Recipient Information:**

Name of the Recipient	Samish Indian Nation
Contact Person	Wooten, Thomas
Telephone Number with Area Code	360-293-6404
Mailing Address	PO Box 217
City	Anacortes
State	WA
Zip	98221-0217
Fax Number with Area Code	360-293-0790
Email Address	tomwooten@samishtribe.nsn.us
Tribes:	

**TDHE/Tribe Information:**

Tax Identification Number	910931896
DUNS Number	091741637
CCR/SAM Expiration Date	01/25/2020

**Planned Grant-Based Budget for Eligible Programs:**

IHBG Fiscal Year Formula Amount	\$811,454.00
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**Housing Needs**

Type of Need (A)	Low-Income Indian Families (B)	All Indian Families (C)
Overcrowded Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Renters Who Wish to Become Owners	<input type="checkbox"/>	<input type="checkbox"/>
Substandard Units Needing Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>
Homeless Households	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Households Needing Affordable Rental Units	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
College Student Housing	<input type="checkbox"/>	<input type="checkbox"/>
Disabled Households Needing Accessibility	<input type="checkbox"/>	<input type="checkbox"/>
Units Needing Energy Efficiency Upgrades	<input type="checkbox"/>	<input type="checkbox"/>
Infrastructure to Support Housing	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>

Planned Program Benefits

Our program and activities address the needs of low income Native families by offering safe and affordable housing through our Tenant Based Rental Assistance (TBRA) Program, Homelessness Prevention, Emergency Housing (Shelter Stays), Rapid Re-Housing, housing searches, financial management, landlord/tenant education and other supportive services that will help Native families obtain skills that will support their ability to retain long term permanent housing. Through our TBRA program, fifty (50) Native families will be provided with long term assistance and fifty (50) will be supported through our Homelessness Prevention, Rapid Re-Housing and/or Emergency Housing assistance program. In early 2020, Samish Indian Nation will complete its work with our Rental Design team, and start constructing up to eighteen (18) units of rental housing, in which nine (9) of those units will be designated as affordable



	<p>permanent housing for our low-income households. The other 9 will be designated for over-income households, financed with Non-Indian Housing Block Grant (IHBG) funding. The land is located at 2109 34th Street, Anacortes, Washington 98221. A Community Center will be constructed to be used by residents of our affordable permanent housing, in addition to families participating in our TBRA, Homelessness Prevention, Rapid Re-housing and Emergency housing programs. We will introduce a new program Community Awareness Health and Safety, designed to provide home safety demonstrations, home ownership education, home maintenance skills, educational training, and financial literature to residents in our affordable permanent housing, in addition to families participating in our TBRA, Homelessness Prevention, Rapid Re-housing and Emergency Shelter housing programs. Activities offered will include assistance preparing a housing search plan and list of local landlords. For those clients that demonstrate that they need more assistance and support to find housing, the supportive service will be provided to meet the level of need. Evaluate the household's current resources, problem-solving abilities, and financial life skills, then provide the appropriate amount of assistance to ensure the greatest chance of successful transition to independence after program exit. When assistance ends, participants should have developed a natural support system, if possible, that will allow them to address obstacles that might later arise with employments, childcare, transportation or financial management. Participants will also need to know how to navigate multiple systems, so other housing services should consist of arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability. Rather than simply making referrals to programs, there will be times that we will need to walk participants through how to access services on their own and ensure that participants have the skills to access services in the future independently. Connections to Mainstream Resources that are appropriate to addressing barriers to housing retention. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish and Whatcom. Many of our housing clients live in rural areas and do not have access to public transportation. Because of this, our housing staff make home visits to review housing stability plans, transport clients to medical appointments, work source and other necessary appointments to ensure families will become self-sufficient.</p>
<p>Geographic Distribution</p>	<p>Assistance is distributed in a variety of ways for us to meet the needs and diversity of our families. We send information to our families through mailings on a quarterly basis. Our newsletter is mailed to all Samish households regardless of where they live, and our webpage is available to anyone with access to the internet. For our Native Elders, developing community relationships with agencies that have Tribal Outreach and Assistance has been and continues to be critical in providing information and assistance to this population. This one on one approach has been effective in helping our elders understand the services we provide and how such services can be effective for them. We provide services in ten (10) counties throughout Western Washington Clallam, Island, King, Kitsap, Pierce, San Juan, Skagit, Snohomish and Whatcom. We have developed partnerships within our 10-county service area, explaining to other providers who we serve and how to contact us for information regarding the various housing services offered. We are also a part of Skagit County's Coordinated Entry System- a system designed for all populations that aligns the Single Adult, Family, and Youth into a seamless, collaborative, county-wide platform for housing and service delivery to homeless households. Our focus is on Native households. The main objectives of this system are to: Reduce the length of time a family is homeless and permanently house them as quickly as possible, using Rapid Re-housing and linkages to supportive services. Build upon existing community-based infrastructures to serve homeless families, leverage resources, and provide more targeted and cost-effective interventions. It is our goal in 2020 to become a part of the Homelessness Management Information System (HMIS) in Whatcom, Island and San Juan Counties. This will be another resource in helping us identify families in those areas that could benefit from our program.</p>

**Programs**

**2020-0004 : Construction of Rental Housing**

<p>Program Name:</p>	<p>Construction of Rental Housing</p>						
<p>Unique Identifier:</p>	<p>2020-0004</p>						
<p>Program Description (continued)</p>	<p>Samish Indian Nation will build up to twenty (20) units of rental housing of which 10 units will be designated as affordable permanent housing for our low-income households and a Community Center that will be used by residents of our affordable permanent housing, in addition to families participating in our TBRA and Homelessness/Rapid Rehousing programs. Up to ten (10) of the units and fifty-percent (50%) of the cost associated with the community center and related infrastructure will be designated for low-income households using IHBG funding. Up to ten (10) of the units and fifty-percent (50%) of the cost associated with the community center and related infrastructure will be designated for over-income households financed with non-IHBG funding. The land is located at 2109 34th Street, Washington 98221.</p>						
<p>Eligible Activity Number</p>	<p>(4) Construction of Rental Housing [202(2)]</p>						
<p>Intended Outcome Number</p>	<p>(7) Create new affordable rental units</p>						
<p>APR: Actual Outcome Number</p>	<p>This information is only completed for an APR.</p>						
<p>Who Will Be Assisted</p>	<p>Low-Income Native American Families with a preference for Samish tribal Elders and members with a permanent or total disability.</p>						
<p>Types and Level of Assistance</p>	<p>Permanent Supportive Housing to families that meet program eligibility criteria. The project will provide up to 20 rental units - in which 10 will be assisted with NAHASDA funds. Each unit will have two bedrooms, one and one-half bathrooms with a combination of ADA accessible bedrooms. A Community Center will be located on the property, allowing housing staff to conduct community gatherings, annual events in the community, safety demonstrations, home maintenance and education training provided in a classroom setting. Low income families will pay between 10% - 30% of their adjusted gross income toward monthly rent. This percentage amount will be determined by Council Resolution on an annual basis.</p>						
<p>APR : Describe Accomplishments</p>	<p>This information is only completed for an APR.</p>						
<p>Planned and Actual Outputs for 12-Month Program Year</p>	<table border="1"> <thead> <tr> <th></th> <th>Planned</th> <th>APR - Actual</th> </tr> </thead> <tbody> <tr> <td>Number of Units to be</td> <td>10</td> <td>This information is only</td> </tr> </tbody> </table>		Planned	APR - Actual	Number of Units to be	10	This information is only
	Planned	APR - Actual					
Number of Units to be	10	This information is only					

	Completed in Year	completed for an APR.
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$2,664,688.81	\$0.00	\$2,664,688.81

**2020-0017 : Tenant Based Rental Assistance**

Program Name:	Tenant Based Rental Assistance						
Unique Identifier:	2020-0017						
Program Description (continued)	This program is designed to provide rental assistance to Samish members and enrolled members of Federally recognized Indian tribes living in the Samish Tribes 10 county service area. The purpose of the program is to ensure that low income Native families have the opportunity for and access to housing and that they can develop and/or increase their economic skills that will demonstrate their ability to maintain stable permanent housing once rental assistance ends. Families will be assigned to a Case Manager that will link them to supportive services that enable participants to increase earned income, reduce or eliminate the need for welfare assistance, and make progress toward achieving economic independence and housing self-sufficiency.						
Eligible Activity Number	(17) Tenant Based Rental Assistance [202(3)]						
Intended Outcome Number	(6) Assist affordable housing for low income households						
APR: Actual Outcome Number	This information is only completed for an APR.						
Who Will Be Assisted	Low-Income Native American Families.						
Types and Level of Assistance	Eligible low-income households will receive rental assistance to pay rent in private market rental units. Low Income Households will pay between 10% and 30% of their adjusted gross income toward their rent. (The percent paid toward rent is determined by Tribal Council Resolution). The Samish Housing Department pays the additional cost of the families rent up to the Fair Market Rent.						
APR : Describe Accomplishments	This information is only completed for an APR.						
Planned and Actual Outputs for 12-Month Program Year	<table border="1"> <thead> <tr> <th></th> <th>Planned</th> <th>APR - Actual</th> </tr> </thead> <tbody> <tr> <td>Number of Households to be served in Year</td> <td>50</td> <td>This information is only completed for an APR.</td> </tr> </tbody> </table>		Planned	APR - Actual	Number of Households to be served in Year	50	This information is only completed for an APR.
	Planned	APR - Actual					
Number of Households to be served in Year	50	This information is only completed for an APR.					
APR: If the program is behind schedule, explain why	This information is only completed for an APR.						

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$514,631.80	\$0.00	\$514,631.80

**2020-0018 : Housing and Support Services**

Program Name:	Housing and Support Services	
Unique Identifier:	2020-0018	
Program Description (continued)	The intent of this program is to work with Native families to understand their unique needs, tailoring our services to move them toward independence and self-sufficiency. Information and resources on budgets, credit repair, basic home housekeeping, how to maintain a rental unit, Landlord/Tenant rights and other information, is just an example of the resources we will provide to families enrolled in our services. To prevent households from becoming homeless by offering short term rental assistance to defray rent and utility bills. For tribal households who are currently homeless to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe or sanitary. We will introduce a new program ¿Community Awareness Health and Safety¿, designed to provide home safety demonstrations, home ownership education, home maintenance skills, educational training, and financial literature to residents in our affordable permanent housing, in addition to families participating in our TBRA and Homelessness/Rapid Rehousing programs. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington ¿ Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish and Whatcom. Many of our housing clients live in rural areas and do not have access to public transportation. Because of this, our housing staff make home visits to review housing stability plans, transport clients to medical appointments, work source and other necessary appointments to ensure families will become self-sufficient.	
Eligible Activity Number	(18) Other Housing Service [202(3)]	
Intended Outcome Number	(12) Other-must provide description in the box below If Other: Families will learn how to identify, obtain and/or maintain access to community resources. They will learn how to understand, create and use a monthly budget and apply those skills to track their spending habits, cut spending and set financial goals. Families will set long term financial goals and take steps to clear up their credit report, if necessary. Families will be provided with home safety demonstrations, home ownership education, home maintenance skills, educational training and financial literature through classroom settings and brochures.	

APR: Actual Outcome Number	This information is only completed for an APR.	
Who Will Be Assisted	Low-Income Native American Families.	
Types and Level of Assistance	Financial assistance, housing search and support.	
APR : Describe Accomplishments	This information is only completed for an APR.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Households</b> to be served in Year 75	This information is only completed for an APR.
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$222,007.66	\$0.00	\$222,007.66

**2020-0019 : Housing Management**

Program Name:	Housing Management	
Unique Identifier:	2020-0019	
Program Description (continued)	The provision of management services for affordable housing, including preparation of work specifications, the cost of operation and maintenance of units developed with funds provided under Native America Housing and Self-Determination Act (NAHASDA) and management of affordable housing projects.	
Eligible Activity Number	(19) Housing Management Services [202(4)]	
Intended Outcome Number	(6) Assist affordable housing for low income households	
APR: Actual Outcome Number	This information is only completed for an APR.	
Who Will Be Assisted	Low-Income Native American Families.	
Types and Level of Assistance	(1) Preparation of work specifications for affordable housing; (2) Loan processing for affordable housing; (3) Inspections for affordable housing; (4) Tenant selection for affordable housing; (5) Management of tenant-based and project-based rental assistance; (6) Mediation programs for landlord-tenant disputes for affordable housing; (7) Hiring of grants writers for affordable housing applications; (8) Operating assistance for NAHASDA-assisted units to include maintenance and utilities.	
APR : Describe Accomplishments	This information is only completed for an APR.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Households</b> to be served in Year 75	This information is only completed for an APR.
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
\$129,900.25	\$0.00	\$129,900.25

**2020-0021 : Community Center**

Program Name:	Community Center	
Unique Identifier:	2020-0021	
Program Description (continued)	The Community Center will be a place for all residents to gather for celebrations, community awareness, cultural events, and other activities for families that live in our affordable housing units. Some of the activities will focus on isolation prevention (for our elders) and as a place of relief in instances of community tragedies. Staff will provide outreach to residents through participation in annual events in the community. Safety demonstrations, home maintenance and education training will be provided in a class room setting. All services offered at the Community Center will be available to all clients participating in our housing programs.	
Eligible Activity Number	(22) Model Activities [202(6)]	
Intended Outcome Number	(12) Other-must provide description in the box below If Other: The Community Center will be used by residents of our permanent affordable housing project, and clients that participate in our TBRA and Homelessness Prevention/Rapid Rehousing Program.	
APR: Actual Outcome Number	This information is only completed for an APR.	
Who Will Be Assisted	Low Income Native American Families	
Types and Level of Assistance	Home safety demonstrations, home ownership education, home maintenance skills, educational training and financial literature. The Community Center is a new construction. The footprint for the building is approximately 800-1000 Sq. ft. The total floor area may be up to 2000 Sq. Ft. The main floor will be opened, with a kitchen area and two bathrooms. The upstairs will be a one bedroom unit for the Resident Manager, who will live on site. Outside there will be a play ground and a fire pit.	
APR : Describe Accomplishments	This information is only completed for an APR.	

Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	The output measure being collected for this eligible activity is dollars. The dollar amount should be included as an other fund amount listed in the Uses of Funding table.	
APR: If the program is behind schedule, explain why	This information is only completed for an APR.	

**Uses of Funding:**  
 The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

<b>Prior and current year IHBG (only) funds to be expended in 12-month program year (L)</b>	<b>Total all other funds to be expended in 12-month program year (M)</b>	<b>Total funds to be expended in 12-month program year (N=L+M)</b>
\$150,000.00	\$0.00	\$150,000.00

**Maintaining 1937 Act Units, Demolition, and Disposition**

Maintaining 1937 Act Units	Does Not Apply
Demolition and Disposition	Does Not Apply

**Budget Information**

Sources of Funding

Funding Source	Amount on hand at beginning of program year (A)	Amount to be received during 12-month program year (B)	Total sources of funds (C=A+B)	Funds to be expended during 12-month program year (D)	Unexpended funds remaining at end of program year (E=C-D)
<b>IHBG Funds:</b>	\$3,057,136.12	\$811,454.00	<b>\$3,868,590.12</b>	\$3,868,590.12	<b>\$0.00</b>
<b>IHBG Program Income:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Title VI:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Title VI Program Income:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>1937 Act Operating Reserves:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Carry Over 1937 Act Funds:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>LEVERAGED FUNDS</b>					
<b>ICDBG Funds:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Other Federal Funds:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>LIHTC:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Non-Federal Funds:</b>	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>
<b>Total:</b>	<b>\$3,057,136.12</b>	<b>\$811,454.00</b>	<b>\$3,868,590.12</b>	<b>\$3,868,590.12</b>	<b>\$0.00</b>

Uses of Funding

Program Name	Unique Identifier	Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)
<b>Construction of Rental Housing</b>	2020-0004	\$2,664,688.81	\$0.00	\$2,664,688.81
<b>Tenant Based Rental Assistance</b>	2020-0017	\$514,631.80	\$0.00	\$514,631.80
<b>Housing and Support Services</b>	2020-0018	\$222,007.66	\$0.00	\$222,007.66
<b>Housing Management</b>	2020-0019	\$129,900.25	\$0.00	\$129,900.25
<b>Community Center</b>	2020-0021	\$150,000.00	\$0.00	\$150,000.00
<b>Planning and Administration</b>		\$187,361.60	\$0.00	\$187,361.60
<b>Loan Repayment (describe in 3 &amp; 4 below)</b>		\$0.00	\$0.00	\$0.00
<b>Total</b>		<b>\$3,868,590.12</b>	<b>\$0.00</b>	<b>\$3,868,590.12</b>

APR	
APR	The answer to this question is only requested for an APR.

**Other Submission Items**

Useful Life/Affordability Period(s)	Indian Housing Block Grant (IHBG) funds invested Affordability Period Under \$5,000 6 months; \$5,000 - \$15,000 5 years; \$15,001 - \$40,000 10 Years; Anything over \$40,000 15 Years; New Construction or acquisition of newly constructed homes 20 Years.
Model Housing and Over-Income Activities	Samish Indian Nation will build a Community Center, which will be used by residents of our permanent affordable housing project and clients that participate in our TBRA, Prevention, Rapid Re-Housing and Emergency Shelter programs. The Community Center will be 800 - 1,000 Square feet, with a total floor area up to 2,000 square feet. The Center will be an open area, with a kitchen and bathroom. The grounds on the outside will have a common area for residents and a playground.
Tribal and Other Indian Preference Does the tribe have a preference policy?	YES  Samish Tribal Members will have first preference for all services offered through our Housing Department. However, if funds allow, we will provide services to other Native households that are enrolled in a Federally recognized Indian Tribe.
Anticipated Planning and Administration Expenses	NO

Do you intend to exceed your allowable spending cap for Planning and Administration?										
Actual Planning and Administration Expenses Did you exceed your allowable spending cap for Planning and Administration?	The answer to this question is only requested for an APR.									
Does the tribe have an expanded formula area?:	NO									
Total Expenditures on Affordable Housing Activities:	<table border="1"> <thead> <tr> <th></th> <th>All AIAN Households</th> <th>AIAN Households with Incomes 80% or Less of Median Income</th> </tr> </thead> <tbody> <tr> <td>IHBG Funds</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>Funds from Other Sources</td> <td>\$0.00</td> <td>\$0.00</td> </tr> </tbody> </table>		All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income	IHBG Funds	\$0.00	\$0.00	Funds from Other Sources	\$0.00	\$0.00
	All AIAN Households	AIAN Households with Incomes 80% or Less of Median Income								
IHBG Funds	\$0.00	\$0.00								
Funds from Other Sources	\$0.00	\$0.00								
For each separate formula area, list the expended amount	The answer to this question is only requested for an APR.									
<b>Indian Housing Plan Certification Of Compliance</b>										
In accordance with applicable statutes, the recipient certifies that it will comply with Title II of the Civil Rights Act of 1968, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and other federal statutes, to the extent that they apply to tribes and TDHEs, see 24 CFR 1000.12.	YES									
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									
The recipient 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									
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									
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									
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									
<b>Tribal Wage Rate Certification</b>										
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.	YES									
2. You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.										
3. You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities described below.										
4. List the activities using tribally determined wage rates:										



## Energy and Performance Information Center ( EPIC )

Grant Number: **55-IT-53-13870**Report: **APR Report for 2019**

OMB CONTROL NUMBER: 2577-0218

EXPIRATION DATE: 07/31/2019

**Cover Page****Grant Information:**

Grant Number	55-IT-53-13870
Recipient Program Year	01/01/2019-12/31/2019
Federal Fiscal Year	2019
Initial Indian Housing Plan (IHP):	Yes
Amended Plan	
Annual Performance Report (APR):	Yes
Amended Plan	
Tribe:	Yes
TDHE:	

**Recipient Information:**

Name of the Recipient	Samish Indian Nation
Contact Person	Wooten, Thomas
Telephone Number with Area Code	360-293-6404
Mailing Address	PO Box 217
City	Anacortes
State	WA
Zip	98221-0217
Fax Number with Area Code	360-293-0790
Email Address	tomwooten@samishtribe.nsn.us
Tribes:	

**TDHE/Tribe Information:**

Tax Identification Number	910931896
DUNS Number	091741637
CCR/SAM Expiration Date	06/27/2019

**Planned Grant-Based Budget for Eligible Programs:**

IHBG Fiscal Year Formula Amount	\$645,878.00
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**Housing Needs**

Type of Need (A)	Low-Income Indian Families (B)	All Indian Families (C)
Overcrowded Households	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Renters Who Wish to Become Owners	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Substandard Units Needing Rehabilitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Homeless Households	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Households Needing Affordable Rental Units	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
College Student Housing	<input type="checkbox"/>	<input type="checkbox"/>
Disabled Households Needing Accessibility	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Units Needing Energy Efficiency Upgrades	<input type="checkbox"/>	<input type="checkbox"/>
Infrastructure to Support Housing	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>

**Planned Program Benefits**

Our program and activities address the needs of low income Native families by offering safe and affordable housing through our Tenant Based Rental Assistance (TBRA) Programs, Homelessness Prevention, Emergency Housing, housing searches, financial management, landlord/tenant education and other supportive services that will help Native families obtain skills that will support their ability to retain long term permanent housing. Through our TBRA program, forty (40) Native families will be provided with long term assistance and fifty (50) will be supported through our Homelessness Prevention and/or Emergency Housing assistance program. In early 2019, Samish Indian Nation will complete its work with our Rental Design team, and start constructing up to twenty (20) units of rental housing, in which ten (10) of those units will be designated as affordable permanent housing for our low-income households. The other 10 will be designated for over-income households, financed with Non-Indian Hou

**Geographic Distribution**

Assistance is distributed in a variety of ways for us to meet the needs and diversity of our families. Information is available through our tribal newsletter and webpage. We send information to our families through mailings on a quarterly basis. Our newsletter is mailed to all Samish households regardless of where they live, and our webpage is available to anyone with access to the internet. For our Native Elders, developing community relationships with agencies that have Tribal Outreach and Assistance has been and continues to be critical in providing information and assistance to this population. This one on one approach has been effective in helping our elders understand the services we provide and how such services can be effective for them. We provide services in ten (10) counties throughout Western Washington Clallam, Island, King, Kitsap, Pierce, San Juan, Skagit, Snohomish and Whatcom. We have developed partnerships within our 10-county service area, explaining who w

**Programs**

**2019-0004 : Construction of Rental Housing**

Program Name:	Construction of Rental Housing
Unique Identifier:	2019-0004
Program Description (continued)	Samish Indian Nation will build up to twenty (20) units of rental housing of which 10 units will be designated as affordable permanent housing for our low-income households and a Community Center that will be used by residents of our affordable permanent housing, in addition to families participating in our TBRA and Homelessness/Rapid Rehousing programs. Up to ten (10) of the units and fifty-percent (50%) of the cost associated with the community center and related infrastructure will be designated for low-income households using IHBG funding. Up to ten (10) of the units and fifty-percent (50%) of the cost associated with the community center and related infrastructure will be designated for over-income households financed with non-IHBG funding. The land is located at 2109 34th Street, Washington 98221.
Eligible Activity Number	(4) Construction of Rental Housing [202(2)]
Intended Outcome Number	(7) Create new affordable rental units
APR: Actual Outcome Number	(7) Create new affordable rental units
Who Will Be Assisted	Low-Income Native American Families with a preference for Samish tribal Elders and members with a permanent or total disability.

Types and Level of Assistance	Permanent Supportive Housing to families that meet program eligibility criteria. The project will provide up to 20 rental units - in which 10 will be assisted with NAHASDA funds. Each unit will have two bedrooms, one and one-half bathrooms with a combination of ADA accessible bedrooms. A Community Center will be located on the property, allowing housing staff to conduct community gatherings, annual events in the community, safety demonstrations, home maintenance and education training provided in a classroom setting. Low income families will pay between 10% - 30% of their adjusted gross income toward monthly rent. This percentage amount will be determined by Council Resolution on an annual basis.	
APR : Describe Accomplishments	Samish Indian Nation was not able to accomplish this goal in 2019.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Units</b> to be Completed in Year 10	0
APR: If the program is behind schedule, explain why	Samish Indian Nation continues to work on a mixed-income housing development on its 2-acre property in Anacortes, Washington. The City of Anacortes is in the midst of a complete overhaul of its development regulations, which was expected to be completed by the end of 2018, however this did not happen until August 2019. The new regulations have provided additional development potential for the property. We are currently working with a design firm Travois Design to design the property based off the new regulations. At the current state of design, we expect to be able to construct up to 20 single/-story cottage-style homes of about 1100 sq. ft, each with two bedrooms and 1 1/2 baths and a Community Center of about 1000 sq. ft. \$286.70 was used for program administration.	

**Uses of Funding:**

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Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$2,279,417.05	\$0.00	\$2,279,417.05	\$286.70	\$0.00	\$286.70

**2019-0013 : Down Payment - Closing Cost**

Program Name:	Down Payment - Closing Cost	
Unique Identifier:	2019-0013	
Program Description (continued)	This program is designed to provide expanded home ownership opportunities for Low Income Native American Families, by providing first time home buyers, with a grant for down payment and closing cost.	
Eligible Activity Number	(13) Down Payment/Closing Cost Assistance [202(2)]	
Intended Outcome Number	(2) Assist renters to become homeowners	
APR: Actual Outcome Number	(2) Assist renters to become homeowners	
Who Will Be Assisted	Low Income Native American Families	
Types and Level of Assistance	Samish Tribal Members will receive a onetime grant up to \$10,000 prorated based on income.	
APR : Describe Accomplishments	Samish Indian Nation was not able to accomplish this outcome in 2019.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Units</b> to be Completed in Year 3	0
APR: If the program is behind schedule, explain why	In November of 2018, we had three families in the process of completing their application for this program, with the hopes of approval in early 2019. Unfortunately, one of the families income to debt ratio was too high and did not qualify for a home loan. The other two families were denied and their application was closed. This has been a difficult program to operate,	



and because of this, we decided not to offer the service in 2020. \$48.00 was used to conduct a background check on potential client.

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$30,924.13	\$0.00	\$30,924.13	\$48.00	\$0.00	\$48.00

**2019-0017 : Tenant Based Rental Assistance**

Program Name:	Tenant Based Rental Assistance	
Unique Identifier:	2019-0017	
Program Description (continued)	This program is designed to provide rental assistance to Samish members and enrolled members of Federally recognized Indian tribes living in the Samish Tribes 10 county service area. The purpose of the program is to ensure that low income Native families have the opportunity for and access to housing and that they can develop and/or increase their economic skills that will demonstrate their ability to maintain stable permanent housing once rental assistance ends. Families will be assigned to a Case Manager that will link them to supportive services that enable participants to increase earned income, reduce or eliminate the need for welfare assistance, and make progress toward achieving economic independence and housing self-sufficiency.	
Eligible Activity Number	(17) Tenant Based Rental Assistance [202(3)]	
Intended Outcome Number	(6) Assist affordable housing for low income households	
APR: Actual Outcome Number	(6) Assist affordable housing for low income households	
Who Will Be Assisted	Samish members and enrolled members of Federally recognized Indian Tribes living in the Samish Tribes 10-county service area.	
Types and Level of Assistance	Eligible low-income households will receive rental assistance to pay rent in private market rental units. Low Income Households will pay between 10% and 30% of their adjusted gross income toward their rent. (The percent paid toward rent is determined by Tribal Council Resolution). The Samish Housing Department pays the additional cost of the families rent up to the Fair Market Rent.	
APR : Describe Accomplishments	In 2019 we provided rental assistance to 51 eligible low-income Native households. During the course of the year we had 6 families reach their self-sufficiency goals; 3 families were over-income and no longer needed our assistance.	
Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of Households to be served in Year	51
APR: If the program is behind schedule, explain why	Does not apply	

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
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\$495,843.63	\$0.00	\$495,843.63	\$340,994.55	\$0.00	\$340,994.55
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**2019-0018 : Housing and Support Services**

Program Name:	Housing and Support Services
Unique Identifier:	2019-0018
Program Description (continued)	<p>The intent of this program is to work with Native families to understand their unique needs, tailoring our services to move them toward independence and self-sufficiency. Information and resources on budgets, credit repair, basic home housekeeping, how to maintain a rental unit, Landlord/Tenant rights and other information, is just an example of the resources we will provide to families enrolled in our services. To prevent households from becoming homeless by offering short term rental assistance to defray rent and utility bills. For tribal households who are currently homeless to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe or sanitary. We will introduce a new program <i>Community Awareness Health and Safety</i>, designed to provide home safety demonstrations, home ownership education, home maintenance skills, educational training, and financial literature to residents in our affordable permanent housing, in addition to families participating in our TBRA and Homelessness/Rapid Rehousing programs. Our clients reside in scattered site-housing throughout ten (10) Counties in Western Washington <i>Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Skagit, Snohomish and Whatcom</i>. Many of our housing clients live in rural areas and do not have access to public transportation. Because of this, our housing staff make home visits to review housing stability plans, transport clients to medical appointments, work source and other necessary appointments to ensure families will become self-sufficient. In 2019, we plan on purchasing two (2) vehicles that will allow our staff to continue this essential work.</p>
Eligible Activity Number	(18) Other Housing Service [202(3)]
Intended Outcome Number	<p>(12) Other-must provide description in the box below          If Other: Families will learn how to identify, obtain and/or maintain access to community resources. They will learn how to understand, create and use a monthly budget and apply those skills to track their spending habits, cut spending and set financial goals. Families will set long term financial goals and take steps to clear up their credit report, if necessary. Families will be provided with home safety demonstrations, home ownership education, home maintenance skills, educational training and financial literature through classroom settings and brochures.</p>
APR: Actual Outcome Number	<p>(12) Other-must provide description in the box below          If Other: In 2019, we provided Housing and Support Services to 49 Tribal Households with homelessness prevention - short term rental assistance and 51 Households that were enrolled in our Tenant Based Rental Assistance program with other housing support services that would help them become self-sufficient with their long term housing goals.</p>
Who Will Be Assisted	Samish and other Native families. Households with or without children who are living temporarily with friends, relatives or households who are facing eviction within 14 days. Households that are forced to live in a place not meant for human habitation. Having no primary nighttime residence. People who are fleeing or attempting to flee a domestic violence situation.
Types and Level of Assistance	<p>Assistance preparing a housing search plan and list of local landlords. For those clients that demonstrate that they need more assistance and support to find housing, the supportive service will be provided to meet the level of need. Evaluate the household's current resources, problem-solving abilities, and financial life skills, then provide the appropriate amount of assistance to ensure the greatest chance of successful transition to independence after program exit. When assistance ends, participants should have developed a natural support system, if possible, that will allow them to address obstacles that might later arise with employments, childcare, transportation or financial management. Participants will also need to know how to navigate multiple systems, so <i>other housing services</i> should consist of arranging, coordinating, and monitoring the delivery of individualized services to facilitate housing stability. Rather than simply making referrals to programs, there will be times that we will need to walk participants through how to access services on their own and ensure that any issues with access are resolved before exit. Connections to Mainstream Resources <i>that are appropriate to addressing barriers to housing retention</i>. We will also provide resources and information through our newsletter, webpage and mailings on budgeting, credit repair and debt management. We will also provide</p>

information on basic home repair, weatherization and home safety tips. This information will be available to all our Samish members and to other Native families that have access to the internet. Homelessness Prevention - short term rental assistance to defray rent and utility bills. Emergency Assistance - to establish stable housing, emergency shelter will be offered for up to four (4) weeks. Emergency assistance will also be used to relocate families when it has been determined that current living situations are not decent, safe or sanitary.

APR : Describe Accomplishments  
 In 2019, we were able to provide assistance to 49 low income native families with housing search, landlord mitigation, financial assistance, emergency housing support and transportation assistance for those families that lived in rural areas of their community and elders that were not able to get to medical appointments and cultural events. We also provided assistance to 51 households that were enrolled in our Tenant Based Rental Assistance Program

Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of <b>Households</b> to be served in Year	75

APR: If the program is behind schedule, explain why  
 We added dollars to the Rental Assistance line item, for we found there to be a greater needed than what we had anticipated.

**Uses of Funding:**  
 The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$232,166.21	\$0.00	\$232,166.21	\$293,374.89	\$0.00	\$293,374.89

**2019-0019 : Housing Management**

Program Name:	Housing Management
Unique Identifier:	2019-0019
Program Description (continued)	The provision of management services for affordable housing, including preparation of work specifications, the cost of operation and maintenance of units developed with funds provided under Native America Housing and Self-Determination Act (NAHASDA) and management of affordable housing projects.
Eligible Activity Number	(19) Housing Management Services [202(4)]
Intended Outcome Number	(6) Assist affordable housing for low income households
APR: Actual Outcome Number	(6) Assist affordable housing for low income households
Who Will Be Assisted	Samish Tribal members and enrolled members of Federally Recognized Indian Tribes that meet income eligibility requirements and live in Samish Tribes 10-County service area.
Types and Level of Assistance	(1) Preparation of work specifications for affordable housing; (2) Loan processing for affordable housing; (3) Inspections for affordable housing; (4) Tenant selection for affordable housing; (5) Management of tenant-based and project-based rental assistance; (6) Mediation programs for landlord-tenant disputes for affordable housing; (7) Hiring of grants writers for affordable housing applications; (8) Operating assistance for NAHASDA-assisted units to include maintenance and utilities.
APR : Describe Accomplishments	In 2019, we provided 49 tribal households, with rental assistance and housing inspections. We also provided 51 tribal household families with housing inspections and rental assistance in our Tenant Based Rental Assistance Program.

Planned and Actual Outputs for 12-Month Program Year	<b>Planned</b>	<b>APR - Actual</b>
	Number of	75

	<b>Households to be served in Year</b>
APR: If the program is behind schedule, explain why	Use of Funding. When we developed our 2019 budget we thought we would have housing stock and staff time would be charged to rental assistance. When we realized that we would not have housing stock, staff time was charged to Housing Management.

**Uses of Funding:**

The Uses of Funding table information can be entered here for each individual program or can be entered for all programs within Section 5(b): Uses of Funding. Changes to data on either page location will update in both Section 3: Program Descriptions and Section 5(b): Uses of Funding accordingly.

Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$77,064.47	\$0.00	\$77,064.47	\$226,970.96	\$0.00	\$226,970.96

**2019-0021 : Community Center**

Program Name:	Community Center				
Unique Identifier:	2019-0021				
Program Description (continued)	The Community Center will be a place for all residents to gather for celebrations, community awareness, cultural events, and other activities for families that live in our affordable housing units. Some of the activities will focus on isolation prevention (for our elders) and as a place of relief in instances of community tragedies. Staff will provide outreach to residents through participation in annual events in the community. Safety demonstrations, home maintenance and education training will be provided in a class room setting. All services offered at the Community Center will be available to all clients participating in our housing programs.				
Eligible Activity Number	(22) Model Activities [202(6)]				
Intended Outcome Number	(12) Other-must provide description in the box below If Other: The Community Center will be used by residents of our permanent affordable housing project, and clients that participate in our TBRA and Homelessness Prevention/Rapid Rehousing Program.				
APR: Actual Outcome Number	(12) Other-must provide description in the box below If Other: The Community Center was not built in 2019.				
Who Will Be Assisted	Low Income Native American Families				
Types and Level of Assistance	Home safety demonstrations, home ownership education, home maintenance skills, educational training and financial literature. The Community Center is a new construction. The footprint for the building is approximately 800-1000 Sq. ft. The total floor area may be up to 2000 Sq. Ft. The main floor will be opened, with a kitchen area and two bathrooms. The upstairs will be a one bedroom unit for the Resident Manager, who will live on site. Outside there will be a play ground and a fire pit.				
APR : Describe Accomplishments	The Community Center was not built in 2019				
Planned and Actual Outputs for 12-Month Program Year	<table border="1"> <thead> <tr> <th>Planned</th> <th>APR - Actual</th> </tr> </thead> <tbody> <tr> <td colspan="2">The output measure being collected for this eligible activity is dollars. The dollar amount should be included as an other fund amount listed in the Uses of Funding table.</td> </tr> </tbody> </table>	Planned	APR - Actual	The output measure being collected for this eligible activity is dollars. The dollar amount should be included as an other fund amount listed in the Uses of Funding table.	
Planned	APR - Actual				
The output measure being collected for this eligible activity is dollars. The dollar amount should be included as an other fund amount listed in the Uses of Funding table.					
APR: If the program is behind schedule, explain why	Samish Indian Nation continues to work on a mixed-income housing development on its 2-acre property in Anacortes, Washington. The City of Anacortes is in the midst of a complete overhaul of its development regulations, which was expected to be completed by the end of 2018, however this did not happen until August 2019. The new regulations have provided additional development potential for the property. We are currently working with a design firm Travois Design to design the property based off the new regulations. At the current state of design, we expect to be able to construct up to 20 single/-story cottage-style homes of about 1100 sq. ft, each with two bedrooms and 1 1/2 baths and a Community Center of about 1000 sq. ft.				

**Uses of Funding:**

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Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
\$153,867.58	\$0.00	\$153,867.58	\$0.00	\$0.00	\$0.00

**Maintaining 1937 Act Units, Demolition, and Disposition**

Maintaining 1937 Act Units	Does not apply
Demolition and Disposition	Does not apply

**Budget Information**

**Sources of Funding**

Funding Source	Estimated(IHP) /Actual(APR)	Amount on hand at beginning of program year (F)	Amount to be received during 12-month program year (G)	Total sources of funds (H=F+G)	Funds to be expended during 12-month program year (I)	Unexpended funds remaining at end of program year (J=H-I)	Unexpended funds obligated but not expended at end of 12-month program year (K)
	Estimated	\$2,776,814.84	\$645,878.01	\$3,422,692.85	\$3,422,692.85	(\$0.00)	
<b>IHBG Funds:</b>	Actual	\$2,868,539.60	\$938,171.00	<b>\$3,806,710.60</b>	\$976,490.79	<b>\$2,830,219.81</b>	\$2,830,219.81
	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>IHBG Program Income:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Title VI:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Title VI Program Income:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00		\$0.00	\$0.00	\$0.00	
<b>1937 Act Operating Reserves:</b>	Actual	\$0.00		<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00		\$0.00	\$0.00	\$0.00	
<b>Carry Over 1937 Act Funds:</b>	Actual	\$0.00		<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00		\$0.00	\$0.00	\$0.00	
<b>LEVERAGED FUNDS</b>							
	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>ICDBG Funds:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Other Federal Funds:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00

	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>LIHTC:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Non-Federal Funds:</b>	Actual	\$0.00	\$0.00	<b>\$0.00</b>	\$0.00	<b>\$0.00</b>	\$0.00
	Estimated	<b>\$2,776,814.84</b>	<b>\$645,878.01</b>	<b>\$3,422,692.85</b>	<b>\$3,422,692.85</b>	<b>(\$0.00)</b>	<b>\$0.00</b>
<b>Total:</b>	<b>Actual</b>	<b>\$2,868,539.60</b>	<b>\$938,171.00</b>	<b>\$3,806,710.60</b>	<b>\$976,490.79</b>	<b>\$2,830,219.81</b>	<b>\$2,830,219.81</b>

Uses of Funding

Program Name	Unique Identifier	Prior and current year IHBG (only) funds to be expended in 12-month program year (L)	Total all other funds to be expended in 12-month program year (M)	Total funds to be expended in 12-month program year (N=L+M)	Total IHBG (only) funds expended in 12-month program year (O)	Total all other funds expended in 12-month program year (P)	Total funds expended in 12-month program year (Q=O+P)
Construction of Rental Housing	2019-0004	\$2,279,417.05	\$0.00	\$2,279,417.05	\$286.70	\$0.00	\$286.70
Down Payment - Closing Cost	2019-0013	\$30,924.13	\$0.00	\$30,924.13	\$48.00	\$0.00	\$48.00
Tenant Based Rental Assistance	2019-0017	\$495,843.63	\$0.00	\$495,843.63	\$340,994.55	\$0.00	\$340,994.55
Housing and Support Services	2019-0018	\$232,166.21	\$0.00	\$232,166.21	\$293,374.89	\$0.00	\$293,374.89
Housing Management	2019-0019	\$77,064.47	\$0.00	\$77,064.47	\$226,970.96	\$0.00	\$226,970.96
Community Center	2019-0021	\$153,867.58	\$0.00	\$153,867.58	\$0.00	\$0.00	\$0.00
Planning and Administration		\$153,327.43	\$0.00	\$153,327.43	\$114,815.69	\$0.00	\$114,815.69
Loan Repayment (describe in 3 & 4 below)		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total</b>		<b>\$3,422,610.50</b>	<b>\$0.00</b>	<b>\$3,422,610.50</b>	<b>\$976,490.79</b>	<b>\$0.00</b>	<b>\$976,490.79</b>

APR	Does not apply
APR	Does not apply

Other Submission Items

Useful Life/Affordability Period(s)	Indian Housing Block Grant (IHBG) Funds Invested Affordability Period Under \$5,000 6 Months \$5,000 - \$15,000 5 Years \$15,001 - \$40,000 10 Years Over \$40,000 15 Years New construction or acquisition of newly constructed house 20 years.
Model Housing and Over-Income Activities	Samish Indian Nation will build a Community Center, which will be used by residents of our permanent affordable housing project, and clients that participate in our TBRA and Homelessness Prevention/Rapid Rehousing Program. The Community Center will be 800-1000 square feet, with a total floor area up to 2000 square feet. The bottom floor of the Center will be an open area, with a kitchen and bathroom. The upstairs will be a one bedroom unit which will be occupied by our on-site Resident Manager. The grounds on the outside will have a common area for residents, a playground and a fire pit.
Tribal and Other Indian Preference Does the tribe have a preference policy?	YES  Samish Tribal Members will have first preference for all services offered through our Housing Department. However, if funds allow, we will provide services to other Native Households that are enrolled in a Federal recognized Indian Plan.
Anticipated Planning and Administration Expenses Do you intend to exceed your allowable spending cap for	NO

Planning and Administration?			
Actual Planning and Administration Expenses Did you exceed your allowable spending cap for Planning and Administration?	NO		
Does the tribe have an expanded formula area?:	NO		
Total Expenditures on Affordable Housing Activities:		<b>All AIAN Households</b>	<b>AIAN Households with Incomes 80% or Less of Median Income</b>
	<b>IHBG Funds</b>	\$0.00	\$0.00
	<b>Funds from Other Sources</b>	\$0.00	\$0.00
For each separate formula area, list the expended amount		<b>All AIAN Households</b>	<b>AIAN Households with Incomes 80% or Less of Median Income</b>
	<b>IHBG Funds</b>	\$0.00	\$0.00
	<b>Funds from Other Sources</b>	\$0.00	\$0.00

**Indian Housing Plan Certification Of Compliance**

In accordance with applicable statutes, the recipient certifies that it will comply with Title II of the Civil Rights Act of 1968, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and other federal statutes, to the extent that they apply to tribes and TDHEs, see 24 CFR 1000.12.	YES
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
The recipient 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
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
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
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

**Tribal Wage Rate Certification**

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.	YES
2. You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.	
3. You will use Davis-Bacon and/or HUD determined wage rates	

when required for IHBG-assisted construction except for the activities described below.

4. List the activities using tribally determined wage rates:

**Self Monitoring**

Do you have a procedure and/or policy for self-monitoring?:

YES

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?:

NA

Did you conduct self-monitoring, including monitoring sub-recipients?:

YES

Self-Monitoring Results: Describe the results of the monitoring activities, including corrective actions planned or taken.

2019 OVERVIEW SELF-MONITORING RESULTS This year Samish has continued using the self-monitoring plans for recipients, as provided by HUD on their website on the Grant Oversight and Monitoring page, to complete our required annual self-monitoring. During this year we completed the following monitoring plans as applicable to current Samish NAHASDA programs and any areas of non-compliance or improvements needed are noted: A. APR & IHP Compliance Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A B. Draft Lead-Based Paint Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A C. Environmental Review Compliance Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A Comment: Completed corrective action plan identified in 2018. D. Organization & Structure Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A Comments: Housing Director will be working to implement a new procedure for evaluating criminal background check results in a standard way to create a more uniform system not reliant on the single case manager's interpretation; it is hoped this effort will better meet the needs of our community and also better identify criminal barriers in serving our community. E. Procurement & Contract Administration Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A Comments: We do not currently directly address Indian Preference, Section 3, and protests and complaints, directly in our Finance Policy, but meet with requirements in our practices. A future revision of the Finance Policy is planned, and we will consider creating separate clauses within our Finance policy that specifically address these areas. F. Section 504 Accessibility Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A G. IHBG Self-Monitoring Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A H. Admissions & Occupancy Issue: We identified a single failure in implementing procedure for a possible a conflict of interest for a Rental Assistance client that was the nephew of an employee. In this isolated occurrence, the client failed to disclose the conflict during their application process. Corrective Action Plan/Taken: The conflict of interest procedures per our policy were followed and declaration was published once discovered. In order to ensure clarity in this process for the future, the program has now included the full definition of immediate family in both the application documents for the client to review prior to their declaration and in the enrollment verification form. Comments: Additionally, the Program will look offering clients rental insurance as an added benefit in 2020. I. Financial & Fiscal Management (including Appendixes 1-8) Issue: No areas of non-compliance or improvement noted. Corrective Action Plan/Taken: N/A Comments:

**Inspections**

Activity (A)	Total number of Units (B)	Units in standard condition (C)	Units needing rehabilitation (D)	Units needing to be replaced (E)	Total number of units inspected (F=C+D+E)
<b>1937 Housing Act Units:</b>					
a. Rental	0	0	0	0	0



b. Homeownership	0	0	0	0	0
c. Other	0	0	0	0	0
<b>1937 Act Subtotal:</b>	0	0	0	0	0
<b>NAHASDA Assisted Units:</b>					
a. Rental	0	0	0	0	0
b. Homeownership	0	0	0	0	0
c. Rental Assistance	100	100	0	0	100
d. Other	0	0	0	0	0
<b>NAHASDA Subtotal:</b>	100	100	0	0	100
<b>Total:</b>	100	100	0	0	100

2. Did you comply with your inspection policy? YES

**Audits**

1. Did you expend \$750,000 or more in total Federal awards during the previous fiscal year ended (24 CFR 1000.544) ? YES  
 If Yes, an audit is required to be submitted to the Federal Audit Clearinghouse. If No, an audit is not required.

**Public Availability**

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

If you are a TDHE, did you submit this APR to the Tribe Not Applicable

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

Summarize any comments received from the Tribe and/or the citizens : There were no comments received from Samish Citizens

**Jobs Supported By NAHASDA**

Number of Permanent Jobs Supported by Indian Housing Block Grant Assistance(IHBG): 6

Number of Temporary Jobs Supported by Indian Housing Block Grant Assistance(IHBG): 0

Narrative (Optional):



*Samish Indian Nation*

## **ATTENTION**

The Samish Indian Nation Housing Department is required to provide public notice and opportunities to review the 2020 Indian Housing Plan.

If you would like to request a copy by mail or email, please contact Samish Indian Nation's Housing Director, Sharon Paskewitz at [Spaskewitz@samishtribe.nsn.us](mailto:Spaskewitz@samishtribe.nsn.us) or call at 360-726-3366.

Date Posted: September 25, 2019

Date Pulled: October 25, 2019

Notice Posted: Samish Indian Nation Health and Human Services Division  
Samish Indian Nation Administrative Building



**Samish Indian Nation  
Confidential Request for Tribal Enrollment Verification**

The following is a "Release of Information" regarding Verification of Enrollment:

Date: \_\_\_\_\_ Requested by: Wendy Kolppa, Health & Human Services Support Specialist

Tribal Member Name: \_\_\_\_\_

Enrollment Number: \_\_\_\_\_

Tribal Member Date of Birth: \_\_\_\_\_

Enrolled:  Yes  No

Does enrolled Tribal Member have an "immediate" family member that is:

- A member of Samish Indian Nation Tribal Council
- A member of the Samish Indian Nation Housing Committee
- Currently Employed with Samish Indian Nation
- NONE

Please indicate below the "immediate" relationship and the person(s) name that is related to the Tribal Member:

<input type="checkbox"/>	Spouse/Domestic Partner		<input type="checkbox"/>	Aunt	
<input type="checkbox"/>	Father		<input type="checkbox"/>	Half Sister/brother	
<input type="checkbox"/>	Mother		<input type="checkbox"/>	First Cousin	
<input type="checkbox"/>	Sister		<input type="checkbox"/>	Niece/Nephew	
<input type="checkbox"/>	Brother		<input type="checkbox"/>	Sister/Brother In-law	
<input type="checkbox"/>	Son		<input type="checkbox"/>	Father/Mother In-law	
<input type="checkbox"/>	Daughter		<input type="checkbox"/>	Daughter/Son In-law	
<input type="checkbox"/>	Grandparent		<input type="checkbox"/>	Step Father/Mother	
<input type="checkbox"/>	Grandchild		<input type="checkbox"/>	Step Sister/Brother	
<input type="checkbox"/>	Uncle		<input type="checkbox"/>		

Enrollment Officer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# SAMISH INDIAN NATION HOUSING DEPARTMENT

715 Seafarers Way STE 103, Anacortes, Washington 98221  
(360) 899-5282 FAX: (360) 899-5193

## Tenant Based Rental Assistance (TBRA) Program

**You have 30 days from the date of application to return your paperwork**

Please complete and sign all pages of the attached application, including the Authorization(s) for Release of Information. Incomplete applications will not be accepted and will be returned for completion. Please provide the following verification for **all** household members:

### 1. INCOME

All sources of income earned or received (social security, disability payments, workman's compensation, wages, retirement benefits, self-employment, monthly child support, TANF welfare) payments excluding food stamps, etc.). Include proof of **CURRENT**, and two (2) previous month's wages. Bank statements that show the source of direct deposit is acceptable, check stubs, **CURRENT** Benefit letter(s), and W-2's is some of the documentation accepted.

### 2. ASSETS

All checking accounts, savings accounts, real estate, investments, retirement accounts, mobile homes, recreation vehicles, money market accounts, savings bonds, CDs etc. must be listed in the "Asset Detail" section of the Household Information Worksheet.

### 3. BANK STATEMENTS

**CURRENT** and previous two (2) months of all bank statements. **ALL PAGES**

## REQUIRED DOCUMENTATIONS FOR ALL HOUSEHOLD MEMBERS:

### 1. SOCIAL SECURITY NUMBERS FOR ALL HOUSEHOLD MEMBERS HAVE BEEN VERIFIED

Verified by Housing Staff:

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date:

### 2. PHOTO I.D.

Photo identification is required for every household member age eighteen (18) and older. Tribal ID is an acceptable, preferred identification for the primary applicant (Tribal member(s), Driver's License, Veteran ID, School ID.

### 3. BIRTH CERTIFICATES

A copy is required for every household member under the age of 18.

### 4. BACKGROUND/TENANT SCREENING

A Screening is required for each adult household member (18+) being added to your lease. Make sure you fill out each section and sign and date each section that requires that you do so.

## Samish Indian Nation Tenant Based Rental Assistance Application

Head of Household: \_\_\_\_\_ County: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment Number: \_\_\_\_\_

Last four (4) digits of your Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_ WA \_\_\_\_\_

City State Zip Code

Telephone Numbers: \_\_\_\_\_

Home

Work

Message

### For Samish Tribal Members only:

Does enrolled Tribal Member have an "immediate" family member that is:

- A member of Samish Indian Nation Tribal Council
- A member of the Samish Indian Nation Housing Committee
- Currently Employed with Samish Indian Nation
- NONE

Please indicate below the "immediate" relationship and the person(s) name that is related to the Tribal Member:

<input type="checkbox"/>	Spouse/Domestic Partner	<input type="checkbox"/>	Aunt
<input type="checkbox"/>	Father	<input type="checkbox"/>	Half Sister/brother
<input type="checkbox"/>	Mother	<input type="checkbox"/>	First Cousin
<input type="checkbox"/>	Sister	<input type="checkbox"/>	Niece/Nephew
<input type="checkbox"/>	Brother	<input type="checkbox"/>	Sister/Brother In-law
<input type="checkbox"/>	Son	<input type="checkbox"/>	Father/Mother In-law
<input type="checkbox"/>	Daughter	<input type="checkbox"/>	Daughter/Son In-law
<input type="checkbox"/>	Grandparent	<input type="checkbox"/>	Step Father/Mother
<input type="checkbox"/>	Grandchild	<input type="checkbox"/>	Step Sister/Brother
<input type="checkbox"/>	Uncle	<input type="checkbox"/>	

## Household Composition

List all household members who will be living with you.

Household Member	Sex	Date of Birth	Relationship to Head of Household	Last 4 digits of SS Number	Tribal Affiliation	Enrollment Number	Disability Yes or No

### NAHASDA regulations require disclosure of all household income and assets.

**Earned income:** Wages from employment, self-employment, compensation for personal services, state payee, etc.

Household Member	Type of Income	Source of Income (Person and/or company name)	Amount (per hour/month/year)
			\$
			\$
			\$
			\$

**How often do you get paid?**     Weekly     Every other week     Two times per Month

**Unearned income:** Social Security, SSI, Veterans Benefits, Retirement, Pension, Annuities, Death Benefits, Alimony, Child Support, Grant Assistance (GA/GAF/State Welfare) Per Capita, Elders Stipend, Gifts, etc.

Household Member	Type of Unearned Income	Source of Unearned Income	Amount
			\$
			\$
			\$
			\$

**How often do you receive this?** \_\_\_\_\_

**Assets:** Notes, Bonds, Bank Deposits, Savings Certificates, Dividends, Rental Income, Royalties, Estates, Trust Funds, Cash on Hand, Savings Account, Checking Accounts, etc.

Household Member	Source/Type	Address	Amount
			\$
			\$
			\$

**Education:** Student Grants, Scholarships, Higher Education, Loans, etc.:

Household Member	Source/Type	Start to End	Amount
			\$
			\$
			\$

**If you answer YES, to the questions below, you must submit documentation to qualify for deductions**

- Do you pay childcare to someone that does not reside in your home? Yes  No
- Do you travel 25 miles or more one way to work or school? Yes  No
- Do you have a household member attending college 12 credit hours? Yes  No
- Do you or a member of your household have a disability? Yes  No
- Do you have ongoing medical expenses that are 3% more than your annual income? Yes  No

**General Questions:** Please read answer the following questions carefully:

- 1) Do you or a member of your household have a disability that requires a unit with special features? Yes   
No
- 2) Have you ever been evicted? Yes  No   
a. If yes, please provide the Date and Address \_\_\_\_\_  
\_\_\_\_\_
- 3) Do you currently rent or own the home you are living in?  
RENT  OWN
- 4) Have you sold or transferred any real estate in the past two years?  
Yes  No   
If yes please explain: \_\_\_\_\_
- 5) Does anyone outside of your home pay your bills or supplement your income? Yes   
No

6) Have you or any adult member of your household ever used a different name or social security numbers other than listed on this application?

Yes  No

If yes, list the name and/or social security number: \_\_\_\_\_

7) Have you or any member of your household been convicted of a crime or criminal activity?

Yes  No

If yes please explain: \_\_\_\_\_

8) Have you or any member of your household been arrested or convicted of a crime involving drugs? Yes

No

If yes please explain: \_\_\_\_\_

9) Have you or any member of your household been arrested or convicted for sexual assault?

Yes  No

If yes please explain: \_\_\_\_\_

10) Have you or any member of your household been required to register as a sex offender?

Yes  No

If yes please explain: \_\_\_\_\_

11) Do you or any member of your household owe Samish Indian Nation any money? Yes

No

If so please explain: \_\_\_\_\_

12) Have you or any member of your household ever received Samish Indian Nation housing assistance?

Yes  No

If yes, please list dates: \_\_\_\_\_

13) Have you or any member of your household ever lived in federally assisted housing?

Yes  No

If yes, please list dates: \_\_\_\_\_

14) Have you or any member of your household ever lived on a Reservation?



Yes  No

If yes, Which one: \_\_\_\_\_

15) Do you or any member of your household owe money to any Housing Authority in connection with participation in a federally assisted housing program (Section 8)

Yes  No

If Yes, please list the name of the Housing Authority: \_\_\_\_\_

16) Have you or any member of your household ever committed fraud in a federally assisted housing program or was requested to repay money for knowingly misrepresenting information pertinent to such programs?

Yes  No

If Yes, please explain: \_\_\_\_\_

**CERTIFICATION SIGNATURES:**

I certify that all information provided on this application is accurate and complete. I understand that I must report to SINHD in writing, of any changes in my household composition or household income. I certify that the Unit I am applying for will be my principal residence and that I will not obtain duplicated Federal housing assistance while I am participating in SINHD Program. I know that I am required to cooperate in supplying all information needed to determine my eligibility. Cooperation includes attending pre-scheduled meetings, keeping SINHD informed of my current mailing address, completing and signing all required forms. I understand that knowingly supplying false, incomplete or inaccurate information is punishable under Title 18 Parts 1 Chapter 47 "Fraud and False Statements" and shall be fined under this title or imprisoned not more than one year, or both.

Head of Household: \_\_\_\_\_  
Signature Date

Spouse or other Adult \_\_\_\_\_  
Signature Date

Other Adult Member: \_\_\_\_\_  
Signature Date

Other Adult Member: \_\_\_\_\_  
Signature Date

**HOUSING STAFF:**

**Staff Initials:** \_\_\_\_\_

**Date Rcv'd:** \_\_\_\_\_

**Time Rcv'd:** \_\_\_\_\_

## Jenna Burnett

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**From:** Jenna Burnett  
**Sent:** Friday, November 22, 2019 2:35 PM  
**To:** Sharon Paskewitz  
**Cc:** Dana Matthews  
**Subject:** RE: NAHASDA Self-Monitoring Update

Hi Sharon,

It is great to hear you were able to get all those recommendations addressed so quickly!

I would love to have copies of the new forms you created to include in the monitoring packets this year. It will show how fast you developed and implemented some of our comments for program improvements.

Thank you so much for keeping me in the loop, and I hope you have a great day!

Jenna



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**From:** Sharon Paskewitz <spaskewitz@samishtribe.nsn.us>  
**Sent:** Friday, November 22, 2019 12:07 PM  
**To:** Jenna Burnett <jburnett@samishtribe.nsn.us>  
**Cc:** Dana Matthews <dmatthews@samishtribe.nsn.us>  
**Subject:** NAHASDA Self-Monitoring Update  
**Importance:** High

Good Afternoon Jenna

I wanted to follow up with you regarding our recent self-monitoring and your recommendations:

1. Criminal History and the Amount of Time you can stay in the program – these policies have been revised and are now sitting with the HHS Director for review. As soon as HHS Director has reviewed, I will send to Housing Committee then to Tribal Council for Final Approval
2. Immediate Family Members definition has been updated and added to the TBRA Application and Enrollment Form. Do you want me to send you a copy?
3. Staff are now providing Clients with 60 days' notice of HUD inspection. Do you want to see the notice we created?
4. Questions about policy interpretation "Folder" has been created and is in the housing drive folder.

Thank you.

**Sharon Paskewitz** | Housing Director - Samish Indian Nation  
PO Box 217, 715 Seafarers Way, Suite 103, Anacortes, WA 98221  
Office: 360-726-3366 ext. 3366 | E-mail: [spaskewitz@samishtribe.nsn.us](mailto:spaskewitz@samishtribe.nsn.us)

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