

Section 1: Cover Page

- (1) Grant Number: 55IH5318320
- (2) Recipient Program Year: 10/1/2023 - 9/30/2024
- (3) Federal Fiscal Year: 2024
- (4) ☐ Initial Plan (Complete this Section then proceed to Section 2)
- (5) ☐ Amended Plan (Complete this Section and Section 8 if applicable)
- (6) ☒ Annual Performance Report (Complete items 27-30 and proceed to Section 3)
- (7) ☐ Tribe
- (8) ☒ TDHE
- (9) Name of Recipient: Yakama Nation Housing Authority
- (10) Contact Person: Preston Harrison
- (11) Telephone Number with Area Code (999) 999-9999: 509-877-6171
- (12) Mailing Address: 611 S. Camas Avenue
- (13) City: Wapato
- (14) State: WA
- (15) Zip Code (99999 or 99999-9999): 98951
- (16) Fax Number with Area Code (999) 999-9999: 509-877-7830
- (17) Email Address preston@ynha.com
- (18) If TDHE, List Tribes Below:
 - ☒ Confederated Tribes and Bands of the Yakama Nation
- (19) Tax Identification Number: 910786940
- (20) UEI Number: F824ZJB5ZD46
- (21) CCR/SAM Expiration Date (MM/DD/YYYY): 10/02/2025
- (22) IHBG Fiscal Year Formula Amount: \$7,442,464
- (23) Name of Authorized IHP Submitter: Andrea Matheny
- (24) Title of Authorized IHP Submitter: Executive Director
- (25) Signature of Authorized IHP Submitter:
- (26) IHP Submission Date (MM/DD/YYYY): 07/01/2024
- (27) Name of Authorized APR Submitter: Preston Harrison
- (28) Title of Authorized APR Submitter: Interim Executive Director
- (29) Signature of Authorized APR Submitter: Preston Harrison
- (30) APR Submission Date (MM/DD/YYYY): 01/21/2025

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

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

ONE YEAR PLAN ANNUAL PERFORMANCE REPORT

Section 2: Housing Needs

NAHASDA § 102(b)(2)(B)

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

	Check All That Apply	
(A) Type of Need	(B) Low-Income Indian Families	(C) All Indian Families
(1) Overcrowded Households	X	X
(2) Renters Who Wish to Become Owners	X	X
(3) Substandard Units Needing Rehabilitation	X	X
(4) Homeless Households	X	X
(5) Households Needing Affordable Rental Units	X	X
(6) College Student Housing		
(7) Disabled Households Needing Accessibility	X	X
(8) Units Needing Energy Efficiency Upgrades	X	X
(9) Infrastructure to Support Housing	X	X
(10) Other (specify below)		

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

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

Maintain safe, decent, affordable housing for eligible low-income Tribal families and non-low income families. Provide services to break the cycle of poverty by providing emergency housing and support self-sufficiency through community outreach (Native Night Out). Please reference section 3 for individual program benefiting the identified low-income families' needs.

(4) Geographic Distribution. Describe below how the assistance will be distributed throughout the geographic area and how this geographic distribution is consistent with the needs of low income families. *NAHASDA § 102(b)(2)(B)(i)*:

YNHA programs are designed for eligible Tribal Families in the approved service area: the Yakama Reservation, Yakima, Kittitas, Klickitat, Grant and portions of Franklin, Skamania counties, Washington, Wenatchee, WA and Celilo, Oregon.

Section 3: Program Descriptions

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

Planning and Reporting Program Year Activities

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

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

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

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

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

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

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

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

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

Rehabilitation	Units	All work completed and unit passed final inspection
Infrastructure	Dollars	Dollars spent (report in Uses of Funding table only)
(24) Infrastructure to Support Housing [202(2)]	Dollars	Dollars spent (report in Uses of Funding table only)
(25) Reserve Accounts [202(9)]	N/A	N/A

Outcome May Include

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

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

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

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

APR: REPORTING ON PROGRAM YEAR PROGRESS

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year. (NAHASDA § 404(b))

1.1. Program Name and Unique Identifier: 2024-01:Housing Management Services

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

Assistance to include preparation of work specifications and management of affordable housing Activities.

1.3. Eligible Activity Number(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

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

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

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Monitor, maintain, and enforce compliance by tenants with all policies and program requirements.

1.5 Actual Outcome Number(In the APR identify the actual outcome from the Outcome list.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Provide management oversight of staff positions including grant writers, Housing Manager, receptionist, occupancy, collections, and inspector. Monitor and enforce compliance of tenants with all program policy requirements.

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

Eligible tribal families who reside within the YNHA Service Area.

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

Provide management services for affordable housing and management of eligible tenants. This budget includes payroll for a grant writer and grant coordinator, Housing Management employees to include Manager, Receptionist, Occupancy, Grant Writers, Collections, inspector and two enforcement compliance specialists. Training Budget for staff: \$13,000.

1.8. APR(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):

Housing Management provided management oversight of all the housing units and ensured compliance with Policy. Staff (enforcement, collections, occupancy, grant writers) did attend training.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 549	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 549	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-02:Housing Services

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

Provide housing-related services for affordable housing, such as housing counseling in connection with rental or home ownership assistance, activities related to the provision of self-sufficiency and other services related to assisting owners, low income tribal families seeking affordable housing.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Assist and counsel tenants in developing necessary skills for unit up keep.

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Assist and counsel tenants with necessary skills and unit up keeping.

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

Eligible Tribal Families in need of housing assistance

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

Meet with tenants for referrals for alcohol and drug abuse, mental health crisis, credit counseling and notice of lease violations. Provide tenant training for home safety, tenant based rental assistance, homelessness prevention activities, financial literacy. To notify of YNHA service inspections, tenants referral support and outreach.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Housing services provided ***** drug/alcohol related incidence referrals, ***** mental health referrals to Yakama Nation Behavioral Health, credit counseling to financial literacy grant program and notice of lease violations. YNHA completed annual inspections of all units. Provided tenant incentives for tenants that maintained a good payment history and incentives for lowest income tenants during holidays.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 549	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 549	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-03:Housing Services - Ross

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

Provide for on-going ROSS grant activities, which are designed to support and assist tribal members in achieving self sufficiency. The grant document indicates a 25% match requirement, which is covered by in kind services, document provided to NW ONAP.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Ross Grant Deliverable Life Skills Financial Literacy Credit Counseling and Repair GED Higher Ed Job Search Placement Home Ownership Counseling Drug Alcohol Referrals Mental Health Referrals Home Maintenance Class Youth Program Transportation Referrals

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

ROSS delivers life skills, financial literacy, credit counseling, and repair GED higher education job search, placement home ownership counseling, drug/alcohol referrals, mental health referrals, home maintenance class , youth program transportation referrals.

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

Eligible Tribal Families within the YNHA service area.

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

ROSS grant program anticipated for PY 2023, has developed individual counseling and group training in a variety of areas such as: family budgeting, social service referrals, credit use, education goal setting, job search, job interviews, and the like. The YNHA IHP funds are allocated for services, which may overlap in the Housing Services area.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

ROSS program started June 2024 and YNHA hired Service Coordinator in July 2024. Services were provided for financial literacy, employment, and health wellness.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 20	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 35	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-04:FY 2023 THVASH Renewal

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

The YNHA THVASH program serves PBRA and TBRA. The YNHA will determine the level of assistance between the PBRA and TBRA options as needed.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(6) Assist affordable housing for low income households

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(5) Address homelessness

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

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

Low-income Native American Veterans

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

The YNHA will operate a PBRA/TBRA program for eligible Tribal Veterans. Est Total unit count for the PY: 20. All vouchers will subsidize the contracted units. The HA will mainly utilize PBRA but with the option of TBRA when the need arise.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

YNHA completed regular maintenance on HUD VASH units.

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

Planned Number of Units to be Completed in Year Under this Program: 15	Planned Number of Households To Be Served in Year Under this Program: 20	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 20	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-05:Weatherization Program, Homeowner

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

Provide weatherization audits and related services to homeowners within YNHA service area. Funds provided under this program are matching funds for a Washington state Department of Commerce Weatherization grant.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(10) Improve energy efficiency

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(10) Improve energy efficiency

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

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

Eligible Tribal Homeowner families within the YNHA service area.

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

Energy audits and follow-up to recommendation will be provided in accordance with the Washington state department of Commerce guidelines and will include addressing any energy efficiency issues within the home. This may include replacing HVAC units, replacing insulation, replacing bathroom vent fans, caulking, replacing or addressing exterior door seals, as well as other weatherization measures. The intended outcome is to upgrade existing homes in order to meet energy efficiency standards and to reduce energy consumption and ultimately reduce the cost occupancy, for low income families. YNHA may revise older less efficient Technology with newer more efficient appliances, HVAC, windows, insulation and so on. A signification amount of focus is centered on mold, and improving ventilation within the wet areas in order to reduce mold.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Weatherization cleaned and refurbished ranges fans, insulation, LED lights, door repairs and replacements, window repairs and replacements, installing ERV fans, roof replacements, floor repairs, electrical panel replacement and repairs, exterior replacements.

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

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

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

1.1. Program Name and Unique Identifier: 2024-06:Weatherization Program, Rentals

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

Provide weatherization audits and related services to YNHA housing stock within the YNHA service area. Funds provided under this program are matching funds for a Washington State Department of Commerce weatherization grant.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(5) Rehabilitation of Rental Housing [202(2)]

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

(10) Improve energy efficiency

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(10) Improve energy efficiency

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

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

Eligible Tribal Families rental units within the YNHA service area.

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

Energy Audits and follow up to recommendations will be provided in accordance with the Washington State Department of Commerce guidelines and will include addressing any energy efficiency issues within the homes. This may include replacing HVAC units, replacing insulation, replacing bathroom vent fans, caulking, replacing or addressing exterior door seals, as well as other weatherization related measures. The intended outcome is to upgrade existing homes in order to meet energy efficiency standards, and to reduce energy consumption and ultimately reduce the cost of occupancy, for low income families. YNHA may replace older less efficient technology with newer more efficient appliances, HVAC, windows, insulation, and so on. A significant amount of focus is centered on mold, and improving ventilation within the wet areas in order to reduce mold.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Weatherization replaced washers in units.

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

Planned Number of Units to be Completed in Year Under this Program: 5	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 15	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-07:Emergency Housing for Homeless

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

Emergency Housing for Homeless.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(5) Address homelessness

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

Emergency Assistance for Homeless

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Provide emergency housing for homeless and prevent homelessness.

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

Low Income Native American Families

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

Provide emergency temporary placement for homeless individuals up to \$2,500 for shelter/hotel stays, once every 24 months per policy. Individuals must demonstrate low income, homelessness to be eligible for emergency temporary placement not to exceed 30 days.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

YNHA has an excess need to serve homeless individuals and families and exceeded our anticipated outcome of serving 84 individuals in part from a fire that displaced many tribal members. YNHA actually assisted 145 applications that included families with children by providing temporary hotel stays and rental hotel stays, mortgage assistance.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 84	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 0	APR: Actual Number of Households Served in Program Year: 145	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-08:Crime Prevention

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

Security will be provided in YNHA properties. Assistance may be provided to tenants as needed or requested.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(11) Reduction in crime reports

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(11) Reduction in crime reports

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

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

Low Income Native American Families

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

YNHA will administer up to 7 employees to patrol parks to deter vandalism and observe activities contrary to the tenant lease agreement. They are responsible to document, observe and report disturbances to the appropriate governmental authority (ie. police, fire, 911). This budget funds 7 employees, vests, flashlights, streetlights, cell phone service and cell phones, fuel and repairs. Security officers patrolling YNHA properties, ensuring a reduction in vandalism, alcohol and drug parties, break-ins, thefts and so on. When a possible crime is identified security services will contact tribal police. Patrol officers will also periodically check on YNHA vehicles, equipment, offices, and other facilities. Officers will ensure previously evicted tenants are not back in YNHA Properties, work with police to enforce restraining orders, provide daily report logs.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

YNHA Security patrolled parks and reported on incidents such as thefts, alcohol/drug violations, vandalism, break-ins, etc. YNHA Security works with Yakama Nation Police to enforce restraining orders and criminal activity. YNHA employees 8 employees to complete Security activities. YNHA purchased flashlights, shirts, vehicle equipment, cell phone, fuel and repairs. Assist compliance with housing.

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

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

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

1.1. Program Name and Unique Identifier: 2024-09:Maintenance Warehouse

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

Maintenance warehouse employees, order, receive, stock safeguard and distribute supplies and materials for all work orders. They are responsible to ensure adequate maintenance supplies are on hand and available for active work orders.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

The maintenance warehouse stores, safeguards and documents and distributes supplies and materials to the 24 maintenance employees who complete landscape type activities, repairs and replace large appliances.

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Maintenance warehouse stores, safeguards and documents and distributes supplies and materials to YNHA employees. Perform annual inventory of tools, materials, and equipment.

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

Low Income Native American Families

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

Warehouse staff ensure supplies and materials are available for routine, regularly scheduled and emergency work orders. Maintenance staff are not sent to the store to purchase supplies. This budget includes wages and benefits, a new hand pallet jack and a computer workstation.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Maintenance warehouse stores, safeguards and documents and distributes supplies and materials to YNHA employees. Perform annual inventory of tools, materials, and equipment.

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

Planned Number of Units to be Completed in Year Under this Program: 0	Planned Number of Households To Be Served in Year Under this Program: 549	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 549	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-10:Operate & Maintenance of FCAS Units

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

Provide for the continued maintenance of FCAS units under YNHA management. Employment of maintenance professionals to conduct and carryout, maintenance and operations. Maintain water and sewer systems, maintain common areas in parks. Utility and internet assistance for 1937 Act units.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(2) Operation of 1937 Act Housing [202(1)]

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

(6) Assist affordable housing for low income households

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(3) Improve quality of substandard units

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

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

Low Income Native American Families residing in FCAS units.

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

Regular maintenance including monitoring smoke alarms, regular work order items including repairing plumbing leaks, electrical deficiencies, roof leaks, infestation issues, appliance repairs or replacements. Maintenance on street lights and street signs.

Landscaping activities to include maintenance of fences and gates, landscaping, lawn mowing, playground repairs. Routine vacant unit turnaround. Staff training amount of \$6,500. Training may include various subjects not limited to water and sewer management and certifications, equipment safety trainings, maintenance in coordination with inspections. These are units built with Operating 37 Act funds, some are converted New Mutual Help homes. Cost of utilities including electricity, sewer, garbage, and internet for 1937 Act units. Address as needed graffiti and vandalism.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Regular repair maintenance such as smoke alarms, regular work orders items including plumbing, electrical, infestation, appliances and roof leaks. Servicing septic, HVAC preventative maintenance. Landscaping activities including fencing and gates, lawn mowing, weed control, landscaping, water sewer management, playground repairs, and graffiti. Routine vacant unit turnaround. Schedule and conducted annual inspections. Several staff attended equipment safety training, water sewer, defensive driving, first aid, team building. Spring and Fall clean-up.

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

Planned Number of Units to be Completed in Year Under this Program: 281	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 281	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-11:Modernization FCAS Units

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

Modernization and rehab of Operating 37 Act units.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(3) Improve quality of substandard units

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(3) Improve quality of substandard units

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

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

Eligible Tribal Families living in current assisted stock units.

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

Rental units will be assessed for needs in Energy Efficiency including conservation matters, electrical, plumbing, HVAC and rehab and other tasks defined per annual inspections.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Maintenance completed HVAC replacements, venting, exhaust replacement, door replacement, kitchen/bathroom sink/toilet/cabinet/floor/shower replacements. Addressed all issues noted in the annual inspections. Cabinet and flooring replacements.

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

Planned Number of Units to be Completed in Year Under this Program: 10	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 13	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-12:Operation & Maintenance of NAHASDA Units

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

Operation and Maintenance of NAHASDA Units.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(6) Assist affordable housing for low income households

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(6) Assist affordable housing for low income households

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

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

Low-income eligible Tribal Families living within YNHA's Service Area

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

Maintenance schedules regular maintenance for NAHASDA units to include routine vacancy maintenance, addressing vandalism issues, replacing air filters, changing batteries in the fire alarms, fixing leaky faucets, landscaping, water testing, damaged locks, damaged boxes, spray wasps, garbage service, street sign cleaning and repairs, irrigation and sewer maintenance and other plumbing and maintenance items.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Performed regular maintenance of smoke alarms, work orders as needed for plumbing, electrical, infestation, appliances, and roof leaks. Inspections were completed, maintenance repaired emergency health and safety concerns immediately and conducted home repairs as needed. Maintain street lights and signs, mail buildings, playgrounds, irrigation and sewer and plumbing maintenance.

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

Planned Number of Units to be Completed in Year Under this Program: 268	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 268	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-13:Modernization NAHASDA Units

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

Modernization and rehab of NASHASDA

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(5) Rehabilitation of Rental Housing [202(2)]

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

(3) Improve quality of substandard units

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(3) Improve quality of substandard units

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

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

Eligible Tribal Families living in current assisted stock units.

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

Rental units will be assessed for needs in electrical, plumbing, HVAC and rehab due to extended use.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Maintenance completed HVAC, plumbing, and electrical needs. Also, addressed floor, venting, exhaust, door, and kitchen/bathroom sink/toilet/cabinets/shower replacements. Vinyl window replacements.

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

Planned Number of Units to be Completed in Year Under this Program: 10	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 16	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-14:Elder Home Repair Program

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

The Home Repair Program will extend the useful life of current affordable, privately owned elder housing stock. YNHA may provide grants, zero interest loans in accordance with the Home Repair and Useful Life Agreements, to qualified home owners.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(3) Improve quality of substandard units

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(3) Improve quality of substandard units

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

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

Privately-owned homes of low income elderly families with a preference for enrolled members of the Yakama Nation, and a secondary preference for other enrolled tribal members. Applicants must complete an application for consideration. LIMIT ONCE IN A LIFETIME GRANT PER TRIBAL MEMBER PER HOME.

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

Funding may be used only to pay costs for repairs and improvements which will remove identified health or safety hazards. Examples include 1. Installation or repair of sanitary disposal systems, together with related plumbing and fixtures, which will meet local health department requirements. 2. Energy conservation measures such as insulation, weatherization, or other energy efficient measures. 3. Repair or replacement of windows and doors. 4. Repair or replacement of heating system. 5. Minor electrical wiring. 6. Repair or replacement of roof. 7. Replacement of deteriorated siding where Not to exceed \$15,000 per project

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

YNHA completed 11 Elder Minor home repair applications. Repairs included well water pumps, septic drain fields, installed ramps, HVAC repair, drive ways, electrical replacements, replaced vinyl windows, replaced exterior doors, installed security doors, replaced flooring, bath/shower repair replacement.

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

Planned Number of Units to be Completed in Year Under this Program: 10	Planned Number of Households To Be Served in Year Under this Program: 0	Planned Number of Acres To Be Purchased in Year Under this Program: 0
APR: Actual Number of Units Completed in Program Year: 11	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

1.1. Program Name and Unique Identifier: 2024-15:Acquisition of Rental Units

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

Option for YNHA to negotiate purchasing homes from current homeowners due to homes that were succeeded to a non-enrolled person and that are on tribal trust land.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(3) Acquisition of Rental Housing [202(2)]

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

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Acquire home so unit can be used for low income family.

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

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

Intent was to acquire a homeowner property that could be repaired and used for a low-income family.

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

Low Income Tribal Families

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

Purchase homes to include into rental stock.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

Completed the purchase of the home and it is being brought back up to minimum standards.

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

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

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

1.1. Program Name and Unique Identifier: 2024-16:Elder Home Repair Program - 80-100%

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

The Elder Home Repair Program will extend the useful life of current affordable, privately owned elder housing stock. Funding may be used only to pay costs for repairs and improvements which will remove identified urgent health or safety hazards for 80-100% income families.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(3) Improve quality of substandard units

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(3) Improve quality of substandard units

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

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

Privately-owned homes of non-low income elderly families for enrolled members of the Yakama Nation. Applicants must complete an application for consideration. LIMIT ONCE IN A LIFETIME GRANT PER TRIBAL MEMBER PER HOME.

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

YNHA will provide urgent health and safety repairs such as lack of heat, water, sewer and air conditioning or other major health hazards to qualified homeowners between 80-100% income. Examples include: 1. Installation or repair of sanitary disposal systems, together with related plumbing and fixtures, which will meet local health department requirements. 2. Energy conservation measures such as insulation, weatherization, or other energy efficient measures. 4. Repair or replacement of heating/cooling system. 5. Major electrical wiring. 6. Repair of leaking roof. Not to exceed \$10,000 per project

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

No application were received by YNHA due to the housing authority having the DOT HAF grant. The YNHA HAF program assisted 41 homeowners.

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

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

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

The YNHA received a grant from the Department of Treasury for Homeowners. This grant covered all the needs for elder minor home repairs so no assistance was needed from YNHA IHP.

1.1. Program Name and Unique Identifier: 2024-17:Weatherization Program, Rentals - 80-100%

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

Provide weatherization audits and related services to YNHA housing stock within the YNHA service area. Funds provided under this program are matching funds for a Washington State Department of Commerce weatherization grant to serve 80-100% income families.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(5) Rehabilitation of Rental Housing [202(2)]

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

(10) Improve energy efficiency

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(10) Improve energy efficiency

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

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

Eligible Tribal Families rental units within the YNHA service area.

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

Energy Audits and follow up to recommendations will be provided in accordance with the Washington State Department of Commerce guidelines and will include addressing any energy efficiency issues within the homes. This may include replacing HVAC units, replacing insulation, replacing bathroom vent fans, caulking, replacing or addressing exterior door seals, as well as other weatherization related measures. The intended outcome is to upgrade existing homes in order to meet energy efficiency standards, and to reduce energy consumption and ultimately reduce the cost of occupancy, for low income families. YNHA may replace older less efficient technology with newer more efficient appliances, HVAC, windows, insulation, and so on. A significant amount of focus is centered on mold, and improving ventilation within the wet areas in order to reduce mold.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

None were completed for the year due to no applications received for this assistance.

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

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

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

No applications were received that meet the income qualifications.

1.1. Program Name and Unique Identifier: 2024-18: Weatherization Program, Homeowner 80-100%

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

Provide weatherization audits and related services to homeowners within YNHA service area. Funds provided under this program are matching funds for a Washington State Department of Commerce weatherization grant.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

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

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

(10) Improve energy efficiency

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(10) Improve energy efficiency

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

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

Eligible Tribal Homeowner Families within the YNHA service area.

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

Energy Audits and follow up to recommendations will be provided in accordance with the Washington State Department of Commerce guidelines and will include addressing any energy efficiency issues within the homes. This may include replacing HVAC units, replacing insulation, replacing bathroom vent fans, caulking, replacing or addressing exterior door seals, as well as other weatherization related measures. The intended outcome is to upgrade existing homes in order to meet energy efficiency standards, and to reduce energy consumption and ultimately reduce the cost of occupancy, for low income families. YNHA may replace older less efficient technology with newer more efficient appliances, HVAC, windows, insulation, and so on. A significant amount of focus is centered on mold, and improving ventilation within the wet areas in order to reduce mold.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

YNHA did not receive an applications for this type of assistance from homeowners. Also, YNHA received a grant from DOT for homeowners that met the need. The YNHA HAF program assisted 41 homeowners.

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

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

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

The YNHA received a grant from the Department of Treasury for Homeowners. This grant covered all the needs for elder minor home repairs so no assistance was needed from YNHA IHP.

1.1. Program Name and Unique Identifier: 2024-19:Wishram Gorge View Solar Project Low Income

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

To provide energy efficient solar panels to 44 low income homes at Wishram Heights. The solar project will be reimbursed by the Department of Energy.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(5) Rehabilitation of Rental Housing [202(2)]

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

(10) Improve energy efficiency

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(10) Improve energy efficiency

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

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

44 Low Income Native American Families.

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

The Wishram Gorge View Country Lop project will target 46 (44 low income and 2 Non-low Income) newly built homes on Yakama Nation tribally owned land located in Wishram Heights, Washington. Each of the 46 homes will receive roof mounted solar photovoltaic panels that will be roughly 4.74 kW in size with a combined total of 217.04 kW and be interconnected to the electrical grid through Klickitat County PUD.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

All 46 homes (44 low income and 2 non-low income) homes as Wishram Heights received 16 roof mounted solar panels per home that were interconnected to the Klickitat County PUD electrical grid.

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

Planned Number of Units to be Completed in Year Under this Program: 44	Planned Number of Households To Be Served in Year Under this Program:	Planned Number of Acres To Be Purchased in Year Under this Program:
APR: Actual Number of Units Completed in Program Year: 44	APR: Actual Number of Households Served in Program Year:	APR: Actual Number of Acres Purchased in Program Year:

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

1.1. Program Name and Unique Identifier: 2024-20:Wishram Gorge View Solar Project Over-Income

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

To provide efficient solar panels to 2 over-income homes at Wishram Heights.

1.3. Eligible Activity Number*(Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):*

(5) Rehabilitation of Rental Housing [202(2)]

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

(10) Improve energy efficiency

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

1.5 Actual Outcome Number*(In the APR identify the actual outcome from the Outcome list.):*

(10) Improve energy efficiency

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

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

2- Non-low Income (80%-100%) family homes at Wishram Heights. The solar project will be reimbursed by the Department of Energy.

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

The Wishram Gorge View Country Lop project will target 46 (44 low income and 2 Non-low Income) newly built homes on Yakama Nation tribally owned land located in Wishram Heights, Washington. Each of the 46 homes will receive roof mounted solar photovoltaic panels that will be roughly 4.74 kW in size with a combined total of 217.04 kW and be interconnected to the electrical grid through Klickitat County PUD.

1.8. APR*(Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.):*

All 46 homes (44 low income and 2 non-low income) homes as Wishram Heights received 16 roof mounted solar panels per home that were interconnected to the Klickitat County PUD electrical grid.

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

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

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

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

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

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

Ensure units are occupied, complete periodic inspections, operate in compliance with YNHA Maintenance Policy.

(2) Demolition and Disposition(NAHASDA § 102(b)(2)(A)(iv)(I-III), 24 CFR 1000.134)Describe any planned demolition or sale of 1937 Act or NAHASDA-assisted housing units. If the recipient is planning on demolition or disposition of 1937 Act or NAHASDA-assisted housing units, be certain to include the timetable for any planned demolition or disposition and any other information that is required by HUD with respect to the demolition or disposition:

Not applicable.

Section 5: Budgets

NAHASDA §§ 102(b)(2)(C), 404(b)

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

SOURCE	IHP				
	(A) Estimated amount on hand at beginning of program year	(B) Estimated amount to be received during 12-month program year	(C) Estimated total sources of funds (A+B)	(D) Estimated funds to be expended during 12-month program year	(E) Estimated unexpended funds remaining at end of program year (C-D)
1. IHBG Funds	\$594,320.00	\$10,059,999.00	\$10,654,319.00	\$9,133,420.00	\$1,520,899.00
2. IHBG Program Income	\$1,457,946.00	\$2,076,625.98	\$3,534,571.98	\$3,164,126.98	\$370,445.00
3. Title VI	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4. Title VI Program Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5. 1937 Act Operating Reserves	\$0.00		\$0.00	\$0.00	\$0.00
6. Carry Over 1937 Act Funds	\$0.00		\$0.00	\$0.00	\$0.00
7. ICDBG Funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8. Other Federal Funds	\$579,621.00	\$0.00	\$579,621.00	\$379,962.00	\$199,659.00
9. LIHTC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10. Non-Federal Funds	\$183,471.00	\$0.00	\$183,471.00	\$0.00	\$183,471.00
Total	\$2,795,358.00	\$12,136,624.98	\$14,931,982.98	\$12,677,508.98	\$2,254,474.00
TOTAL Columns C and H(2 through 10)			\$4,277,683.98		

SOURCE	APR					
	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F+G)	(I) Actual funds to be expended during 12-month program year	(J) Actual unexpended funds remaining at end of program year (H-I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	\$4,240,893.67	\$10,059,999.00	\$14,300,892.67	\$8,630,516.61	\$5,670,376.06	
2. IHBG Program Income	\$1,231,579.99	\$3,222,971.97	\$4,454,551.96	\$0.00	\$4,454,551.96	
3. Title VI			\$0.00		\$0.00	
4. Title VI Program Income			\$0.00		\$0.00	
5. 1937 Act Operating Reserves			\$0.00		\$0.00	
6. Carry Over 1937 Act Funds			\$0.00		\$0.00	
7. ICDBG Funds			\$0.00		\$0.00	
8. Other Federal Funds			\$0.00		\$0.00	
9. LIHTC			\$0.00		\$0.00	
10. Non-Federal Funds			\$0.00		\$0.00	
Total	\$5,472,473.66	\$13,282,970.97	\$18,755,444.63	\$8,630,516.61	\$10,124,928.02	
TOTAL Columns C and H(2 through 10)			\$4,454,551.96			

Notes:

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

d. For the IHP, describe any estimated leverage in Line 3 below (Estimated Sources or Uses of Funding). For the APR, describe actual leverage in Line 4 below Uses of Funding table below.

(2) Uses of Funding (NAHASDA § 102(b)(2)(C)(ii) (Note that the budget should not exceed the total funds on hand (Column C) and insert as many rows as needed to include all the programs identified in Section 3.

Actual expenditures in the APR section are for the 12-month program year.)

PROGRAM NAME	IHP			APR		
	(L) Prior and current year IHBG (only) funds to be expended in 12-month program year	(M) Total all other funds to be expended in 12-month program year	(N) Total funds to be expended in 12-month program year (L+M)	(O) Total IHBG (only) funds expended in 12-month program year	(P) Total all other funds expended in 12-month program year	(Q) Total funds expended in 12-month program year (O+P)
2024-01: Housing Management Services	\$852,356.00	\$0.00	\$852,356.00	\$984,991.72	\$0.00	\$984,991.72
2024-02: Housing Services	\$498,233.00	\$0.00	\$498,233.00	\$293,945.51	\$0.00	\$293,945.51
2024-03: Housing Services - Ross	\$12,500.00	\$77,250.00	\$89,750.00	\$12,650.29	\$0.00	\$12,650.29
2024-04: FY 2023 THVASH Renewal	\$0.00	\$339,212.00	\$339,212.00	\$85,940.01	\$0.00	\$85,940.01
2024-05: Weatherization Program, Homeowner	\$347,628.00	\$0.00	\$347,628.00	\$582,453.54	\$0.00	\$582,453.54
2024-06: Weatherization Program, Rentals	\$296,128.00	\$0.00	\$296,128.00	\$122,906.19	\$0.00	\$122,906.19
2024-07: Emergency Housing for Homeless	\$210,000.00	\$0.00	\$210,000.00	\$295,173.22	\$0.00	\$295,173.22
2024-08: Crime Prevention	\$442,026.00	\$0.00	\$442,026.00	\$312,618.27	\$0.00	\$312,618.27
2024-09: Maintenance Warehouse	\$386,546.00	\$0.00	\$386,546.00	\$413,573.87	\$0.00	\$413,573.87
2024-10: Operate & Maintenance of FCAS Units	\$1,307,596.00	\$0.00	\$1,307,596.00	\$792,540.75	\$0.00	\$792,540.75
2024-11: Modernization FCAS Units	\$100,000.00	\$0.00	\$100,000.00	\$141,648.78	\$0.00	\$141,648.78
2024-12: Operation & Maintenance of NAHASDA Units	\$762,336.00	\$0.00	\$762,336.00	\$611,660.36	\$0.00	\$611,660.36
2024-13: Modernization NAHASDA Units	\$100,000.00	\$0.00	\$100,000.00	\$171,794.06	\$0.00	\$171,794.06
2024-14: Elder Home Repair Program	\$100,000.00	\$0.00	\$100,000.00	\$58,493.94	\$0.00	\$58,493.94
2024-15: Acquisition of Rental Units	\$150,000.00	\$0.00	\$150,000.00	\$143,740.00	\$0.00	\$143,740.00
2024-16: Elder Home Repair Program - 80-100%	\$50,000.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$0.00
2024-17: Weatherization Program, Rentals - 80-100%	\$37,500.00	\$0.00	\$37,500.00	\$0.00	\$0.00	\$0.00
2024-18: Weatherization Program, Homeowner 80-100%	\$37,500.00	\$0.00	\$37,500.00	\$0.00	\$0.00	\$0.00
2024-19: Wishram Gorge View Solar Project Low Income	\$1,041,631.97	\$0.00	\$1,041,631.97	\$411,071.02	\$0.00	\$411,071.02
2024-20: Wishram Gorge View Solar Project Over-Income	\$92,721.03	\$0.00	\$92,721.03	\$36,591.53	\$0.00	\$36,591.53
Loan repayment - describe in 3 & 4 below	\$1,308,718.00	\$0.00	\$1,308,718.00	\$1,308,717.96	\$0.00	\$1,308,717.96
Planning and Administration	\$1,000,000.00	\$3,127,626.98	\$4,127,626.98	\$1,870,005.59	\$0.00	\$1,870,005.59
TOTAL	\$9,133,420.00	\$3,544,088.98	\$12,677,508.98	\$8,630,516.61	\$0.00	\$8,630,516.61

Notes:

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

(3) Estimated Sources or Uses of Funding NAHASDA § 102(b)(2)(C)) (Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses of Funding table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):
Title VI Loan Bank of America for Tax Credit V 68 Units loan for infrastructure, housing, and Pahto Village, 40 units, 20 Units for HUD VASH Participants, 20 units homeless, paid with IHBG funds, \$1,308,718. (1) Bank of America Loan (06/2013) - 18 Year Loan; as of 10/01/2023 balance est= \$2,491,455.81. est pymt = \$30,601.87 per month.(2) Bank of America Loan (06/2013) - 18 Year Loan; as of 10/01/2023 balance est= \$5,222,504.06; est pymnt = \$ 64,146.31 per month(3) WA State Housing Finance Commission Loan (Pahto Village) (12/2015) - 10 Year Loan; as of 10/01/2023 balance est = \$414,465.10. est pymnt = \$14,311.65 per month.

(4) APR (NAHASDA § 404(b)) (Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses of Funding table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):
Loans repaid title 6 (Bank of America) \$94,748 per month 68 unit loan for infrastructure.Bank of Washington Community Reinvestment \$14,311 per month for Pahato village 40 units (20 for homeless and 20 for HUD VASH). Bank of America loan (6/2013)- 18 year loan; as f 10/1/2024 balance est = \$2,197,113.79. est pymt = \$30,601.87 per month. (2) Bank of America Loan (6/2013) - 18 Year Loan; as of 10/1/2024 balance est= \$4,605,518.47; est pymt = \$64,146.31 per month. (3) WA State Housing Finance Commission Loan (Pahto Village) (12/2015)- 10 Year Loan as of 10/1/2024 balance est = \$224,587.20. est [ymt = 14,311.65 per month.

Section 6: Other Submission Items

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

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

YNHA has determined the Useful Life of their housing stock. For Federal Funds spent on a home in the following amounts, will apply:
Less than \$5000=6 months of 'Useful Life' \$5000-\$15000=5 years \$15001 - \$40000= 10 years over \$40000= 15 years new construction = 20 years
WA22-2 (30 units) Apas Goudy 1967+ 40=2007 15-20 years WA22-6 (60 units) Apas Goudy 1973+40 = 2013 15-20 years WA22-8 (30 units) Totus Park 1977+40= 2017 15-20 years WA22-9 (30 units) Wanity Park 1978+40=2018 20 years WA22-11 (45 units). Adams View 1980+40 = 2020 15-20 years WA22-14 (25 units) Wanity Park 1981+40 = 2021 20 years WA22-22 (30 units) Wolf Point 1988+40=2028 25-30 years WA22-28 (23 units) Foster Center 1994+40=2034 25-30 years WA22-31 (8 units) Six Neet 2001+40=2041 25-30 years WA22-32 (15 units) Adams View addition 2006+40 = 2046 25-30 years WA22-32A (15 units) Adams View Addition 2006+40=2046 25-30 years WA22-33 (10 units) Foster Center 2006+40=2046 25-30 years WA22-34 (10 units) Wanity 4 Plex 2006+40=2046 25-30 years

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

YNHA will be utilizing 10% of IHBG funds to serve 80-100% over income families through rehabilitation and emergency housing (reference section 3).

(3) Tribal and Other Indian Preference(NAHASDA § 201(b)(5), 24 CFR § 1000.120) If preference will be given to tribal members or other Indian families, the preference policy must be described. This information may be provided here or in the program description section of the 1-year plan.

Does the Tribe have a preference policy?:Yes

If yes, describe the policy. YNHA gives preference to enrolled members of the Yakama Nation for housing or assistance. Secondary preference is provided to low income members of other Federally recognized tribes.

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

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

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

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

Did you exceed your spending cap for Planning and Administration? No

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

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

(6) Expanded Formula Area - Verification of Substantial Housing Services (24 CFR § 1200.302(3)) If your tribe has an expanded formula area (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1200.302 Formula Area (1)), the tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the tribe have an expanded formula area? No

If no, proceed to Section 7.

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

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year:

Expanded Formula Area:

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

All AIAN Households - IHBG Funds : \$0.00

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

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

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

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

All AIAN Households - IHBG Funds : \$0.00

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

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

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

Section 7: Indian Housing Plan Certification of Compliance

NAHASDA § 102(b)(2)(D)

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

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

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

(2) In accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that:

There are households within its jurisdiction at or below 80 percent of median income: **Not Applicable**

(3) The following certifications will only apply where applicable based on program activities.

a. It will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD: **Yes**

b. Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA: **Yes**

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

d. Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA: **Yes**

Section 8: IHP Tribal Certification

NAHASDA § 102(c)

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP or IHP amendment on behalf of a tribe.

This certification must be executed by the recognized tribal government covered under the IHP.

- (1) The recognized tribal government of the grant beneficiary certifies that: **Andrea Matheny**
- (2) ☐ It had an opportunity to review the IHP or IHP amendment and has authorized the submission of the IHP by the TDHE
- (3) ☒ It has delegated to such TDHE the authority to submit an IHP or IHP amendment on behalf of the Tribe without prior review by the Tribe
- (4) Tribe: **Yakama Nation**
- (5) Authorized Official's Name and Title: **Andrea Matheny**
- (6) Authorized Official's Signature: **Andrea Matheny**
- (7) Date (MM/DD/YYYY): **2024-05-20**

Section 9: Tribal Wage Rate Certification

NAHASDA §§ 102(b)(2)(D)(vi), 104(b)

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

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

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

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

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

Section 10: Self-Monitoring

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

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

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

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

(4) Self-Monitoring Results. *(Describe the results of the monitoring activities, including corrective actions planned or taken.):*
Self-Assessment and Program Review Assessment at the Yakama Nation Housing Authority (YNHA) October 23-24, 2023 in accordance with the YNHA Self-Evaluation Monitoring Policy dated April 16, 2014.

Audit

Problem-The audit has one finding and it is labeled a Material Weakness. The issue is the accounting system not providing timely and accurate information. It appears that the six findings from last year by a different auditor are essentially the same as this one finding.

II. Reason or cause for lack of control-None noted.

III. Budget Implication-None noted.

IV. Detailed strategy or plan of action to come in to compliance within specific time frame-The audit does contain YNHA's Corrective Action plan with an anticipated completion date of December 2023. I was able to visit the CFO and accounting staff and it appears that a firm plan is in place to get the deficiencies addressed this year.

HUD Draft Monitoring Report dated August 21, 2023

I. Problem- the draft monitoring report listed three findings and two concerns and does mention that HUD and YNHA are discussing the issues contained in the draft report and HUD "will determine if modifications or revisions should be made to the Draft Report before it is issued in the final report."

II. Reason or cause for lack of control-None noted.

III. Budget Implication-none noted.

IV. Detailed strategy or plan of action to come into compliance within specific time frame- YNHA is working with HUD currently on this draft report and has several more weeks to respond and provide information on the findings and concerns. YNHA believes that all findings and concerns will be addressed in their response and could lead to a final report with no findings or concerns and I have no reason to believe that to be true.

YNHA Organizational Chart dated October 21, 2022

I. Problem-This Organizational Chart is the same one provided last year. It is outdated as it mentions staff by name and some of those staff are no longer with YNHA.

II. Reason or cause for lack of control-none noted.

III. Budget Implication-none noted.

IV. Detailed strategy or plan of action to come into compliance within specific time frame - Should be updated as positions and people change.

Tenant Empowerment program Policy dated April 20, 2016

I. Problem-The document in the shared drive was this same policy. I made notes last year that are still relevant in this policy. The spreadsheet says that an updated policy was approved on September 21, 2023, I did not receive that document.

II. Reason or cause of lack of control-none noted.

III. Budget Implication-none noted.

IV. Detailed strategy or plan of action to come into compliance within specific time frame- I was unable to review the new policy, so I don't know if last years' issues were addressed.

Procurement Policy and Procedures

I. Problem-The policy reviewed was updated this year. I saw few instances where it appears that YNHA was supposed to fill in information where there was "(accept change)" remained in the document. Also, I had discussed with the Procurement Officer the issue in 1100.4 that says, "any correspondence with HUD on the procurement." I have informed the Procurement Officer that in 2CFR Part 200.320 (c)(f) it mentions that any non-competitive procurement needs to be communicated to HUD for their concurrence. I am not sure if this section means to state that, but it needs to be clarified.

II. Reason or cause of lack of control-none noted.

III. Budget Implication-none noted.

IV. Detailed strategy or plan of action to come into compliance within specific time frame-none noted.

Financial and Administration Policy and Procedures

I. Problem- I received a document while onsite. I reviewed the document, and it appears to be a draft with highlighted changes, but the document does not have an approval date on it. The changes look good, and I do not have any additional comments on this policy.

II. Reason or cause of lack of control-none noted.

III. Budget Implication-none noted.

IV. Detailed strategy or plan of action to come into compliance within specific time frame-none noted.

Capitalization Policy and Procedures

I. Problem-The policy reviewed is the same from previous years. The spreadsheet says that this policy was reviewed but I did not receive a newer policy.

II. Reason or cause of lack of control-none noted.

III. Budget Implication-none noted.

IV. Detailed strategy or plan of action to come into compliance within specific time frame-Previous years' reports on this policy are still relevant.

Section 11: Inspections

NAHASDA § 403(b)

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

Activity (A)	Total Number of Units (B)	Units in Standard Condition (C)	Units Needing Rehabilitation (D)	Units Needing to be Replaced (E)	Total Number of Units Inspected (F=C+D+E)
1937 Housing Act Units:					
a. Rental	282	281	0	1	282
b. Homeownership	0	0	0	0	0
c. Other	0	0	0	0	0
1937 Act Subtotal:	282	281	0	1	282
NAHASDA Associated Units:					
a. Rental	113	112	1	0	113
b. Homeownership	8	8	0	0	8
c. Rental Assistance	0	0	0	0	0
d. Other	114	114	0	0	114
NAHASDA Act Subtotal:	235	234	1	0	235
Total:	517	515	1	1	517

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

(3) If no, why not:

Section 12: Audits

24 CFR § 1000.544

This section is used to indicate whether a financial audit based on the Single Audit Act and 2 CFR Part 200 Subpart F is required, based on a review of your financial records.

Did you expend \$750,000 or more in total Federal awards during the APR reporting period? **Yes**

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

If No, an audit is not required.

Audit Due Date : **06/30/2025**

Section 13: Public Availability

NAHASDA § 408, 24 CFR § 1000.518

- (1) Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518): **Yes**
- (2) If you are a TDHE, did you submit this APR to the Tribe(s) (24 CFR § 1000.512): **Yes**
- (3) If you answered “No” to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so.
- (4) Summarize any comments received from the Tribe(s) and/or the citizens (NAHASDA § 404(d)).
No comments received.

Section 14: Jobs Supported by NAHASDA

NAHASDA § 404(b)

Use the table below to record the number of jobs supported with IHBG funds each year.

Indian Housing Block Grant Assistance (IHBG)	
(1) Indian Housing Block Grant Assistance (IHBG)	79
(2) Number of Temporary Jobs Supported	2

(3) Narrative (optional):

Section 15: IHP Waiver Requests

NAHASDA § 101(b)(2)

THIS SECTION IS ONLY REQUIRED IF THE RECIPIENT IS REQUESTING A WAIVER OF AN IHP SECTION OR A WAIVER OF THE IHP SUBMISSION DUE DATE.

A waiver is valid for a period not to exceed 90 days Fill out the form below if you are requesting a waiver of one or more sections of the IHP. **NOTE** :This is NOT a waiver of the IHBG program requirements but rather a request to waive some of the IHP submission items.

(1) List below the sections of the IHP where you are requesting a waiver and/or a waiver of the IHP due date. (*List the requested waiver sections by name and section number*) :

(2) Describe the reasons that you are requesting this waiver (*Describe completely why you are unable to complete a particular section of the IHP or could not submit the IHP by the required due date.*) :

(3) Describe the actions you will take in order to ensure that you are able to submit a complete IHP in the future and/or submit the IHP by the required due date. (*This section should completely describe the procedural, staffing or technical corrections that you will make in order to submit a complete IHP in the future and/or submit the IHP by the required due date.*):

(4) Recipient: **Yakama Nation Housing Authority**

(5) Authorized Official's Name and Title:

(6) Authorized Official's Signature:

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