

# Section 1: Cover Page

- (1) Grant Number: 55IT5312680
- (2) Recipient Program Year: 10/1/2024 - 9/30/2025
- (3) Federal Fiscal Year: 2025
- (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:** Puyallup Tribe of Indians
- (10) **Contact Person:** Anita Oldbull
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- (14) **State:** WA
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- (18) **If TDHE, List Tribes Below:**
- (19) **Tax Identification Number:** 910955402
- (20) **UEI Number:** K3P8QSSCSJC4
- (21) **CCR/SAM Expiration Date** (MM/DD/YYYY): 04/01/2025
- (22) **IHBG Fiscal Year Formula Amount:** \$4,168,838
- (23) **Name of Authorized IHP Submitter:** Anita Oldbull
- (24) **Title of Authorized IHP Submitter:** Administrative Manager
- (25) **Signature of Authorized IHP Submitter:** Anita Oldbull
- (26) **IHP Submission Date** (MM/DD/YYYY): 08/21/2024
- (27) **Name of Authorized APR Submitter:**
- (28) **Title of Authorized APR Submitter:**
- (29) **Signature of Authorized APR Submitter:**
- (30) **APR Submission Date** (MM/DD/YYYY):

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

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

## ONE YEAR PLAN ANNUAL PERFORMANCE REPORT

# Section 2: Housing Needs

NAHASDA § 102(b)(2)(B)

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

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

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

Providing additional funding for the construction of the Waller Road Project of 12 units on existing site. The housing department received funding from IHBG ARP and ICDBG ARP funding to complete this project.

**(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)):

Puyallup Tribal Housing Department current programs include Low Rent units, Homebuyer units and rental assistance vouchers. These programs service 125 plus households each year and through the expansion of these programs PTHD has positively impacted the number of families that have been on the waiting lists for many years. The waiting lists for each program continues to grow each year (along with the Puyallup Tribe's number of enrolled members living in the area) There is a continuing need for additional housing units, renovation and repair of existing units. PTHD current program year activities specifically address the type of needs for low income Native American families as identified in section 2 (1) by means of Operation and Maintenance, Housing Management Services, Crime and Prevention, 1937 Act Modernization, Rehab of Rental Housing, Waller Road ,New construction, acquisition of new rent housing and homes.

**(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)*:

Puyallup Tribal Housing Department services two counties: Pierce and King: within and outside of the reservation boundaries. These counties are limited to the rental assistance voucher subsidies of the Fair Market Rent for those counties the units are located.

# Section 3: Program Descriptions

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

## Planning and Reporting Program Year Activities

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

Subtitle B of NAHASDA authorizes recipients to establish a program for self-determined housing activities involving construction, acquisition, rehabilitation, or infrastructure relating to housing activities or housing that will benefit the low-income households served by the Indian tribe. A recipient may use up to 20 percent of its annual allocation, but not more than \$2 Million, for this program. Section 233(a) of NAHASDA requires a recipient to include its planned self-determination program activities in the IHP, and Section 235(c) requires the recipient to report the expenditures, outputs, and outcomes for its self-determination program in the APR. For more information, see PIH Notice 2010-35 (Demonstration Program - Self-Determined Housing Activities for Tribal Governments) at [https://www.hud.gov/sites/documents/DOC\\_8814.PDF](https://www.hud.gov/sites/documents/DOC_8814.PDF).

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

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

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

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

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

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

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

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

**Outcome May Include**

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

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

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

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

## APR: REPORTING ON PROGRAM YEAR PROGRESS

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

### 1.1. Program Name and Unique Identifier: **18108A1:Housing Management**

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

The provision of management services for affordable housing, including preparation of work specifications, and management of affordable housing projects.

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

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

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

(6) Assist affordable housing for low income households

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

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

(6) Assist affordable housing for low income households

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

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

Low-Income Native Americans living in the departments rental units 22 Greatview Apartments 27 NE apartments 20 Longhouse apartments 6 Sandi Yakima house 8 Waller Road 4 scattered home rentals 26 HOPA units ,1 rental assistance voucher

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

1. Preparation of work specifications RFPs; 2. Loan grant processing, tracking maintenance; 3. Housing Inspections; 4. Tenant selection; 5. Mediation programs for landlord/tenant disputes in Housing; 6. Paralegal

### 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.):*

Conducted work specifications and RFP with housing administration, Housing legal team, Puyallup Tribe of Indians: Accounting, Administration, Legal, and TERO departments. Housing department conducted housing inspections on units. Units that were under suspicion of methamphetamines' or fentanyl will be inspected at a later date due to the uncertainty of contamination. Housing department has screened all new prospective tenants for selection of units according to policy and procedures. The grievance procedure is followed for issues where landlord/tenant disputes are occurring in housing department. There is flexibility in some situations to allow for corrective actions to mediate disputes. The clients are given their due process through the grievance procedures if the issue goes to tribal court for eviction proceedings.

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

Planned Number of Units to be Completed in Year Under this Program:	Planned Number of Households To Be Served in Year Under this Program: 114	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: 114	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))):*

N/A

**1.1. Program Name and Unique Identifier: 18108B1:Operations and Maintenance of NAHASDA HOPA**

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

Operation Maintenance of PTHD NAHASDA.

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

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

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

(6) Assist affordable housing for low income households

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

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

(6) Assist affordable housing for low income households

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

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

Low-Income Native Americans in HOPA 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.):*

Maintain units to housing quality standards , i.e., appliances, debris removal; Replacesiding/painting exterior

**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.):*

Provides the opportunity for assistance to do repairs of units to bring unit back to housing quality standards for occupancy and rehabilitation of unit for new client to move into unit.

**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))):*

N/A

**1.1. Program Name and Unique Identifier: 18108B2:Operations and Maintenance of CAS Rental units**

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

Operation and Maintenance of PTHD CAS units.

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

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

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

(6) Assist affordable housing for low income households

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

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

(6) Assist affordable housing for low income households

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

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

Low-Income Native Americans

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

Assistance is limited to operations and maintenance of the units including utilities, insurance, AP/AR, garbage collection, water, landscaping, administration, maintenance repairs, property management. Plan to address, paint, asphalt sealing, maintenance shed and storage due to the need to store tools and maintenance items and supplies to complete work orders. (camera installation, lock/door change)

**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.):*

Provided assistance with operations and maintenance of the units that included utilities, insurance, AP/AR, garbage collection, water, landscaping of property, administration of the program, Budget for repairs and maintenance of the units and rehabilitation of units for new clients to occupy units. Property management of the all CAS units. Addressed paint and asphalt sealing of parking lot and surrounding area in complex. Provided safety and control of speeding within complex by installation of speed bumps.

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

Planned Number of Units to be Completed in Year Under this Program: 37	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: 37	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: 18108B5:37 ACT Modernization**

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

This program will be used for the modernization of Act 1937 units under PTHD's management

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

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

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

(3) Improve quality of substandard units

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

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

(3) Improve quality of substandard units

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

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

Low-Income Native Americans Homes that were bought with funds from the 1937 Act dollars.

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

New hot water tanks, new closet enclosures and increase patio size of units

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

The housing department was only able to replacement a few of hot water tanks.

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

Planned Number of Units to be Completed in Year Under this Program: 27	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: 27	APR: Actual Number of Households Served in Program Year:	APR: Actual Number of Acres Purchased in Program Year:

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

The staff turn-over and training of new maintenance team has delayed the process of getting this task completed. The department is in the process of hiring for a few positions on maintenance team.

**1.1. Program Name and Unique Identifier: 18108B7:1937 Act Modernization (HOPA)**

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

This program will be used for the modernization of Act 1937 units under PTHD's management

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

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

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

(3) Improve quality of substandard units

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

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

(3) Improve quality of substandard units

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

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

Low-Income Native Americans Homes that were bought with funds from the 1937 Act dollars.

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

Repair extensively damaged units after tenants vacate, and unit turnovers due to evictions or policy and procedure violations, i.e. floor wall replacement or damages, replacement, painting, appliances, debris removal.

**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.):*

Repair was conducted on damaged units after tenants vacated unit. Costs included remediation of unit. Replacement of any damages to bring unit back to Housing Quality Standards for unit to be occupied as soon as possible. Repairs can vary from replacement of appliances, painting, flooring, debris removal, etc...

**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: 2	APR: Actual Number of Households Served in Program Year: 0	APR: Actual Number of Acres Purchased in Program Year: 0

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

**1.1. Program Name and Unique Identifier: 18108B8:HOPA Loans**

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

HOPA Loans to provide assistance to Low-Income Native Americans clients in the Home Ownership Program Agreement (HOPA) an opportunity to get a \$50,000 loan to do major repairs on their home. The program would allow the tenant to make repairs and allowable upgrades on unit if the inspection by housing department determines that is a need for unit to maintain useful life of unit or need repairs identified. The department will insure that the proper procurement procedures are followed for work conducted on homes.

**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.):*

(3) Improve quality of substandard units

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

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

(3) Improve quality of substandard units

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

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

Low income Native American HOPA clients

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

HOPA clients must qualify as low income for major repairs deemed necessary by housing department for \$50,000 cap per household. The program will assist 10 homes at a max of \$50,000 per household.

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

Unable to complete 10

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

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

No amendment to this policies and procedures set up to run this program since the amount was increased. The administration, Maintenance, and resident services staff has been short staff, to complete and beginning of being training in their positions to understand their job duties and tasks. Changes within the housing committee members delayed due to tribal council selection. Election of new officers on housing committee.

**1.1. Program Name and Unique Identifier: 18108C1:Operations and Maintenance of NAHASDA Rental units**

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

Operation and Maintenance of PTHD NAHASDA.

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

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

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

(6) Assist affordable housing for low income households

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

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

(6) Assist affordable housing for low income households

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

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

Low-Income Native Americans clients

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

Assistance is limited to operations maintenance of the units including utilities, insurance, AP/AR, garbage collection, water, landscaping, administration, maintenance repairs, property management. Plan to address painting of properties, replace floor and walls in units.

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

The housing department provided assistance with operations and maintenance of units which included the utilities, insurance, AP/AR, garbage collection, water, landscaping, administration, maintenance and repairs, property management. Addressed the painting of outside of units at properties to extend the useful life of all units at complex. When necessary painting of properties, replacement of floors and wall in units to wear and tear. This will extend the useful life of unit or address the tenant damage of unit.

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

Planned Number of Units to be Completed in Year Under this Program: 82	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: 82	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: 18108C2:Housing Services**

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

The provision of housing-related services for affordable housing, such as housing counseling in connection with rental or home-ownership assistance, establishment and support of resident organizations and resident management corporations, activities, related to the provision of self-sufficiency and other services, and other services related to assisting owners, tenants, contractors, and other entities, participating or seeking to participate in other housing activities assisted pursuant to this section.

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

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

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

(6) Assist affordable housing for low income households

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

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

(6) Assist affordable housing for low income households

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

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

Low-income Native Americans living in PTHD Low Rent and HOPA 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.):*

Activities and counseling to provide tenants assistance with tools to become self-sufficient through financial, budgeting, and credit counseling classes. Provide eating healthy habits and cooking. Provide family-oriented events to bring culture, diversity, safety, and crime prevention throughout the year and hosting numerous events. Community awareness of neighbors. Aging in place for our Waller and disabled units.

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

Provide tenants with information to attend financial, budgeting, credit counseling classes. Provided eating healthy habits and cooking classes at NE gym as scheduled by NE gym staff. Provided events at NE GYM for family oriented events that brought culture, diversity, safety, and crime prevention throughout the year and hosting of events. Coordinating with various programs within the tribe to bring services to the housing community through the wellness committee, GRIPS taskforce, House of Respect Elders program, Wrap around, Child Services, CDVAP, Puyallup Language, culture program, etc... Trying to create a community watch program within housing communities. Assisting our tribal elders with services to age in place for our Waller units and disabled units.

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

Planned Number of Units to be Completed in Year Under this Program:	Planned Number of Households To Be Served in Year Under this Program: 114	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: 114	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: 18108C3:Rental Assistance Voucher Program**

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

The Rental Assistance Voucher Program subsidizes housing units in the private market throughout service area for Low-Income Native Americans. Based on 30% of participants adjusted gross monthly income for household.

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

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

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

(6) Assist affordable housing for low income households

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

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

(6) Assist affordable housing for low income households

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

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

Low-Income Native Americans within our service area of Pierce and King County

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

Subsidize rents to landlord-All units are inspected for meeting HQS before occupancy. Program is limited to 36 months per participant unless client meets other preferences deemed in housing policy. Not to exceed FMR-Participant must recertify annually

**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.):*

Provided rent to landlord for subsidized housing in our rental assistance program according to FMR. Tenant moved out without notice to housing department however; information was relayed to housing department through communication with interdepartmental meetings that she was in care of House of Respect at Elder's facility with PTOI.

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

Planned Number of Units to be Completed in Year Under this Program:	Planned Number of Households To Be Served in Year Under this Program: 1	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: 1	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))):*

N/A

**1.1. Program Name and Unique Identifier: 18108C4:Rehabilitation of NAHASDA Units**

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

Rehab of PTHD 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.):*

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

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

(3) Improve quality of substandard units

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

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

(3) Improve quality of substandard units

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

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

Low-Income Native Americans

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

Assistance is limited to rehabilitation of the units including repairs. Plan to address sprinklers and possibly add more to the sprinkler system, roofs, gutters, (stripping paint, primer, finishing, etc.) paint, replace floors, walls, HVAC and appliances. Meth remediation and boiler system repairs. Place bark at sights for protection of plants and shrubs. Rehab of green house (1415 East 32nd) from the holes to fixing the sinking of unit pillions. Replace playground floor or parts due to issues with maintenance of floor.

**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 department provided limited repairs for rehabilitation of units. Bark was distributed to housing sites for protection of plants and shrubs through fall winter months. Playground at Greatview apartments was replaced due to wear an tear throughout the years and to extend the useful life of the playground and safety of community.

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

Planned Number of Units to be Completed in Year Under this Program: 82	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: 82	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))):*

Limited due to the turnover in maintenance staff within housing department and training the new staff in maintenance department.

**1.1. Program Name and Unique Identifier: 18108D2:Crime & Prevention**

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

The provision of safety, security, and law enforcement measures and activities appropriate to protect residents of affordable housing from crime. The need to hire a Puyallup Tribe of Indians Police Officer to be specifically hired to respond to incidents within housing projects. This officer would be available for servicing of termination, eviction, and any court related documents to housing clients. The officer to create a relationship with housing department by attending housing events and activities at NE gym and other scatter sites to give a positive image of Puyallup Tribe of Indians Officers. This program would also provide a budget for the staff that assist with crime and prevention activities at the NE gym and scattered housing sites for clients. While also providing a budget to host these activities to prevent crime, provide the need for mobile cameras from Live View tech due to the need to have this option to deter crime and scattered vacant units in rehab being broken into. Potentially having this camera service available for the construction of the Waller Road Project to prevent crime and incidents.

**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 Americans housing clients and housing client community members

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

Officer will provide crime prevention activities; monthly crime reports, provide daily housing focused patrols of all subdivisions. Implement a community policing program. PTHD will provide wages, law enforcement supplies, relevant training, publications, vehicle operational costs. Maintenance of surveillance cameras at each subdivision. Criminal background checks. Update/Replace modem's, cameras and lighting with additional lighting and additional internet feeds to support the system. Trailer with tables and chairs for community events at different site locations to provide an outdoor space to conduct event related to housing safety, crime and prevention to gather safely outdoors and socialize with neighbors and local tribal officers in person to discuss crime prevention: theft, personal safety, neighborhood protection and crime reduction issues. - Plan to build fence at Yakima House, Greatview apartments, Northeast site.

**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.):*

PTOI technology along with Robblee's has been assisting with surveillance needs of housing department and coordination of services with cameras and equipment. The updating of equipment included modem's, cameras, lighting, IP addresses, and any support is done based off the PTOI overall contract with Robblee's. Criminal backgrounds are done in compliance with policies and procedures. Installation of Greatview fencing and gate completed at complex. Along with installation of speed bumps to control speed and equipment for gate to function.

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

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

Delay in screening and hiring a officer due to limited applicants and shortage of PTOI officers available. This will assist with crime prevention at all housing sites and providing official service of documents . The housing department has been busy trying policy and procedures along with staff turnovers this purchase of trailer, table and chairs for community events at other housing sites. Yakima and

Northeast fencing is still being planned out and budgeted. Northeast fencing will be mostly like be part of the master plan for the future development of NE site.

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**1.1. Program Name and Unique Identifier: 18108F2:Acquistion**

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

Purchase new home, or apartment building for low income Native American within service area.

**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.):*

(7) Create new affordable rental units

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

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

(7) Create new affordable rental units

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

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

Low-Income Native Americans within our 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.):*

Seeking to purchase land and build new low income rental units and/or purchase pre-existing apartment rentals to address the extreme housing needs in the area while following any NAHASDA guidelines and environmental review before purchase. This funding will help find a unit for a family in flood zone that needs to be relocated out of 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.):*

N/A

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

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

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

Was unable to find a comparable home within price range for family in flood zone relocation. Prices for vacant land and homes is still at high market value in area. Properties that housing was interested in sold fast to other buyers in area. New staff have been hired in realty and trust department at PTOI so maybe this will help assist the housing department in future purchases.

**1.1. Program Name and Unique Identifier: 18108F8:Waller Road Construction**

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

Waller Road construction for additional complexes on existing site owned by Puyallup Tribe of Indians Housing Department. This project will expand the existing Waller Road site to add the construction of 6 duplex complexes with 2 bedrooms for each unit.

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

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

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

(7) Create new affordable rental units

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

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

(7) Create new affordable rental units

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

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

To service low-income Native Americans within our 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.):*

Develop and construct safe and healthy housing for participants on Waller Road waiting lists. Develop 6 duplex complexes with 2 units with 2 bedrooms . Any need for change orders if need be. The project will be using multiple fund sources to complete this project. The estimated cost per unit will be around \$460,813 for a total of \$921,626 per duplex complex. The fund sources that will be used will be from ICDBG ARP Grant # (22RP5312680) \$1,722,746 IHBG ARP Grant # (21AH5312680) (\$2,000,000) IHBG Grant # (55IT5312680) (\$1,277,254) These fund sources will be used for the infrastructure and construction any associated with the Waller Road 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.):*

N/A

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

Planned Number of Units to be Completed in Year Under this Program: 12	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))):*

Too many delays on getting permits and design from each individual company secondary emergency driveway permit, Summit water, and Tacoma Power. Also waiting for the Pierce county issue of permit for site. All of these permit waiting time for turn around pushed our schedule out further than expected. Then the bid for construction had lapsed over a period of year so reissued bid and only one construction company responded a lot higher than the TDC so in a predicament since the Nwonap HUD office is closed due to government shut down to ask for a waiver.

# 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.)*

Adequate fire and extended insurance coverage will continued to be provided for all units owned by the PTHD. Annual inspections will be done on all the rental units to ensure any necessary repairs are attended to in a timely manner. Lease to purchase homeownership unit inspections will result in action plans to address the costs of repairs. Re-inspections will occur for those units in need of serious repairs to meet the HQS.

**(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:*

PTHD has no plans for demolition or disposition of the 1937 act units in 2025

# 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	\$12,076,517.03	\$4,168,838.00	\$16,245,355.03	\$6,584,147.00	\$9,661,208.03	
2. IHBG Program Income	\$2,887,539.00	\$419,742.00	\$3,307,281.00	\$0.00	\$3,307,281.00	
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	\$3,487,310.00	\$0.00	\$3,487,310.00	\$3,487,310.00	\$0.00	
9. LIHTC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
10. Non-Federal Funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<b>Total</b>	\$18,451,366.03	\$4,588,580.00	\$23,039,946.03	\$10,071,457.00	\$12,968,489.03	
<b>TOTAL Columns C and H ( 2 through 10 )</b>			\$6,794,591.00			
SOURCE	APR					
	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F+G)	(I) Actual funds to be expended during 12-month program year	(J) Actual unexpended funds remaining at end of program year (H-I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
1. IHBG Funds	\$13,454,353.98	\$7,162,792.00	\$20,617,145.98	\$3,920,273.71	\$16,696,872.27	
2. IHBG Program Income	\$2,904,749.09	\$435,276.24	\$3,340,025.33	\$0.00	\$3,340,025.33	
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	\$1,984,102.88	\$0.00	\$1,984,102.88	\$62,392.29	\$1,921,710.59	
9. LIHTC			\$0.00		\$0.00	
10. Non-Federal Funds			\$0.00		\$0.00	
<b>Total</b>	\$18,343,205.95	\$7,598,068.24	\$25,941,274.19	\$3,982,666.00	\$21,958,608.19	
<b>TOTAL Columns C and H ( 2 through 10 )</b>			\$5,324,128.21			

**Notes:**

- a. 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).
- b. Total of Column D should match the total of Column N from the **Uses of Funding** table below.
- c. 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)
18108A1: Housing Management	\$739,422.00	\$0.00	\$739,422.00	\$1,011,021.91	\$0.00	\$1,011,021.91
18108B1: Operations and Maintenance of NAHASDA HOPA	\$11,758.00	\$0.00	\$11,758.00	\$103,001.08	\$0.00	\$103,001.08
18108B2: Operations and Maintenance of CAS Rental units	\$877,108.00	\$0.00	\$877,108.00	\$371,016.64	\$0.00	\$371,016.64
18108B5: 37 ACT Modernization	\$405,000.00	\$0.00	\$405,000.00	\$28,609.40	\$0.00	\$28,609.40
18108B7: 1937 Act Modernization (HOPA)	\$49,094.00	\$0.00	\$49,094.00	\$84,446.84	\$0.00	\$84,446.84
18108B8: HOPA Loans	\$500,000.00	\$0.00	\$500,000.00	\$0.00	\$0.00	\$0.00
18108C1: Operations and Maintenance of NAHASDA Rental units	\$1,434,093.00	\$0.00	\$1,434,093.00	\$1,162,538.70	\$0.00	\$1,162,538.70
18108C2: Housing Services	\$228,733.00	\$0.00	\$228,733.00	\$304,629.42	\$0.00	\$304,629.42
18108C3: Rental Assistance Voucher Program	\$25,000.00	\$0.00	\$25,000.00	\$6,878.00	\$0.00	\$6,878.00
18108C4: Rehabilitation of NAHASDA Units	\$348,919.00	\$0.00	\$348,919.00	\$22,812.98	\$0.00	\$22,812.98
18108D2: Crime & Prevention	\$247,663.00	\$0.00	\$247,663.00	\$305,429.82	\$0.00	\$305,429.82
18108F2: Acquisition	\$1.00	\$0.00	\$1.00	\$13,034.32	\$0.00	\$13,034.32
18108F8: Waller Road Construction	\$1,277,254.00	\$3,487,310.00	\$4,764,564.00	\$0.00	\$62,392.29	\$62,392.29
Loan repayment - describe in 3 & 4 below	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Planning and Administration	\$440,102.00	\$0.00	\$440,102.00	\$506,854.60	\$0.00	\$506,854.60
<b>TOTAL</b>	<b>\$6,584,147.00</b>	<b>\$3,487,310.00</b>	<b>\$10,071,457.00</b>	<b>\$3,920,273.71</b>	<b>\$62,392.29</b>	<b>\$3,982,666.00</b>

**Notes:**

- a. Total of Column L cannot exceed the IHBG funds from Column C, Row 1 from the Sources of Funding table in Line 1 above.
- b. Total of Column M cannot exceed the total from Column C, Rows 2-10 from the Sources of Funding table in Line 1 above.
- c. 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.
- d. Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources of Funding table in Line 1 above.
- e. 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): **Waller Road Construction includes leveraged funds from ICDBG ARP and IHBG-ARP.**

(4) **APR** (NAHASDA § 404(b)) (Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses of Funding table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):

N/A

# Section 6: Other Submission Items

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

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

**IHP Funds**

**IHBG funds expensed**

**under \$5,000 6months**

**\$5,000 to \$15,000 5years**

**\$15,000-\$40,000 10 years**

**over \$40,000 15 years**

**New construction or acquisition of newly constructed housing: 20 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.):

N/A

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

Does the Tribe have a preference policy?:**Yes**

If yes, describe the policy.**PTHD is committed to non-discrimination. PTHD shall not discriminate while providing services on race, color, gender, sexual orientation, disability, national origin, or veteran status. However PTHD will exercise its sovereign authority regarding the practice of Puyallup Tribal preference regarding eligibility of services. Furthermore, PTHD will only service eligible Native Americans and Alaskan Natives.**

**(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:

# Section 7: Indian Housing Plan Certification of Compliance

NAHASDA § 102(b)(2)(D)

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

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

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

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

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

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

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

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

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

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

# Section 8: IHP Tribal Certification

NAHASDA § 102(c)

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

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

(1) The recognized tribal government of the grant beneficiary certifies that:

(2)  It had an opportunity to review the IHP or IHP amendment and has authorized the submission of the IHP by the TDHE

(3)  It has delegated to such TDHE the authority to submit an IHP or IHP amendment on behalf of the Tribe without prior review by the Tribe

(4)Tribe:

(5)Authorized Official's Name and Title:

(6)Authorized Official's Signature:

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

# Section 9: Tribal Wage Rate Certification

NAHASDA §§ 102(b)(2)(D)(vi), 104(b)

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

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

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

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

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

N/A

# 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.):*

**All activities conducted at the Puyallup Tribe of Indians housing department were managed controlled by policies and procedures of department. IHBG, IHBG CARES, IHBG ARP, ICDBG ARP, and ROSS grants have remained in compliance with planned activities according to the reporting, policies, procedures, and regulations according to HUD NWONAP. The housing department is in compliance with WBARS reporting through department of commerce grant reporting and auditing. Housing quality standards according to policies and procedures have been meet according to policy. The housing department continues to strive to provide the tools to become self sufficient while in the programs they are participants in. The Puyallup Tribal Housing Department: Mission is to enhance the quality of life, stability and prosperity of Native American families with the Puyallup Tribal service area by: Developing and managing safe, sustainable, healthy, and affordable housing, providing opportunities and resources to inspire self sufficiency and fulfillment. Maintaining the cultural integrity of each family in Tribal Housing. Vision: We are inspired by the vision of a Native American community where: · All families have high quality, affordable housing that's well-maintained, environmentally sustainable, and culturally relevant · All children grow up in stable, safe homes and neighborhoods, and receive support for the education they need to reach their fullest potential · Elders receive adequate care and have a safe, stable place to live · The housing we provide is a stepping stone toward self-sufficiency · In partnership with our clients, we all work together to respect, appreciate and contribute toward making our community a great place to live, work and play Core Values: The PTHD is a Department of Housing and Urban Development (HUD) funded organization. All PTHD programs must follow HUD guidelines and participants must meet HUD's definition of Low Income as well as other eligibility requirements. Low Income Rental Program: PTHD properties available for lease at one of our professionally managed sites: Elders Community Homes, Northeast Apartment Complex, Longhouse Apartment Complex (Place of Hidden Waters), Great View Townhomes, and Yakima House (Sandy House). Home Ownership (HOPA): PTHD owned properties on the reservation and Puyallup Tribal Trust property that are offered as a lease with the option to buy. Provide services for Low-Income Native Americans on waiting lists and living in the departments' rental units 22 units Greatview Apartments, 27 units NE apartments, 20 units Longhouse apartments, 6 units Sandi Yakima house, 8 units Waller Road,4 units scattered home rentals, 26 units HOPA units,1 units rental assistance voucher Provide services for clients such as: 1. Preparation of work specifications RFPs 2. Loan grant processing, tracking maintenance 3. Housing Inspections 4. Tenant selection 5. Mediation programs for landlord/tenant disputes in Housing and housing committee 6. Paralegal 7. Maintenance and operations of all sites and units 8. Rehabilitation of all units back to Housing quality standards 9. Crime and prevention for all sites and units ROSS Grant Provide assistance to Clients to become self-sufficient. Waller Road Site Development is progressing into the bid and selection of bids for construction will be the next step. Policies and procedures formally written out for the personnel to follow for programs to function implement in all areas at the housing department management of grants according to NAHASDA are in the process of being reviewed by housing staff to prepare for upcoming retreat for next year 2025 . Indian Housing Plans (IHP), Annual Performance Reports (APR), 425 forms, fiscal year financial audits have all been submitted in a timely manner with HUD NWONAP for review and approval. The Puyallup Tribe of Indians Housing Department in coordination with Accounting DAP services has conducted Single Audit Acts relating to NAHASDA activities and submitted these to HUD NWONAP and Federal Audit Clearinghouse pursuant to OMB Circular A-133. These annual reports and forms are submitted to the chain of command for review with Housing Director, Administrative Manager, Legal Department, and Accounting DAP services then to Puyallup Tribal of Indians Tribal Council for final approval. Quarterly reports are submitted for PTOI administrative team, housing committee and Council review in regards to program grants, reporting, financials, and budgets. Also submitting Waivers for ICDBG ARP, IHBG ARP, IHBG. The Puyallup Tribe of Indians Housing Department continues to work on training and education of all staff working on grants understands the importance of doing the check off lists for environmental reviews for activities and projects for all grants with the guidance of HUD NWONAP. The design of the master plan for the NE property expansion has been started to be developed. Working on the completion of the geotechnical information for NE Expansion. The beginning phases for planning the infrastructure build out to do this project in phases. The financial data is routed through the appropriate**

personnel for procurement to route the process of the purchases and route for payment. DAP with the PTOI provides this service to the housing department along with housing staff doing their review, checks and balances submissions to DAP. PTOI and DAP updated their policies and procedures for the accounting and procurement. Training continues to be done by staff to stay current with any notices or policies and procedures with HUD NWONAP or grants. Arrangements for all staff to take the HOTMA inspire training to begin to implement at appropriate time. Financial Management training for accounting , staff and managers who work on financial documents within the housing department was provided by HUD NWONAP. Puyallup Tribal Housing Staff and committee member have been to continuing education training and courses for housing related topics and issues at local, state, region, and national. Training provided by PTOI and Human Resources such as CPR, TOSHA, training, etc.... The organizational structure is current and has a chain of command to follow to run this program effectively. The Puyallup Tribal of Indians Human Resources Department Policies and Procedures insure that the integrity and ethical values are clear and effective for the management of this program. Providing training and safety with opioid crisis is a new tasks the housing department is taken on with methamphetamine and fentanyl remediation being conducted. The housing committee bylaws are still being updated in draft form awaiting Puyallup Tribal Of Indians Tribal Council approval. The Housing Committee consists of council appointed 7 positions. The members of this committee elect their officer positions, duties and voting privileges according to the Roberts Rule of Order. These members have been meeting twice a month on grievance procedures with clients addressing the Puyallup Tribal Housing Department Policies and Procedures with Housing Department management and staff. Also information on the grants the department has received for fiscal year, policies and procedures. Agendas, Minutes, committee votes are taken and submitted for the record for review by Puyallup Tribe of Indians Administration and Puyallup Tribe of Indians Tribal Council. Guidance on reporting for grants and relaying information from tribal council and community needs. The housing department is currently preparing policy and procedure amendments for review by housing committee, then forwarded to tribal council for final approval. Possible amendments to the housing code will also be submitted soon. Puyallup Tribe of Indians Housing Department is committed to non-discrimination. PTHD shall not discriminate while providing services on race, color, gender, sexual orientation, disability, national origin, or veteran status. However; PTHD will exercise its sovereign authority regarding the practice of Puyallup Tribal preference regarding eligibility of services. Furthermore, PTHD will only service eligible Native Americans and Alaskan Natives enrolled in a federally recognized tribe. Resident Services has been following the approved Puyallup Tribe of Indians Housing Department Eligibility Admission and Occupancy policy and procedures for Housing Management between Tenant/Homebuyer Eligibility and Selection.

# Section 11: Inspections

NAHASDA § 403(b)

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

Activity (A)	Total Number of Units (B)	Units in Standard Condition (C)	Units Needing Rehabilitation (D)	Units Needing to be Replaced (E)	Total Number of Units Inspected (F=C+D+E)
<b>1937 Housing Act Units:</b>					
a. Rental	32	32	0	0	32
b. Homeownership	5	5	0	0	5
c. Other	0	0	0	0	0
<b>1937 Act Subtotal:</b>	<b>37</b>	<b>37</b>	<b>0</b>	<b>0</b>	<b>37</b>
<b>NAHASDA Associated Units:</b>					
a. Rental	57	57	0	0	57
b. Homeownership	24	24	0	0	24
c. Rental Assistance	1	1	0	0	1
d. Other	0	0	0	0	0
<b>NAHASDA Act Subtotal:</b>	<b>82</b>	<b>82</b>	<b>0</b>	<b>0</b>	<b>82</b>
<b>Total:</b>	<b>119</b>	<b>119</b>	<b>0</b>	<b>0</b>	<b>119</b>

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

(3) If no, why not:

**Housing Department did not enter units that were know to be contaminated with Methamphetamines' and fentanyl due to health risk of exposure. Staff were not aware of level of contamination and location of usage in units. Our standard practices within the department are to have the unit sampled with testing to determine the level of contamination and where in the unit. This determines if remediation needs to be conducted before entering a unit for the safety of staff and community. The rental assistance voucher moved out before inspection could be conducted on unit.**

# 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 : **06/30/2026**

# Section 13: Public Availability

*NAHASDA § 408, 24 CFR § 1000.518*

(1) Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518): **Yes**

(2) If you are a TDHE, did you submit this APR to the Tribe(s) (24 CFR § 1000.512): **Not Applicable**

(3) If you answered “No” to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so.

(4) Summarize any comments received from the Tribe(s) and/or the citizens (NAHASDA § 404(d)).

**This information for Fiscal Year IHBG Annual Performance Report will be posted to the Puyallup Tribe of Indians Website at [https://www.puyalluptribe-nsn.gov/housing/tribal housing department/](https://www.puyalluptribe-nsn.gov/housing/tribal%20housing%20department/) and any comments will be submitted to Joanne Gutierrez @ [joanne.gutierrez@puyalluptribe-nsn.gov](mailto:joanne.gutierrez@puyalluptribe-nsn.gov) No comments on IHBG APR have been received since posting on**

# 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.

<b>Indian Housing Block Grant Assistance (IHBG)</b>	
<b>(1)</b> Indian Housing Block Grant Assistance (IHBG)	20
<b>(2)</b> Number of Temporary Jobs Supported	0

**(3)** Narrative (optional):

**There has been staff turn over and new hires within the administration, maintenance, and resident services. Listed below are the staff members and their positions within housing department.**

**# of Staff in the Department**

**Staff # 20 and positions**

**Joanne Gutierrez, Director**

**Suzanne Sailto, Sr. Admin. Asst.**

**Kim Moorehead, Accountant**

**Brian Wescott, Project Manager**

**Phillip Campbell Joseph, Maintenance Manager**

**Vacant, Carpenter**

**Gary Boyd, Maintenance**

**Colby Moses, Maintenance**

**VACANT, Maintenance**

**Jimmy Sharp, Maintenance**

**Vacant, Landscaper**

**David Shippentower, Landscaper**

**Jamie Sportsman, RS Manager/Compliance**

**Tashina Smith, ROSS Coordinator**

**Candi TurningRobe, RS Specialist**

**Vacant, RS Specialist**

**Kasandra Gutierrez, RS Specialist**

**Lucia Earl-Mitchell, Gym Coordinator**

**Daphne Neha, Gym Assistant**

**Rachel Black-Contreras, Intake Specialist**

# 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: **Puyallup Tribe of Indians**
- (5) Authorized Official's Name and Title:
- (6) Authorized Official's Signature:
- (7) Date (*MM/DD/YYYY*):