JOSH GREEN, M.D.
GOVERNOR
STATE OF HAWAII
Ke Kia'āina o ka Moku'āina 'o Hawai'i

SYLVIA J. LUKE
LT. GOVERNOR
STATE OF HAWAII
Ka Hope Kia'āina o ka Moku'āina 'o Hawai'i

KALI WATSON
CHAIRMAN, HHC
Ka Luna Ho'okele

KATIE L. DUCATT
DEPUTY TO THE CHAIRMAN
Ka Hope Luna Ho'okele

STATE OF HAWAII
DEPARTMENT OF HAWAIIAN HOME LANDS
Ka 'Oihana 'Āina Ho'opulapula Hawai'i
P. O. BOX 1879
HONOLULU, HAWAII 96805

April 17, 2023

Ms. Heidi J. Frechette
Deputy Assistant Secretary
for Native American Programs
U. S. Department of Housing
and Urban Development
Office of Native American Programs
451 Seventy Street SW, Room 4126
Washington, DC 20410-5000

Aloha Ms. Frechette:

Subject: Native Hawaiian Housing Block Grant (NHHBG) 2023 Annual Housing Plan

Please find enclosed the above-referenced housing plan as part of the Department's compliance efforts with 24 CFR Part 1006.

Should you have any questions or concerns, please contact Ms. Nicole Kinilau-Cano, HHL Legislative Analyst, at (808) 620-9486 or Nicole.L.Kinilau-Cano@hawaii.gov.

Aloha,

Kali Watson

Kali Watson, Chairman
Hawaiian Homes Commission

Enclosure

cc: Ms. Claudine C. Allen, Lead Native Hawaiian Program Specialist
Ms. Diana Houston, Native Hawaiian Program Specialist

For DHHL's Use: July 1, 2023 thru June 30, 2024 Annual Housing Plan

NATIVE HAWAIIAN HOUSING PLAN

(NAHASDA §§ 803(b)(1), 803(c)(1) and 820(a)(2))

This form meets the requirements for a Native Hawaiian Housing Plan (NHHP) and Annual Performance Report (APR) required by the United States Department of Housing and Urban Development. The information requested does not lend itself to confidentiality.

Regulatory and statutory citations are provided throughout this form as applicable. The Department of Hawaiian Home Lands (DHHL) is encouraged to review these citations when completing the NHHP and APR sections of the form.

Under Title VIII of the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA) (25 U.S.C. 4101 et seq.), HUD will provide grants under the Native Hawaiian Housing Block Grant (NHHBG) program to DHHL to carry out affordable housing activities for Native Hawaiian families who are eligible to reside on the Hawaiian Home Lands. To be eligible for the grants, DHHL must submit a NHHP that meets the requirements of the Act. To align the NHHBG program with recent improvements made to the Indian Housing Block Grant program, HUD is requiring DHHL to submit the NHHP to HUD at least 75 days prior to the start of its 12-month fiscal year. The APR is due no later than 60 days after the end of DHHL's fiscal year (24 CFR § 1006.410).

The NHHP and the APR (previously two separate forms) are now combined into one form. The sections pertaining to the NHHP are submitted **before** the beginning of the 12-month fiscal year, leaving the APR (shaded) sections blank. If the NHHP has been updated or amended, use the most recent version when preparing the APR. After the 12-month fiscal year, enter the results from the 12-month fiscal year in the shaded sections of the form to complete the APR. More details on how to complete the NHHP and APR sections of the form can be found in the body of this form. In addition, DHHL may find it helpful to refer to the IHP/APR form guidance available at http://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/ih/codetalk/nahasda/guidance until a guidance specific to the NHHP/APR form is made available.

FORM COMPLETION OPTIONS: The NHHP/APR form may be completed either in hard copy or electronically. Hard copy versions may be completed either by hand or typewriter. Alternatively, the form may be completed electronically as it is a Word document. It is recommended that the form be completed electronically because it is more efficient to complete, submit, and review the form. Furthermore, electronic versions of the form may be submitted to HUD as an email attachment. To document official signatures on the electronic version, you should sign a hard copy of the pages and either fax (808-457-4694) that signed page or email (claudine.c.allen@hud.gov) it as an attachment to the Office of Native American Programs – Attention: Claudine Allen in the HUD Honolulu Field Office. The sections of the NHHP that require an official signature are the Cover Page and Sections 13 and 14, if applicable. For the APR, the Cover Page requires an official signature.

The NHHP data is used to verify that planned activities are eligible, expenditures are reasonable, and DHHL certifies compliance with related requirements. The APR data is used to audit the program accurately and monitor DHHL's progress in completing approved activities, including reported expenditures, outputs, and outcomes. This form is exempt from OMB Approval pursuant to 5 CFR 1320.3(4)(c).

TABLE OF CONTENTS

SECTION PAGE NUMBER

COVER PAGE 3
SECTION 1: FIVE YEAR PLAN 5
SECTION 2: HOUSING NEEDS 10
SECTION 3: PROGRAM DESCRIPTIONS 15
SECTION 4: AFFORDABLE HOUSING RESOURCES 48
SECTION 5: BUDGETS 548
SECTION 6: OTHER SUBMISSION ITEMS 57
SECTION 7: NATIVE HAWAIIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE 53
SECTION 8: SELF-MONITORING 60
SECTION 9: INSPECTIONS 61
SECTION 10: AUDITS 62
SECTION 11: PUBLIC AVAILABILITY 63
SECTION 12: JOBS SUPPORTED BY NAHASDA 64
SECTION 13: NHHP WAIVER REQUESTS 65
SECTION 14: NHHP AMENDMENTS 66

Note: The page numbers in the Table of Contents can update automatically as the NHHP or APR is completed. To update the page numbers, right-click anywhere in the table, select "Update Field" and select "update page numbers only."

COVER PAGE

(1) Grant Number: **15HBGHI0001; 17HBGHI0001; 18HBGHI0001; 19HBGHI0001; 20HBGHI0001; 21HBGHI0001; 22HBGHI0001; 23HBGHI0001**

(2) Recipient Fiscal Year: **2024**

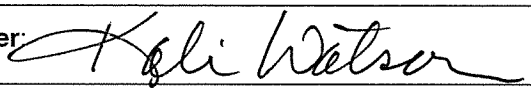
(3) Federal Fiscal Year: **2023**

(4) ☒ Initial Plan (Complete this Cover Page then proceed to Section 1)

(5) ☐ Amended Plan (Complete this Cover Page and Section 14)

(6) ☐ Annual Performance Report (Complete items 24-27 and proceed to Section 3)

(7) Name of Recipient: Department of Hawaiian Home Lands		
(8) Contact Person: Lehua Kinilau-Cano, NAHASDA Government Relations Program Manager		
(9) Telephone Number with Area Code: 808-620-9486		
(10) Mailing Address: PO Box 1879		
(11) City: Honolulu	**(12) State:** HI	**(13) Zip Code:** 96805
(14) Fax Number with Area Code (if available): 808-620-9529		
(15) Email Address (if available): Nicole.L.Kinilau-Cano@hawaii.gov		

(16) Tax Identification Number: 99-0266483
(17) DUNS Number: 809935661
(18) CCR/SAM Expiration Date: 05/17/2023
(19) NHHBG Annual Grant Amount: $21,300,000
(20) Name of Authorized NHHP Submitter: Kali Watson
(21) Title of Authorized NHHP Submitter: Chairman, Hawaiian Homes Commission
(22) Signature of Authorized NHHP Submitter: 
(23) NHHP Submission Date: 04/17/2023
(24) Name of Authorized APR Submitter:
(25) Title of Authorized APR Submitter:
(26) Signature of Authorized APR Submitter:
(27) APR Submission Date:

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 18 U.S.C 1001. 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.

SECTION 1: FIVE YEAR PLAN

The Five Year Plan is intended to cover the Department of Hawaiian Home Lands' (DHHL) long range plans for affordable housing. Each housing plan must contain, for the five-year period beginning with the fiscal year for which the plan is first submitted, the following information.

Five Year Period: **2023** through **2027**

MISSION STATEMENT (NAHASDA § 803(b)(2)(A))

A Mission Statement describes the mission of the DHHL to serve the needs of Native Hawaiian low-income families.

Enter the DHHL's Mission Statement here:

To manage the Hawaiian Home Lands Trust effectively and to develop and deliver land to native Hawaiians. We will partner with others toward developing self-sufficient and healthy communities.

GOALS, OBJECTIVES AND PROGRAMS/ACTIVITIES (NAHASDA § 803(b)(2)(B) and (C))

DHHL must provide a statement of the goals, objectives, and programs/activities planned for the beneficiaries over the five year period. The goals are the intended result of the NHHBG activity and are based on the types of outcomes that the DHHL will report in the APR. The objectives are the means or approach that the DHHL will use to reach the goal. The programs/activities are the specific programs/activities that will be funded in order to achieve the goal and the objective.

Goals May Include:

(1) Reduce over-crowding
(2) Assist renters to become homeowners
(3) Improve quality of substandard units
(4) Address homelessness
(5) Create new affordable rental units
(6) Assist affordable housing for college students
(7) Provide accessibility for disabled/elderly persons
(8) Improve energy efficiency
(9) Reduction in crime reports
(10) Other

Objectives May Include:

(1) [RESERVED – DO NOT USE THIS NUMBER]
(2) [RESERVED – DO NOT USE THIS NUMBER]
(3) Acquisition of rental housing
(4) Construction of rental housing
(5) Rehabilitation of rental housing
(6) Acquisition of land for rental housing development
(7) Development of emergency shelters
(8) Conversion of other structures to affordable housing
(9) Other rental housing development
(10) Acquisition of land for homebuyer unit development
(11) New construction of homebuyer units
(12) Acquisition of homebuyer units
(13) Downpayment/Closing cost assistance
(14) Lending subsidies for homebuyers
(15) Other homebuyer assistance activities
(16) Rehabilitation assistance to existing homeowners
(17) Tenant based rental assistance
(18) Other Housing Service
(19) Housing Management Services
(20) Operation and maintenance of NHHBG units
(21) Crime Prevention and Safety
(22) Model Activities
(23) [RESERVED – DO NOT USE THIS NUMBER]
(24) Infrastructure to support housing
(25) [RESERVED – DO NOT USE THIS NUMBER]

Use the sections below to describe the DHHL's goals, objectives, and programs/activities during the five year period.

Goal(s) Number: I.	(2) Assist renters to become homeowners

Select from the goals listed above.

Objective(s) Number: Ia.	(24) Infrastructure to support housing

Select from the objectives listed above.

Program/Activity Description: Infrastructure Development (Statewide)	To develop lots statewide.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: II.	(5) Create new affordable rental units

Select from the goals listed above.

Objective(s) Number: IIa.	(4) Construction of rental housing

Select from the objectives listed above.

Program/Activity Description: Developer Financing	This activity provides NAHASDA funding as part of a capital stack to conduct vertical construction of rental units.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: III.	(2) Assist renters to become homeowners

Select from the goals listed above.

Objective(s) Number: IIIa.	(14) Lending subsidies for homebuyers

Select from the objectives listed above.

Program/Activity Description: Homeowner Financing (Statewide)	To provide NHHBG-funded home loans to lessee families for new construction or home purchase.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: IV.	(3) Improve quality of substandard units

Select from the goals listed above.

Objective(s) Number: IVa.	(16) Rehabilitation assistance to existing homeowners

Select from the objectives listed above.

Program/Activity Description: Home Assistance Program (Statewide)	This activity provides three types of assistance: (1) a deferred, no payment loan up to $100,000; (2) a small repayment loan (up to $100,000) for costs exceeding the original $100,000 amount; or (3) a demolition/new build loan for properties where cost to repair exceed the appraised or tax assessed value.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: V.	(4) Address homelessness

Select from the goals listed above.

Objective(s) Number: Va.	(17) Tenant based rental assistance

Select from the objectives listed above.

Program/Activity Description: Waimanalo Kupuna Housing Rental Assistance	The use of NHHBG funds in the project is primarily to supplement tenants rent at the Waimanalo Kupuna Housing so their maximum contribution does not exceed 30% of their gross monthly income. Built in 2002 utilizing Low Income Housing Tax Credits, this subsidy will assist in stabilizing rental increases over the remainder of the project's LIHTC existence.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: VI.	(4) Address homelessness

Select from the goals listed above.

Objective(s) Number: VIa.	(17) Tenant based rental assistance

Select from the objectives listed above.

Program/Activity Description: Rental Vouchers	This activity establishes the use of rental housing vouchers for eligible beneficiaries. Provides financial assistance to families facing eviction, experiencing homelessness or at risk of homelessness.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: VII.	(10) Other

Select from the goals listed above.

Objective(s) Number: VIIa.	(18) Other Housing Service

Select from the objectives listed above.

Program/Activity Description: Housing Counseling	At minimum, every family that receives NHHBG assistance will be offered financial literacy education; case management assistance; and servicing by housing counseling vendor.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: VIII.	(10) Other

Select from the goals listed above.

Objective(s) Number: VIIIa.	(18) Other Housing Service

Select from the objectives listed above.

Program/Activity Description: Homeowner Assistance	This activity is aimed at mitigating financial hardships by providing financial assistance to promote housing stability.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: IX.	(3) Improve quality of substandard units

Select from the goals listed above.

Objective(s) Number: IXa.	(24) Infrastructure to support housing

Select from the objectives listed above.

Program/Activity Description: Potable Water Development (Statewide)	This activity will support the development and delivery of potable water to new and existing homesteads.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: X.	(4) Address homelessness

Select from the goals listed above.

Objective(s) Number: Xa.	(8) Conversion of other structures to affordable housing

Select from the objectives listed above.

Program/Activity Description: Housing Conversion	This activity supports the conversion of existing land and structures to affordable housing.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: XI.	(5) Create new affordable rental units

Select from the goals listed above.

Objective(s) Number: XIa.	(6) Acquisition of land for rental housing development

Select from the objectives listed above.

Program/Activity Description: Property Acquisition (Oahu – Priority)	This activity will support the purchase of land or existing structure(s) for rental housing.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

Goal(s) Number: XII.	(5) Create new affordable rental units

Select from the goals listed above.

Objective(s) Number: XIIa.	(4) Construction of rental housing

Select from the objectives listed above.

Program/Activity Description: Supplemental Dwelling Unit Financing	This activity will provide NHHBG funding to residential lessees on Hawaiian Home Lands to finance construction of a supplemental dwelling unit that will be used as an affordable rental.

Describe the planned program/activity and indicate how it will enable DHHL to meet its mission, goals, and objectives.

SECTION 2: HOUSING NEEDS

(NAHASDA § 803(c)(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 Native Hawaiian families (columns B and C) and non-low-income Native Hawaiian families, including non-Native Hawaiian essential families [809(a)(2)(B) and (C)] (column D) eligible to be served by DHHL.

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

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

The Hawaiian Homes Commission Act of 1920, as amended, established the Hawaiian Home Lands Trust and defined the population eligible to reside on Hawaiian home lands as those native Hawaiians with no less than 50% Hawaiian blood and their successors or assignees of less than 50% Hawaiian blood. With approximately 9,205 leases on homesteads stretching from Hawaii Island to Kauai, the Department of Hawaiian Home Lands was created at statehood to assist the commission in meeting its fiduciary obligations.

DHHL, through SMS Research, completed its 2020 Beneficiary Survey detailed in the *DHHL Beneficiaries Study Lessee Report, 2020* and the *DHHL Beneficiaries Study Applicant Report, 2020.*

The native Hawaiian subset for the purpose of this plan is determined as follows:

9,205	Lessees residing on the DHHL lands — as of December 31, 2022[1]
23,725	Unduplicated waitlist as of December 31, 2022[2]
21,399	Estimated Potential Applicants based on SMS 2019 respondents[3]
54,329	**Total native Hawaiian individuals/households**

The *DHHL Beneficiaries Study Lessee Report, 2020* detailed the following about HUD Median Income: "While the median household income has consistently increased, the percentage of Lessee households classified as earning 80 percent or less of the Department of Housing and Urban Development (HUD) Area Median Income (AMI) has risen. In 2008, 46 percent of Lessee households were considered low income according to the HUD guidelines. By 2014, this had increased to 55 percent. The percentage of Lessee households considered low income stayed about the same at 56 percent in 2020."

The *DHHL Beneficiaries Study Applicant Report, 2020* noted the following about HUD Income Categories: "In 2020, the percent of applicant households below 80 percent of HUD AMI level is back up to 51 percent."

5,155	Lessees residing on the DHHL Lands – 9,205 x 56%
12,100	Applicants – 23,725 x 51%
12,197	Potential Applicants – 21,399 x 57% (SMS 2019 Study)
29,452	**Total native Hawaiian households eligible for NAHASDA**

If we extrapolate and say that the average DHHL turnkey home is $350,000, then the sufficient funding amount for NAHASDA would look like this:

12,100 Applicants – 23,725 x 51%				
12,197 Potential Applicants – 21,399 x 57% (SMS 2019 Study)				
24,297	x	$350,000	=	**$8,503,950,000.00 sufficient funding for NAHASDA**

Additional Research - 2017 HUD Report

Some of the key findings of *the Housing Needs of Native Hawaiians: A Report From the Assessment of American Indian, Alaska Native, and Native Hawaiian Housing Needs* prepared for HUD and dated May 2017 include the following:

- Native Hawaiian households tend to be larger. In 2010, the average size of a Native Hawaiian's household was 4.1 people compared with 2.7 people for residents of Hawaii households.

1 Homestead Services Division, 1/17/23 Commission submittal. Includes lessees residing on residential, agricultural and pastoral lots, one lessee per lease, one house per lease/lot, as applicable. 773 Undivided Interest lessees omitted.
2 *Ibid.*
3 The SMS Hawaii Housing Policy Study, 2019 included a category for native Hawaiians with at least 50% blood quantum and not DHHL lessees or applicants.

- Although improvements were made during the 2000-to-2010 decade, Native Hawaiians living in Hawaii continue to be more economically disadvantaged: they have lower incomes, higher rates of assistance receipt, and higher poverty rates than do other residents of Hawaii.

- Native Hawaiian households also experience higher rates of overcrowding (15 percent) compared with residents of Hawaii households (8 percent).

- Homelessness among Native Hawaiians is prevalent. Although not typically chronically homeless, they are overrepresented in Hawaii's homeless population. Homeless Native Hawaiians often have jobs but cannot afford housing, so they double up (hidden homeless) or live in tents, shelters, cars, or garages.

- HHCA beneficiary households on the waiting list are more economically disadvantaged than are Native Hawaiian households overall, residents of Hawaii households, and Native Hawaiian households living on the home lands.
  - HHCA beneficiary households on the waiting list have the lowest median income of all four groups by a substantial margin: $48,000 compared with more than $60,000 for all other groups.
  - HHCA beneficiaries on the waiting list also receive public cash assistance at more than twice the rate of the other groups: about 20 percent of households on the waiting list received public cash assistance compared with about 7 percent of Native Hawaiians and those living on the home lands and 3 percent for residents of Hawaii.

- HHCA beneficiary households on the waiting list face more significant housing challenges across all dimensions than do the other groups.
  - Nearly 40 percent of HHCA beneficiary households on the waiting list were overcrowded compared with only 19 percent of households on sampled Hawaiian home lands, 15 percent of the state's Native Hawaiian households, and 8 percent of residents of Hawaii households.
  - About 10 percent of HHCA beneficiary households on the waiting list lack complete plumbing compared with 1 percent for all other groups.
  - Nearly one-half (46 percent) of HHCA beneficiary households on the waiting list experience cost burden compared with 40 percent of Native Hawaiian households, 42 percent of residents of Hawaii households, and only 21 percent of households on the sampled Hawaiian home lands. The much lower rate of cost burden among home lands households is due, at least in part, to the financial benefits of home lands leases, which reduce monthly housing costs, including minimal lease payments for the land and a 7-year exemption from real estate property tax.

Native Hawaiian Rehabilitation

The statistics shared in preceding paragraphs are not new to the native Hawaiians. Over 100 years ago, moved by the poor living conditions and low incomes of his people, Prince Jonah Kuhio Kalanianaole created the Ahahui Puuhonua o Na Hawaii, an organization comprised of royal men of lesser rank than himself who collectively served as the catalyst toward the chronicling of the despair and destitution of the makaainana (commoner) in 1911.

The work of the Ahahui Puuhonua o Na Hawaii and its members provided Prince Kuhio the much-needed data to create support, both in Hawaii and abroad in Washington, D.C. to pass the HHCA.

Through the Prince's leadership and participation in each of these community endeavors, the legacy of the Prince lives on for us today. This housing plan, a descendant of Kuhio's legacy thru the HHCA, is but a small piece of a much broader articulation of need in the State of Hawaii today. By focusing on housing, this most basic of needs acknowledged in the Western world, the department attempts to participate in the rehabilitation of the Hawaiian people. Should every Hawaiian have a safe, affordable, decent home, with fresh water for bathing and eating and cooking and food grown or gathered nearby, we could claim success. But with over $8 billion in need and as the average 59-year-old applicant dies on the waiting list, it does not seem likely we will be able to make such a claim without immediate and swift monetary assistance in the next few years.

(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 § 803(c)(2)(B)):*

The planned programs and activities are aimed at assisting as many native Hawaiian households that earn 80% or less of HUD AMI to realize homeownership as part of the ongoing lot awards and production. The 2017 HUD Report noted that "many renters (63 percent) on the HHCA beneficiary waiting list who would prefer to own a home are unable to do so because they cannot afford a downpayment or save enough for a house." Thus, focus will be on homeowner financing and leveraged loans with USDA Rural Housing to provide new awardees with the opportunity for safe, affordable and decent housing.

While the 2017 HUD Report noted that HHCA beneficiary households on the waiting list face more significant housing challenges, lessees, especially in our older homestead communities face aging substandard housing. The 2020 Beneficiary Study Lessee Report identified 2,538 lessees that earn 80% or less of HUD AMI with a house needing either minor or major repairs. The planned home assistance program is geared to addressing this need.

DHHL recognizes the need for increased housing stability, especially as families have experienced financial hardships associated with the Coronavirus pandemic and took swift action first by approving the postponement of mortgage loan payments for all DHHL direct loans and loans assigned to DHHL. DHHL also initially utilized NAHASDA funds to provide emergency rental and homeowner assistance and has since received other federal funds for this purpose. The planned rental voucher program will build upon the initial temporary relocation and emergency assistance by expanding to kupuna (elders) who have been on the waiting list the longest in an effort to provide financial assistance for those at risk of homelessness or facing financial hardship.

The 2017 HUD Report identified homelessness among Native Hawaiians as a significant problem, but also acknowledged that data is not available for only Native Hawaiians. In an effort to fill this gap, DHHL entered into a Memorandum of Understanding with Partners in Care – Oahu Continuum of Care to understand how pervasive the situation of homelessness might be among its beneficiaries and especially those on its homestead applicant waiting list. The conversion of an existing structure to a transitional housing facility is intended to begin addressing this need.

DHHL's Oahu Island Plan noted that approximately 1,390 acres of land suitable for residential development is necessary to meet the homestead needs of all applicants on the residential list that are not otherwise accommodated assuming full implementation of the Oahu Island Plan. One of the program activities would be to develop site selection criteria to screen land and existing structure(s) to identify possible lands and existing structure(s) for residential units.

Infrastructure to support housing on land currently under DHHL's jurisdiction or future land or units acquired is a separate program activity. In addition to existing developments, these areas will likely be expanded to cover lands recently transferred to DHHL in Ewa, Oahu. Water is just as critical to homestead development as land. DHHL secured approved water reservations for DHHL's foreseeable groundwater needs statewide and the potable water infrastructure improvements would allow for improved and increased potable water service delivery. NAHASDA funding for developer financing will supplement the cost to construct affordable housing.

All NAHASDA assisted activities will be supported by housing counseling for both homeowners and renters.

(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, including the needs for various categories of housing assistance. NAHASDA § 803(c)(2)(B)(i)):*

The 2020 Beneficiary Study Applicant Report provided HUD Income Categories by Island as follows:

80%	Oahu		Maui		Hawaii		Kauai		Molokai		Lanai		Total	
or >	#	%	#	%	#	%	#	%	#	%	#	%	#	%
AMI	6824	61%	1282	12%	2048	18%	600	5%	368	3%	36	.3%	11,158	99.3%

This distribution is similar to the % of DHHL Applicants by Island:

	Oahu	Maui	Hawaii	Kauai	Molokai	Lanai	Total
% App	57%	12%	21%	6%	3%	.3%	99.3%

NAHASDA-Assisted units by island to date align closely to this distribution and is expected to continue, but notes that assistance to neighbor islands is above the percent of households classified as earning 80 percent or less of the HUD AMI:

	Oahu	Maui	Hawaii	Kauai	Molokai	Lanai	Total
% Assisted	49%	15%	19%	8%	7%	2%	100%

SECTION 3: PROGRAM DESCRIPTIONS

(NAHASDA § [803(c)(2)(A)], [802(c)], [820(b)], 24 CFR §1006.410(b)(2) and (3)])

Planning and Reporting on Program Year Activities

For the NHHP, the purpose of this section is to describe each program that will be operating during the 12-month fiscal year. Each program must include the eligible activity, its planned outputs, intended outcome, who will be assisted, and types and levels of assistance. Each of the eligible activities has a specific, measurable output. The first column in the table below lists all eligible activities, the second column identifies the output measure for each eligible activity, and the third column identifies when to consider an output as completed for each eligible activity. Copy and paste text boxes 1.1 through 1.10 as often as needed so that all of your planned programs are included.

For the APR, the purpose of this section is to describe your accomplishments, actual outputs, actual outcomes, and any reasons for delays.

Eligible Activities May Include (citations below reference sections in NAHASDA)

Eligible Activity	Output Measure	Output Completion
(1) RESERVED – DO NOT USE THIS NUMBER		
(2) RESERVED – DO NOT USE THIS NUMBER		
(3) Acquisition of Rental Housing [810(b)(1)]	Units	When recipient takes title to the unit
(4) Construction of Rental Housing [810(b)(1)]	Units	All work completed and unit passed final inspection
(5) Rehabilitation of Rental Housing [810(b)(1)]	Units	All work completed and unit passed final inspection
(6) Acquisition of Land for Rental Housing Development [810(b)(1)]	Acres	When recipient takes title to the land
(7) Development of Emergency Shelters [810(b)(1)]	Households	Number of households served at any one time, based on capacity of the shelter
(8) Conversion of Other Structures to Affordable Housing [810(b)(1)]	Units	All work completed and unit passed final inspection
(9) Other Rental Housing Development [810(b)(1)]	Units	All work completed and unit passed final inspection
(10) Acquisition of Land for Homebuyer Unit Development [810(b)(1)]	Acres	When recipient takes title to the land
(11) New Construction of Homebuyer Units [810(b)(1)]	Units	All work completed and unit passed final inspection
(12) Acquisition of Homebuyer Units [810(b)(1)]	Units	When recipient takes title to the unit
(13) Down Payment/Closing Cost Assistance [810(b)(1)]	Units	When binding commitment signed
(14) Lending Subsidies for Homebuyers (Loan) [810(b)(1)]	Units	When binding commitment signed
(15) Other Homebuyer Assistance Activities [810(b)(1)]	Units	When binding commitment signed
(16) Rehabilitation Assistance to Existing Homeowners [810(b)(1)]	Units	All work completed and unit passed final inspection
(17) Tenant Based Rental Assistance [810(b)(2)]	Households	Count each household once per year
(18) Other Housing Service [810(b)(2)]	Households	Count each household once per year

(19) Housing Management Services [810(b)(3)]	Households	Count each household once per year
(20) Operation and Maintenance of NHHBG-Assisted Units [810(b)(3)]	Units	Number of units in inventory at Fiscal Year End
(21) Crime Prevention and Safety [810(b)(4)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(22) Model Activities [810(b)(5)]	Dollars	Dollars spent (report in Uses of Funding Table only)
(23) RESERVED – DO NOT USE THIS NUMBER		
(24) Infrastructure to Support Housing [810(b)(1)]	Improved Lots	All work completed and lot passed final inspection
(25) RESERVED – DO NOT USE THIS NUMBER		

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 (NHHP) and 1.5 (APR)

NHHP: PLANNED FISCAL YEAR ACTIVITIES (NAHASDA § 803(c)(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 2014-1, 2014-2, 2014-3, etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, 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. The programs under the second eligible activity would be numbered as 2.1, 2.2., 2.3, etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 820(b))

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 fiscal year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133* 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 fiscal year.

*DHHL should note that new Federal government regulations on Administrative Requirements, Cost Principles, and Audit Requirements were promulgated on December 26, 2013 at 2 C.F.R. Part 200. HUD intends to update its regulations by December 26, 2014 to implement these new requirements in its programs. In the meantime, applicable OMB Circulars and the regulations at 2 C.F.R. Part 225 will continue to apply to existing grants. After HUD implements the new requirements in 2 C.F.R. Part 200 (after December 26, 2014), all grants will be subject to 2 C.F.R. Part 200, as implemented by HUD.

1.1 Program Name and Unique Identifier: 2023 Capital Improvement Projects (AHP I)

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

This activity develops lots for residential use on Trust Lands statewide.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(24) Infrastructure to Support Housing [810(b)(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.):*

(2) Assist renters to become homeowners

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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Undivided interest lessees and applicants meeting the 80% AMI income guidelines will receive vacant or improved lots for new home construction.

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

This activity covers the cost of the infrastructure for projects, including planning, design, engineering, construction, and construction management services. The level of NAHASDA funding for this activity is expected to slightly increase because in addition to the existing contract for engineering services in East Kapolei IIC, Oahu, planning is expected to begin for the lands transferred to DHHL in Ewa, Oahu. Other proposed developments may also require infrastructure funding.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Improved Lots	0	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Developer Financing (AHP II)

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

This activity will provide funding as part of a capital stack for vertical construction of rental housing on Trust Lands statewide.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(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.):*

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Undivided interest lessees and applicants meeting the 80% AMI income guidelines will have the opportunity to rent or rent with an option to purchase their unit. NAHASDA guidelines for rental projects keep the unit rents at or below 30% of the family's monthly adjusted income.

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 assistance being provided will go directly to the developer as part of the capital stack for vertical construction financing of approximately 30 rent with option to purchase units in the Villages of Lai Opua. If the unit purchase price at the end of the rental period is reduced in direct proportion to the amount of NHHBG developer financing provided, then the assistance will be in the form of a grant, otherwise the financing will be in the form of a loan that needs to be repaid.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Units	0	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Homeowner Financing (AHP III)

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

This activity utilizes the Department's Direct Loan program, providing homeowner financing to eligible NAHASDA families for new construction or home purchase. DHHL is working to identify families in upcoming project areas for direct loans.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(14) Lending Subsidies for Homebuyers (Loan) [810(b)(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.):*

(2) Assist renters to become homeowners

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.):*

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Molokai: 2 families

Maui: 1 family

Hawaii: 5 families

Oahu: 6 families

Kauai: 8 families

Lanai: 2 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.)*: Financing for home loans statewide utilizing NHHBG funds up to the appraised value for projects in areas listed in 1.6.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Units	5	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Home Assistance Program (HAP) (AHP IV)

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

This program covers the department's attempt to address substandard and/or aging housing on the homelands by providing assistance to low income households to repair their existing homes, including home replacement (demolition & construction), energy retrofit, building code compliance, and home repair.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Lessee families at or below the 80% AMI income guidelines identified over the past few years are being assisted.

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

Deferred, no-payment loans, subject to conditional recapture, as defined by HAP will be provided. NAHASDA eligible families will receive $100,000 to repair their home according to Housing Quality Standards that would prioritize repairs for the home. Those families whose homes have been identified as needing more than $100,000 to fix repairs are offered 1% loans on the amount that exceeds the first $100,000, up to an additional $100,000. A demolition/new build loan is the third option offered for properties where cost to repair exceed the appraised or tax assessed value.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Units	2	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Waimanalo Kupuna Housing Rental Assistance (AHP V)

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

This activity provides funds primarily to supplement tenants rent at the Waimanalo Kupuna Housing so their maximum contribution does not exceed 30% of their monthly adjusted income.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

NAHASDA eligible elders whose income is at or below 80% AMI and who are tenants of this rental housing project, with up to 85 units, on Trust Lands in Waimanalo.

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

This elderly housing project was first occupied in 2002 and constructed with funds from the state's Low Income Housing Trust Fund and Rental Housing Trust Fund along with funds from DHHL and the Office of Hawaiian Affairs. Many of the elderly are living on fixed income and cannot afford current rental rates under Hawaii Housing and Finance Development Corporation (HHFDC) which oversees the project and approves the rates from the developer. The monthly rental amount continues to remain affordable. Nevertheless, the subsidy has recently increased annually to adequately cover the difference between the NAHASDA required 30% cap on tenant's monthly adjusted income and the approved LITHC rent.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	70	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Rental Vouchers for Temporary Relocation (AHP VI-A)

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

This activity provides funds for rental housing vouchers (first month rent/deposit/emergency rent) for temporary relocation assistance.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands whose income is at or below 80% AMI.

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

This activity will provide for temporary relocation assistance for duration of time to construct or repair primary residence.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	2	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Emergency Rental and Utilities Assistance Program (AHP VI-B)

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

This activity provides funds for rental housing vouchers (rent/security deposit) for emergency assistance (rent, rental arrears, utilities, or utility arrears) to mitigate financial hardships associated with the Coronvirus pandemic to ensure housing stability.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(5) Address homelessness

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

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

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands whose income is at or below 80% AMI.

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

DHHL will contract with a service provider to provide emergency rental assistance (rent, rental arrears, utilities, or utility arrears) for a period not to exceed 12 months except that assistance may be provided for an additional 6 months only if necessary to ensure housing stability for a household subject to availability of funds. The maximum monthly assistance for an eligible household to receive will be the greater of either the maximum monthly amount set by each County for similar emergency rental and utilities assistance programs or the Fair Market Rent within the island or zip code area.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	10	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: DHHL Kupuna Rental Subsidy Program (AHP VI-C)

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

This activity provides funds for rental housing vouchers (rent/security deposit) for kupuna (elders) who are sixty-two years of age or older and head of household starting with those who have been on DHHL's waiting list the longest to ensure housing stability.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(5) Address homelessness

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

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

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian kupuna (elders) who are sixty-two years of age or older and head of household starting with those who have been on DHHL's waiting list the longest that are eligible to reside on the Hawaiian Home Lands whose income is at or below 80% AMI.

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

DHHL will contract with a service provider to provide rental subsidies that will be reviewed on an annual basis subject to availability of funds. The monthly rental subsidy will be the difference between no more than 30% of the household's monthly adjusted income which will be paid by the kupuna (elder) of an eligible household and the Fair Market Rent within the zip code area.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	100	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Rental Vouchers for Units Developed for DHHL (AHP VI-D)

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

This activity provides funds for rental housing vouchers (rent/security deposit) for rental units developed for DHHL currently consisting of rent with option to purchase units in the Villages of Lai Opua upon entering into an agreement with the property management company.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(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.*):

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands whose income is at or below 80% AMI and reside in a rental unit developed for DHHL.

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

This activity will provide for rental assistance that will be reviewed on an annual basis subject to availability of funds. The monthly rental assistance will be the difference between no more than 30% of the household's monthly adjusted income which will be paid by the eligible household and the Fair Market Rent within the zip code area.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	5	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Housing Counseling (AHP VII)

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

Independent, expert advice customized to the need of the Native Hawaiian lessee, applicant or household to address housing barriers in order to achieve housing goals through homeownership counseling or rental housing counseling and include the following processes: intake, financial and housing affordability analysis, an action plan, and a reasonable effort to have follow-up communication when possible.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 Service [810(b)(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.)*:

(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.)*:

Native Hawaiian lessee, applicants or households who received or are eligible to receive NAHASDA assistance including but not limited to homeowner financing, home repair assistance, rental and homeowner 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.)*:

Families who received NAHASDA assistance will receive either homeownership or rental housing counseling from a HUD-certified Housing Counselor. Homeownership counseling is housing counseling related to homeownership and residential mortgage loans that covers the decision to purchase a home, issues arising during or affecting the period of ownership of a home (including financing, refinancing, default, and foreclosure/lease cancellation, and other financial dispositions), and the sale/transfer or other disposition of a home. Rental housing counseling is counseling related to the rental of residential property, which may include counseling regarding future homeownership opportunities and may also include the decision to rent, responsibilities of tenancy, affordability of renting and eviction prevention. At a minimum, initial contact will be made with lessee, applicants or households who received NAHASDA assistance informing them of the availability of housing counseling services.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	150	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Homeowner Assistance (AHP VIII)

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

This activity provides funds for homeowner assistance (mortgage, utilities, insurance, or association fees) to mitigate financial hardships to promote housing stability and/or to prevent lease cancellation.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 Service [810(b)(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.):*

(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands whose income is at or below 80% AMI.

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

DHHL will contract with a service provider to provide homeowner assistance (mortgage, utilities, insurance or association fees) for a period not to exceed 12 months except that assistance may be provided for an additional 6 months only if necessary to ensure housing stability and/or to prevent lease cancellation on a home subject to availability of funds. The maximum monthly assistance for an eligible household to receive will be the maximum amount set by each County for similar homeowner assistance programs.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Households	10	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Existing Potable Water Infrastructure Improvements (AHP IX)

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

This activity will utilize NHHBG funding for engineering, construction, and construction management services for the Molokai Water System Improvements. These funds will be leveraged with funding from USDA to improve potable water infrastructure for Hoolehua, Molokai.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(24) Infrastructure to Support Housing [810(b)(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.):*

(4) Improve quality of existing infrastructure

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.):*

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 exceed 80 percent of the median should be included as a separate program within this section.):*

New and existing lessees in homestead areas with approved USDA DHHL applications would be assisted with potable water infrastructure improvements.

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

Improved potable water service delivery and/or new potable water service delivery for lessees in homestead areas with an approved DHHL USDA water application.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Improved Lots	0	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Housing Conversion (AHP X)

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

This activity involves the conversion of existing structures to transitional or affordable housing.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(8) Conversion of Other Structures to Affordable Housing [810(b)(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.):*

(5) Address homelessness

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

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

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands whose income is at or below 80% AMI would be assisted through transitional or affordable rental housing.

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 assistance will provide funding to rehabilitate an existing building for transitional or affordable rental housing.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Units	0	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Property Acquisition (AHP XI)

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

This activity provides funds for the development of site selection criteria to screen land and existing structure(s) while meeting HUD environmental thresholds. Through GIS analysis, and other real estate assessment tools, this site selection criteria will be used to research and identify possible available lands and existing structure(s) for residential units. Land or existing structure(s) for rental housing will then be acquired upon completion of the environmental review process.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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.):*

(6) Acquisition of Land for Rental Housing Development [810(b)(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.):*

(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands at or below the 80% AMI income guidelines will be assisted when land or existing structure(s) is acquired and rental units are made available.

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

Land or existing structure(s) will be purchased to provide rental units to increase affordable housing inventory.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Acres	2	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

1.1 Program Name and Unique Identifier: Supplemental Dwelling Unit Financing (AHP XII)

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

This activity provides funds to residential lessees on Hawaiian Home Lands to finance construction of a supplemental dwelling unit that will be used as an affordable rental by an eligible Native Hawaiian family.

1.3 Eligible Activity Number *(Select one activity from the Eligible Activity list. 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 [810(b)(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.):*

(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.)*:

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 exceed 80 percent of the median should be included as a separate program within this section.):*

Native Hawaiian families eligible to reside on Hawaiian Home Lands whose income is at or below 80% AMI income would be assisted with affordable rental 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.)*:

Financing for supplemental dwelling units statewide utilizing NHHBG funds.

1.8 APR: *(Describe the accomplishments for the APR in the 12-month fiscal year in accordance with 24 CFR § 1006.410(b)(2) and (3)):*

1.9: Planned and Actual Outputs for 12-Month Fiscal Year

Type of Output to be Completed in Fiscal Year Under this Program. Enter one of following choices in accordance with the Eligible Activity: **Units; Households; Improved Lots; Acres**	Planned Number of **Outputs** to be completed in Fiscal Year Under this Program	APR: Actual Number of **Outputs** Completed in Fiscal Year
Units	0	

1.10: APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

1.11: APR: Describe the manner in which DHHL would change its housing plan as a result of its experiences. (24 CFR § 1006.410(b)(4)). NOTE: It is sufficient to provide one response to this item rather than an individual response for each NHHBG-funded program.

NOTE: Remember to complete all the text boxes in Section 3 for each NHHBG-funded program. If you are completing an electronic version of this form, you may copy and paste text boxes 1.1 through 1.11 as needed to describe each of your programs. If you are completing this form in hard copy, you may photocopy Section 3 as needed to describe each of your programs.

SECTION 4: AFFORDABLE HOUSING RESOURCES

This section of the NHHP is designed to provide the public with basic background information on the characteristics shaping DHHL's affordable housing programs. Each portion of the text below has several required components that must be discussed. DHHL is encouraged to carefully review the instructions for each section and provide text covering all required elements.

Housing Market (NAHASDA § 803(c)(2)(D)(i) and (ii)) *(Describe the key characteristics of the housing market in the State of Hawaii, currently, and in the period of time covered by the plan. Include a description of the availability of housing from other public sources and private market housing, and how this supply of housing affected the DHHL's program/activity choices.):*

The Hawaii Housing Planning Study, 2019 pointed out that the most distinctive characteristic of Hawaii's housing market is high prices. Hawaii also continues to have the highest average rents in the nation, followed by the District of Columbia and New York. For the past decade, Hawaii's median gross rent has consistently been 50 to 55 percent higher than the national median gross rent.

In addition, the Study noted the slowing of residential housing construction. Total housing units grew by about 5,600 units per year (2.2%) between 2009 and 2011. Between 2011 and 2014, growth slowed to 2,800 units per year – half what it was in the previous five years. Between 2014 and 2017, growth slowed further to about 2,675 units per year. In recent years, Hawaii has been building more units that aren't being used for Hawaii families.

The Study also reported that Hawaii has typically been in the top 15 percent of states losing housing units to vacancies. Hawaii ranked 12th for percent of total housing units held for seasonal, recreational, and occasional use in 2017. Only two states ranked higher than the counties of Hawaii, Kauai, and Maui with respect to the percent of total units held off the market for seasonal use. Across the State, there were differences in the percent of total housing units counted as housing stock. In Honolulu, 6.8 percent of all units were unavailable. In the other counties, that figure was significantly higher as in 19 percent for Kauai County, 16 percent in the County of Hawaii, and 13 percent for Maui County.

The Study further indicated that one in ten households statewide devotes 30 to 40 percent of their income to shelter costs. For nearly one-quarter of households statewide (23.1%), shelter payments take up more than 40 percent of their income each month. Most disturbing is the evidence that Hawaii's shelter to income ratios are higher than most of the nation. In 2019, the percentage of mortgage holders whose monthly housing cost was greater than 30 percent of monthly income was 40.3 percent, the highest in the nation. The percentage of renters paying more than 30 percent was 55.6 percent, ranking Hawaii third in the nation after Florida (59.0%) and California (57.2%). When you factor Hawaii's Housing Wage ($36.13) with the average wage of a renter in the state ($16.16), it is understandable that there are many households with high shelter-to-income. In 2018, Hawaii had the largest shortfall (-$19.98) between the average renter wage (amount renters earn) and the two-bedroom housing wage (amount required to afford an average two-bedroom rental unit).

Hawaii's crowding rate has long been among the highest in the nation. In 2017, Hawaii was ranked first in crowding for owner-occupied units (6.3%) and second for renter-occupied conditions (12.8%).

The department's NHHBG funded mortgage loans provide single family housing for the same or lower price than a studio in a multi-family high rise built by another housing agency in the urban core.

Without NHHBG funding, the department would be unable to build or finance housing for the 80% AMI or below target population.

Cooperation (NAHASDA § 803(c)(2)(D)(iii) *(Describe the structure, coordination, and means of cooperation between DHHL and other relevant partners and organizations [including private nonprofit organizations experienced in the planning and development of affordable housing] in the development, submission, or implementation of its housing plan. In addition, DHHL must indicate if it plans to use loan guarantees under Section 184A of the Housing and Community Development Act of 1992 and any other housing assistance provided by the Federal Government.):*

The department currently partners with a number of housing agencies and organizations either thru subject matter meetings or formal MOUs or agreements.

The Section 184A Loan Guarantee Program, which is similar to the Section 184 Loan Guarantee Program giving Native Americans access to private mortgage financing by providing loan guarantees to lenders, was implemented in 2007. Currently, 1st Tribal Lending, American Savings Bank, Bank of Hawai'i, CMG Financial, Cardinal Financial Company, Guardian Lending, DBA of Guardian One, Homebridge Financial Services, Inc., HomeStreet Bank, and MLD Mortgage Inc. dba The Money Store are approved lenders for the Section 184A loan program.

DHHL has been utilizing the FHA 247 loan program since 1987. Over $533 million in mortgage loans are outstanding through the FHA 247 loan program to lessees on Hawaiian home lands. The Veterans Affairs direct loan, Rural Development (U.S. Department of Agriculture) loan programs, and low-income housing tax credits are other financing options and tools utilized on Hawaiian home lands.

Demolition and Disposition (NAHASDA § 803(c)(2)(D)(viii), 24 CFR 1006.101(b)(4)(viii)) *(Describe any planned demolition or sale of NHHBG-assisted housing units, or any other demolition or disposition that will be carried out with NHHBG funds. Be certain to include a financial analysis of the proposed demolition, the timetable for any planned demolition or disposition and any other information that is required by HUD with respect to the demolition or disposition.):*

There are no 1937 Act housing on Hawaiian home lands. The DHHL does not anticipate demolishing any units funded by the NHHBG.

Coordination (NAHASDA § 803(c)(2)(D)(ix) *(Describe how DHHL will coordinate with partners to promote employment and self-sufficiency opportunities for residents of affordable housing.):*

The State of Hawai'i Department of Human Services (DHS) administers individual and family financial assistance programs that provide cash payments to help individuals and families meet their basic needs. The programs include Temporary Assistance to Needy Families (TANF), Temporary Assistance to Other Needy Families (TAONF), General Assistance (GA), Aid to the Aged, Blind and Disabled (AABD) and the Food Stamps program. Medical assistance is provided through the Hawai'i QUEST and Medicaid fee-for-services programs. Vocational rehabilitation services are provided to persons with disabilities. Whenever the DHHL staff is made aware of a lessee in need, the families are referred to DHS or to an appropriate non-profit service provider.

Safety (NAHASDA § 803(c)(2)(D)(x)) *(Describe how DHHL will promote crime prevention and resident involvement in affordable housing.):*

The DHHL continues to coordinate efforts with the Police Narcotics Division, the Sherriff's Office and the Attorney General's Office—Investigative Division to do surveillance and to evict the offending occupants whenever there is evidence of drug problems or other crimes in the homestead areas. If investigation results in a conviction, the lessee is taken to a contested case hearing for lease cancellation.

Capacity (NAHASDA § 803(c)(2)(D)(xi)) *(Describe the structure, capacity, and key personnel of the entities that will carry out the program/activities of the housing plan.):*

The DHHL was created by the State Legislature in 1964 to administer the Hawaiian home lands program and manage the Hawaiian home lands trust. The DHHL is one of eighteen principal agencies of the Executive Branch of the State of Hawai'i.

The DHHL serves native Hawaiians or individuals of no less than 50% Hawaiian blood, as defined by the Hawaiian Homes Commission Act of 1920, as amended, and their successors and assigns. These native Hawaiians are the beneficiaries of the Hawaiian home lands trust consisting of a land trust of over 200,000 acres, settlement monies from the State for the mismanagement of trust lands, funds received from the State general fund for operating costs, and revenues and earnings from the land leasing program.

The DHHL is governed by a nine-member board of commissioners headed by the Chairman, who also serves as the executive officer of the DHHL. The Governor of the State of Hawai'i appoints each commissioner and Chairman to a four-year term. The terms of the commissioners are staggered.

Currently, there are 123 full time employees in DHHL with six offices statewide. DHHL's main administrative office is located in Kapolei, Oahu and the five (5) district offices are located on neighbor islands. There are two (2) district offices on the Big Island, one in Hilo (East Hawaii) and one in Waimea (West Hawai'i), Hawai'i; one (1) district office in Lihue, Kauai; one (1) district office in Wailuku, Maui;and one (1) district office in Kalamaula, Molokai. DHHL is organized into five offices and three divisions under the Hawaiian Homes Commission and Office of the Chairman. The various offices and divisions are described as follows:

Office of the Chairman (OCH) — 22 staff members
The Office of the Chairman consists of the Chairman of the Hawaiian Homes Commission, who is also the Director of Department of Hawaiian Home Lands; the Deputy to the Chairman, the Executive Assistant; the NAHASDA Government Relations Program Manager, NAHASDA Program Specialist, NAHASDA Compliance Specialist, NAHASDA Construction Specialist, NAHASDA Mortgage Loan Assistant, NAHASDA Government Relations Program Specialist; and executive staff.

Administrative Services Office (ASO) – 9 staff members
The Administrative Services Office provides DHHL staff support in the areas of personnel, budgeting, program evaluation, information and communication systems, risk management, facilities management, clerical services and other administrative services.

Fiscal Office (FO) – 12 staff members
The Fiscal Office provides accounting support for DHHL.

Planning Office (PO) – 9 staff members
The Planning Office conducts research and planning studies required in the development of policies, programs, and projects to benefit native Hawaiians. The PO coordinates and develops the Regional Plans, administers the Native Hawaiian Development Program, provides capacity building training for homestead organizations, and provides community based grants for the implementation of Regional priority projects, community based economic development, and membership development.

Information and Community Relations Office (ICRO) – 2 staff members
The Information and Community Relations Office disseminates information to the public on Department issues, oversees community relations with the various homestead communities and coordinates DHHL's ceremonies. They also publish DHHL's annual reports to the State Legislature.

Homestead Services Division (HSD) – 42 staff members
HSD is composed of three branches: 1) Homestead Applications, 2) District Operations, and 3) Loan Services. HSD is the largest division in DHHL, has staff on all islands, and services more than 25,000 applicants and 9,000 lessees on five islands.

Land Management Division (LMD) – 7 staff members
LMD is responsible for managing Hawaiian home lands that are not used for homestead purposes. Unencumbered lands are managed and disposed of for long and short term uses in order to generate revenues and keep the lands productive while minimizing the occurrence of vegetative overgrowth, squatting or illegal dumping. LMD is responsible for properly managing the lands in DHHL's inventory.

Land Development Division (LDD) – 12 staff members
LDD is charged with the responsibility of developing trust lands for homesteading and income-producing purposes. This is accomplished through the development of properties for residential, agricultural, pastoral, and economic development uses. LDD has three operating branches: 1) Design and Construction – concentrating on the design and construction of off-site and on-site improvements for the various subdivisions; 2) Master-Planned Community – expediting the construction of housing options through partnerships with private sector and exploring other housing opportunities; and, 3) Housing Project—providing turn-key homes and assisting lessees of vacant lots in arranging financing and in contracting with a builder, including self-help and Habitat programs.

The following is a listing of the key personnel responsible for the implementation of DHHL and NAHASDA assisted programs:

Hawaiian Homes Commission (HHC)
Kali Watson, Chairman
Makai Freitas, West Hawaii Commissioner
Michael Kaleikini, East Hawaii Commissioner
Randy Awo, Maui Commissioner
Zachary Helm, Molokai Commissioner
Pauline Namuo, Oahu Commissioner
Patricia (Patty) Kahanamoku-Teruya, Oahu Commissioner
Russell Kaupu, Oahu Commissioner
Dennis Neves, Kauai Commissioner

Department of Hawaiian Home Lands
Kali Watson, Chairman
Katie Ducatt, Deputy to the Chairman
Richard Hoke, Executive Assistant
Brian Furuto, Acting Administrative Services Officer
Pearl Teruya, Fiscal Management Officer
Andrew Choy, Planning Program Manager
Lehua Kinilau-Cano, NAHASDA Government Relations Program Manager

Cynthia Rezentes, NAHASDA Program Specialist
Malia Cox, NAHASDA Compliance Specialist
Aloha Kaikaina, NAHASDA Construction Specialist
Kapuaala "Meleana" Kamai, NAHASDA Mortgage Loan Asst
Oriana Leao, NAHASDA Government Relations Program Manager
Michelle Hitzeman, HALE Manager
Juan Garcia, HSD Administrator
Nina Fisher, East Hawaii Homestead District Supervisor
James Du Pont, West Hawaii Homestead District Supervisor
Erna Kamibayashi, Kauai Homestead District Supervisor
Antonette Eaton, Maui Homestead District Supervisor
Dean Oshiro, Housing Services Loan Manager
Kip Akana, Enforcement Officer
Stewart Matsunaga, Acting Land Development Division Administrator
Kehaulani Quartero, Labor Compliance Specialist
Stephanie DeCoite, HHL Clerk Typist

SECTION 5: BUDGETS

(1) Sources of Funding (NAHASDA § 803(c)(2)(C)(i) and 820(b)(1)) *(Complete the **non-shaded** portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month fiscal 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 fiscal year.)***

	NHHP					APR					
SOURCE	(A) Estimated amount on hand at beginning of fiscal year	(B) Estimated amount to be received during 12-month fiscal year	(C) Estimated total sources of funds (A + B)	(D) Estimated funds to be expended during 12-month fiscal year	(E) Estimated unexpended funds remaining at end of fiscal year (C minus D)	(F) Actual amount on hand at beginning of fiscal year	(G) Actual amount received during 12-month fiscal year	(H) Actual total sources of funding (F + G)	(I) Actual funds expended during 12-month fiscal year	(J) Actual unexpended funds remaining at end of 12-month fiscal year (H minus I)	(K) Actual unexpended funds obligated but not expended at end of 12-month fiscal year
1. NHHBG Funds	20,000,000	21,300,000	41,300,000	19,840,000	21,460,000						
2. NHHBG Program Income	0	140,000	140,000	140,000	0						
LEVERAGED FUNDS											
3. Other Federal Funds	0	25,000	25,000	25,000	0						
4. LIHTC											
5. Non-Federal Funds											
TOTAL	20,000,000	21,465,000	41,465,000	20,005,000	21,460,000						

Notes:

a. For the NHHP, 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 Table** on the following page.

c. Total of Column I should match the Total of Column Q from the Uses Table on the following page.

d. For the NHHP, describe any estimated leverage in Line 3 below. For the APR, describe actual leverage in Line 4 below (APR).

(2) Uses of Funding (NAHASDA § 803(c)(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 fiscal year.)***

		NHHP			APR		
PROGRAM NAME (tie to program names in Section 3 above)	Unique Identifier	(L) Prior and current year NHHBG (only) funds to be expended in 12-month fiscal year	(M) Total all other funds to be expended in 12-month fiscal year	(N) Total funds to be expended in 12-month fiscal year (L + M)	(O) Total NHHBG (only) funds expended in 12-month fiscal year	(P) Total all other funds expended in 12-month fiscal year	(Q) Total funds expended in 12-month fiscal year (O+P)
2023 CIP	AHP I	250,000		250,000			
Developer Financing	AHP II	5,000,000		5,000,000			
Homeowner Financing	AHP III	1,335,000	165,000	1,500,000			
HAP	AHP IV	600,000		600,000			
Waimanalo Kupuna Housing Rental Asst	AHP V	830,000		830,000			
Rental Vouchers	AHP VI-A	50,000		50,000			
Emergency Rental	AHP VI-B	300,000		300,000			
Kupuna Rental	AHP VI-C	2,500,000		2,500,000			
Rental Vouchers for DHHL Units	AHP VI-D	125,000		125,000			
Housing Counseling	AHP VII	750,000		750,000			
Homeowner Assistance	AHP VIII	300,000		300,000			
Water Infrastructure Improvements	AHP IX	250,000		250,000			
Housing Conversion	AHP X	2,000,000		2,000,000			
Property Acquisition	AHP XI	5,000,000		5,000,000			
SDU Financing	AHP XII	150,000		150,000			
Planning and Administration		400,000		400,000			
Loan Repayment – describe in 3 and 4 below.							
TOTAL		19,840,000	165,000	20,005,000			

Notes:

a. Total of Column L cannot exceed the NHHBG funds from Column C, Row 1 from the Sources Table on the previous page.
b. Total of Column M cannot exceed the total from Column C, Rows 2-10 from the Sources Table on the previous page.
c. Total of Column O cannot exceed total NHHBG funds received in Column H, Row 1 from the Sources Table on the previous page.
d. Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources Table on the previous page.
e. Total of Column Q should equal total of Column I of the Sources Table on the previous page.

(3) Estimated Sources or Uses of Funding *(NAHASDA § 803(c)(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. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):*

The department anticipates $140,000 in program income. The estimated $25,000 in other federal funds is the repayment of the NHHBG subsidy when the lessee transfers their interest in the lease to a non-income eligible Native Hawaiian purchaser.

(4) APR (NAHASDA § 820(b)(1)) *(Enter any additional information about the actual sources or uses of funding, including leverage (if any).*

SECTION 6: OTHER SUBMISSION ITEMS

(1) Useful Life/Affordability Period(s) (NAHASDA § 813, 24 CFR § 1006.305) *(Describe your plan or system for determining the useful life/affordability period of the housing assisted with NHHBG funds. A record of the current, specific useful life/affordability period for housing units assisted with NHHBG funds must be maintained in DHHL's files and available for review for the useful life/affordability period.):*

DHHL has established the following affordability periods to describe the term during which DHHL will keep the unit affordable:

NHHBG Funds Invested	Affordability Period
Up to $24,999	5 years
$25,000 to $100,000	10 years
$100,001 to $200,000	20 years
$200,001 and above	30 years

The affordability period is based on the total amount of NHHBG funds invested in the development and/or rehabilitation of a housing unit. Resale and recapture provisions will be included as a condition of the Hawaiian homestead lease to enforce the affordability restriction for each assisted housing unit.

(2) Model Housing and Over-Income Activities (NAHASDA § 810(b)(5) and 809(a)(2)(B), 24 CFR § 1006.225 and 1006.301(b)) *(If you wish to undertake a model housing activity or wish to serve non-low-income households during the 12-month fiscal year, those activities may be described here. Each approved model activity must be included as a separate program in Section 3 (Program Descriptions) and the APR portions of Section 3 must be completed in the APR submission for any approved model activity.):*

None.

(3) Anticipated Planning and Administration Expenses (NAHASDA § 802(d), 24 CFR § 1006.230)

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

If yes, describe why the additional funds are needed for Planning and Administration.

(4) Actual Planning and Administration Expenses (NAHASDA § 802(d), 24 CFR § 1006.230)

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

If yes, did you receive HUD approval to exceed your spending cap on Planning and Administration? Yes ☐ No ☐

If you did not receive approval for exceeding your spending cap on Planning and Administration costs, describe the reason(s) for exceeding the cap.

SECTION 7: NATIVE HAWAIIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE
(NAHASDA § 803(c)(2)(E))

By signing the NHHP, you certify that you have all required policies and procedures in place in order to operate any planned NHHBG programs.

(1) In accordance with applicable statutes, the recipient certifies that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.) or with the Fair Housing Act (42 U.S.C. 3601 et seq.) in carrying out the NHHBG program, to the extent that such Acts are applicable, and other applicable federal statutes.

Yes ☒ No ☐

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

(2) The recipient will require 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 ☒ No ☐ Not Applicable ☐

(3) 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 ☒ No ☐ Not Applicable ☐

(4) 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 ☒ No ☐ Not Applicable ☐ and

(5) 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 ☒ No ☐ Not Applicable ☐

SECTION 8: SELF-MONITORING

(NAHASDA § 819(b), 24 CFR § 1006.401)

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

Yes ☐ No ☐

(2) Did you conduct self-monitoring, including monitoring sub-recipients?

Yes ☐ No ☐

(3) Self-Monitoring Results. *(Describe the results of the monitoring activities, including inspections for this program year.):*

SECTION 9: INSPECTIONS

(NAHASDA § 819(b))

(1) Inspection of Units *(Use the table below to record the results of inspections of assisted housing.)*

			Results of Inspections
(A) **Activity**		**(B)** **Total number of units inspected**	**(C)** **Total number of units (Inventory)**
NAHASDA-Assisted Units: Running inventory as of Fiscal Year Beginning (July 1) a 12-month total.			
a.	New Construction Completed		
b.	Rehab/Repair Completed		
c.	Rental Assistance (if applicable)		
d.	Other		
Total			

(2) Did you comply with your inspection policy: Yes ☐ No: ☐

(3) If no, why not:

SECTION 10: AUDITS

(24 CFR § 1006.375(d))

This section is used to indicate whether an Office of Management and Budget Circular A-133* audit is required, based on a review of your financial records.

Did you expend $500,000* or more in total Federal awards during the APR reporting period?

Yes ☐ No ☐

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

If No, an audit is not required.

*DHHL should note that new Federal government regulations on Administrative Requirements, Cost Principles, and Audit Requirements were promulgated on December 26, 2013 at 2 C.F.R. Part 200. HUD intends to update its regulations by December 26, 2014 to implement these new requirements in its programs. Audits covering recipients' fiscal years that begin in January 2015 will be subject to the revised audit requirements. In the meantime, applicable OMB Circulars and the regulations at 2 C.F.R. Part 225 will continue to apply to grants until implementation of the new requirements.

SECTION 11: PUBLIC AVAILABILITY

(NAHASDA § 820(d), 24 CFR § 1006.410(c))

(1) Did you make this APR available to the beneficiaries of the Hawaiian Homes Commission Act before it was submitted to HUD?

Check one: Yes ☐ No ☐

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

(3) Summarize any comments received from the beneficiaries (NAHASDA § 820(d)(2)).

SECTION 12: JOBS SUPPORTED BY NAHASDA
(NAHASDA § 820)

Use the table below to record the number of jobs supported with NHHBG funds each year (including DHHL staff, Subrecipient staff, Contractors, etc.).

Native Hawaiian Housing Block Grant Assistance (NHHBG)	
(1) Number of **Permanent** Jobs Supported	
(2) Number of **Temporary** Jobs Supported	

(3) Narrative *(optional):*

SECTION 13: NHHP WAIVER REQUESTS

(NAHASDA § 802(b)(2), 24 CFR 1006.20(b))

THIS SECTION IS ONLY REQUIRED IF DHHL IS REQUESTING A WAIVER OF A NHHP SECTION OR A WAIVER OF THE NHHP SUBMISSION DUE DATE. Fill out the form below if you are requesting a waiver of one or more sections of the NHHP. **NOTE**: This is NOT a waiver of the NHHBG program requirements but rather a request to waive some of the NHHP submission items because DHHL cannot comply due to circumstances beyond its control.

(1) List below the sections of the NHHP where you are requesting a waiver and/or a waiver of the NHHP 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 NHHP or could not submit the NHHP by the required due date.):*

(3) Describe the actions you will take in order to ensure that you are able to submit a complete NHHP in the future and/or submit the NHHP 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 NHHP in the future and/or submit the NHHP by the required due date.):*

(4) Recipient:	
(5) Authorized Official's Name and Title:	
(6) Authorized Official's Signature:	
(7) Date (MM/DD/YYYY):	

SECTION 14: NHHP AMENDMENTS

(24 CFR § 1006.101(d))

Use this section for NHHP amendments only.

Fill out the text below to summarize your NHHP amendment. Copy and paste Section 14 for each amendment. This amendment is only required to be submitted to the HUD Office of Native American Programs when the recipient is adding a new activity that was not described in the current One-Year Plan that has been determined to be in compliance by HUD. All other amendments will be reflected in the APR and do not need to be submitted to HUD.

NOTE: A Cover Page is strongly recommended but not required with a NHHP Amendment submission.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 820(b))

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 fiscal year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133* 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 fiscal year.

*DHHL should note that new Federal government regulations on Administrative Requirements, Cost Principles, and Audit Requirements were promulgated on December 26, 2013 at 2 C.F.R. Part 200. HUD intends to update its regulations by December 26, 2014 to implement these new requirements in its programs. In the meantime, applicable OMB Circulars and the regulations at 2 C.F.R. Part 225 will continue to apply to existing grants. After HUD implements the new requirements in 2 C.F.R. Part 200 (after December 26, 2014), all grants will be subject to 2 C.F.R. Part 200, as implemented by HUD.

(1) Program Name and Unique Identifier:
(2) Program Description (*This should be the description of the planned program.)*:
(3) Eligible Activity Number (*Select one activity from the Eligible Activities list in Section 3. Do not combine homeownership and rental housing in one activity, so that when units are reported in the APR they are correctly identified as homeownership or rental.)*:

(4) Intended Outcome Number (*Select one Outcome from the Outcome list in Section 3.*):
Describe Other Intended Outcome *(Only if you selected "Other" above.):*
(5) Actual Outcome Number (*Select one Outcome from the Outcome list in Section 3.*):
Describe Other Actual Outcome *(Only if you selected "Other" above.):*
(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 exceed 80 percent of the median income should be included as a separate program within this Section.*):
(7). Types and Level of Assistance *(Describe the types and the level of assistance that will be provided to each household, as applicable.):*
(8). APR: *(Describe the accomplishments for the APR in the 12-month fiscal year. In accordance with 24 CFR § 1006.410(b)(2) and (3), provide an analysis and explanation of cost overruns or high unit costs.):*

(9). Planned and Actual Outputs for 12-Month Fiscal 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	Planned Number of **Acres** To Be Purchased in Year Under this Program	APR: Actual Number of **Units** Completed in Fiscal Year	APR: Actual Number of **Households** Served in Fiscal Year	APR: Actual Number of **Acres** Purchased in Fiscal Year

(10). APR: If the program is behind schedule, explain why. (24 CFR § 1006.410(b)(2))

(11) Amended Sources of Funding (NAHASDA § 803(c)(2)(C)(i)) *(Complete the **non-shaded** portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month fiscal 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 fiscal year.)***

	NHHP					APR					
SOURCE	(A) Estimated amount on hand at beginning of fiscal year	(B) Estimated amount to be received during 12-month fiscal year	(C) Estimated total sources of funds (A + B)	(D) Estimated funds to be expended during 12-month fiscal year	(E) Estimated unexpended funds remaining at end of fiscal year (C minus D)	(F) Actual amount on hand at beginning of fiscal year	(G) Actual amount received during 12-month fiscal year	(H) Actual total sources of funding (F + G)	(I) Actual funds expended during 12-month fiscal year	(J) Actual unexpended funds remaining at end of 12-month fiscal year (H minus I)	(K) Actual unexpended funds obligated but not expended at end of 12-month fiscal year
6. NHHBG Funds											
7. NHHBG Program Income											
LEVERAGED FUNDS											
8. Other Federal Funds											
9. LIHTC											
10. Non-Federal Funds											
TOTAL											

Notes:

a. For the NHHP, 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 Table** on the following page.

c. Total of Column I should match the Total of Column Q from the Uses Table on the following page.

(12) Amended Uses of Funding (NAHASDA § 803(c)(2)(C)(ii)) *(Note that the budget should not exceed the total funds on hand 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 fiscal year.)***

		NHHP			APR		
PROGRAM NAME (tie to program names in Section 3 above)	**Unique Identifier**	**(L) Prior and current year NHHBG (only) funds to be expended in 12-month fiscal year**	**(M) Total all other funds to be expended in 12-month fiscal year**	**(N) Total funds to be expended in 12-month fiscal year (L + M)**	**(O) Total NHHBG (only) funds expended in 12-month fiscal year**	**(P) Total all other funds expended in 12-month fiscal year**	**(Q) Total funds expended in 12-month fiscal year (O+P)**
Planning and Administration							
Loan repayment							
TOTAL							

Notes:
a. Total of Column L cannot exceed the NHHBG funds from Column C, Row 1 from the Sources Table on the previous page.
b. Total of Column M cannot exceed the total from Column C, Rows 2-10 from the Sources Table on the previous page.
c. Total of Column O cannot exceed total NHHBG funds received in Column H, Row 1 from the Sources Table on the previous page.
d. Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources Table on the previous page.
e. Total of Column Q should equal total of Column I of the Sources Table on the previous page.

(13) Estimated Sources or Uses of Funding *(NAHASDA § 803(c)(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 Table on the previous page. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):*

(14) APR (NAHASDA § 820(b)(1)) *(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 Table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):*

(15) Recipient:	
(16) Authorized Official's Name and Title:	
(17) Authorized Official's Signature:	I certify that all other sections of the NHHP approved on are accurate and reflect the activities planned.
(18) Date (MM/DD/YYYY):	