

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD.gov at https://www.hud.gov/program_offices/comm_planning/coc.
- Questions regarding the FY 2023 CoC Program Competition process must be submitted to CoCNOFO@hud.gov.
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov.
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2023 Continuum of Care (CoC) Program Competition. For more information see FY 2023 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2023 CoC Program NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- Before starting the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- Carefully review each question in the Project Application. Questions from previous competitions may have been changed or removed, or new questions may have been added, and information previously submitted may or may not be relevant. Data entered in the post award and amendment forms in e-snaps will not be imported into the project application.
- Rental assistance projects can only request the number of units and unit size as approved in the final HUD-approved Grant Inventory Worksheet (GIW).
- HUD reserves the right to reduce or reject any renewal project that fails to adhere to 24 CFR part 578 and the application requirements set forth in the FY 2023 CoC Program Competition NOFO.
- YHDP projects must state they were awarded under the YHDP program on screen 3A and answer the YHDP specific page that follows.

1A. SF-424 Application Type

- 1. Type of Submission: Application
- 2. Type of Application: YHDP Project Application

If "Revision", select appropriate letter(s):

If "Other", specify:

- 3. Date Received: 08/15/2023

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier: SD0045

This is the first 6 digits of the Grant Number, known as the PIN, that will also be indicated on Screen 3A Project Detail. This number must match the first 6 digits of the grant number on the HUD approved Grant Inventory Worksheet (GIW).

Check to confirm that the Federal Award Identifier has been updated to reflect the most recently awarded grant number

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

- a. Legal Name:** South Dakota Housing Development Authority
- b. Employer/Taxpayer Identification Number (EIN/TIN):** 46-0318666
- c. Unique Entity Identifier:** NQW1BHKPK8U3

d. Address

Street 1: 3060 East Elizabeth Street
Street 2: PO Box 1237
City: Pierre
County: Hughes
State: South Dakota
Country: United States
Zip / Postal Code: 57501

e. Organizational Unit (optional)

Department Name: Department of Rental Housing
Division Name: Department of Rental Housing

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.
First Name: Joseph
Middle Name:
Last Name: Tielke
Suffix:
Title: Continuum of Care Administrator
Organizational Affiliation: South Dakota Housing Development Authority
Telephone Number: (605) 773-5160
Extension:

Fax Number: (605) 773-5154

Email: Joseph@sdhda.org

1C. SF-424 Application Details

9. Type of Applicant: A. State Government

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program
CFDA Number: 14.267

12. Funding Opportunity Number: FR-6700-N-25
Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:
Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): South Dakota
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: YHDP SD-500 CES FY2023

16. Congressional District(s):

16a. Applicant: SD-000

16b. Project: SD-000
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 10/01/2024

b. End Date: 09/30/2025

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

21. Authorized Representative

Prefix: Mr.

First Name: Chas

Middle Name:

Last Name: Olson

Suffix:

Title: Executive Director

Telephone Number: (605) 773-3181
(Format: 123-456-7890)

Fax Number: (605) 773-5154
(Format: 123-456-7890)

Email: chas@sdhda.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 08/15/2023

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2501-0017 (exp. 1/31/2026)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: South Dakota Housing Development Authority
Prefix: Mr.
First Name: Chas
Middle Name:
Last Name: Olson
Suffix:
Title: Executive Director
Organizational Affiliation: South Dakota Housing Development Authority
Telephone Number: (605) 773-3181
Extension:
Email: chas@sdhda.org
City: Pierre
County: Hughes
State: South Dakota
Country: United States
Zip/Postal Code: 57501

2. Employer ID Number (EIN): 46-0318666

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$50,000.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? **Yes**
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. **No**

Certification

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

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

X

Name / Title of Authorized Official: Chas Olson, Executive Director

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 08/15/2023

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: South Dakota Housing Development Authority
Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a.	<p>Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.</p>
b.	<p>Establishing an on-going drug-free awareness program to inform employees —</p> <ul style="list-style-type: none"> (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
c.	<p>Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;</p>
d.	<p>Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will —</p> <ul style="list-style-type: none"> (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
e.	<p>Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;</p>
f.	<p>Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted —</p> <ul style="list-style-type: none"> (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
g.	<p>Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.</p>

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

X

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Chas

Middle Name

Last Name: Olson

Suffix:

Title: Executive Director

Telephone Number: (605) 773-3181
(Format: 123-456-7890)

Fax Number: (605) 773-5154
(Format: 123-456-7890)

Email: chas@sdhda.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 08/15/2023

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: South Dakota Housing Development Authority

Name / Title of Authorized Official: Chas Olson, Executive Director

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 08/15/2023

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352. Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: South Dakota Housing Development Authority
Street 1: 3060 East Elizabeth Street
Street 2: PO Box 1237
City: Pierre
County: Hughes
State: South Dakota
Country: United States
Zip / Postal Code: 57501

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

Authorized Representative

Prefix: Mr.

First Name: Chas

Middle Name:

Last Name: Olson

Suffix:

Title: Executive Director

Telephone Number: (605) 773-3181
(Format: 123-456-7890)

Fax Number: (605) 773-5154
(Format: 123-456-7890)

Email: chas@sdhda.org

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 08/15/2023

IK. SF-424B

(SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007
Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency. |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |

- | | |
|-----|--|
| 9. | Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements. |
| 10. | Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more. |
| 11. | Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93~205). |
| 12. | Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system. |
| 13. | Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.). |
| 14. | Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance. |
| 15. | Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance. |
| 16. | Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures. |
| 17. | Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations." |
| 18. | Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program. |
| 19. | Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award. |

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: South Dakota Housing Development Authority
Prefix: Mr.
First Name: Chas

Middle Name:

Last Name: Olson

Suffix:

Title: Executive Director

Signature of Authorized Certifying Official: Considered signed upon submission in e-snaps.

Date Signed: 08/15/2023

Recipient Performance

1. Did you submit your previous year's Annual Performance Report (APR) on time? Yes

2. Do you have any unresolved HUD Monitoring or OIG Audit finding(s) concerning any previous grant term related to this renewal project request? No

3. Do you draw funds quarterly for your current renewal project? Yes

4. Have any funds remained available for recapture by HUD for the most recently expired grant term related to this renewal project request? No

YHDP Renewal Grant Consolidation Screen

The FY2023 CoC Competition will continue offering opportunities to consolidate CoC projects.

1. Consolidations will no longer be required to submit a combined version of the application.



a. Consolidations will be required to **ONLY** submit a Survivor grant and a terminating grant. Up to 10 grants may be involved in a consolidation (Survivor + 9 Terminating grants)

2. Since no combined version will be submitted for the Consolidation, the combining of data will occur at Post-Award. HUD HQ will combine all units, beds and budgets prior to the Post-Award process. The field office and applicant will then be required to combine remaining project data at C1.9a (recipient step). HUD HQ will provide a data report with the data all combined. All that will be required for applicants to do is a simple copy and paste.

We hope this process will simplify and reduce any confusion when submitting expansions or consolidations. If you have any questions, please contact the AAQ.

1. Is this project application requesting to be part of a renewal grant consolidation in the FY 2023 CoC Program Competition? No
"If "No" click on "Next" or "Save & Next" below to move to the next screen."

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Type	Sub-Award Amount
This list contains no items			

3A. Project Detail

1. Expiring Grant Project Identification Number (PIN): SD0045

(e.g., the "Federal Award Identifier" indicated on form 1A. Application Type)

2. CoC Number and Name: SD-500 - South Dakota Statewide CoC

3. CoC Collaborative Applicant Name: South Dakota Housing Development Authority

4. Project Name: YHDP SD-500 CES FY2023

5. Project Status: Standard

6. Component Type: SSO

6a. Please select the type of SSO project: Coordinated Entry

7. Is your agency or expected subrecipient a victim service provider, as defined in 24 CFR 578.3? No

8. Was this project funded under the Youth Homeless Demonstration Program (YHDP)? Yes

3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

SD Housing Development Authority (SDHDA) is Lead Agency for Coordinated Entry (CE), responsible for the operation and oversight of CE. The YHDP CES SSO project supports staff costs associated with YYA CE. This includes funding for CE Administrator and two CE assessors to complete YYA CE tasks. These functions include but aren't limited to: completing CE assessment of YYAs statewide (call in), management of CE queues, referral of CE participants and project follow-up, leading regional case conferencing meetings with YYA partners, training new CE YYA specific access point staff, implementation and monitoring of YYA specific access points.

All youth accessing housing and services will be assessed, prioritized, and referred via CE. CES access for YYA's is organized regionally via physical access points and statewide call-in center. The CE queues are by name lists of literally homeless and at-risk households seeking assistance and organized according to standardized assessed household need, vulnerability, and risk factors. The expansion and enhancement of CES access points funded by YHDP CE Project has increased accessible with low barrier access points through YHDP funded YYA street outreach programs and drop-in centers. The YHDP support services projects are coordinated entry access points where youth navigators assist in service navigation and support.

Referrals for support services are initiated to participating providers following assessment of household need, reviewed in bi-weekly case conferencing, and prioritized in accordance with adopted standards. All CES housing assessors provide triage/crisis needs assessments and connect youth to emergency shelter and other immediate service needs at the time of assessment. Service connection needs are reviewed in regional case conferencing biweekly to ensure service connections are made and appropriate housing matches are identified. When participating housing providers in CES have openings; they request referrals from the CES Administrator and referrals are initiated from the respective queue based on acuity and service needs.

1a. Provide a description that addresses how this project will follow Positive Youth Development.

Positive Youth Development is grounded in empowering youth to believe in themselves and their capacity to have meaningful impact in their communities and relationships. This approach focuses on educating and engaging young people in taking initiative, problem solving, and demonstrating compassion within the activity. SDHDA has engaged with YAB members to develop confidence, character, connections, and competence. YAB members were critical to the development of prioritization policies and have an active role in CES Committee and PAC advisories, the entities that provide oversight to the CES process including the YHDP implementation.

Promoting protective factors

CES SSO implementation involves youth as active agents, valued participants in the design, delivery and evaluation of services. adults and youth work in partnership. The expansion and enhancement of the CES system through YHDP will continue to build on the momentum and collaborative partnership developed during the development of the CCP. YYA partners including YAB membership will be critical in implementing and evaluating the effectiveness of youth specific access points, evaluating assessment practices.

1b. Provide a description that addresses how this project will follow Trauma Informed Care.

SD Coordinated Entry access points are designed for all persons presenting for assistance. Assessments are completed using a person-centered, trauma informed approach ensuring that accommodations are made to ensure privacy and responsive to the cultural, developmental and accessibility needs of the individual. Assessors are trained to be responsive to the specific needs' youth experiencing homelessness face, including barriers to triage services, increased risk of victimization and exploitation as well as human trafficking and domestic violence. Youth households that identify immediate unmet needs during the assessment process for shelter, mental health or other basic needs are referred directly to youth specific providers that serve their communities. All households assessed who identify experiencing domestic violence, sexual assault or human trafficking are provided the opportunity to be referred directly to victim service providers in their communities. The expansion of CES includes coordination with existing and new access points to ensure housing assessors have adequate training in trauma informed, person centered crisis response and assessment to accurately assess needs. Training and support for the implementation of trauma informed practices is a recurrent practice.

1c. How does this project help the community meet the shared vision, goals and objectives of the coordinated community plan?

SDHDA reviews performance of the project with the CES Committee, PAC and YAB. YAB representatives are key stakeholder partners for the development and ongoing monitoring of SDCES goals and objectives in Coordinated Community Plan as follows:

- Coordinated Entry Objective 1.3: Develop and implement marketing strategy to ensure youth are aware of coordinated entry system and increase youth access to CE.
- Objective 1.4: Improve Identification and referral of youth experiencing or at risk of homelessness to available resources.
- Objective 2.1: Create Prevention and Diversion Strategies
- Objective 2.2: Provide integrated services that serve youth and families before homelessness occurs, and prevent recurrences of homelessness
- Coordinated Entry Objective 3.1: Work to assure CES processes meet the needs of youth.
- Coordinated Entry Objective 3.2: Develop processes, policies, and procedures for allocating youth diversion and rapid exit funds.

The housing assessment activities referenced in the CES SSO YHDP application refer to existing housing assessor positions staffed by SDHDA that operate the toll free 1-800 number. Housing navigators funded through YHDP projects will also be trained in triage case management, crisis response and CES assessment. The activities referenced in the coordinated community plan in conjunction with the stakeholder teams previously identified and facilitated by the CES Administrator; include but are not limited to supporting CES access points in crisis assessment and housing problem solving, expanding and implementing marketing activities targeted to youth and young adults, bi weekly review of CES enrollments in regional youth specific case conferencing, and coordination/follow up on referrals to participating providers.

2. Check the appropriate box(s) if this project will have a specific subpopulation focus. (Select all that apply)

N/A - Project Serves All Subpopulations	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input checked="" type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

2a. Please identify the specific populations addressed in this project

Pregnant/Parenting	<input checked="" type="checkbox"/>
Minors (Include short textbox if "minor" selected)	<input type="checkbox"/>

Foster care/justice involved youth	<input checked="" type="checkbox"/>
LGBTQ+	<input checked="" type="checkbox"/>
Gender Non-Conforming	<input checked="" type="checkbox"/>
Victims of Sexual Trafficking	<input checked="" type="checkbox"/>
Other	<input type="checkbox"/>

3. Housing First

3a. Does the project quickly move participants into permanent housing? Yes

3b. Does the project items enroll program participants who have the following barriers? Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3c. Will the project prevent program participant termination for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

3d. Does the project follow a "Housing First" approach? Yes

4. As a renewal SSO-Coordinated Entry project update the following questions.

4a. Will the coordinated entry process cover the CoC's entire geographic area? Yes

4b. Will the coordinated entry process be affirmatively marketed and easily accessible by individuals and families seeking assistance? Yes

4c. Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.

Coordinated Entry access points are marketed in a variety of ways including distribution of print material, business cards and youth specific info flyer. Print material is distributed at local shelters, youth specific drop in centers, McKinney Vento liaisons at local high schools and through community-based organizations. Access point information is available on the CES dedicated page of the SDHDA website. Local street outreach and youth crisis response teams play a vital role in connecting youth and young adult households to CES access points during encounters where they are triaging for immediate service needs.

4d. Does the coordinated entry process use a comprehensive, standardized assessment process? Yes

4e. Describe the referral process and how the coordinated entry process ensures program participants are directed to appropriate housing and services.

Referrals for support services are initiated to participating providers following assessment of household need, reviewed in bi-weekly case conferencing, and prioritized in accordance with adopted standards. All CES housing assessors provide triage/crisis needs assessments and connect youth to emergency shelter and other immediate service needs at the time of assessment. Service connection needs are reviewed in regional case conferencing bi weekly to ensure service connections are made and appropriate housing matches are identified. When participating housing providers in CES have openings; they request referrals from the CES Administrator and referrals are initiated from the respective queue based on acuity and service needs.

4f. If the coordinated entry process includes differences in access, entry, assessment, or referral for certain subpopulations, are those differences limited only to the following five groups? Yes

- (1) adults without children;
- (2) adults accompanied by children;
- (3) unaccompanied youth;
- (4) households fleeing domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions (including human trafficking); and
- (5) persons at risk of homelessness.

5. Effectively serving youth populations:

5a. Describe the racial composition of the persons or households who are expected to benefit from your proposed grant activities, including a description of how you analysed the local population to determine this.

Utilizing Coordinated Entry System data, from January through December 2022 143 young adult households enrolled in CES. 69% of those households identified as Black, Indigenous and People of Color with the largest percentage, 72 % identifying as Native American.

From January 2023 through August 2023, 128 young adult households have enrolled in CES, with 68% identifying as Black, Indigenous and People of Color with the largest percentage, 66% as Native American. The 2023 Point in Time Count identified 92 unaccompanied youth households, with 74% identifying as Black, Indigenous and People of Color, the largest percentage 80% identifying as Native American. YHDP projects continue to reach the most diverse cohort of participants of all our ESG and CoC projects as evidences by HMIS data.

5b. Identify any potential barriers to persons or communities of color equitably benefiting from your proposed grant activities.

Potential barriers to equitable access to housing solutions through Coordinated Entry include lack of low barrier access due to limited transportation and reliable phone access to connect with an access point. Young adult households of color may have previous experiences with formal service systems that may influence the confidence and comfort in sharing sensitive information regarding their housing and service needs. Historical trauma experienced by communities of color impact a household's trust and sense of safety in accessing Coordinated Entry and other service support systems.

5c. Detail the steps you will take to prevent, reduce or eliminate these barriers.

All Coordinated Entry access points, including YHDP should be as low barrier as possible; including but not limited to providing access and assessment opportunities to households over the phone where transportation may be a barrier for households, providing assessment on site at service locations where assessors are available (example, mobile outreach and/or drop in centers where young adult households may be utilizing other service supports).

All CES assessors should be sensitive and responsive to the needs of households including the conducting interviews and gathering information in culturally responsive ways, recognizing that definitions of family units may differ within cultures; adjusting the assessment process to recognize these differences. CES access points should to all extents possible incorporate staffing structures that reflect the background and lived experience of the households accessing Coordinated Entry services.

5d. Describe the measures in place to track progress and evaluate the effectiveness of efforts to advance racial equity through the grant activities.

CES project measures include quantitative data collection on the racial and ethnic background of households accessing CES and compare to local data to determine if CES is reaching it's intended audience. Referral and housing data is also regularly evaluated by race to identify disparities in system performance and address system response. In addition to quantitative evaluation; ensuring the qualitative evaluation includes feedback mechanisms from people with lived experience and is representative of Black, Indigenous and People of Color.

Youth Homeless Demonstration Projects

1. Does this project carry out housing problem solving activities to divert or rapidly exit households from homelessness? No

2. Is this a Host Homes Project? No

3. Does this project plan to use Rental Assistance? No

4. How will the community continue to involve the Youth Action Board (YAB) in the development and implementation of YHDP projects?

The Youth Advisory Board has an active role in YHDP project development, implementation and evaluation. Evaluation of the YHDP CES SSO project performance includes reviewing progress on the Coordinated Community Plan objectives and CES specific performance indicators measured by the number of households served at CES access points (general and those that are youth and young adult specific); number of youth diverted to mainstream resources, percentage of households connected to housing solutions via referral and monitoring the safe, permanent housing destinations for YHDP households.

The Youth Advisory Board has a membership seat on both the CES Committee and voting member seat on the Policy and Advisory Committee; the two formal governing bodies within the CoC responsible for oversight of CES operations. Through evaluation of qualitative feedback (surveys, focus groups and stakeholder forums) and quantitative (data review) the YAB will have equitable access to participate in the evaluation process with the opportunity to provide recommendations regarding project implementation. CES operation policy and procedures are reviewed at minimum on an annual basis with full review by the YAB prior to approval.

5. Will your project offer any specialized services for youth living with HIV/AIDS? No

Special YHDP Activities

1. Is the YHDP Renewal project applicant requesting a Special YHDP Activity, Exemption or Innovative Activity? No

4A. Supportive Services for Participants

**1. For all supportive services available to program participants, indicate who will provide them and how often they will be provided.
 Click 'Save' to update.**

Supportive Services	">	Provider	Frequency
Assessment of Service Needs		Applicant	Daily
Assistance with Moving Costs			
Case Management			
Child Care			
Education Services			
Employment Assistance and Job Training			
Food			
Housing Search and Counseling Services			
Legal Services			
Life Skills Training			
Mental Health Services			
Outpatient Health Services			
Outreach Services			
Substance Abuse Treatment Services			
Transportation			
Utility Deposits			

2. How will the project allow youth the ability to choose the providers and interventions that fit their needs?

Coordinated Entry is designed to be person centered, including a household’s choice for how they engage with an access point, (time, date, location and type of assessment) and the process of partnering with the household during and after the assessment process to ensure the preferences and needs of the household are reflected in the enrollment and during the case conferencing process. To the extent possible households are referred to the housing program that best fits their preference and need. When a household’s first housing choice is not available (due to availability of project type or opening in their community) the CES process is transparent in communicating this to the household to determine if alternative housing options are available.

3. How will the project respond to the different needs for service type, intensity, and length of supports for youth?

Through initial and ongoing assessment of service needs for households the Coordinated Entry System regularly reviews and updates household details to ensure the recommended service type is matched with each household and referred in a timely fashion. The case conferencing process influences and informs these recommendations as providers engage youth and young adults in services and determine with the youth the need for increased or decreased intensity of support services that may influence a housing referral. Once a referral is made a housing provider to a project opening; households have choice as to if they wish to participate in that project and the duration of program enrollment.

Identify whether the project includes the following activities:

4. Transportation assistance to program participants to attend mainstream benefit appointments, employee training, or jobs? No

5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed? No

6. Do program participants have access to SSI/SSDI technical assistance provided by this project applicant, a subrecipient, or partner agency? No

4A. HMIS Standards

1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the FY 2022 HMIS Data Standard Manual? Yes

2. Does HMIS produce all HUD-required reports and provide data needed for HUD reporting? (i.e., Annual Performance Report (APR)/CoC reporting, Consolidated Annual Performance and Evaluation Report (CAPER)/ESG reporting, Longitudinal System Analysis (LSA)/Annual Homeless Assessment Report, System Performance Measures (SPM), and Data Quality Table, etc.). Yes

3. Is your HMIS capable of generating all reports required by all Federal partners including HUD, VA, and HHS? Yes

4. Does HMIS provide the CoC with an unduplicated count of program participants receiving services in the CoC? Yes

5. Describe your organizations process and stakeholder involvement for updating your HMIS Governance Charters and HMIS Policies and Procedures.

The HMIS Administrator is the lead on HMIS Stakeholder activities and the CoC Administrator and CES Administrator also assist. The CoC Governing Board makes the final decisions on updating changes to the HMIS Governance Charter and HMIS Polices and Procedures. HMIS Administrator obtains stakeholder involvement via the HMIS Committee Meetings and by email contact with the HMIS agency users or Contributing Homelessness Organizations (CHOs). The CoC Administrator also follows up with CoC Grantees to obtain stakeholder involvement via the CoC Grantee Work Group meetings. The CES Administrator obtains stakeholder input via the CES Committee Meetings. In these ways the CoC seeks out and obtains HMIS stakeholder involvement from multiple sources and multiple individuals.

6. Who is responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners?


South Dakota Housing Development Authority (SDHDA) is the CoC Collaborative Applicant and the HMIS Lead for the CoC. SDHDA employs the HMIS Administer. In order to meet the mandate that CoC policy be developed through participative planning, the CoC Governing Board is responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners, as outlined in our CoC Governance Charter. The CoC's HMIS Committee assists the HMIS Administrator when reviewing and writing draft updates on all HMIS privacy and security standards. The CoC Governing Board reviews privacy and security standards and approves any policy changes required to insure all privacy and security standards as required by HUD and federal partners.

7. Does the HMIS Lead conduct Privacy and Security Training and follow up on privacy and security standards on a regular basis? Yes

8. What is the CoC's policy and procedures for managing a breach of Personally Identifiable Information (PII) in HMIS?

The CoC will follow a four step process for managing a breach of Personally Identifiable Information (PII). 1. Contain the breach to prevent any further compromise of personal information. This includes suspending an HMIS user's HMIS access or an agency's HMIS access until HMIS Administrator is assured the breach is contained. The HMIS Administrator will inform the CoC Governing Board, CoC Administrator, and supervisor of the breach. 2. HMIS Administrator will Assess the data breach by gathering facts and evaluating risks, including potential harm to affected individuals, and where possible take action to remediate any harm. 3. HMIS Administrator will notify individuals affected by the breach and steps being taken to contain the breach and assess potential harm. 5. The HMIS administrator will Review the incident and consider what actions can be taken to prevent future breaches and provide this information and any pertinent recommendations to the CoC Governing Board.

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 0

Total Beds: 0

Housing Type	Housing Type (JOINT)	Units	Beds
None	---	--	--

4B. Housing Type and Location Detail

1. Housing Type: None

5A. Program Participants - Households

Households	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Total Number of Households		1		1

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24				0
Persons ages 18-24		1		1
Accompanied Children under age 18				0
Unaccompanied Children under age 18				0
Total Persons	0	1	0	1

Click Save to automatically calculate totals

5B. Program Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons	0	0	0	0	0	0	0	0	0	0

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24				1						
Total Persons	0	0	0	1	0	0	0	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0			0	0	0	0	0	0	0

6A. Funding Request

1. Does this project propose to allocate funds according to an indirect cost rate? **Yes**

Indirect cost rate proposals should be submitted as soon as the applicant is notified of a conditional award. Conditional award recipients will be asked to submit the proposal rate during the e-snaps post-award process.

Applicants with an approved indirect cost rate must submit a copy of the approval with this application.

a. Please complete the indirect cost rate schedule below:

Cognizant Agency	Indirect Cost Rate	Direct Cost Base	Plan approved by cognizant agency or will use 10% de minimis rate
US Department of Housing and Urban Development	45%	\$88,000	Approved Rate

2. Renewal Grant Term: **1 Year**
 This field is pre-populated with a one-year grant term and cannot be edited:

3. Select the costs for which funding is requested:

Leased Units	
Leased Structures	
Rental Assistance	
Supportive Services	X
Operating	
HMIS	
VAWA	X

The VAWA BLI is permanently checked. This allows any project to shift funds up to a 10% shift from another BLI if VAWA emergency transfer costs are needed.

6E. Supportive Services Budget

A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs	1/2 FTE Employee with benefits Indirect Cost Rate	\$50,000
2. Assistance with Moving Costs		
3. Case Management		
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation		
16. Utility Deposits		
17. Operating Costs		
Total Annual Assistance Requested		\$50,000
Grant Term		1 Year
Total Request for Grant Term		\$50,000

Click the 'Save' button to automatically calculate totals.

VAWA Budget

VAWA Budget

New in FY2023, the Violence Against Women Act (VAWA) has clarified the use of CoC Program funds for VAWA eligible cost categories. These VAWA cost categories can be added to a new project application to create a CoC VAWA Budget Line Item (BLI) in e-snaps and eLOCCS. The new BLI will be added to grant agreements and utilized the same as other CoC Program BLIs in e-snaps and eLOCCS. Eligible CoC VAWA costs can be identified in one or both of the following CoC VAWA categories. Examples of eligible costs in these cost categories are identified as follows:

- A. VAWA Emergency Transfer Facilitation. Examples of eligible costs include the costs of assessing, coordinating, approving, denying, and implementing a survivor’s emergency transfer(s). Additional details of eligible costs include:
- Moving Costs. Assistance with reasonable moving costs to move survivors for an emergency transfer(s).
 - Travel Costs. Assistance with reasonable travel costs for survivors and their families to travel for an emergency transfer(s). This may include travel costs to locations outside of your CoC’s geography.
 - Security Deposits. Grant funds can be used to pay for security deposits of the safe unit the survivor is transferring to via an emergency transfer(s).
 - Utilities. Grant funds can be used to pay for costs of establishing utility assistance in the safe unit the survivor is transferring to.
 - Housing Fees. Grant funds can be used to pay fees associated with getting survivors into a safe unit via emergency transfer(s), including but not limited to application fees, broker fees, holding fees, trash fees, pet fees where the person believes they need their pet to be safe, etc.
 - Case Management. Grant funds can be used to pay staff time necessary to assess, coordinate, and implement emergency transfer(s).
 - Housing Navigation. Grant funds can be used to pay staff time necessary to identify safe units and facilitate moves into housing for survivors through emergency transfer(s).
 - Technology to make an available unit safe. Grant funds can be used to pay for technology that the individual believes is needed to make the unit safe, including but not limited to doorbell cameras, security systems, phone, and internet service when necessary to support security systems for the unit, etc.
- B. VAWA Confidentiality Requirements. Examples of eligible costs for ensuring compliance with VAWA confidentiality requirements include:
- Monitoring and evaluating compliance.
 - Developing and implementing strategies for corrective actions and remedies to ensure compliance.
 - Program evaluation of confidentiality policies, practices, and procedures.
 - Training on compliance with VAWA confidentiality requirements.
 - Reporting to CoC Collaborative Applicant, HUD, and other interested parties on compliance with VAWA confidentiality requirements.
 - Costs for establishing methodology to protect survivor information.
 - Staff time associated with maintaining adherence to VAWA confidentiality requirements.



Enter the estimated amount(s) you are requesting for this project’s Emergency Transfer Facilitation costs and VAWA Confidentiality Requirements costs for one or both of these eligible CoC VAWA cost categories. The CoC VAWA BLI Total amount can be expended for any eligible CoC VAWA cost identified above.

Eligible Costs	Annual Assistance Requested
Estimated budget amount for VAWA Emergency Transfer Facilitation:	\$0
Estimated budget amount for VAWA Confidentiality Requirements:	\$0

CoC VAWA BLI Total:	\$0
Grant Term	1 Year
Total Request for Grant Term	\$0

Click the 'Save' button to automatically calculate totals.

6H. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the  icon. To view or update a Matching source already listed, select the  icon.

Summary for Match

Total Amount of Cash Commitments:	\$12,500
Total Amount of In-Kind Commitments:	\$0
Total Amount of All Commitments:	\$12,500

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Contributor	Value of Commitments
Cash	Government	South Dakota Hous...	\$12,500

Sources of Match Detail

1. **Type of Match Commitment:** Cash
2. **Source:** Government
3. **Name of Source:** South Dakota Housing Development Authority
(Be as specific as possible and include the office or grant program as applicable)
4. **Amount of Written Commitment:** \$12,500

6I. Summary Budget

The following information summarizes the funding request for the total term of the project. Budget amounts from the Leased Units, Rental Assistance, and Match screens have been automatically imported and cannot be edited. However, applicants must confirm and correct, if necessary, the total budget amounts for Leased Structures, Supportive Services, Operating, HMIS, and Admin. Budget amounts must reflect the most accurate project information according to the most recent project grant agreement or project grant agreement amendment, the CoC's final HUD-approved FY 2017 GIW or the project budget as reduced due to CoC reallocation. Please note that, new for FY 2017, there are no detailed budget screens for Leased Structures, Supportive Services, Operating, or HMIS costs. HUD expects the original details of past approved budgets for these costs to be the basis for future expenses. However, any reasonable and eligible costs within each CoC cost category can be expended and will be verified during a HUD monitoring.

Eligible Costs (Light gray fields are available for entry of the previous grant agreement, GIW, approved GIW Change Form, or reduced by reallocation)	Applicant CoC Program Costs Requested (1 Year Term)
1a. Leased Units (Screen 6B)	\$0
1b. Leased Structures (Screen 6C)	\$0
2. Rental Assistance (Screen 6D)	\$0
3. Supportive Services (Screen 6E)	\$50,000
4. Operating (Screen 6F)	\$0
5. HMIS (Screen 6G)	\$0
6. VAWA	\$0
7. Sub-total of CoC Program Costs Requested	\$50,000
8. Admin (Up to 10% of Sub-total in #8)	
9. HUD funded Sub-total + Admin. Requested	\$50,000
10. Cash Match (From Screen 6H)	\$12,500
11. In-Kind Match (From Screen 6H)	\$0
12. Total Match (From Screen 6H)	\$12,500
13. Total Project Budget for this grant, including Match	\$62,500

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachmenbt	No		
3) Other Attachment	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

7B. Certification

**Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No.
2501-0017
(expires 01/31/2026)**

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et.seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage.

Name of Authorized Certifying Official: Chas Olson

Date: 08/15/2023

Title: Executive Director

Applicant Organization: South Dakota Housing Development Authority

PHA Number (For PHA Applicants Only):

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties.**(18 U.S.C. §§287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

X

8B Submission Summary

Page	Last Updated
1A. SF-424 Application Type	08/14/2023
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1B. SF-424 Legal Applicant	08/14/2023
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	08/15/2023
1E. SF-424 Compliance	08/14/2023
1F. SF-424 Declaration	08/14/2023
1G. HUD 2880	08/14/2023
1H. HUD 50070	08/14/2023
1I. Cert. Lobbying	08/14/2023
1J. SF-LLL	08/14/2023
IK. SF-424B	08/14/2023
Recipient Performance	No Input Required
YHDP Renewal Grant Consolidation	08/14/2023
2A. Subrecipients	No Input Required
3A. Project Detail	08/14/2023
3B. Description	08/15/2023
Youth Homeless Demonstration Projects	08/15/2023
Special YHDP Activities	08/14/2023
4A. Services	08/15/2023
4A. HMIS Standards	No Input Required
4B. Housing Type	08/15/2023
5A. Households	No Input Required
5B. Subpopulations	No Input Required
6A. Funding Request	08/15/2023
6E. Supp Srvcs Budget	08/15/2023
VAWA Budget	No Input Required
6H. Match	08/14/2023
6I. Summary Budget	No Input Required
7A. Attachment(s)	No Input Required
7B. Certification	08/14/2023