



# HOME Investment Partnerships Program (HOME)

Subrecipient Orientation | June 25, 2024 | 2:30 pm

# Agenda

1. Welcome
2. Introductions
3. HOME – Grant Objectives
4. Allowable Uses
5. Participant Eligibility
6. Statistical Reporting
7. Budget
8. Invoices
9. Match
10. Continuing Education Log
11. Monitoring
12. Grant Award Process
13. Next Steps
14. Federal Regulatory Requirements
15. Q&A
16. Closing

# Introductions



**Viviana McDaniel**

Grants Division Manager



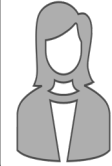
**Dulce Spencer**

Senior Grants Analyst



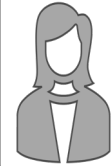
**Margo Arispuro**

Senior Grants Accountant



**Melissa Aguilar**

HUD Consultant



**Adriana Robledo**

HUD Consultant

City of Moreno Valley

Avant Garde



# HOME Basics: HOME Grant Objectives

- Expanding the supply of decent and affordable housing, particularly housing for low- and very low-income;
- Strategies for achieving adequate supplies of decent, affordable housing;
- Providing financial and technical assistance to participating jurisdictions; and
- Extending and strengthening partnerships among all levels of government and the private sector in the production and operation of affordable housing.

# HOME Allowable Uses

- New Construction
- Rehabilitation
- Reconstruction
- Conversion
- Site Improvements
- Acquisition of Property
- Acquisition of Vacant Land
- Demolition
- Relocation Costs

# Participant Eligibility

- Household income must be verified to qualify benefited persons as Low and Very-Low income using HUD Income Limit table.
  - Verifying documents may include, among others, most recent tax return showing reported dependents, W-2's of household members, recent pay stubs, bank statements, etc.
- For rehabilitation projects, proof of home ownership is also required.
  - Verifying documents should include a title report, deed of trust and most recent property tax bill.

# Income Limits

**Maximum Annual Household Income Limits as Determined by HUD  
effective May 1, 2024**

# of Persons in Household

	1	2	3	4	5	6	7	8
<b>Extremely Low Income (30%)</b>	\$21,550	\$24,600	\$27,700	\$30,750	\$33,250	\$35,700	\$38,150	\$40,600
<b>Very Low Income (50%)</b>	\$35,900	\$41,000	\$46,100	\$51,250	\$55,350	\$59,450	\$63,550	\$67,650
<b>Low Income (80%)</b>	\$57,400	\$65,600	\$73,800	\$82,000	\$88,600	\$95,150	\$101,650	\$108,250

# Compliance Certification

SUBRECIPIENT  
FY \_\_\_\_ HOME- PROGRAM

EXHIBIT E

INVOICE DATE/ INVOICE NO. :

PROJECT ADDRESS: \_\_\_\_\_

SUBRECIPIENT hereby certifies that the below procedures were performed; and policies, guidelines, and requirements (among other regulations) related to the acceptance and use of CDBG/HOME funds have been adhered to and complied with as stipulated in the executed agreement for the above-mentioned program:

## A. PARTICIPANT ELIGIBILITY

1. Applicable definition of income used (e.g., selected for this homeownership rehabilitation program)
2. Income inclusions and exclusions correctly applied for the chosen income definition and the calculation was performed correctly. [24 CFR 92.203(b)]
3. The household income supported with source documentation [24 CFR 92.203(a)(2)]
4. The family's annual income less than or equal to 80% of the area median income. [24 CFR 92.254(b)]

### *Ownership/Occupancy*

5. HFHR program staff obtained evidence of ownership. (NOTE: A deed alone is not sufficient documentation. A title search or recent review of recorded ownership information should have been conducted.) [24 CFR 92.254(c)]
6. The file documentation includes documentation demonstrating that the household uses this property as its principal residence (e.g. utility bill) [24 CFR 92.254(b)(2)]

## B. PROPERTY ELIGIBILITY

7. The property is listed as a single-family home. [CFR 92.254(c)]
8. The work write-up/cost estimate establish that at least \$1,000 of HOME -funded rehabilitation work is required. [24 CFR 92.205(c)]
9. The estimated after-rehabilitation property value less than or equal to 95% of the median single-family purchase price for the are as determined by HUD/City [24 CFR 92.254(b)(1)]



# Statistical Reporting

CITY OF MORENO VALLEY CDBG MONTHLY STATISTICAL & ACCOMPLISHMENT REPORT		JULY	AUGUST	SEPTEMBER	Quarter 1 JUL-SEP	OCTOBER	NOVEMBER	DECEMBER	Quarter 2 OCT-DEC	JANUARY	FEBRUARY	MARCH	Quarter 3 JAN-MAR	APRIL	MAY	JUNE	Quarter 4 APR-JUN	Program to Date
1	Units Served																	
1a	Number of Rehabilitated Units				0				0				0				0	0
<b>Other Accomplishments</b>																		
1b					0				0				0				0	0
1c					0				0				0				0	0
1d					0				0				0				0	0
2	Participant Income																	
2a	Extremely Low Income (30%)				0				0				0				0	0
2b	Very Low Income (50%)				0				0				0				0	0
2c	Low Income (60%)				0				0				0				0	0
2d	Non-Low/Med Income				0				0				0				0	0
	Subtotal (Low Income)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Subtotal (ALL)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total here should match total for question 1a																		
3	Participant Demographic																	
3a	White				0				0				0				0	0
3a1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3b	Black/African American				0				0				0				0	0
3b1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3c	Asian				0				0				0				0	0
3c1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3d	American Indian/Alaskan Native				0				0				0				0	0
3d1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3e	Native Hawaiian/Other Pacific Islander				0				0				0				0	0
3e1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3f	American Indian/Alaskan Native & White				0				0				0				0	0
3f1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3g	Asian & White				0				0				0				0	0
3g1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3h	Black/African American & White				0				0				0				0	0
3h1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3i	Amer. Indian/Alaskan Native & Black African Amer.				0				0				0				0	0
3i1	How many also identified as Hispanic/Latino?				0				0				0				0	0
3j	Other Multi-Race				0				0				0				0	0
3j1	How many also identified as Hispanic/Latino?				0				0				0				0	0
	Subtotal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3k	Total Female Heads of Household	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	Program Budget																	
4a	Reimbursement Requests Submitted				\$0.00				\$0.00				\$0.00				\$0.00	\$0.00
4	<b>CERTIFICATION</b>																	
6a	Name of Person Submitting Report																	
6b	Title																	
6c	Phone				N/A				N/A				N/A				N/A	N/A
6d	Email																	
6e	Date of Submission																	

# Budget

City of Moreno Valley  
 "HOME Entitlement Funds"  
 LINE ITEM BUDGET FORM FY 2024-2025

Subrecipient: \_\_\_\_\_

Project Title: \_\_\_\_\_

# of NEW/UNDUPLICATED Units/Persons to Serve for FY (Moreno Valley only) \_\_\_\_\_

**Guidance:** Please use the following format to present your line item budget for your CDBG program. In column A, list the items for which you will use CDBG funds for. In column B, provide the calculation explaining how you arrived at the cost of the line item. In column C, provide the budget amount or the line item.

A. BUDGET ITEM	B. DESCRIPTION	C. CALCULATION	CDBG BUDGET AMOUNT
<b>PERSONNEL</b>	N/A		N/A
<b>Salaried Positions-Name &amp; Job Titles</b>	Provide rate of pay (hourly/salary) and percentage of time spent on project (full-time equivalent) or hours per week	Using an Excel formula, enter the calculation here. For example, for an employee engaged on a project for 12 months at \$20 per hour and 40% FTE, the calculation should unfold as follows: =20*40%*40*52	Enter the budget amount here
N/A			
	Total-Salaries		
<b>Fringe Benefits-List Individual Costs</b>			
	Total-Fringe Benefits		\$ -
<b>TOTAL PERSONNEL COSTS:</b>	(Total Personnel Costs + Fringe Benefits)		
<b>OPERATING COSTS</b>	Provide description of how you arrive at a total for each line item		
<b>Supplies &amp; Materials</b>			
<b>Equipment</b>			
<b>Printing/Copying</b>			
<b>Rent/Lease (Program Only)</b>			
<b>Insurance</b>			
<b>Utilities</b>			
<b>Telephone</b>			
<b>Travel/Mileage</b>			
<b>Audit</b>			
<b>Professional Services</b>			
<b>Other:</b>			
<b>Indirect Costs:</b> _____ (please be specific)			
<b>TOTAL OPERATING COSTS:</b>			\$ -
<b>TOTAL PROJECT COST:</b>	<b>(Total Personnel + Total Operating)</b>		<b>\$ -</b>

# Monthly Invoices

Exhibit D

CITY OF MORENO VALLEY  
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Subrecipient Payment Request FY \_\_\_\_/\_\_\_\_

AGENCY NAME:	DATE:
PROJECT TITLE:	INVOICE NO. :
PREPARER'S NAME:	
EMAIL:	PHONE:

<b>ACCOUNT SUMMARY:</b>	
Approved CDBG Budget	
CDBG Reimbursements Received To Date	
Pending Reimbursements To Date (including this invoice)	
Remaining CDBG Balance	\$ -

CURRENT REQUEST:		BUDGET AMOUNT \$	(PREVIOUS REQUESTS)	(CURRENT AMOUNT REQUESTED FOR REIMBURSEMENT)	REMAINING BUDGET BALANCE
<b>CDBG BUDGET LINE ITEM PER APPROVED AGREEMENT</b> <small>(List individual line item costs per approved budget, Exhibit "B")</small>					
<b>PERSONNEL COSTS:</b>					
Salaries					\$ -
Fringe Benefits					\$ -
<b>Total Personnel Costs:</b>	\$ -	\$ -	\$ -	\$ -	\$ -
<b>OPERATING COSTS:</b> <small>(List individual operating line item costs)</small>					
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
<b>Total Operating Costs:</b>	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL: (Personnel Costs + Oper. Costs)</b>	\$ -	\$ -	\$ -	\$ -	\$ -

**TOTAL PAYMENT REQUESTED THIS INVOICE:** \$ -

NOTE: Corresponding back-up source documentation must be attached. The "Documentation Required for Reimbursement Checklist" may be included as back-up and/or used for guidance in preparing the submittal.

Signature of Preparer \_\_\_\_\_ Date \_\_\_\_\_

Signature of Authorized Supervisor, Executive Director, or Board Member \_\_\_\_\_ Date \_\_\_\_\_

<b>For City Use Only:</b>	Date Received: _____	By: _____
P.O. No.: _____	Amt. \$: _____	
Inv. No.: _____	Acct. No.: _____	
Inv. Date: _____	Auth. By: _____	



# Match Log

**EXHIBIT I**  
**HOME MATCH LOG FY 2024-2025**

Project Number	Date Project Committed	Project Address	Project Type	HOME Funds Expended	Date HOME \$ Expended	Value of Match Contribution	Type of Match	Date Match Recognized	Comments
(1)	(2)	(3)	(4)	(5)	(6)	(8)	(9)	(10)	(11)
Example	12/1/99	1440 West End Rd	H	\$485,000	12/20/99	\$6,500	Waived fees	12/20/99	State transfer tax and recordation fee
Subtotal									
Balance Forward									
Total									

# Continuing Education Log

EXHIBIT G  
CDBG CONTINUING EDUCATION LOG

Date of Workshop	Time of Workshop	Title of Workshop	Length of time attended in minutes	Name of Person that Attended Workshop



# Monitoring

- On-Site Visits
- Participant Eligibility
- Monthly Performance Statistics
- Request for Reimbursement



# Monitoring: Common Concerns

- Behind on program milestones and goals
- Incomplete or inaccurate reporting
- Late invoice submissions
- Ratio of budget expenditures to program activity



# Monitoring: Common Findings

- Participant ineligibility
- Inadequate record keeping
- Lack of adequate accounting, policies and procedures, and internal controls



# Grant Award Process\*

## Award Notification

- **Anticipated Timeline:** Early June
- The City sends letters notifying organizations of award selection. An acceptance letter is also sent requesting a response from the organization..

## HUD Agreement Issued

- **Anticipated Timeline:** August-October
- Upon obtaining a formal agreement from HUD, City staff starts processing subrecipient agreements for approval and signature by the City Manager and City Attorney.

## Legal Review of Agreements

- **Anticipated Timeline:** 2 Weeks
- The City Attorney's office reviews and approves all subrecipient agreements. Upon approval, the agreements are routed to subrecipients for review/comments.

# Grant Award Process\*

## Agreements Executed

- **Anticipated Timeline:** 1-2 weeks
- Agreements are then returned to the City for final signatures from City staff. Executed agreements are then distributed to subrecipients.

## Finance Review

- **Anticipated Timeline:** 4 weeks
- The Grants Division enters the agreement and all supporting documentation into the City's Financial Operations System and a Purchase Order is created for each subrecipient.

## Invoice & Statistical Reports

- **Anticipated Timeline:** Submitted Monthly
- Subrecipients are expected to submit monthly invoices to the City on the 10th of each month for review. City Staff/Consultants will review invoices for completeness, compliance, and review program deliverables via a statistical report.

# Grant Award Process\*

## Invoice Submittal

- **Anticipated Timeline:** 1-2 weeks
- After invoices have been reviewed and approved the Grants Division submits the invoices to Accounts Payable to initiate the internal approval process.

## Payment Authorization

- **Anticipated Timeline:** 1-2 weeks
- Once the invoices have obtained the necessary approvals, Accounts Payable issues payment to subrecipients. All payments are sent as an ACH.

# Next Steps

- Agreements will be circulated to subrecipients for review and signature(s)
- The City receives its agreement from HUD
  - Timeline for this item varies and impacts the timeline in which the City can execute its agreements with subrecipients
- The City executes the subrecipient agreements
  - Executed copies are sent to subrecipients
  - A Notice to Proceed is issued

# HOME Specific Regulations & Policy

- Lead-Based Paint Testing ([24 CFR Part 35](#))
  - Rehab and repairs on homes built prior to 1978.
- Prevailing Wages ([24 CFR Part 92](#))
  - Prevailing wage required for projects containing cumulatively more than 12 units.

## HOME Specific Regulations & Policy – cont.

- Rehab projects are subject to [HUD and City rehabilitation standards](#).
- Full HOME regulations found in [24 CFR Part 92](#).

# Federal Regulatory Requirements

- Title 2 of Code of Federal Regulations Part 200 ([2 CFR Part 200](#))- Uniform Administrative Requirements:
  - Conflict of Interest ([200.112](#))
  - Standards of Financial Management ([200.302](#))
  - Internal Controls ([200.303](#))
  - Program Income ([200.307](#))
  - Procurement Standards ([200.320](#))
  - Monitoring ([200.329](#))
  - Direct & Indirect Cost Principles ([200.412](#) & [200.413](#))
  - Audit Requirements ([200.501](#))

# Federal Regulatory Requirements cont.

- Title 24 of Code of Federal Regulations Part 570 ([24 CFR Part 570](#))- Basic provisions:
  - Records to be maintained
  - Labor standards (Davis-Bacon Prevailing Wage)
- Section 3 requirements for HUD awards in excess of \$200,000 for Covered Projects. Most CDBG and ESG programs are exempt.
- Various non-discrimination and affirmative action regulations.



# HUD Exchange – HOME Resources

- Register for [HUD Exchange Account](#)
- [\*Building HOME Online Training\*](#)
- [\*HOME On-Demand Training\*](#)

# Q & A



# We're Here to Help!

## Moreno Valley

**Call:** 951.413.3450

**Email:**

[grantadmin@moval.org](mailto:grantadmin@moval.org)

## Avant Garde

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