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| **RECIPIENT NAME:**  | **Regulatory/****Statutory Citation** | **Other Tools** | **Ref. Pg.** | **Remarks** |
| --- | --- | --- | --- | --- |
| **Indian Community Development Block Grant (ICDBG)** |  |  |  |  |
| ICDBG promotes the development of viable Indian and Alaska Native communities, including the creation of decent housing, suitable living environments, and economic opportunities primarily for persons with low and moderate incomes, as defined in 24 CFR 1003.4. All grant funds awarded in accordance with the annual Notice of Funding Availability (NOFO) are subject to the requirements of 24 CFR 1003. | 24 CFR Part 1003 | Program Guidance 2006-05 (ONAP),ICDBG NOFO for the year the grant was funded, grant agreement. |  |  |
| There are two types of ICDBG awards: |  |  |  |  |
| * single-purpose grants are awarded on a competitive basis, following the NOFO criteria for submission and rating of application.
 | 24 CFR Part 1003, Subpart D |  |  |  |
| * imminent threat (IT) grants are not funded on a competitive basis and do not have to be funded by the NOFO deadline. IT grants are funded on a “first come, first serve” basis, and are intended to alleviate or remove threats to health or safety that require an immediate solution.
 | 24 CFR Part 1003, Subpart E | Program Guidance 2005-03 (ONAP) |  |  |
| Purpose |  |  |  |  |
| * 1. The purpose of this review is to determine whether the recipient (grantee) has:
		1. Compliance with approved application.
		2. Complied with the requirements of the ICDBG regulations, the grant agreement, and other applicable laws and regulations;
		3. Carried out its activities substantially, as described in its application;
		4. Made substantial progress in carrying out its approved program;
		5. A continuing capacity to carry out the approved activities in a timely manner; and
		6. The capacity to undertake additional activities funded under ICDBG.
 | 24 CFR 1003.700 |  |  |  |
| Pre-Visit Preparation |  |  |  |  |
| * 1. If available, review the following documents:
		1. Previous monitoring findings and corrective actions status for findings
		2. Previous financial and OIG audits, work papers and management plan status for findings
		3. Previous and current enforcement actions
		4. Valid complaints
		5. Relevant correspondence
 | 24 CFR Part 1003 |  |  |  |
| * 1. Also, review:
 |  |  |  |  |
| * + 1. The ICDBG NOFO, including the General Section, for the funding year of the grant being reviewed.

*Note: NOFA was changed to NOFO circa 2021* |  |  |  |  |
| [**2017 NOFA**](https://www.hud.gov/sites/documents/2017ICDBGNOFA_MOD.PDF)[**2018 NOFA**](https://www.hud.gov/sites/dfiles/PIH/documents/FR-6200-N-23_FY18_ICDBG_NOFA.pdf)[**2019-2020 NOFA**](https://www.hud.gov/sites/dfiles/PIH/documents/FY%202019-2020%20ICDBG%20NOFA.pdf)[**2021 NOFO**](https://www.grants.gov/web/grants/view-opportunity.html?oppId=335356)[**2022 NOFO**](https://www.hud.gov/sites/dfiles/PIH/documents/Community_Development_Block_Grant_Program_for_Indian_Tribes_and_Alaska_Native_Villages.pdf)[**2023 NOFO**](https://www.hud.gov/sites/dfiles/SPM/documents/FR-6700-N-23_ICDBG_NOFO.pdf) |  |  |  |  |
| * + 1. ICDBG program files for reports submitted, i.e., Annual Status and Evaluation Reports, SF-425s, Logic Model reports (HUD-96010) on outputs and outcomes (required for grants funded in FY 2010 and 2011), Contract and Subcontract Activity Reports (HUD-2516).
 | 24 CFR 1003.506(a) and (b) | Program Guidance 2002-14 (Recipients)Program Guidance 2010-02 |  |  |
| * + 1. The funded application:
 |  |  |  |  |
| * + - 1. Develop a list of HUD-funded activities;
 |  |  |  |  |
| * + - 1. Review the Code of Conduct submitted as part of the application;
 |  |  |  |  |
| * + - 1. Review the HUD-4125, Implementation Schedule, approved by ONAP and any amendments;
 |  |  |  |  |
| * + - 1. Determine if the grant has been amended;
 | 24 CFR 1003.305 |  |  |  |
| * + - 1. Review the Cost Summary, form HUD 4123, approved by ONAP;
 |  |  |  |  |
| * + - 1. Review the closeout report (if submitted)
 | 24 CFR 1003.508 |  |  |  |
| * + - 1. Identify projects that have achieved close out, subject to audit status in the last 5 years
 |  |  |  |  |
| On-Site Review |  |  |  |  |
| 1. Review the sampling methods in the General Instructions and select sample files.
 |  |  |  |  |
| 1. For the following areas, use the monitoring plans specific to those areas:
 |  |  |  |  |
| * + 1. Procurement and Contract Administration
 |  |  |  |  |
| * + 1. Relocation (if applicable)
 |  |  |  |  |
| * + 1. Lead-Based Paint (if applicable)
 |  |  |  |  |
| * + 1. Subrecipient Agreements
 |  | Subrecipient Agreement Monitoring Plan |  |  |
| * + 1. Environmental Review
 |  |  |  |  |
| * 1. Compliance with approved application:
 | 24 CFR 1003.700(b)(1) |  |  |  |
| * + 1. Review the list of activities for compliance with the approved ICDBG grant application.
 |  |  |  |  |
| * + 1. Verify that the activities approved in the grant are the same activities undertaken by the recipient.
 |  |  |  |  |
| * + 1. If the activities are not the same and an amendment was not approved by HUD, contact the GE Director. This may be a finding.
 |  |  |  |  |
| * + 1. Request and review financial system expenditure reports for each project.
 |  | Form HUD-4123 |  |  |
| * + - 1. Compare the expenditure totals to the amounts reported on Form HUD-4123.
 |  |  |  |  |
| * + - 1. Select a sample of expenditures and request supporting documentation for those transactions.
 |  |  |  |  |
| * + - 1. Are financial expenditures consistent with planned expenditures on the Cost Summary?
 |  |  |  |  |
| * + 1. If the application was awarded points under rating factor 4 for leveraging, have leveraged funds been expended in an amount and method stated in the application?
 |  | ICDBG NOFO, Factor 4 |  |  |
| * 1. If not, have funds been set aside by the recipient for expenditure?
 |  |  |  |  |
| * 1. Are leveraged funds (for economic development projects only) spent on a pro-rata basis with grant funds?
 |  | ICDBG NOFO, Program-related threshold for economic development projects |  |  |
| * 1. Are leveraged funds for projects (other than economic development) being expended for the project?
 |  |  |  |  |
| * + - 1. If leveraging consists of in-kind services, is there documentation to track the in-kind?
 |  |  |  |  |
| * + 1. If the recipient is utilizing force account, was HUD approval received prior to beginning construction? Is force account work consistent with the program requirements?
 | 24 CFR 1003.509 |  |  |  |
| * + 1. Review citizen participation documents to ensure there is consistency with what was submitted in the application and the program requirements.
 | 24 CFR 1003.604 |  |  |  |
| * + 1. If the project funded was for housing rehabilitation:
 |  |  |  |  |
| * + - 1. Is the recipient adhering to HUD required cost limits in the ICDBG NOFO?
 |  | ICDBG NOFO, Program and Project Specific Requirements |  |  |
| * + - 1. Does the recipient have rehabilitation standards and rehabilitation policies that have been adopted, as required by the ICDBG NOFO?
 |  | ICDBG NOFO, Program-Related Threshold Requirements |  |  |
| * + 1. If the project funded was for Land Acquisition for Housing, is the recipient in compliance with the ICDBG NOFO requirement regarding the provision of a financial commitment for the project?
 |  | ICDBG NOFO, Program and Project Specific Requirements |  |  |
| * + 1. If the project funded was for new housing construction, is the recipient in compliance with the following ICDBG NOFO program-related thresholds?
 |  | ICDBG NOFO Program-Related Thresholds |  |  |
| * + - 1. Is the project being implemented by a Community Based Development Organization?
 |  |  |  |  |
| * + - 1. Does the recipient have in effect, adopted construction standards.
 |  |  |  |  |
| * + 1. If the project funded was for a public facility and improvement project and the ICDBG application said the recipient was assuming responsibilities for operation and maintenance of the facility:
 |  | ICDBG NOFO, Factor 3  |  |  |
| * + - 1. Did the recipient adopt a maintenance and operation plan? If so, is the recipient complying with the policy?
 |  |  |  |  |
| * + - 1. Does the policy meet the ICDBG NOFO requirements for rating factor 3?
 |  |  |  |  |
| * + - 1. If the application indicated that the recipient was committing funds for the maintenance and operation of the facility, have the funds been used as stated in the application?
 |  |  |  |  |
| * 1. Program Progress
 |  |  |  |  |
| * + 1. Regarding the required Implementation Schedule:
 | 24 CFR 1003.700 | Form HUD-4125 |  |  |
| * + - 1. Are the activities listed on the HUD-4125 the same as the activities undertaken?
 |  |  |  |  |
| * + - 1. Is the actual progress consistent with the HUD-4125?
 |  |  |  |  |
| * + - 1. Should the recipient revise its HUD-4125?
 |  |  |  |  |
| * + 1. Did the Area Office receive the completed Contract and Subcontract Activity Report (HUD-2516) by October 10th of each year?
 | 24 CFR 1003.506(b) |  |  |  |
| * + - 1. If yes, did the report provide the required information on contacting and subcontracting activities during the fiscal year?
 |  |  |  |  |
| Summary |  |  |  |  |
| * 1. Summarize the compliance review sections to include:
		1. Compliance with requirements
		2. Violations of the applicable statutes and regulations
		3. Issues that should be noted as a concern because they could lead to a violation
		4. Significant accomplishments and/or best practices
	2. Develop report language, including any findings and concerns.
 |  |  |  |  |

|  |  |
| --- | --- |
| **Reviewer Name:** |  |
| **Review Date(s):** |  |
| **GE Director’s Name:** |  |

| **RECIPIENT NAME:**  | **Regulatory/****Statutory Citation** | **Other Tools** | **Ref. Pg.** | **Remarks** |
| --- | --- | --- | --- | --- |
| **Resident Opportunity and Self-Sufficiency Program (ROSS)** |  |  |  |  |
| Purpose |  |  |  |  |
| The purpose of this review is to ensure that the program requirements are operating efficiently and effectively. | 2 CFR Part 200 | ROSS NOFO for year grant funded, grant agreement,  |  |  |
| Pre-Visit Preparation |  |  |  |  |
| * 1. If available, review the following documents:
		1. Previous monitoring findings and corrective actions status for findings
		2. Previous financial and OIG audits, work papers, and management plan status for findings
		3. Previous and current enforcement actions
		4. Valid complaints
		5. Relevant correspondence
 |  |  |  |  |
| * 1. Also, review:
 |  |  |  |  |
| * + 1. ROSS NOFO, including the General Section, for the funding year of the grant being reviewed.

*Note: NOFA was changed to NOFO circa 2021*[**2017 NOFA**](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps/fy17ROSS)[**2018 NOFA**](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps/fy18ross-sc)[**2019 NOFA**](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps/fy19_ross)[**2020 NOFA**](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps/fy2020_ross)[**2021 NOFO**](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps/fy21_ross_sc)[**2022 NOFO**](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps/fy22_ross_sc) |  |  |  |  |
| * + 1. ROSS program files for reports submitted and/or accepted in application:
 |  |  |  |  |
| * + - 1. Work Plan
 |  | Form HUD-52764 |  |  |
| * + - 1. Logic Model
 |  | Form HUD-96010 |  |  |
| * + - 1. Budget Detail
 |  | Form HUD-424 CB |  |  |
| * + - 1. Budget Detail Worksheet
 |  | Form HUD-424 CBW |  |  |
| * + - 1. Semi-annual reports (Logic Model and 269A and narratives, if submitted)
 |  | Grant Agreement Subarticle F |  |  |
| * + 1. The funded application:
 |  |  |  |  |
| * + - 1. Review the Logic Model and develop a list of HUD-funded activities.
 |  |  |  |  |
| * + - * 1. Review the grant agreement for any changes to identified activities
 |  |  |  |  |
| * + - * 1. Review the Work Plan to determine if the activities have changed from time of application and amendments have been finalized at time of grant award.
 |  |  |  |  |
| * + - 1. Review the Code of Conduct submitted by the recipient as part of the application;
 |  |  |  |  |
| * + - 1. Review the Work Plan and Logic Model for the time schedule for the activities;
 |  |  |  |  |
| * + - 1. Determine if the grant has been amended (see Grant Agreement for amendment requirements);
 |  | ROSS Grant Agreement |  |  |
| * + - 1. Review the Budget Detail and Budget Detail Worksheet.
 |  |  |  |  |
| * + 1. Develop any additional review criteria based on the NOFO.
 |  |  |  |  |
| On-Site Review  |  |  |  |  |
| * 1. Review the sampling methods in the General Instructions and select a sample of files to review.
 |  |  |  |  |
| * 1. For the following areas, use the monitoring plans specific to those areas:
 |  |  |  |  |
| * + 1. Procurement and Contract Administration
 |  |  |  |  |
| * + 1. Environmental Review Requirements
 |  |  |  |  |
| * 1. Program Progress
 |  |  |  |  |
| (NOTE: Progress reports are due every 6 months after effective date of grant agreement (July 30 and Jan 31). Reports must meet the requirements of 2 CFR Part 200, as applicable, as well as NOFO requirements for submission of a Logic Model (optional).) | 2 CFR Part 200 | ROSS NOFO requirements for the Logic Modeland 269A |  |  |
| 1. Review Logic Model and Work Plan
 |  |  |  |  |
| 1. Are recipient reports submitted in a timely manner, as required?
 |  | ROSS NOFO, Reporting |  |  |
| 1. Is actual progress consistent with that reported?
 |  |  |  |  |
| * 1. Request and review financial system expenditure reports for each project.
 |  |  |  |  |
| * + 1. Compare the expenditure totals to the amounts reported in the latest status report.
 |  |  |  |  |
| * + 1. Select a sample of expenditures and request supporting documentation for those transactions.
 |  |  |  |  |
| * 1. Eligibility of Activities
 |  |  |  |  |
| * + 1. Do the actual activities undertaken meet the eligibility requirements in the NOFO?
 |  |  |  |  |
| * + 1. Are the activities consistent with those approved in the Grant Agreement?
 |  |  |  |  |
| * 1. Leveraging
 |  |  |  |  |
| * + 1. If the application was awarded points under rating factor 4 for leveraging:
 |  | ROSS NOFO, rating factor 4 |  |  |
| * + - 1. Review the Budget Detail Worksheet to determine if the final one approved at time of grant execution is different than the one in the application package.
 |  | Form HUD-424 CBW |  |  |
| * + - 1. Have leveraged funds been expended in the amount stated in the application?
 |  |  |  |  |
| * + - 1. If not, have funds been set aside for expenditure?
 |  |  |  |  |
| * + - 1. If leveraging consists of in-kind services, is there documentation to track the in-kind?
 |  |  |  |  |
| * 1. Grant Term

(NOTE: The term of a ROSS grant is no more than 3 years from the date the grant agreement is signed by HUD, unless the grant is extended in writing by HUD up to an additional 6 months). |  |  |  |  |
| * + 1. Were planned activities approved within the grant term? If work is under way, does it appear that work will be completed within the grant term or will an extension be required?

  |  |  |  |  |
| * 1. Grant Closeout
 |  |  |  |  |
| * + 1. Within 90 days of project completion, the recipient must submit:
 |  |  |  |  |
| * + - 1. A certification (statement by grantee) of project completion
 |  |  |  |  |
| * + - 1. A certification (statement by grantee) of compliance with the grant requirements
 |  |  |  |  |
| * + - 1. A breakdown and certification of project costs (for 2007 grantees, this will be a cumulative summary of expenditures and will indicate the balance of unexpended funds)
 |  | Final Form SF-425 |  |  |
| * + - 1. A final performance report
 |  |  |  |  |
| * + 1. Were grant closeout documents submitted when required?
 |  |  |  |  |
| * + 1. Were closeout documents complete?
 |  |  |  |  |
| Summary |  |  |  |  |
| 1. Summarize the results of the review in a work paper.
2. Discuss significant issues with GE Director.
3. Develop findings, including questioned costs and corrective actions, as appropriate.
4. Develop concerns because they could lead to a violation.
5. Develop report language, including any findings and concerns.
6. If there are any major issues identified in this review and the recipient has approval to invest, determine if a withdrawal of investment authority should be recommended.
 |  |  |  |  |

|  |  |
| --- | --- |
| **Reviewer Name:** |  |
| **Review Date(s):** |  |
| **GE Director’s Name:** |  |