



## 2017 COC PROGRAM COMPETITION NEW/BONUS PROJECT APPLICATION

AGENCY PROFILE	
Legal Name of Agency	Community Rebuilders
Project Name	Housing Solutions 2
Contact Person	Vera Beech
Title	Executive Director
Address	1120 Monroe Ave NW Suite 220
Email	vbeech@communityrebuilders.org
Phone	616-458-5102

Check one:

- ☐ Permanent Supportive Housing for Chronically Homeless
- ☐ DedicatedPLUS Permanent Supportive Housing
- ☐ Rapid Re-Housing
- ☐ Joint Transitional Housing-Rapid Re-Housing
- ☐ Support Services Only Coordinated Entry
- ☐ Support Services Only HMIS

Check one:

- ☐ New Project Application from Reallocated Funds
- ☐ Bonus Project Application

Authorized Representative: *I hereby certify that the information contained in this proposal is true and accurate. Any falsification of information will render the application void, and the application will not be accepted. This application has been reviewed and authorized for submission by the agency's board of directors as of the date indicated.*

Name:	Title:
Date of Board Authorization:	9/14/2017
Date of Anticipated Board Authorization:	9/14/2017

## **ELIGIBILITY THRESHOLDS**

Basic HUD Eligibility Thresholds must be satisfied before the CoC may consider a new or bonus project application for funding.

1. Please indicate by checking the boxes if the agency has any of the following:

a. Outstanding obligation to HUD that is in arrears for which a payment schedule has not been agreed upon;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

b. Debarments and/or Suspensions- In accordance with 2 CFR 2424, no award of federal funds may be made to debarred or suspended applicants, or those proposed to be debarred or suspended from doing business with the federal government;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

c. Unresolved monitoring findings or outstanding (agency or HUD) audit findings;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

d. Inadequate financial management or accounting practices within the past three years;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

e. Evidence of untimely expenditures on prior award;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

f. Major capacity issues that have significantly impacted the operation of a project and its performance within the past three years;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

g. Issues impacting the timeliness in reimbursing subrecipients for eligible costs;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

h. Served ineligible persons, expended funds on ineligible costs, or failed to expend funds within statutorily established timeframes within the past three years;

☐ Yes ☒ No If yes, please explain: [Click here to enter text.](#)

2. Does applicant have a financial management system that meets federal standards as described at 2 CFR 200.302? ;

☒ Yes ☐ No Please describe: [Click here to enter text.](#)

3. Does the agency employ or contract services of an accountant who is familiar with Generally Accepted Accounting Principles (GAAP)?

☒ Yes ☐ No

4. Does the agency obtain an annual audit by an independent certified public accountant?

☒ Yes   ☐ No

5. Has your organization been monitored by HUD in the past three (3) years? **Yes**

**If yes,** include as attachments: Monitoring report from HUD, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

**If no,** reference most recent monitoring by an entity other than HUD for federal or state funding (ESG, CDBG, etc) and include as attachments: Monitoring report, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

**All projects must include as attachments:**

- ☒ Proof of 501(c)3 status from the IRS
- ☒ Financial statements, including cash flow statement
- ☒ Non-profit Corporation Update (2013) or equivalent
- ☒ DUNS number and Standard Form 424 (SF-424)
- ☒ Active registration in SAM
- ☒ Most recent audit by an independent certified public accountant
- ☒ Monitoring report by HUD or other federal or state funding entity, including any responses if there were findings noted in the report
- ☒ Project Application in e-Snaps (If available)
- ☐ Preliminary Rendering and Site Plan (if applicable)

## NEW AND BONUS PROJECT APPLICATION

*See scorecard for scoring criteria in each question.*

### **PROJECT OVERVIEW**

- 1.a. Provide a description that addresses the entire scope of the proposed project. (Include target population(s), the plan for addressing identified needs/issues of the identified target population, projected outcomes, how the project type, scale and location of housing and support services fit the needs of the identified target population.)

Community Rebuilders is seeking an expansion to its currently funded Housing Solutions project. Housing Solutions is dedicated to serve chronically homeless households. We know that chronically homeless households face the greatest barriers to obtaining housing and remaining housed long term. With the use of best practices such as a strengths based, housing first model, we are ensuring that this most vulnerable population is receiving the most cost-effective intervention (housing) that serves as a foundation for improved health and well being. A Life Domain Rating Scale is used to measure improvement in health and well-being and self-sufficiency. This tool allows us to see the effectiveness of the PSH program through the eyes of the consumer. The project exceeded the targets for all outcome measures. Because of careful financial oversight and efficient use of resources, Housing solutions served 20% over the projected number to be served. Based on feedback from our consumers this year, a support group was held each month giving consumers the opportunity to share their personal success stories regarding their housing stability. Consumers have enjoyed this and have indicated they want this to continue. New consumers have found the group both motivating and inspiring. Our Housing Resource Specialist staff work with consumers to gain or increase income whenever possible. This is accomplished through connection to benefits or working to increase earned income when possible. All avenues to increase income are explored including non-traditional employment.

- 1.b. Describe the plan to assist in participants securing and maintaining permanent housing that is safe, affordable, accessible and acceptable to their needs.

Every participant will partner with a trained Housing Resource Specialist (HRS), who is experienced in providing strengths based, housing first services. Participant and HRS will develop individualized housing plans that allow the project participant choice in their housing. This begins with pre-tenancy planning and culminates in the execution of a lease. Chronically homeless households will be assisted to negotiate lease terms and will develop a plan to take over full rental payments once project leasing assistance ends. HRS services will promote housing stability this includes, connection to mainstream benefits, counseling, transportation assistance, and educational assistance.

- 1.c. Describe how participants will be assisted to rapidly increase employment and/or income to maximize their ability to live independently.

Currently our Housing Resource Specialist staff work with consumers to gain or increase income. This is accomplished through connections to benefits, or working to increase earned income. Consumers are assisted to connect with local employment and rehabilitative services that meet their specific

needs. This is accomplished through connections to benefits, or working to increase earned income. All avenues to increase income are explored including non-traditional employment. We currently are working with local workforce development agencies.

## **EXPERIENCE**

2. Describe the experience of the applicant and sub-applicants in working with the proposed target population and in providing housing similar to that proposed in the application.

For close to 25 years Community Rebuilders has provided services to chronically homeless households. Community Rebuilders is experienced in providing Housing First, strengths based services. Community Rebuilders has been a leader both locally and nationally in designing and implementing services for chronically homeless households. We listen to our consumers and develop housing plans unique to each consumer's individual needs. We are national experts that train providers across the county on how to utilize strengths based case management to chronically homeless households. These services are provided in a manner that quickly resolves homelessness and is cost effective and honoring of the individual consumer's wants, needs and rights.

Chronically homeless	<input checked="" type="checkbox"/>	Families	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Youth (18-25)	<input type="checkbox"/>

3. Describe the experience of the applicant and sub-applicants with utilizing a Housing First approach.

Community Rebuilders was an early adopter of the Housing First approach and has delivered all of its programs utilizing a Housing First approach for the past 11 years. This is evidenced by our focus on providing people experiencing homelessness with housing as quickly as possible and providing services that are as needed and voluntary. All projects provide rental assistance that varies in duration depending on the household's needs. Consumers sign a standard lease and are assisted to be able to choose housing in the private rental market. Persons served access housing faster and remain stably housed.

4. Describe the experience of the applicant and sub-applicants in utilizing federal funds.

Community Rebuilder has a 25 year history of managing federal funds. Community Rebuilders has a robust system in place for efficiently distributing funds and managing federally funded projects. Effective staffing, policy and procedures and the ability to translate federal rules and regulations into practices is a skill the organization is praised for by federal agencies. Performance on federally funded projects under the U.S. Department of Veteran Affairs has identified our projects as "exceptional: in their review of our performance. Financial management, grant management, reporting and audit compliance as well as collaboration and transparency are keys to our success at managing federal funds. The organization has been publicly praised by HUD to Local CoC steering council members after an audit HUD invited the steering council, shared our success and encouraged other grantees to learn from our example and processes.

5. Describe the process for the determination of the type, amount, and the duration of rental assistance for participants.

6. Does the project commit to taking all referrals through the community's Coordinated Assessment process?

☒ Yes      If no, explain: [Click here to enter text.](#)

7. Will all participating households served in this project be recorded in HMIS or an equivalent database for Domestic Violence, in accordance with the community's Data Quality Standards?

☒ Yes      If no, explain: [Click here to enter text.](#)

8. Describe the plan for rapid implementation of the project, documenting how the project will be ready to begin housing the first participant. Provide a detailed schedule of proposed activities for 60 days, 120 days and 180 days after grant award.

This application is being submitted as an expansion of our current Housing Solutions project. This request allows the community to provide much needed housing for chronically homeless individuals and families. Because Community Rebuilders' Housing Solutions program is currently in operation, the staff team for Housing Solutions 2 are already trained and experienced. These staff can begin working in the project immediately. Staff will simply transition to a new contract with the availability to meet the unmet needs of chronically homeless households who may need additional supports prior to entry into housing. We have chosen to pursue an expansion to our current project, in order to align with HUD's Federal strategic plan objective #4, to provide permanent supportive housing to prevent and end chronic homelessness. Through our work in leading the ending Veteran homelessness effort, we believe we have the skills, ability, and expertise to end chronic homelessness. Additional funding for this project will allow us to provide the much needed leasing assistance dollars to serve additional households and give Consumers immediate access to safe and affordable housing of their choice. This project will maintain its current operating start date of 11/1/2017.

30-60 days prior to the operating state date the following key actions occur:

1. Project Planning. This involves creation of quality assurance binders specific to the project. Employees are provided training on the scope and budget, work breakdown through the development of RACI charts, communication plans and risk management plans. Case file contents and documentation standards for the project are approved and defined. Key Milestones and deliverable charts are developed.
2. Project launch happens after a completed project kick off meeting and referrals are requested from Coordinated entry, HAP, one week prior to launch.

In the first 90 days and throughout the project We will be in the Performance and Control phase of the project. Objectives, deliverables, effort and cost tracking and performance are evaluated monthly throughout the course of the project to ensure compliance with regulations and contract deliverables and consumer needs. Key activities, involve engagement of consumers, utilization of the strengths based housing resource specialist model, monitoring of consumer's progress and gradual disengagement as consumer's transition into permanent housing without support of the project. New Participants are entered as openings occur. Quarterly sub recipient meetings are held, annual monitoring of sub recipients and multiple youth focus groups will be held throughout the project. Youth are quickly assisted to develop a strength based housing plan upon entry. This plan that facilitates their movement from homelessness to housing.

By 120 / 180 days consumers have been housed and are being served many will have already exited to permanent housing and some will be entering the project.

### **ORGANIZATIONAL CAPACITY**

9. Describe agency key staff positions and qualifications of individuals who will carry out the project:

The employees at Community Rebuilders form a knowledgeable and productive workforce that is empowered with all the direct information, authority, recognition and training they need to satisfy the consumers they serve and meet the goals and objectives of each project. Our team is driven by our mission and our commitment to end homelessness. The leadership team has a combined total of over 50 years providing supportive services to vulnerable and at risk populations. Training is intensive for orientation and continues with an additional 40 hours required annually. Housing Resource Specialist are certified in Community Rebuilders strengths based model.






10. Describe the agency's financial management system, including financial reporting, record keeping, accounting systems, payment procedures, procurement processes, and audit requirements:

Community Rebuilders places a heavy emphasis on accountability and transparency including reporting requirements related to the use of funds and maintenance of client level and program services and expense data. Community Rebuilders follows Generally Accepted Accounting Principles (GAAP). The financial records of Community Rebuilders are audited by a Certified Public Accounting firm annually. Community Rebuilders has a robust system of controls in place and has demonstrated a history of integrity in financial records and reports. The system of controls assures appropriate authorization, recording and accountability of assets. Employees share the responsibility for maintaining and complying with these controls and internal compliance controls to ensure they are not circumvented. The organization has clearly stated procedures for handling each area, including a system of checks and balances in which no financial transaction is handled by only one-person from beginning to end. The Board and Executive Director share responsibility for setting a tone and standard of accountability and conscientiousness regarding the organizations assets and responsibilities. There is a developed system and infrastructure of collecting and reporting the required information to funding sources. This project will duplicate our fiscal control systems that work to track and evaluate program compliance and

spending goals in similar HUD funded CoC projects. Specifically, we utilize service tracking in HMIS, monthly activity logs that are compared to financial records and then approved by the project manager and CFO. This process promotes the maintenance of adequate program and fiscal records and files. Source document for project activities and all expenditures made under the term of the grant agreement are reconciled as required. Community Rebuilders has solid experience and demonstrates success in complying with HUD procurement and auditing requirements

Scope of Proposed Project		Proposed Households Served	
Total units	21	Households with at least one adult and one child	7
Total beds	34	Adult households without children	14

#### **PROJECT BUDGET**

Activity	Requested Funds	Other Funding	Total Project Cost	% of Total Budget
Acquisition				 %
New Construction				 %
Rehabilitation				 %
Leasing	191,064.00		191,064.00	60 %
Rental Assistance				 %
Supportive Services	96,192.00		96,192.00	30 %
Operating Costs				 %
HMIS	11,329.00		11,329.00	5 %
Project Administration (limited to 7%)	22,474.13			7 %
Total Project Cost	321,059.00		321,059.00	

Complete Match and Leveraging worksheet, Attachment A.

See scorecard for scoring criteria based on budget information, questions 11-14



## Attachment A

Identify all HUD and non-HUD funding that comprises the project budget. Only those dollars or non-cash contributions (in-kind) that directly support the project should be listed. This may include federal, state, or local government funds, private funds, grants, and/or other sources, including donations.

**Match must be at least 25% of total funding requested.**

Resource	Cash or In Kind	Committed or Planned/ Pending	Available (MM/YY)	Amount/ Value	% of Total Budget	Serves as CoC Program Match? (Y/N)
Program Income	Cash	Committed	11/17	22,756.00	19%	Yes
The Salvation Army	In Kind	Committed	11/17	12,200.00	10%	Yes
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%.	Yes/No
<b>Total leveraged from other sources</b>				<b>34,956.00</b>	<b>%</b>	

Attach additional forms as necessary

## Attachment B

### HUD General Section Certificates

The agency certifies to the Grand Rapids Area Coalition to End Homelessness that it and its principals are in compliance with the following requirements as indicated by checking the box.

- ☒ *Fair Housing and Equal Opportunity*. See CFR 578.93 for specific requirements related to Fair Housing and Equal Opportunity.
- ☒ *Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity*. See the Federal Register dated February 1, 2012, Docket No. FR 5359-F-02 and Section VI.B.2. of the General Section.
- ☒ *Debarment and Suspension*. See Section III.C.4.c. of the FY 2015 General Section. Additionally, it is the responsibility of the recipient to ensure that all subrecipients are not debarred or suspended. (24 CFR 578.23((3)(c)(4)(v).d. Delinquent Federal Debts. See Section III.C.4.a. of the FY 2013 General Section.
- ☒ *Compliance with Fair Housing and Civil Rights*. See Section III.C.3.a. of the FY 2015 General Section.
- ☒ *Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP)*. See Section III.C.3.d. of the FY 2015 General Section.
- ☒ *Economic Opportunities for Low- and Very Low-income Persons (Section 3)*. See Section III.C.3.c. of the FY 2015 General Section.
- ☒ *Real Property Acquisition and Relocation*. See Section VI.B.4. of the FY 2015 General Section.
- ☒ *Conducting Business in Accordance with Core Values and Ethical Standards/Code of Conduct*. See Section III.C.3.f. of the FY 2015 General Section.
- ☒ *Prohibition Against Lobbying Activities*. See Section III.C.3.h. of the FY 2015 General Section.
- ☒ *Participation in HUD-Sponsored Program Evaluation*. See Section VI.B.6. of the FY 2015 General Section.
- ☒ *Environmental Requirements*. Notwithstanding provisions at 24 CFR 578.31 and 24 CFR 578.99(a) of the CoC Program interim rule, and in accordance with Section 100261(3) of MAP-21 (Pub. L. 112-141, 126 Stat. 405), activities under this NOFA are subject to environmental review by a responsible entity under HUD regulations at 24 CFR part 58.
- ☒ *Drug-Free Workplace*. See Section VI.B.9. of the FY 2015 General Section. n. Safeguarding Resident/Client Files. See Section VI.B.10 of the FY 2015 General Section.
- ☒ *Compliance with the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 209-282) (Transparency Act), as amended*. See Section VI.B.11. of the FY 2015 General Section.
- ☒ *Lead-Based Paint Requirements*. For housing constructed before 1978 (with certain statutory and regulatory exceptions), CoC Program recipients must comply with the requirements of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801, et seq.), as amended by the Residential Lead-Based

☒ *Paint Hazard Reduction Act of 1992* (42 U.S.C. 4851, et seq.); and implementing regulations of HUD, at 24 CFR part 35; the Environmental Protection Agency (EPA) at 40 CFR part 745, or State/Tribal lead rules implemented under EPA authorization; and the Occupational Safety and Health Administration at 29 CFR 1926.62 and 29 CFR 1910.1025.

☒ Attestation that all attachments as required by HUD are uploaded in *e-snaps*. See Notice of Funding Availability for the 2015 Continuum of Care Program Competition FR-5900-N-25; Section VI. C. 2.

This list is not exhaustive of all HUD requirements. Applicants are encouraged to review the 2015 General Section, found at:

[http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/administration/grants/fundsavail/2015general](http://portal.hud.gov/hudportal/HUD?src=/program_offices/administration/grants/fundsavail/2015general) to ensure eligibility.

Agency: Community Rebuilders

Acknowledged By:

*Lera Beed*

Title: Executive Director

Date:

*8/18/2017*

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

APR 13 2004

Date:

COMMUNITY REBUILDERS NONPROFIT  
HOUSING CORPORATION  
C/O JEFFREY A DEVREE  
900 MONROE AVE  
GRAND RAPIDS, MI 49503

Employer Identification Number: APR 16 2004  
38-3458918  
DLN:  
17053087823044  
Contact Person:  
GERRY R McLAUGHLIN ID# 31115  
Contact Telephone Number:  
(877) 829-5500  
Public Charity Status:  
509(a) (2)

Dear Applicant:

Our letter dated July 1999, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity during an advance ruling period.

Based on our records and on the information you submitted, we are pleased to confirm that you are exempt under section 501(c)(3) of the Code, and you are classified as a public charity under the Code section listed in the heading of this letter.


Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at [www.irs.gov](http://www.irs.gov).

If you have general questions about exempt organizations, please call our toll-free number shown in the heading between 8:00 a.m. - 6:30 p.m. Eastern time.

Please keep this letter in your permanent records.

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely yours,



Lois G. Lerner  
Director, Exempt Organizations  
Rulings and Agreements

Letter 1050 (DO/CG)

**COMMUNITY REBUILDERS, INC.**  
**(A Non-Profit Organization)**

**FINANCIAL STATEMENTS**

**YEARS ENDED**  
**DECEMBER 31, 2016 AND 2015**

**COMMUNITY REBUILDERS, INC.**

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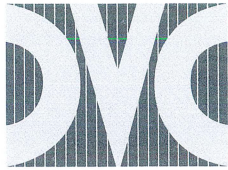
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# DOLINKA, VANNOORD & COMPANY

A PROFESSIONAL LIMITED LIABILITY PARTNERSHIP

C e r t i f i e d   P u b l i c   A c c o u n t a n t s

## INDEPENDENT AUDITORS' REPORT

Board of Directors  
Community Rebuilders, Inc.  
Grand Rapids, Michigan

### Report on the Financial Statements

We have audited the accompanying financial statements of Community Rebuilders, Inc. (a nonprofit organization), which are comprised of the statement of financial position as of December 31, 2016 and 2015, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to error or fraud.

### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Community Rebuilders, Inc. as of December 31, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

## Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued under separate cover our report dated July 20, 2017, on our consideration of Community Rebuilders, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Community Rebuilders, Inc.'s internal control over financial reporting and compliance.

Respectfully submitted,

DOLINKA, VANNOORD & COMPANY, P.L.L.P.

A handwritten signature in black ink that reads "Dolinka, Van Noord & Co., PLLP". The signature is written in a cursive, flowing style.

Certified Public Accountants  
Grand Rapids, Michigan

July 20, 2017



**COMMUNITY REBUILDERS, INC.**  
**STATEMENT OF FINANCIAL POSITION**  
**DECEMBER 31, 2016 AND 2015**

**ASSETS**

	<u>2016</u>	<u>2015</u>
<b>CURRENT ASSETS</b>		
Cash and Cash Equivalents	\$ 53,318	\$ 179,973
Accounts Receivable:		
Grants	346,517	199,510
Contributions	400	-
Rentals - Net of Allowance for Uncollectible Accounts	58,091	37,621
Inventory	24,590	-
Prepaid Expenses	<u>21,649</u>	<u>25,419</u>
<b>TOTAL CURRENT ASSETS</b>	<u>\$ 504,565</u>	<u>\$ 442,523</u>
<b>PROPERTY AND EQUIPMENT</b>		
Property and Equipment	\$ 1,587,556	\$ 1,405,604
Less: Accumulated Depreciation	<u>(1,069,328)</u>	<u>(1,019,071)</u>
<b>NET PROPERTY AND EQUIPMENT</b>	<u>\$ 518,228</u>	<u>\$ 386,533</u>
<b>TOTAL ASSETS</b>	<u><u>\$ 1,022,793</u></u>	<u><u>\$ 829,056</u></u>

**LIABILITIES AND NET ASSETS**

<b>CURRENT LIABILITIES</b>		
Accounts Payable	\$ 28,798	\$ 3,792
Line of Credit	175,000	150,000
Current Portion of Long-Term Debt	36,411	38,618
Security Deposits	21,915	20,073
Deferred Revenue	-	66,219
Other Accrued Liabilities	<u>28,996</u>	<u>22,897</u>
<b>TOTAL CURRENT LIABILITIES</b>	<u>\$ 291,120</u>	<u>\$ 301,599</u>
<b>LONG TERM LIABILITIES</b>		
Long-Term Debt - Net of Current Portion	<u>\$ 247,717</u>	<u>\$ 94,544</u>
<b>TOTAL LIABILITIES</b>	<u>\$ 538,837</u>	<u>\$ 396,143</u>
<b>NET ASSETS</b>		
Unrestricted	\$ 476,129	\$ 426,097
Temporarily Restricted	<u>7,827</u>	<u>6,816</u>
<b>TOTAL NET ASSETS</b>	<u>\$ 483,956</u>	<u>\$ 432,913</u>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u><u>\$ 1,022,793</u></u>	<u><u>\$ 829,056</u></u>

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**STATEMENT OF ACTIVITIES**  
**YEAR ENDED DECEMBER 31, 2016**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
<b>REVENUE AND SUPPORT</b>			
Grant Revenue	\$ 4,661,383	\$ -	\$ 4,661,383
Program Revenue	203,530	-	203,530
Rental Income	350,921	-	350,921
Contributions	100,755	14,608	115,363
Miscellaneous	10,313	-	10,313
Interest Income	44	-	44
Net Assets Released from Restriction	<u>13,597</u>	<u>(13,597)</u>	<u>-</u>
<b>TOTAL REVENUE AND SUPPORT</b>	<u>\$ 5,340,543</u>	<u>\$ 1,011</u>	<u>\$ 5,341,554</u>
<b>PROGRAM EXPENSES</b>			
Program Services	\$ 5,005,388	\$ -	\$ 5,005,388
Supporting Services - Management and General	<u>285,123</u>	<u>-</u>	<u>285,123</u>
<b>TOTAL PROGRAM EXPENSES</b>	<u>\$ 5,290,511</u>	<u>\$ -</u>	<u>\$ 5,290,511</u>
<b>INCREASE IN NET ASSETS</b>	\$ 50,032	\$ 1,011	\$ 51,043
<b>NET ASSETS - BEGINNING OF YEAR</b>	<u>426,097</u>	<u>6,816</u>	<u>432,913</u>
<b>NET ASSETS - END OF YEAR</b>	<u><u>\$ 476,129</u></u>	<u><u>\$ 7,827</u></u>	<u><u>\$ 483,956</u></u>

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**STATEMENT OF ACTIVITIES**  
**YEAR ENDED DECEMBER 31, 2015**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
<b>REVENUE AND SUPPORT</b>			
Grant Revenue	\$ 4,496,841	\$ -	\$ 4,496,841
Program Revenue	198,378	-	198,378
Rental Income	307,413	-	307,413
Contributions	59,517	-	59,517
Miscellaneous	26,866	-	26,866
Gain on Sale of Assets	1,075	-	1,075
Interest Income	29	-	29
Net Assets Released from Restriction	49,659	(49,659)	-
<b>TOTAL REVENUE AND SUPPORT</b>	<u>\$ 5,139,778</u>	<u>\$ (49,659)</u>	<u>\$ 5,090,119</u>
<b>PROGRAM EXPENSES</b>			
Program Services	\$ 4,691,218	\$ -	\$ 4,691,218
Supporting Services - Management and General	261,260	-	261,260
<b>TOTAL PROGRAM EXPENSES</b>	<u>\$ 4,952,478</u>	<u>\$ -</u>	<u>\$ 4,952,478</u>
<b>INCREASE (DECREASE) IN NET ASSETS</b>	<b>\$ 187,300</b>	<b>\$ (49,659)</b>	<b>\$ 137,641</b>
<b>NET ASSETS - BEGINNING OF YEAR</b>	<u>238,797</u>	<u>56,475</u>	<u>295,272</u>
<b>NET ASSETS - END OF YEAR</b>	<u><u>\$ 426,097</u></u>	<u><u>\$ 6,816</u></u>	<u><u>\$ 432,913</u></u>

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

COMMUNITY REBUILDERS, INC.  
STATEMENT OF FUNCTIONAL EXPENSES  
YEAR ENDED DECEMBER 31, 2016

	Program Services																Supporting Services	Total
	Housing Solutions	Keys First	LOFT	HEROS	Shelter Plus Care	Rental	HOPWA	United Way	Veterans Per Diem Only	Supportive Services for Veteran Families	Health Care - Homeless Vets	PSH Connections	Emergency Solutions Grants	HOME - SVA	Other Programs	Total	Management and General	
Salaries and Related Expense																		
Salaries and Wages	\$ 152,142	\$ 227,618	\$ 33,578	\$ 39,655	\$ 198,086	\$ 64,993	\$ 44,670	\$ 36,531	\$ 105,652	\$ 123,986	\$ 95,073	\$ 39,163	\$ 20,509	\$ 69,284	\$ 16,557	\$ 1,267,497	\$ 148,357	\$ 1,415,854
Retirement Contributions	4,464	6,438	1,037	797	6,004	2,211	1,502	1,283	3,559	4,472	3,109	1,167	257	2,411	585	39,296	3,871	43,167
Employee Insurance	23,710	26,345	4,477	4,112	29,373	11,739	6,598	9,395	25,704	29,949	23,030	6,010	2,040	20,213	4,106	226,801	17,558	244,359
Payroll Taxes	12,961	19,079	2,080	3,168	16,463	5,629	3,562	3,216	8,222	11,133	7,221	3,212	1,805	5,669	1,007	104,427	11,466	115,893
Other Expenses																		
Occupancy	7,657	7,882	2,647	1,452	5,960	2,626	1,410	-	10,567	10,233	9,541	423	-	-	-	60,398	1,379	61,777
Housing Assistance	262,486	245,409	85,116	86,935	996,475	-	65,410	-	232,683	108,314	144,687	158,734	88,278	-	31,862	2,506,389	-	2,506,389
Credit and Collections	-	-	-	-	415	3,600	-	-	10,239	-	-	-	-	-	-	14,254	-	14,254
Bank and Interest Charges	190	238	30	13	290	11,142	4	-	4,813	10	2,585	6	-	-	-	19,321	866	20,187
Subcontractors	-	198,563	-	-	-	-	-	-	-	-	-	-	9,900	-	-	208,463	-	208,463
Communications	10,955	15,094	3,199	2,664	16,438	4,684	4,252	-	11,224	10,591	9,193	603	-	-	754	89,651	4,013	93,664
Outreach and Marketing	658	804	528	537	1,190	681	62	-	957	1,783	954	-	-	-	-	8,154	2,027	10,181
Property Maintenance	-	-	-	-	-	123,480	-	-	-	-	-	-	-	-	-	123,480	-	123,480
Office Supplies	9,219	10,353	6,514	3,624	7,859	2,949	3,121	28	3,662	5,288	3,634	263	838	-	436	57,788	8,064	65,852
Insurance	-	-	-	13	-	22,477	-	-	-	-	59	-	-	-	-	22,549	3,946	26,495
Professional Services	2,218	1,000	1,524	1,463	1,424	2,178	434	-	5,325	766	3,164	4	-	-	-	19,500	21,644	41,144
Training and Recruitment	3,194	7,182	802	823	2,031	266	211	-	1,846	4,711	1,473	88	1,682	-	21	24,330	3,228	27,558
Program Services	24,431	28,493	4,405	1,002	5,221	2,132	3,925	2,033	36,097	13,161	26,282	3,151	-	-	2,787	153,120	45,632	198,752
Other Operating Expenses	557	369	54	57	672	3,397	61	-	202	167	164	105	-	-	8,285	14,090	8,695	22,785
Depreciation Expense	-	-	-	-	-	45,880	-	-	-	-	-	-	-	-	-	45,880	4,377	50,257
TOTAL EXPENSES	\$ 514,842	\$ 794,867	\$ 145,991	\$ 146,315	\$ 1,287,901	\$ 310,064	\$ 135,222	\$ 52,486	\$ 460,752	\$ 324,564	\$ 330,169	\$ 212,929	\$ 125,309	\$ 97,577	\$ 66,400	\$ 5,005,388	\$ 285,123	\$ 5,290,511

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

COMMUNITY REBUILDERS, INC.  
STATEMENT OF FUNCTIONAL EXPENSES  
YEAR ENDED DECEMBER 31, 2015

	Program Services															Supporting Services	Total
	Housing Solutions	Keys First	LOFT	HEROS	Shelter Plus Care	Rental	HOPWA	United Way	Veterans Per Diem Only	Supportive Services for Veteran Families	Health Care - Homeless Vets	PSH Connections	Emergency Solutions Grants	Other Programs	Total	Management and General	
<b>Salaries and Related Expense</b>																	
Salaries and Related Expense	\$ 189,919	\$ 214,094	\$ 18,287	\$ 36,098	\$ 212,385	\$ 66,135	\$ 42,268	\$ 27,585	\$ 111,792	\$ 136,429	\$ 57,288	\$ 6,238	\$ 31,541	\$ 51,303	\$ 1,201,362	\$ 130,670	\$ 1,332,032
Retirement Contributions	2,887	3,049	356	447	3,910	1,571	830	888	2,633	2,344	2,140	75	641	1,538	23,309	2,050	25,359
Employee Insurance	27,358	21,481	3,697	4,240	33,198	13,514	6,076	7,709	20,592	25,239	26,748	812	5,295	17,867	213,826	15,443	229,269
Payroll Taxes	15,138	15,283	1,538	2,763	18,892	6,127	3,510	2,524	9,749	12,000	5,138	447	2,834	4,761	100,704	9,144	109,848
<b>Other Expenses</b>																	
Occupancy	18,653	7,802	948	1,422	12,995	3,167	2,615	-	11,000	10,582	8,788	-	-	-	77,972	-	77,972
Housing Assistance	195,350	295,536	72,448	83,013	892,929	-	66,698	-	244,204	97,084	139,993	24,307	79,701	-	2,191,263	-	2,191,263
Credit and Collections	-	-	-	-	12,291	4,593	-	-	7,719	-	-	-	-	-	24,603	-	24,603
Bank and Interest Charges	120	147	19	28	180	9,034	-	-	1,130	-	3,074	-	-	-	13,732	253	13,985
Subcontractors	-	220,086	-	-	-	-	-	-	-	-	-	-	9,900	-	229,986	-	229,986
Communications	34,783	26,159	2,716	3,188	28,368	2,742	5,448	-	16,987	17,321	12,717	-	-	1,936	152,365	4,082	156,447
Outreach and Marketing	942	935	179	118	819	415	84	-	164	178	164	-	-	-	3,998	505	4,503
Property Maintenance	-	-	-	-	-	154,631	-	-	-	-	-	-	-	-	154,631	-	154,631
Office Supplies	24,302	8,964	11,157	9,076	2,905	2,035	2,633	-	4,222	6,803	2,380	-	900	-	75,377	2,722	78,099
Insurance	-	-	10	13	-	21,808	-	-	-	-	-	-	-	-	21,831	4,320	26,151
Professional Services	2,249	3,632	333	466	2,584	2,806	1,453	-	5,586	1,991	3,599	-	-	-	24,699	21,171	45,870
Training and Recruitment	14,060	11,807	220	4	28	307	1,190	-	89	5,444	63	-	-	-	33,212	12,965	46,177
Program Services	11,870	15,699	284	2,155	1,608	1,232	1,251	-	41,097	12,313	12,581	47	-	669	100,806	1,029	101,835
Other Operating Expense	-	-	-	-	-	550	-	-	-	-	-	-	-	-	550	7,247	7,797
Depreciation Expense	-	-	-	-	-	46,992	-	-	-	-	-	-	-	-	46,992	49,659	96,651
<b>TOTAL EXPENSES</b>	<b>\$ 537,631</b>	<b>\$ 844,674</b>	<b>\$ 112,192</b>	<b>\$ 143,031</b>	<b>\$ 1,223,092</b>	<b>\$ 337,659</b>	<b>\$ 134,056</b>	<b>\$ 38,706</b>	<b>\$ 476,964</b>	<b>\$ 327,728</b>	<b>\$ 274,673</b>	<b>\$ 31,926</b>	<b>\$ 130,812</b>	<b>\$ 78,074</b>	<b>\$ 4,691,218</b>	<b>\$ 261,260</b>	<b>\$ 4,952,478</b>

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**STATEMENT OF CASH FLOWS**  
**YEARS ENDED DECEMBER 31, 2016 AND 2015**

	<u>2016</u>	<u>2015</u>
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Cash Received from Grants	\$ 4,448,157	\$ 4,174,070
Cash Received from Program Service Revenue	203,530	178,368
Cash Received from Rentals	316,197	297,868
Cash Received from Contributions	39,348	13,947
Cash Received from Miscellaneous	10,313	26,866
Cash Received from Interest	44	29
Cash Paid for Interest Expense	(15,305)	(12,652)
Cash Paid for Program Expenses (Excluding Interest)	(4,837,830)	(4,519,401)
Cash Paid for Management and General Expenses (Excluding Interest)	<u>(285,123)</u>	<u>(261,260)</u>
<b>NET CASH FROM OPERATING ACTIVITIES</b>	<u>\$ (120,669)</u>	<u>\$ (102,165)</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Cash Paid for Property and Equipment	\$ (181,952)	\$ -
Cash Received from Sale of Property and Equipment	<u>-</u>	<u>1,075</u>
<b>NET CASH FROM INVESTING ACTIVITIES</b>	<u>\$ (181,952)</u>	<u>\$ 1,075</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Cash Received from Long-Term Debt	\$ 186,542	\$ -
Repayments of Long-Term Debt	(35,576)	(36,304)
Cash Received from Line of Credit	50,000	100,000
Repayments of Line of Credit	<u>(25,000)</u>	<u>(100,000)</u>
<b>NET CASH FROM FINANCING ACTIVITIES</b>	<u>\$ 175,966</u>	<u>\$ (36,304)</u>
<b>NET INCREASE (DECREASE) IN CASH</b>	\$ (126,655)	\$ (137,394)
<b>CASH - BEGINNING OF YEAR</b>	<u>179,973</u>	<u>317,367</u>
<b>CASH - END OF YEAR</b>	<u><u>\$ 53,318</u></u>	<u><u>\$ 179,973</u></u>

**NON CASH TRANSACTIONS**

The Organization received \$75,615 and \$45,802 of donated goods and services for the years ended December 31, 2016 and 2015, respectively.

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**STATEMENT OF CASH FLOWS**  
**YEARS ENDED DECEMBER 31, 2016 AND 2015**

**RECONCILIATION OF CHANGE IN NET ASSETS TO NET CASH  
FROM OPERATING ACTIVITIES**

	<u>2016</u>	<u>2015</u>
<b>CHANGES IN NET ASSETS</b>	\$ 51,043	\$ 137,641
Adjustments:		
Depreciation	50,257	96,651
Gain on Sale of Assets	-	(1,075)
Changes in Assets and Liabilities:		
Accounts Receivable	(167,877)	(36,935)
Inventory	(24,590)	-
Prepaid Expenses	3,770	(10,186)
Accounts Payable	25,006	(11,703)
Security Deposits	1,842	2,799
Deferred Revenue	(66,219)	(290,557)
Other Accrued Liabilities	<u>6,099</u>	<u>11,200</u>
<b>NET CASH FROM OPERATING ACTIVITIES</b>	<u><u>\$ (120,669)</u></u>	<u><u>\$ (102,165)</u></u>

The accompanying notes are an integral part of these financial statements.  
See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Nature of Organization**

Community Rebuilders, Inc. (the “Organization”) is a nonprofit organization whose mission is to provide housing opportunities and support services to households with a housing crisis in Kent County. Community Rebuilders utilizes a housing first approach focused on rapidly re-housing homeless households by providing access to affordable housing with supports. The provision of rent assistance and housing stabilization services, such as strengths-based case management, help with employment, connecting with mainstream resources like TANF and SSI/SSDI, budget counseling, and childcare assistance etc. are utilized to assist households to obtain housing and remain stably housed. Community Rebuilders prevents households from becoming homeless through the provision of rent assistance – paying back rent and effective case management and homeless prevention planning.

The Organization operates the following programs:

*LOFT* – this program provides rental assistance and supportive services for the chronically homeless persons with a disabling condition.

*HEROS* – this program provides rental assistance and supportive services for the homeless veterans with a disabling condition.

*Shelter Plus Care* – this program provides housing and supportive services on a long-term basis for homeless persons with disabilities and their families.

*Rental Program* – Community Rebuilders provides affordable rental units at rates below fair market rent to low income households. This program provides an opportunity for individuals and families to rebuild their rental histories and secure rental housing despite poverty, past evictions and poor credit.

*Housing Opportunities for Persons Living with Aids/ HIV Related Illnesses (HOPWA)* – this program offers short term and medium term rental assistance and supportive services for low income persons living with HIV/ AIDS and their families.

*United Way Allocation* – this program provides funding for Housing Resource Specialist services to assist households to prevent an episode of homelessness or to quickly return to housing after an episode of homelessness.

*VA Homeless Veterans Per Diem Program* – this program provides supportive services and housing to eligible homeless veterans using a scattered site model.

*Supportive Services for Veteran Families Program* – this program provides supportive services and housing to very low-income Veteran families who are residing in permanent housing, are homeless and scheduled to become residents of permanent housing or, after exiting permanent housing within a specified time period, are seeking other housing.

*Health Care for Homeless Veterans Program* – this program provides housing and/or supportive services with the goal of helping homeless veterans achieve residential stability.

*Housing Solutions Program* – this program serves chronically homeless, disabled individuals and families and ensures that they are rapidly housed in a rental unit in the neighborhood and location the participant desires. Once housed, these participants are assisted with developing action plans and the necessary supports to help them maintain long term housing.

See independent auditors’ report.



**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued**

**Nature of Organization – continued**

*Keys First* – this program provides short and medium term rental assistance to homeless households with children who are residing in shelters or living on the streets and housing first, strengths based case management services to produce superior housing outcomes.

*Emergency Solutions Grant Program* – this program provides homeless prevention assistance to households who would otherwise become homeless and to rapidly re-house homeless persons.

*Housing Resource Specialist* – this program assists families who are at imminent risk of homelessness due to inability to pay their back rent or past due mortgage due to no fault of their own. The program attempts to prevent litigation, eviction or foreclosure through assessment, mediation, conflict resolution and the use of a one-time rental/ mortgage assistance payment.

*HOME* – this program provides short term rental assistance to individuals and households who are homeless or would otherwise become homeless.

*PSH Connections* – this program is designed to provide permanent housing for chronically homeless persons receiving behavioral health services funded by Network 180. The goal of this program is to create long term housing stability, a return to self-sufficiency and connection with community for persons who are chronically homeless and in need of behavioral health services.

*MSHDA* – this program is a 2016 initiative between the COC and Michigan Housing Development Authority to support Ending Veterans Homelessness by the end of 2016. These funds were intended to supplement SSVF program dollars received through the Veterans Administration.

*Youth* – this program is a Rapid Rehousing Project intended to serve 18 – 24 year old homeless youth with rental assistance and support services not found elsewhere in the community.

**Concentration of Funding**

The Organization receives virtually all of its funding from U.S. Federal, state and local governments. Loss of this funding would result in a substantial reduction in program services.

**Basis of Accounting and Presentation**

The financial statements of the Organization have been prepared on the accrual basis of accounting utilizing three classes of net assets for reporting and presentation as follows:

Unrestricted net assets represent the Organization's resources that are available for operations. For reporting purposes it is the Organization's policy to record items with temporary restrictions which are satisfied within the same reporting period as unrestricted assets.

Temporarily restricted net assets represent contributions received by the Organization which have been designated for a special purpose by the donor. Once the restrictions have been met, the contributions will be released from their restrictions. The temporarily restricted net assets for the office move and related leasehold improvements were \$7,827 and \$6,816 as of December 31, 2016 and 2015, respectively.

See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 1 –SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued**

**Basis of Accounting and Presentation - continued**

Permanently restricted net assets represent contributions that are subject to restrictions of gift instruments requiring that the principal be maintained in perpetuity and invested; the income therefrom may be used to support operations. As of December 31, 2016 and 2015, the Organization has no permanently restricted assets.

**Use of Estimates**

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting year. Actual results could differ from those estimates.

**Cash and Cash Equivalents**

Cash and cash equivalents consist of demand deposits and interest bearing money market accounts. Although the balances exceed the federally insured limits at certain times during the year and at year end, they are, in the opinion of management, subject to minimal risk.

**Accounts Receivable**

Accounts receivable includes amounts due from grant programs, contributions and rents due from tenants and are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through the provision for bad debt expense and an adjustment to a valuation allowance based on its assessment of the current status of individual receivables. Balances that are still outstanding after management has used reasonable collection efforts are written off. The Organization has established an allowance of \$967 and \$-0- for uncollectible rents for the years ended December 31, 2016 and 2015, respectively.

**Inventory**

Inventory consists of donated furniture and household goods recorded at fair market value of the items at the time of donation. These items will be distributed to program participants during 2017.

**Property, Equipment and Depreciation**

Property and equipment are recorded at cost or, if donated, at the fair market value on the date of the gift. Equipment, major improvements and renewals are capitalized if the costs exceeds \$5,000, while ordinary maintenance and repairs are expensed. Management annually reviews these assets to determine whether carrying values have been impaired. Depreciation is computed using the straight-line method over the estimated useful lives of the related assets, which generally range from 3 to 27.5 years.

See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued**

**Contributions and Rental Revenue**

Contributions are recognized as revenue when promises to give are received. Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence or nature of any donor restrictions. Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets depending on the nature of the restriction. Revenues from rental income and other charges to residents are recognized in the month earned.

**Grant Revenue Recognition/Deferred Revenue**

Revenue from government grants qualifies as “exchange transaction” type revenue. Accordingly, government grants are recognized as revenue in the period in which expenditures are made. Grant proceeds received in advance of expenditures are recorded as deferred revenue in the statement of financial position.

**Functional Expenses**

Expenses are charged to each program based on direct expenditures incurred. Any program expenses not directly chargeable have been allocated among the programs and supporting services benefited.

**Income Taxes**

The Organization qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and is exempt from similar state and local taxes. Accordingly, no provision has been made for income taxes in the accompanying financial statements.

With few exceptions, periods ending December 31, 2013 and thereafter are subject to U.S. tax examinations by tax authorities.

**NOTE 2 – PROPERTY AND EQUIPMENT**

The following is a summary of property and equipment as of December 31:

	2016	2015
Land	\$ 48,712	\$ 41,860
Buildings	623,312	561,639
Building Improvements	661,121	547,694
Leasehold Improvements	224,920	224,920
Transportation Equipment	21,915	21,915
Furniture and Fixtures	7,576	7,576
<b>Total Property and Equipment</b>	<b>\$ 1,587,556</b>	<b>\$ 1,405,604</b>
Less: Accumulated Depreciation	1,069,328	1,019,071
<b>NET PROPERTY AND EQUIPMENT</b>	<b>\$ 518,228</b>	<b>\$ 386,533</b>

See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 3 - LINE OF CREDIT**

During 2015, the Organization renewed their line of credit agreement with a bank for \$250,000. The outstanding balance on the line of credit was \$175,000 and \$150,000 for the years ended December 31, 2016 and 2015, respectively. The line requires monthly interest payments at a rate of 1.75% above the prime rate (3.75% at December 31, 2016) but not lower than 5%. The line of credit is secured by all assets of the Organization and matures in October, 2017.

**NOTE 4 – LONG-TERM DEBT**

Long-term debt consists of the following obligations at December 31:

	<u>2016</u>	<u>2015</u>
Note payable to a bank, collateralized by a real estate mortgage, due in monthly installments of \$4,000 including interest at 5.70% per annum, with a final balloon payment in October, 2021.	\$ 280,565	\$ -
Note payable to a bank, collateralized by a real estate mortgage, due in monthly installments of \$3,250 including interest at 5.70% per annum. This note was refinanced in 2016.	-	123,798
Loan payable to Ford Motor Credit Company, collateralized by a vehicle, due in monthly installments of \$520 including interest at 6.54% per annum, with a final payment due in July, 2017.	<u>3,563</u>	<u>9,364</u>
<b>TOTAL</b>	\$ 284,128	\$ 133,162
Less: Current Portion	<u>(36,411)</u>	<u>(38,618)</u>
<b>NET LONG-TERM DEBT</b>	<u><u>\$ 247,717</u></u>	<u><u>\$ 94,544</u></u>

Current maturities of long-term debt:

December 31, 2017	\$ 36,411
December 31, 2018	34,771
December 31, 2019	36,805
December 31, 2020	38,959
December 31, 2021	<u>137,182</u>
<b>TOTAL</b>	<u><u>\$ 284,128</u></u>

See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 5 – LEASES**

During 2015, the Organization renewed their agreement to lease office space. The building lease is a five year operating lease and requires monthly payments of \$3,798. The terms of the lease require the base rent to be adjusted on the first day of each subsequent 12-month period by the lesser of the percentage change in the Consumer Price Index or 3%. This lease expires in December, 2020.

During 2015, the Organization renewed their agreement to lease additional office space. The lease is an operating lease which may be terminated at the end of any calendar year by giving 60 days prior written notice and requires monthly payments of \$1,200.

The Organization leases copy machines under an operating lease which requires monthly payments of \$859 and expires in November, 2018.

The Organization held 80 lease agreements with various landlords for rental properties which were leased for clients during 2016 and 2015. These leases have initial terms of up to twelve months and require monthly payments ranging from \$528 – \$1,504 per the lease agreements.

The future minimum lease obligations in effect at December 31, 2016 are as follows:

<u>Year Ending</u>	
December 31, 2017	\$ 70,284
December 31, 2018	55,024
December 31, 2019	45,576
December 31, 2020	45,576

Total lease expense was \$69,287 and \$68,987 for the years ended December 31, 2016 and 2015, respectively.

**NOTE 6 – CONTINGENCIES**

In the normal course of its activities, the Organization is a party to various legal actions and is subject to certain asserted and unasserted claims and assessments. The actual costs to the Organization, if any, in the event of an unfavorable outcome, and net of any applicable insurance recoveries, cannot be reasonably estimated at this time. Therefore, no liability has been recorded in the accompanying statement of financial position.

**NOTE 7 – EMPLOYEE PENSION PLAN**

The Organization provides a simplified employee pension plan for all eligible employees. The Organization's retirement plan contribution is equal to 3% and 2% of an eligible employee's salary for 2016 and 2015, respectively. Total pension plan expense was \$43,167 and \$25,359 for 2016 and 2015, respectively.

See independent auditors' report.

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2016 AND 2015**

**NOTE 8 – DONATED GOODS**

The Organization receives gifts in kind, such as materials, supplies and services, from private donors and corporate entities. Gifts in kind are recorded as revenue and inventory or program expense at the fair market value at the time the donations are received. The value of the gifts in kind received were \$75,615 and \$45,802 for the years ended December 31, 2016 and 2015, respectively.

**NOTE 9 – SUBSEQUENT EVENTS**

Management has evaluated subsequent events occurring after the balance sheet date and through July 20, 2017, the date these financial statements were available to be issued, and has determined that no items require disclosure.

**NOTE 10 – RECLASSIFICATIONS**

Certain reclassifications have been made to the December 31, 2015 financial statements to conform with the December 31, 2016 financial statement presentation. Such reclassifications have no effect on net income previously reported.



## Department of Licensing and Regulatory Affairs

Lansing, Michigan

*This is to Certify That*

### **COMMUNITY REBUILDERS**

*was validly incorporated on January 12, 1993, as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state*

*This certificate is issued pursuant to the provisions of 1982 PA 162, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States*



Sent by Facsimile Transmission  
1430166

*In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 25th day of January, 2017.*

*Julia Dale*

Julia Dale, Director  
Corporations, Securities & Commercial Licensing Bureau

**SAM Search Results**  
**List of records matching your search for :**  
**Record Status: Active**  
**DUNS Number: 948960398**

**Functional Area: Entity Management, Performance Information**

ENTITY		COMMUNITY REBUILDERS		Status:Active	
DUNS: 948960398		+4:		CAGE Code: 53YR8	DoDAAC:
Expiration Date: Jan 30, 2018		Has Active Exclusion?: No		Debt Subject to Offset?: No	
Address: 1120 MONROE AVE NW STE 220					
City: GRAND RAPIDS			State/Province: MICHIGAN		
ZIP Code: 49503-1038			Country: UNITED STATES		



**COMMUNITY REBUILDERS, INC.**  
**(A Non-Profit Organization)**

**SINGLE AUDIT REPORT**

**FOR THE YEAR ENDED DECEMBER 31, 2016**

COMMUNITY REBUILDERS, INC.

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**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL  
REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT  
OF THE FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH  
GOVERNMENT AUDITING STANDARDS**

Board of Directors  
Community Rebuilders, Inc.  
Grand Rapids, Michigan

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Community Rebuilders, Inc. (a nonprofit organization), which are comprised of the statement of financial position as of December 31, 2016 and 2015, and the related statements of activities, and cash flows for the years then ended, and the related notes to the financial statements, and have issued our report thereon dated July 20, 2017.

**Internal Control over Financial Reporting**

In planning and performing our audit of the financial statements, we considered Community Rebuilders, Inc.'s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing our opinion on the effectiveness of Community Rebuilders, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of the internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

**Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Community Rebuilders, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and

accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Respectfully submitted,

DOLINKA, VANNOORD & COMPANY, PLLP

A handwritten signature in cursive script that reads "Dolinka, Van Noord & Co., PLLP".

Certified Public Accountants  
Grand Rapids, Michigan

July 20, 2017





**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

Board of Directors  
Community Rebuilders, Inc.  
Grand Rapids, Michigan

**Report on Compliance for Each Major Federal Program**

We have audited Community Rebuilders, Inc.'s compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Community Rebuilders, Inc.'s major federal programs for the year ended December 31, 2016. Community Rebuilders, Inc.'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

**Management's Responsibility**

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

**Auditor's Responsibility**

Our responsibility is to express an opinion on compliance for each of Community Rebuilders, Inc.'s major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; the audit requirements of *Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Community Rebuilders, Inc.'s compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of Community Rebuilders, Inc.'s compliance.

**Opinion on Each Major Federal Program**

In our opinion, Community Rebuilders, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs identified for the year ended December 31, 2016.

## **Report on Internal Control Over Compliance**

Management of Community Rebuilders, Inc. is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Community Rebuilders, Inc.'s internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Community Rebuilders, Inc.'s internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### **Purpose of this Report**

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

## **Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance**

We have audited the financial statements of Community Rebuilders, Inc. as of and for the years ended December 31, 2016 and 2015 and have issued our report thereon dated July 20, 2017, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of

America. In our opinion, the schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the financial statements as a whole.

Respectfully submitted,

DOLINKA, VANNOORD & COMPANY, PLLP

A handwritten signature in cursive script that reads "Dolinka, Van Noord & Co., PLLP".

Certified Public Accountants  
Grand Rapids, Michigan

July 20, 2017



**COMMUNITY REBUILDERS, INC.**  
**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**  
**FOR THE YEAR ENDED DECEMBER 31, 2016**

Federal and Pass Through Grantor / Program Title/Project Number	CFDA Number	Approved Awards Amount	Passed Through to Subrecipients	Expenditures
<b>U.S. Department of Housing and Urban Development</b>				
LOFT Supportive Services:				
MI-0315L5F-061303	14.267	\$ 118,824		\$ 12,728
MI-0315L5F-061404	14.267	\$ 118,824		110,386
Total LOFT Supportive Services				<u>\$ 123,114</u>
HEROS Supportive Services:				
MI-0345L5F-061302	14.267	\$ 125,180		\$ 15,736
MI-0345L5F-061403	14.267	\$ 125,180		106,122
Total HEROS Supportive Services				<u>\$ 121,858</u>
Housing Solutions:				
MI-0412L5F-061401	14.267	\$ 516,390		\$ 428,560
MI-0412L5F-061502	14.267	\$ 528,547		91,545
Total Housing Solutions				<u>\$ 520,105</u>
Keys First:				
MI-0415L5F-061401	14.267	\$ 820,794	\$ 198,563	\$ 706,859
MI-0415L5F-061502	14.267	\$ 840,930	-	131,122
Total Keys First			<u>\$ 198,563</u>	<u>\$ 837,981</u>
Youth RRH Collaborative:				
MI-0505L5F-061500	14.267	\$ 782,976		<u>\$ 7,724</u>
<b>Passed - Through Kent County</b>				
Shelter Plus Care Program - TRA:				
MI-0173L5F-061407	14.267	\$ 822,443		\$ 430,705
MI-0173L5F-061508	14.267	\$ 872,114		409,733
Total Shelter Plus Care Program - TRA				<u>\$ 840,438</u>
Shelter Plus Care Program - SRA:				
MI-0174L5F-061407	14.267	\$ 398,439		\$ 200,639
MI-0174L5F-061508	14.267	\$ 419,309		229,287
Total Shelter Plus Care Program - SRA				<u>\$ 429,926</u>
<b>Total U.S. Department of Housing and Urban Development</b>			<u>\$ 198,563</u>	<u>\$ 2,881,146</u>



**COMMUNITY REBUILDERS, INC.**  
**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS - CONTINUED**  
**FOR THE YEAR ENDED DECEMBER 31, 2016**

Federal and Pass Through Grantor / Program Title/Project Number	CFDA Number	Approved Awards Amount	Passed Through to Subrecipients	Expenditures
<b>U.S. Department of Veterans Affairs</b>				
Veteran Heights - Per Diem Supportive Services:				
07-46-MI	64.024	\$ 438,000		\$ 306,099
07-46-MI	64.024	\$ 501,401		<u>104,859</u>
Total Veteran Heights - Per Diem Supportive Services				<u>\$ 410,958</u>
Supportive Services for Veteran's Families:				
14-MI-223	64.033	\$ 379,950		\$ 273,937
14-MI-223	64.033	\$ 379,950		<u>93,067</u>
Total Supportive Services for Veteran's Families				<u>\$ 367,004</u>
<b>Total U.S. Department of Veterans Affairs</b>				<u>\$ 777,962</u>
<b>Passed - Through Michigan Department of Community Health</b>				
Housing Opportunities for Persons with Aids				
20161523	14.241	\$ 139,793		\$ 93,109
20170325	14.241	\$ 153,256		<u>49,787</u>
Total Housing Opportunities for Persons with Aids				<u>\$ 142,896</u>
<b>Total Expenditures of Federal Awards</b>			<u>\$ 198,563</u>	<u>\$ 3,802,004</u>

**COMMUNITY REBUILDERS, INC.**  
**NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**  
**FOR THE YEAR ENDED DECEMBER 31, 2016**

**NOTE 1 – BASIS OF PRESENTATION**

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of Community Rebuilders, Inc. under programs of the federal government for the year ended December 31, 2016. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of Community Rebuilders, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of Community Rebuilders, Inc.

**NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

- (1) Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Community Rebuilders, Inc. has elected to use the 10 percent de minimus indirect cost rate as allowed under the Uniform Guidance.

**COMMUNITY REBUILDERS, INC.**  
**SCHEDULE OF FINDINGS AND QUESTIONED COSTS**  
**FOR THE YEAR ENDED DECEMBER 31, 2016**

**SECTION I - SUMMARY OF AUDITORS' RESULTS**

**Financial Statements**

Type of Auditor's Report Issued

Unmodified

Internal controls over financial reporting:

Material weakness(es) identified?

\_\_\_\_\_ yes      X   no

Significant deficiencies identified not considered  
to be material weaknesses?

\_\_\_\_\_ yes      X   none reported

Noncompliance material to financial statements noted?

\_\_\_\_\_ yes      X   no

**Federal Awards**

Internal Control over major programs:

Material weakness(es) identified?

\_\_\_\_\_ yes      X   no

Significant deficiencies identified not considered  
to be material weaknesses?

\_\_\_\_\_ yes      X   none reported

Type of auditor's report issued on compliance for  
major programs:

Unmodified

Any audit findings disclosed that are required to be  
reported in accordance with 2 CFR section 200.516(a)?

\_\_\_\_\_ yes      X   no

**Identification of Major Programs**

CFDA Number

Name of Federal Program or Cluster

14.267

Continuum of Care

Dollar threshold used to distinguish between Type A  
and Type B programs:

\$ 750,000

Auditee qualified as low-risk auditee?

  X   yes    \_\_\_\_\_ no

**COMMUNITY REBUILDERS, INC.  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
FOR THE YEAR ENDED DECEMBER 31, 2016**

**SECTION II – FINANCIAL STATEMENT FINDINGS**

None

**COMMUNITY REBUILDERS, INC.  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
FOR THE YEAR ENDED DECEMBER 31, 2016**

**SECTION III – FEDERAL AWARD FINDINGS AND QUESTIONED COSTS**

None

**COMMUNITY REBUILDERS, INC.**  
**SCHEDULE OF FINDINGS AND QUESTIONED COSTS**  
**FOR THE YEAR ENDED DECEMBER 31, 2016**

**SECTION IV – SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS**  
**FINDING 2015-001**

**Finding Type – Significant Deficiency in Internal Controls over Cash Management**

**Program:** Housing Solutions Continuum of Care Program; U.S. Department of Housing and Urban Development; CFDA # 14.267

**Condition:** The Organization requested advance payments for the Housing Solutions program based on estimated expenditures for the month, which resulted in the receipt of Federal funds that exceeded the monthly expenditures at times during the contract period. Although the Organization has procedures designed to comply with the cash management requirements of the new Uniform Guidance and intended to only draw the funds needed for actual expenditures for the month, the advance payment requests did not always follow these procedures.

**Current Status:** The Organization has implemented procedures to more closely identify expenditures expected to be incurred for the month prior to requesting advance payment of Federal funds. They have taken corrective action to minimize the time between the receipt of funds from the U.S. Department of Housing and Urban Development and the disbursement of these funds in order to ensure compliance with their internal control procedures and Federal cash management regulations.



**U.S. Department of Housing and Urban Development**

Detroit Field Office  
Office of Community Planning and Development  
Patrick V. McNamara Federal Building  
477 Michigan Avenue, Room 1710  
Detroit, MI 48226-2592  
Tel. (313) 226-7900 FAX (313) 226-6689

June 24, 2014

Vera Beech  
Executive Director  
Community Rebuilders  
1120 Monroe, Suite 220  
Grand Rapids, MI 49503

SUBJECT: Monitoring Report – Community Rebuilders  
Continuum of Care Program  
Grant Number: MI0315L5F061202

Dear Mrs. Beech:

Our office has conducted a review of the captioned grant pursuant to the regulations for the Continuum of Care Program (CoC). The purpose of the review was to determine compliance with the applicable laws and regulations found at 24 CFR 578 and to measure Community Rebuilders continuing capacity to carry out the program in a timely manner.

Mr. Darrick Mallad, Community Planning and Development Representative, conducted a monitoring review May 13 through May 15, 2014. Mr. Mallad met with Mrs. Vera Beech and members of her staff from Community Rebuilders on location at 1120 Monroe, Grand Rapids Michigan. Activities covered by the monitoring visit included supportive services, housing, program participants, match documentation, overall management systems and financial management.

The entrance conference was held on May 13, 2014 with CPD Rep Mr. Darrick Mallad and Community Rebuilders staff Ms. Vera Beech in attendance. The exit conference was held on May 15, 2014 with CPD Rep Mr. Darrick Mallad and Community Rebuilders staff Ms. Vera Beech, Ms. Alisa Schoenborn, and Ms. Anna Diaz in attendance.

Full details of the monitoring are provided in the enclosed report. Please review our conclusions and if you have questions regarding the content of this report, please feel free to contact Mr. Darrick Mallad at 313-234-7328. The cooperation extended by your staff during our monitoring visit was greatly appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read "Keith E. Hernández", written over a large, stylized circular flourish.

Keith E. Hernández, AICP  
Director, Community Planning and Development



## MONITORING REPORT

Community Rebuilders  
Continuum of Care Program  
Grant Number: MI0315L5F061101  
May 13 – May 15, 21014

~~We reviewed several activities to determine compliance with applicable program regulations.~~

Monitoring was conducted on May 13 – May 15, 21014 by Mr. Darrick Mallad, Community Planning and Development Representative. The CoC activities monitored included:

1. Supportive Services
2. Housing
3. Program Participants
4. Match Documentation
5. Financial Management
6. Overall Grant Management

The persons from Community Rebuilders with whom Mr. Mallad met include:

1. Vera Beech, Executive Director
2. Alisa Schoenborn, Director of Operations
3. Anna Diaz, Director of Programs
4. Bob Bishop, Finance Director
5. Vicki Squires, Supervisor
6. Jeff King, Housing Resource Specialist

### **I. Background**

Community Rebuilders was awarded \$118,824 in CoC funds enacted under the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH). The stated purpose of the Homeless Assistance Program is the development and use of public resources and programs in a more coordinated manner to meet the critically urgent needs of the homeless of the Nation.

The grant reviewed during this monitoring totaled \$118,824 and is administered directly by the recipient.

All regulation citations refer to Title 24 of the Code of Federal Regulations unless otherwise noted.

### **II. Review of Supportive Services**

This program area was reviewed to determine if the grantee's performance in conducting on-going client needs assessments and in providing the supportive services identified in the approved application covering the grant term FY 13 are in accordance with 24 CFR 578.



The grantee provides a large array of client services including case management, referrals for mental health services, legal aid, transportation, moving assistance, and rental assistance

These services were verified by interviews with on-site staff and through review of client records that contained information indicating which services were received and how they were given. Each documented entry contains the signature of a qualified medical authority to attest to its authenticity.

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A review of the targeted client files revealed a thorough evaluation system used to determine client needs and required supportive services to match those needs. The files are well maintained and up to date. Intake documentation was present in every file reviewed.

### **III. Review of Program Housing**

This review evaluates a grantee's housing operations and includes: residential rent calculations, residential supervision, client due process for terminations, habitability standards, Section 3 requirements and affirmative outreach.

Mr. Mallad conducted the review using program client records, program spreadsheets generated by the grantee and questions directed to Mrs. Vera Beech and her team.

The program is designed around a Housing Resource Specialist Model developed by the grantee in 2007. In 2008 the Coalition to End Homelessness, the local CoC entity formed to address homelessness, asked the grantee to help implement this model across the CoC.

The model as explained in Community Rebuilders Housing Specialist Standards Toolkit:

"The model focuses on a client's strengths rather than just deficits to guide services, hope and motivation increase, resulting in greater achievement of goals. The foundation of a strength-based approach is the belief that everyone has unique talents, skills, and life events, in addition to specific unmet needs."

A single client was available for interview and on site housing review. The client interviewed was very upbeat and his home was well maintained. He explained he was very excited as he had just recently acquired a new bed. The client held the program in high regard and any issues they have had have been addressed in an acceptable and prompt manner.

All facilities examined appear to be in compliance with Federal accessibility requirements for those with disabilities.

### **IV. Review of Program Participants**

This review was conducted to determine if a client's homelessness prior to entry into the program has been documented to a sufficient level as required by 24 CFR 578.

This program is designed to serve chronically homeless individuals and move them into permanent housing.

A total of 11 files were inspected to ascertain the status of clients prior to entry into the program and to verify the validity of the documentation provided. Mr. Mallad found all files contained the required documentation.

~~Records were also reviewed to determine disability and homeless status. The recipient maintains a records system that provides sufficient data to make that determination. All client files reviewed showed sufficient verification of disability. Verification of homelessness was sufficient to meet HUD requirements.~~

Visual inspection of client folders found that the clients are evaluated on a regular basis to determine the level of supportive services needed for each client.

Client program records are maintained on site. These records are used to maintain all pertinent information outside of medical records which are maintained by the service providers. Mr. Mallad found adequate protection of client records, which are held in a locked location to which only the case worker has access.

## **V. Review of Supportive Housing Program Overall Management Systems**

The goal of this review is to ascertain the ability of the grantee to carry out the administrative responsibilities for CoC funds.

The grantee maintains guidelines for day to day operations for CoC funded activities that draw from rules and regulations as given by HUD, other agencies and internal guidelines as presented by the grantee.

The grantee maintains thorough written documentation to guide staff in implementation of the various programs that are provided by the grantee. These materials include a 39 page *Housing Resource Specialist Tool Kit* and 35 page manual for financial policies.

A review of the grantee's APR and application has confirmed that all appropriate information such as number of clients, racial and ethnic data, and housing characteristics is contained within. Program staff indicates this data is collected from HMIS and entered when appropriate.

A review of the grantee's financial records did not reveal any issues. The grantee maintains a level of accounting consistent with a program of this size.

Conflicts of interest are addressed by organizational policy internally.

The program also maintains at least one person on staff who was formally homeless and holds a position that allows for participation in the policy decision-making process.

## **VI. Review of Program Match**

This review is designed to determine if the statutory requirements are met based on 24 CFR 578.73.

The grantee expended \$44,100 of the total award of \$118,824. Documentation to support the match amount needed was available at the time of the monitoring and verified against the source of match provided.

Mr. Mallad had a robust conversation with the grantee on changes in match requirements with the implementation of the HEARTH Act.

## **VII. Review of Financial Management**

The purpose of this review is to ascertain the grant recipient's ability to monitor the day-to-day financial operations in compliance with applicable Federal requirements as identified in the approved grant agreement and 24 CFR 578.99 (e).

A review of three months of financial records was conducted and no irregularities were discovered. The grantee maintains the required documentation to support requirements of 24 CFR 84.21 and 25 CFR 85.20 (b) (2).

The grantee has maintained all applicable audits as required by 24 CFR 85.40 and these were available to Mr. Mallad upon request. The audit applicable for this grant year was received by HUD and reviewed by the Senior Financial Analyst.

The grantee maintains financial records in a secured area as per 24 CFR 85.20 (b) (3).

Review of the grantee's LOCCS draws shows the grantee has yet to make a draw. This however is attributed to HUD's delay in grant agreement processing. The grantee has up till this point paid operating costs directly. We discussed the possibility of shifting the grants start date to later in the year to alleviate this from happening in the future. It is important to note this is not the fault of the grantee.

## **VIII. Review of Program Overall Management Systems**

The goal of this review is to ascertain the ability of the grantee to carry out the administrative responsibilities for CoC funds.

The grantee maintains guidelines for day to day operations for CoC funded activities that draw from rules and regulations as given by HUD and internal guidelines as required by Community Rebuilders. A visual inspection of guidelines verified their existence.

A system is in place to provide multiple levels of file review in order to maintain data integrity.

No further findings or issues were noted during this review.

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## 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 Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD the HUD Exchange Ask A Question.
- Project applicants are required to have a Data Universal Numbering System (DUNS) 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) 2017 Continuum of Care (CoC) Program Competition. For more information see FY 2017 CoC Program Competition NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2017 CoC Program NOFA and the FY 2017 General Section NOFA.
- 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 onscreen text and the hide/show instructions found on each individual screen.
- New projects may only be submitted as either Reallocated or Permanent Supportive Housing Bonus Projects. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps.
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2017 CoC Program Competition NOFA.

## 1A. SF-424 Application Type

**1. Type of Submission:**

**2. Type of Application:** New Project Application

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

**If "Other", specify:**

**3. Date Received:** 08/18/2017

**4. Applicant Identifier:**

**5a. Federal Entity Identifier:**

**6. Date Received by State:**

**7. State Application Identifier:**

## 1B. SF-424 Legal Applicant

### 8. Applicant

**a. Legal Name:** Community Rebuilders

**b. Employer/Taxpayer Identification Number (EIN/TIN):** 38-3094108

	<b>c. Organizational DUNS:</b>	948960398	<b>PLUS 4:</b>	
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### d. Address

**Street 1:** 1120 Monroe NW, Suite 220

**Street 2:**

**City:** Grand Rapids

**County:** Kent

**State:** Michigan

**Country:** United States

**Zip / Postal Code:** 49503

### e. Organizational Unit (optional)

**Department Name:**

**Division Name:**

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

**Prefix:** Ms.

**First Name:** Anna

**Middle Name:**

**Last Name:** Diaz

**Suffix:**

**Title:** Chief Operating Officer

**Organizational Affiliation:** Community Rebuilders

**Telephone Number:** (616) 458-5102

**Applicant:** Community Rebuilders

948960398

**Project:** Housing Solutions 2

156506

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**Extension:** 122

**Fax Number:** (616) 458-8788

**Email:** [adiaz@communityrebuilders.org](mailto:adiaz@communityrebuilders.org)



## 1C. SF-424 Application Details

**9. Type of Applicant:** M. Nonprofit with 501C3 IRS Status

**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-6100-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):** Michigan  
(for multiple selections hold CTRL key)

**15. Descriptive Title of Applicant's Project:** Housing Solutions 2

**16. Congressional District(s):**

**a. Applicant:** MI-003, MI-002

**b. Project:** MI-003, MI-002  
(for multiple selections hold CTRL key)

**17. Proposed Project**

**a. Start Date:** 11/01/2018

**b. End Date:** 10/31/2019

**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?** a. Yes

**If "YES", enter the date this application was made available to the State for review:** 08/31/2017

**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: Mrs.

First Name: Vera

Middle Name: Jean

Last Name: Beech

Suffix:

Title: Executive Director

Telephone Number: (616) 458-5102  
(Format: 123-456-7890)

Fax Number: (616) 458-8788  
(Format: 123-456-7890)

Email: vbeech@communityrebuilders.org

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

Date Signed: 08/18/2017

## 1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - Form 2880**  
**U.S. Department of Housing and Urban Development**  
**OMB Approval No. 2510-0011 (exp.11/30/2018)**

### Applicant/Recipient Information

#### 1. Applicant/Recipient Name, Address, and Phone

**Agency Legal Name:** Community Rebuilders

**Prefix:** Mrs.

**First Name:** Vera

**Middle Name:** Jean

**Last Name:** Beech

**Suffix:**

**Title:** Executive Director

**Organizational Affiliation:** Community Rebuilders

**Telephone Number:** (616) 458-5102

**Extension:**

**Email:** vbeech@communityrebuilders.org

**City:** Grand Rapids

**County:** Kent

**State:** Michigan

**Country:** United States

**Zip/Postal Code:** 49503

**2. Employer ID Number (EIN):** 38-3094108

**3. HUD Program:** Continuum of Care Program

**4. Amount of HUD Assistance Requested/Received:** \$321,059.00

(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. **Yes**

## Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
NA	NA		NA

**Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.**

## Part III Interested Parties

You must disclose:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA	NA	NA	\$0.00	0%
NA				
NA				
NA				
NA				

**Note: If there are no other people included, write NA in the boxes.**

### 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 nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that this information is true and complete.

**I AGREE:** ☒

**Name / Title of Authorized Official:** Vera Beech, Executive Director

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

**Date Signed:** 08/07/2017

# 1H. HUD 50070

## HUD 50070 Certification for a Drug Free Workplace

**Applicant Name:** Community Rebuilders

**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. 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.	e. 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;
b. Establishing an on-going drug-free awareness program to inform employees --- (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.	f. 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 --- (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;
c. 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.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (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;	

## 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 hereby certify that all the information stated herein, as well as any information provided in**

X



**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)

**Authorized Representative**

**Prefix:** Mrs.

**First Name:** Vera

**Middle Name:** Jean

**Last Name:** Beech

**Suffix:**

**Title:** Executive Director

**Telephone Number:** (616) 458-5102  
**(Format: 123-456-7890)**

**Fax Number:** (616) 458-8788  
**(Format: 123-456-7890)**

**Email:** vbeech@communityrebuilders.org

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

**Date Signed:** 08/18/2017

## **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:**

X

**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:** Community Rebuilders

**Name / Title of Authorized Official:** Vera Beech, Executive Director

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

**Date Signed:** 08/18/2017

## 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:** Community Rebuilders

**Street 1:** 1120 Monroe NW, Suite 220

**Street 2:**

**City:** Grand Rapids

**County:** Kent

**State:** Michigan

**Country:** United States

**Zip / Postal Code:** 49503

**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.**

X

**Authorized Representative**

**Prefix:** Mrs.

**First Name:** Vera

**Middle Name:** Jean

**Last Name:** Beech

**Suffix:**

**Title:** Executive Director

**Telephone Number:** (616) 458-5102  
**(Format: 123-456-7890)**


**Fax Number:** (616) 458-8788  
**(Format: 123-456-7890)**

**Email:** vbeech@communityrebuilders.org

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

**Date Signed:** 08/18/2017

## 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:

Organization	Type	Sub-Award Amount
This list contains no items		

## **2B. Experience of Applicant, Subrecipient(s), and Other Partners**

### **1. Describe the experience of the applicant and potential subrecipients (if any), in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.**

Community Rebuilders' solid history of experience administering programs is due in part to its ability to leverage federal, state, local, and private sector funds. A great example of our success leveraging funds has been our ability over the past 8-10 years to work with HUD to amend some of our renewal contracts. Several amendments were made at our request to shift dollars from Supportive Services to Leasing Assistance. These amendments were possible because of the linkages and leveraging of federal, state, local and private sector funds to pay for supportive service costs. Another example of our commitment and ability to leverage funds is evidenced in our Shelter Plus Care Project. Each year in this project alone Community Rebuilders' partner agencies provide between \$700,000.00 and one million dollars in services as matching funds to Community Rebuilders each year. This also demonstrates a solid history of quality communication and coordination with other providers within Kent County. Community Rebuilders has a solid reputation of spending out and meeting all project deliverables.

### **2. Describe the experience of the applicant and potential subrecipients (if any) in leveraging other Federal, State, local, and private sector funds.**

Community Rebuilder has a 25 year history of managing federal funds. Community Rebuilders has a robust system in place for efficiently distributing funds and managing federally funded projects. Effective staffing, policy and procedure and the ability to translate federal rules and regulations into practices is a skill the organization is praised for by federal agencies. Performance on federally funded projects under the U.S. Department of Veteran Affairs has identified our projects as "exceptional: in their review of our performance. Financial management, grant management, reporting and audit compliance as well as collaboration and transparency are keys to our success at managing federal funds. The organization has been publicly praised by HUD to Local CoC steering council members after an audit HUD invited the steering council, shared our success and encouraged other grantees to learn from our example and processes.

### **3. Describe the basic organization and management structure of the applicant and subrecipients (if any). Include evidence of internal and external coordination and an adequate financial accounting system.**

The Board of Directors and employees at Community Rebuilders form an knowledgeable and productive work force that is empowered with all the direct information, authority, recognition and training they need to satisfy the

consumers they serve and meet the goals and objectives of each project. Our team is driven by our mission and our commitment to ending homelessness. The Executive Director reports directly to a dedicated and informed Board of Directors. The Executive Director and COO, and CFO and four managers make up the management team. Community Rebuilders has a 25 year history as a successful not for profit organization that places a heavy emphasis on accountability and transparency including reporting requirements related to the use of funds and maintenance of client level and program services and expense data. Community Rebuilders follows Generally Accepted Accounting policy (GAAP). The financial records of Community Rebuilders are audited by a Certified Public Accounting firm annually. Community Rebuilders has a robust system of controls in place and has a demonstrated history of integrity in financial records and reports generating trust with stakeholders. The system of controls assures appropriate authorization, recording and accountability of assets. Employees share the responsibility for maintaining and complying with these controls and compliance controls ensure they are not circumvented. The Board and Executive Director share the responsibility for setting a tone and standard of accountability and conscientiousness regarding the organization's assets and responsibilities. Community Rebuilders internal coordination has been recognized by local partners and our model of Strengths-Based, Housing First case management was adopted by the Continuum of Care as a community wide model of coordinated case management services. Community Rebuilders currently trains and certifies other service providers in the Kent County Community empowering them to delivery prevention and rapid rehousing services. The Salvation Army is not for profit, charitable organization with a long history of providing a range of social services for and with persons in poverty with the goal of improving and developing greater personal strength and stability in all areas of their lives. The Salvation Army follows the regulations placed by The Financial Accounting Standards Board (FASB) which directs us to use Generally Accepted Accounting Policy (GAAP). The financial records are audited by a Certified Public Accounting firm annually, in addition to a Salvation Army team of auditors who annually review program and financial records

**4a. Are there any unresolved monitoring or audit findings for any HUD grants(including ESG) operated by the applicant or potential subrecipients (if any)?** No



## 3A. Project Detail

**1a. CoC Number and Name:** MI-506 - Grand Rapids, Wyoming/Kent County CoC

**1b. CoC Collaborative Applicant Name:** Heart of West Michigan United Way

**2. Project Name:** Housing Solutions 2

**3. Project Status:** Standard

**4. Component Type:** PH

**5. Does this project use one or more properties that have been conveyed through the Title V process?** No

## 3B. Project Description

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

Community Rebuilders is seeking an expansion to its currently funded Housing Solutions project. Housing Solutions is dedicated to serve chronically homeless households. We know that chronically homeless households face the greatest barriers to obtaining housing and remaining housed long term. With the use of best practices such as a strengths based, housing first model, we are ensuring that this most vulnerable population is receiving the most cost-effective intervention (housing) that serves as a foundation for improved health and well being. A Life Domain Rating Scale is used to measure improvement in health and well-being and self-sufficiency. This tool allows us to see the effectiveness of the PSH program through the eyes of the consumer. The project exceeded the targets for all outcome measures. Because of careful financial oversight and efficient use of resources, Housing solutions served 20% over the projected number to be served. Based on feedback from our consumers this year, a support group was held each month giving consumers the opportunity to share their personal success stories regarding their housing stability. Consumers have enjoyed this and have indicated they want this to continue. New consumers have found the group both motivating and inspiring. Our Housing Resource Specialist staff work with consumers to gain or increase income whenever possible. This is accomplished through connection to benefits or working to increase earned income when possible. All avenues to increase income are explored including non-traditional employment.

### 2. Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.

This application is being submitted as an expansion of our current Housing Solutions project. This request allows the community to provide much needed housing for chronically homeless individuals and families. Because Community Rebuilders' Housing Solutions program is currently in operation, the staff team for Housing Solutions 2 are already trained and experienced. These staff can begin working in the project immediately. Staff will simply transition to a new contract with the availability to meet the unmet needs of chronically homeless households who may need additional supports prior to entry into housing. We have chosen to pursue an expansion to our current project, in order to align with HUD's Federal strategic plan objective #4, to provide permanent supportive housing to prevent and end chronic homelessness. Through our work in leading the ending Veteran homelessness effort, we believe we have the skills, ability, and expertise to end chronic homelessness. Additional funding for this project will allow us to provide the much needed leasing assistance dollars to serve additional households and give Consumers immediate access to safe and affordable housing of their choice. This project will maintain its current operating start date of 11/1/2017. 30-60 days prior to the operating state date the following key actions occur:

1. Project Planning. This involves creation of quality assurance binders specific

to the project. Employees are provided training on the scope and budget, work breakdown through the development of RACI charts, communication plans and risk management plans. Case file contents and documentation standards for the project are approved and defined. Key Milestones and deliverable charts are developed. 2. Project launch happens after a completed project kick off meeting and referrals are requested from Coordinated entry, HAP, one week prior to launch. In the first 90 days and throughout the project We will be in the Performance and Control phase of the project. Objectives, deliverables, effort and cost tracking and performance are evaluated monthly throughout the course of the project to ensure compliance with regulations and contract deliverables and consumer needs. Key activities, involve engagement of consumers, utilization of the strengths based housing resource specialist model, monitoring of consumer's progress and gradual disengagement as consumer's transition into permanent housing without support of the project. New Participants are entered as openings occur. Quarterly sub recipient meetings are held, annual monitoring of sub recipients and multiple youth focus groups will be held throughout the project. Youth are quickly assisted to develop a strength based housing plan upon entry. This plan that facilitates their movement from homelessness to housing. By 120 / 180 days consumers have been housed and are being served many will have already exited to permanent housing and some will be entering the project.

**3. Will your project participate in a CoC Coordinated Entry Process?** Yes

**\* 4. Please identify the project's specific population focus.**

**(Select ALL that apply)**

Chronic Homeless	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

**5. Housing First**

**a. Will the project quickly move participants into permanent housing?** Yes

**b. Does the project ensure that participants are not screened out based on the following items? 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"/>

**c. Does the project ensure that participants are not terminated from the program 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"/>

**d. Will the project follow a "Housing First" approach?** Yes  
(Click 'Save' to update)

**6. If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.**

**7. Will the PH project provide PSH or RRH?** PSH

**8. Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation?** No

**9. Will more than 16 persons live in one structure?** No

**Dedicated and DedicatedPLUS**

**A "100% Dedicated" project is a permanent supportive housing project that commits 100% of its beds to chronically homeless individuals and families, according to NOFA Section III.3.b.**

**A “DedicatedPLUS” project is a permanent supportive housing project where 100% of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that at a minimum, meet ONE of the following criteria according to NOFA Section III.3.d:**

- (1) experiencing chronic homelessness as defined in 24 CFR 578.3;
- (2) residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
- (3) residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
- (4) residing in transitional housing funded by a joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
- (5) residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or
- (6) receiving assistance through a Department of Veterans Affairs(VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

**10. Indicate whether the project is “100% Dedicated,” or “DedicatedPLUS,” according to the information provided above.** 100% Dedicated

### 3C. Project Expansion Information

1. Will the project use an existing homeless facility or incorporate activities provided by an existing project? Yes

2. Is this New project application requesting a "Project Expansion" of an eligible renewal project of the same component type? Yes

Enter the PIN number (first 6 numbers of the grant number) and Project Name for the CoC funded grant that is applying for renewal in FY 2017 upon which this project proposes to expand.

Eligible Renewal Grant PIN Number: MI0412

Eligible Renewal Grant Project Name: Housing Solutions.

3. Select the activities below that describe the expansion project, and click on the "Save" button below to provide additional details. Increase the number of homeless persons served

**Increase number of homeless persons served**

Indicate how the project is proposing to "increase the number of homeless persons served."

Current level of effort	
# of persons served at a point-in-time	25
# of units	25
# of beds	40
New effort	
# of additional persons served at a point in time that this project will provide	21
# of additional units this project will provide	14
# of additional beds this project will provide	21

## 4A. Supportive Services for Participants

**1a. Are the proposed project policies and practices consistent with the laws related to providing education services to individuals and families?** Yes

**1b. Will the proposed project have a designated staff person to ensure that the children are enrolled in school and receive educational services, as appropriate?** Yes

**2. Describe how participants will be assisted to obtain and remain in permanent housing.**

Every participant will partner with a trained Housing Resource Specialist (HRS), who is experienced in providing strengths based, housing first services. Participant and HRS will develop individualized housing plans that allow the project participant choice in their housing. This begins with pre-tenancy planning and culminates in the execution of a lease. Chronically homeless households will be assisted to negotiate lease terms and will develop a plan to take over full rental payments once project leasing assistance ends. HRS services will promote housing stability this includes, connection to mainstream benefits, counseling, transportation assistance, and educational assistance.

**3. Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.**

Currently our Housing Resource Specialist staff work with consumers to gain or increase income . This is accomplished through connections to benefits, or working to increase earned income. All avenues to increase income are explored including non-traditional employment. Consumers are assisted to connect with local employment and rehabilitative services that meet their specific needs.

**4. For all supportive services available to participants, indicate who will provide them and how often they will be provided.**

Click 'Save' to update.

Supportive Services		Provider	Frequency
New Project Application FY2017	Page 27		08/18/2017

Assessment of Service Needs
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

Non-Partner	As needed
Non-Partner	As needed
Applicant	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Applicant	As needed
Applicant	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Non-Partner	As needed
Applicant	As needed
Non-Partner	As needed

**5. Please identify whether the project will include the following activities:**

**5a. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs?** Yes

**5b. Use of a single application form for four or more mainstream programs?** Yes



**5c. Regular follow-ups with participants to ensure mainstream benefits are received and renewed?** Yes

**6. Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency?** Yes

**6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months.** Yes



## 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:** 21

**Total Beds:** 34

**Total Dedicated CH Beds:** 34

Housing Type	Units	Beds
Scattered-site apartments (...)	21	34

## **4B. Housing Type and Location Detail**

**1. Housing Type:** Scattered-site apartments (including efficiencies)

**2. Indicate the maximum number of units and beds available for project participants at the selected housing site.**

**a. Units:** 21

**b. Beds:** 34

**3. How many beds of the total beds in “2b. 34  
Beds” are dedicated to the chronically  
homeless?**

**This includes both the “dedicated” and “prioritized” beds.**

**4. Address:**

**Street 1:** 1120 Monroe Suite 220

**Street 2:**

**City:** Grand Rapid

**State:** Michigan

**ZIP Code:** 49503

**\*5. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.  
(for multiple selections hold CTRL key)**

262544 Grand Rapids

## 5A. Project Participants - Households

**Households Table**

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	7	14		21
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
Adults over age 24	6	13		19
Adults ages 18-24	1	1		2
Accompanied Children under age 18	7			7
Unaccompanied Children under age 18				0
Total Persons	14	14	0	28

**Click Save to automatically calculate totals**

## 5B. Project Participants - Subpopulations

### Persons in Households with at Least One Adult and One Child

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Adults over age 24	1	1	1	1			1	1		
Adults ages 18-24	1									
Children under age 18										7
Total Persons	2	1	1	1	0	0	1	1	0	7

Click Save to automatically calculate totals

### Persons in Households without Children

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Adults over age 24	10	1					1	11		
Adults ages 18-24	1									
Total Persons	11	1	0	0	0	0	1	11	0	0

Click Save to automatically calculate totals

### Persons in Households with Only Children

Characteristics	Chronically Homeless Non-Veterans	Chronically Homeless Veterans	Non-Chronically Homeless Veterans	Chronic Substance Abuse	Persons with HIV/AIDS	Severely Mentally Ill	Victims of Domestic Violence	Physical Disability	Developmental Disability	Persons not represented by listed subpopulations
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

Describe the unlisted subpopulations referred to above:

children

## 5C. Outreach for Participants

**1. Enter the percentage of project participants that will be coming from each of the following locations.**

50%	Directly from the street or other locations not meant for human habitation.
50%	Directly from emergency shelters.
	Directly from safe havens.
	Persons fleeing domestic violence.
100%	Total of above percentages

**2. Describe the outreach plan to bring these homeless participants into the project.**

Our community has an effective coordinated entry system that conducts outreach throughout the community, and multiple times through out the year, many places and using multiple methods. Outreach staff are trauma informed and skilled at reaching out and engaging with homeless person living on the streets. Outreach services are coordinated with local shelters and community mental health teams, law enforcement and community health care providers as well as other local community organizations.

## 6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2019? Yes

2. Is the project proposing to using funds reallocated from the CoCs annual renewal demand OR is the project applying for funding through the permanent housing bonus? Permanent Housing Bonus

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

\* 5. Select the costs for which funding is being requested:

Acquisition/Rehabilitation/New Construction	<input type="checkbox"/>
Leased Units	<input checked="" type="checkbox"/>
Leased Structures	<input type="checkbox"/>
Rental Assistance	<input type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
Operating	<input type="checkbox"/>
HMIS	<input checked="" type="checkbox"/>

## 6C. Leased Units

The following list summarizes the funds being requested for one or more units leased for operating the projects. To add information to the list, select the  icon. To view or update information already listed, select the  icon.

Total Annual Assistance Requested:			\$191,064
Grant Term:			1 Year
Total Request for Grant Term:			\$191,064
Total Units:			21
FMR Area	Total Units Requested	Total Annual Assistance Requested	Total Budget Requested
MI - Grand Rapids...	21	\$191,064	\$191,064

## Leased Units Budget Detail

### Instructions:

**Metropolitan or non-metropolitan fair market rent area:** This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rent for each unit in the FMR Area column in the chart below. The FMRs are available online at <http://www.huduser.org/portal/datasets/fmr.html>.

**Size of Units:** Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.

**# of units:** This is a required field. For each unit size, enter the number of units for which funding is being requested.

**FMR:** These fields are populated with the FY 2016 FMRs based on the FMR area selected by the applicant. They serve as a reference and upper limit for the amounts entered in the HUD Paid Rents column.

**HUD Paid Rents:** This is a required field. For each unit size, enter the rent to be paid by the CoC program grant. This rent can be equal to or below the FMR amount in the previous column. Once funds are awarded recipients must document compliance with the rent reasonable requirement in 24 CFR 578.49.

**12 Months:** These fields are populated with the value 12 to calculate the annual rent request. The total request for this budget will calculate based on the grant term selected on Screen "6A. Funding Request."

**Total Request:** This column populates with the total calculated amount from each row.

**Total Units and Annual Assistance Requested:** The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

**Grant Term:** This field is populated with the grant term selected on the "Funding Request" screen and will be read only.

**Total Request for Grant Term:** This field is calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

**In the chart below, enter the appropriate values in the "Number of units" and "HUD Paid Rent" fields.**

**Metropolitan or non-metropolitan fair market rent area:** MI - Grand Rapids-Wyoming, MI HUD Metro FMR Area (2608199999)

### Leased Units Annual Budget

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Size of Units	Number of units (Applicant)		FMR (Applicant)	HUD Paid Rent (Applicant)		12 months		Total request (Applicant)
SRO		x	\$391	\$391	x	12	=	\$0
0 Bedroom		x	\$521	\$521	x	12	=	\$0
1 Bedroom	14	x	\$627	\$627	x	12	=	\$105,336
2 Bedroom	2	x	\$776	\$776	x	12	=	\$18,624
3 Bedroom	4	x	\$1,091	\$1,091	x	12	=	\$52,368
4 Bedroom	1	x	\$1,228	\$1,228	x	12	=	\$14,736
5 Bedroom		x	\$1,412	\$1,412	x	12	=	\$0
6 Bedroom		x	\$1,596	\$1,596	x	12	=	\$0
7 Bedroom		x	\$1,781	\$1,781	x	12	=	\$0
8 Bedroom		x	\$1,965	\$1,965	x	12	=	\$0
9 Bedroom		x	\$2,149	\$2,149	x	12	=	\$0
Total units and annual assistance requested:	21							\$191,064
Grant term:								1 Year
Total request for grant term:								\$191,064

**Click the 'Save' button to automatically calculate totals.**

## 6F. Supportive Services Budget

### Instructions:

Enter the quantity and total budget request for each supportive services cost. The request entered should be equivalent to the cost of one year of the relevant supportive service.

**Eligible Costs:** The system populates a list of eligible supportive services for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.53.

**Quantity AND Description:** This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (e.g. 1 FTE Case Manager Salary + benefits, or child care for 15 children) for each supportive service activity for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and limits HUD's understanding of what is being requested. Failure to enter adequate 'Quantity AND Detail' may result in conditions being placed on an award and a delay of grant funding.

**Annual Assistance Requested:** This is a required field. For each grant year, enter the amount of funds requested for each activity. The amount entered must only be the amount that is DIRECTLY related to providing supportive services to homeless participants.

**Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

**Grant Term:** This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

**Total Request for Grant Term:** This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

### 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		
2. Assistance with Moving Costs		
3. Case Management	1 FTE HRS + benefits .25 Supervisor + benefits	\$79,192
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food	Consumer groups 12/ year at 85.00	\$1,020
8. Housing/Counseling Services	.2 FTE HRS + benefits	\$9,160
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		

**Applicant:** Community Rebuilders

948960398

**Project:** Housing Solutions 2

156506

14. Substance Abuse Treatment Services		
15. Transportation	47.00 monthly bus passess times 60	\$2,820
16. Utility Deposits		
17. Operating Costs	office supplies, space, for 1.75 FTE	\$4,000
Total Annual Assistance Requested		\$96,192
Grant Term		1 Year
Total Request for Grant Term		\$96,192

**Click the 'Save' button to automatically calculate totals.**

## 6H. HMIS Budget

### Instructions:

Enter the quantity and total budget request for each HMIS cost. The request entered should be equivalent to the cost of one year of the relevant HMIS activity. The system populates a list of eligible costs associated with the implementation of an HMIS and for which CoC funds can be requested.

**Quantity Detail:** This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (eg. .75 FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each HMIS cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

**Annual Assistance Requested:** This is a required field. For each grant year, enter the amount funds requested for each activity.

**Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

**Grant term:** This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

**Total Request for Grant Term:** This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment		
2. Software		
3. Services		
4. Personnel	.15 FTE and benefits HMIS	\$11,329
5. Space & Operations		
<b>Total Annual Assistance Requested:</b>		\$11,329
<b>Grant Term:</b>		1 Year
<b>Total Request for Grant Term:</b>		\$11,329

**Click the 'Save' button to automatically calculate totals.**

## 6l. 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 Value of Cash Commitments:	\$22,756
Total Value of In-Kind Commitments:	\$12,200
Total Value of All Commitments:	\$34,956

1. Does this project generate program income as described in 24 CFR 578.97 that will be used as Match for this grant? Yes

1a. Briefly describe the source of the program income: (limit 1000 characters)

Program Participants contribution towards rent.

1b. Estimate the amount of program income that will be used as Match for this project: \$22,756

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	Cash	Private	Program income	08/31/2017	\$22,756
Yes	In-Kind	Private	The Salvation Arm...	08/31/2017	\$12,200

## Sources of Match Detail

1. Will this commitment be used towards match ? Yes
2. Type of commitment: Cash
3. Type of source: Private
4. Name the source of the commitment: Program income  
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 08/31/2017
6. Value of Written Commitment: \$22,756

## Sources of Match Detail

1. Will this commitment be used towards match ? Yes
2. Type of commitment: In-Kind
3. Type of source: Private
4. Name the source of the commitment: The Salvation Army Social Services  
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 08/31/2017
6. Value of Written Commitment: \$12,200

**Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.**

## 6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$191,064	1 Year	\$191,064
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$0	1 Year	\$0
4. Supportive Services	\$96,192	1 Year	\$96,192
5. Operating	\$0	1 Year	\$0
6. HMIS	\$11,329	1 Year	\$11,329
7. Sub-total Costs Requested			\$298,585
8. Admin (Up to 10%)			\$22,474
9. Total Assistance Plus Admin Requested			\$321,059
10. Cash Match			\$22,756
11. In-Kind Match			\$12,200
12. Total Match			\$34,956
13. Total Budget			\$356,015

Click the 'Save' button to automatically calculate totals.

## 7A. Attachment(s)

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



## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## Attachment Details

**Document Description:**

## 7A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No		

## Attachment Details

### Document Description:

## 7D. Certification

### A. For all projects:

#### Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

### **Additional for Rental Assistance Projects:**

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

### **B. For non-Rental Assistance Projects Only.**

#### **15-Year Operation Rule.**

For applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

#### **1-Year Operation Rule.**

For applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provided.

**Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.**

**Name of Authorized Certifying Official:** Vera Beech

**Date:** 08/18/2017

**Title:** Executive Director

**Applicant Organization:** Community Rebuilders

**PHA Number (For PHA Applicants Only):**

**I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent**

X

**statements or claims may subject me to  
criminal, civil, or administrative penalties .  
(U.S. Code, Title 218, Section 1001).**

## **8B. Submission Summary**

**Applicant must click the submit button once all forms have a status of Complete.**

**Applicant must click the submit button once all forms have a status of Complete.**

Page	Last Updated
<b>1A. SF-424 Application Type</b>	No Input Required
<b>1B. SF-424 Legal Applicant</b>	No Input Required
<b>1C. SF-424 Application Details</b>	No Input Required
<b>1D. SF-424 Congressional District(s)</b>	08/18/2017
<b>1E. SF-424 Compliance</b>	08/18/2017
<b>1F. SF-424 Declaration</b>	08/18/2017
<b>1G. HUD 2880</b>	08/18/2017
<b>1H. HUD 50070</b>	08/18/2017
<b>1I. Cert. Lobbying</b>	08/18/2017
<b>1J. SF-LLL</b>	08/18/2017
<b>2A. Subrecipients</b>	No Input Required
<b>2B. Experience</b>	08/18/2017
<b>3A. Project Detail</b>	08/18/2017
<b>3B. Description</b>	08/18/2017
<b>3C. Expansion</b>	08/18/2017
<b>4A. Services</b>	08/18/2017
<b>4B. Housing Type</b>	08/18/2017
<b>5A. Households</b>	08/18/2017
<b>5B. Subpopulations</b>	08/18/2017
<b>5C. Outreach</b>	08/18/2017
<b>6A. Funding Request</b>	08/18/2017
<b>6C. Leased Units</b>	08/18/2017
<b>6F. Supp Srvcs Budget</b>	08/18/2017
<b>6H. HMIS Budget</b>	08/18/2017
<b>6I. Match</b>	08/18/2017
<b>6J. Summary Budget</b>	No Input Required
<b>7A. Attachment(s)</b>	No Input Required



<b>7A. In-Kind MOU Attachment</b>	No Input Required
<b>7D. Certification</b>	08/18/2017