

# Department of Housing and Urban Development



**Grants Evaluation Management System (GEMS)**

**Grantee User Guide**

(ver. 05/30/23)

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# Introduction

HUD's Office of Native American Programs' (ONAP) Grants Evaluation and Management System (GEMS) is the central grant data repository for an ONAP grantee's grant history and the interface for processing and managing ONAP grants. GEMS plays a substantial role in storing and analyzing data reported by grantees, enabling ONAP staff to assess and report on performance.

The use of GEMS is being rolled out in stages, starting with the Indian Housing Block Grant's (IHBG) Indian Housing Plan (IHP) and Annual Performance Report (APR), followed by the Standard Form 425 (SF-425). The purpose of this Guide is to provide grantees with step-by-step instructions on how to use GEMS. The instructions are accompanied by numerous screenshots.

GEMS is a complex application that will continually be improved and expanded to handle all ONAP grant programs. As additional programs and functions are integrated into GEMS, this Guide will be updated, and training will be conducted. Always rely on the current version of this Guide, as it provides the latest descriptions of GEMS and its functionality. Check the [GEMS webpage](#) on [CodeTalk](#) to make sure you have the latest version.

# I. How to Register as a GEMS User

1. Navigate your internet browser to the GEMS login page at <https://hud-gateway.force.com/GEMS>
2. In the top righthand corner, click the red **Log in** button.
3. When the screen refreshes, click the **Sign Up** link in the lower righthand corner.

4. On the next screen, read the Privacy Act Statement and select your ONAP region from the dropdown menu. Click the **Next** button.
5. Complete the registration form. Additional information is provided below about each field. All required fields are indicated with an \* in GEMS:
  - **Tribe/TDHE:** Start typing the name of your Tribe/TDHE and select it from the dropdown menu.
    - If you selected the wrong region on the last screen, scroll to the bottom of the form and click the **Previous** button on the righthand corner. Then return to Step 3.
    - If you cannot find your organization, contact your area ONAP GEMS representative.
  - **Salutation:** Select your preferred salutation from the dropdown menu.
  - **First Name, Middle Name, Last Name, Suffix, Title, Telephone Number, Fax Number:** Enter your information in these fields.
  - **Primary Contact:** Select **Yes** if you are registering as the Executive Contact (the authorized entity) for your organization. Otherwise, select **No**.
  - **Registration Type:** Select one of the following from the dropdown menu:
    - New Account: For all new users who have not previously used GEMS.
    - Reauthorization: For users who need to update an existing or previous user in GEMS.
    - Disablement: For users who need to be removed from GEMS.

- **Work Street, Work City, Work State/Province, Work Zip/Postal Code:** Enter your work address.
  - **Email:** Enter your work email address.
  - **Requested Access:** Select the level of access desired from the dropdown menu:
    - Create/Edit Plans – allows the user to create and edit plans
    - Sign/Submit Plans – allows the user to create and edit the plans. If they are the Certifying Official, they can sign and submit the plans
    - Read/Review Plans – allows the users to only view the plans
  - **Grant Program:** Select your grant program from the dropdown menu.
  - **Are you replacing someone in your tribe/housing entity?:** Select **Yes**, **No**, or **N/A** from the dropdown menu.
  - **Comments:** Add any additional comments for ONAP to review.
6. Click the **Register** button at the bottom righthand corner. The GEMS system will automatically check to see if you already have a user account in the system.
- a. If your account does not already exist in GEMS, then you will receive a message that says your area ONAP GEMS representative will review your registration request. Once the registration is approved, a confirmation email will be sent to your email on file. You may need to check your email inbox and spam folder to find the email.
    - i. If you have not heard back about your registration within 5 business days, please reach out to your area ONAP office:

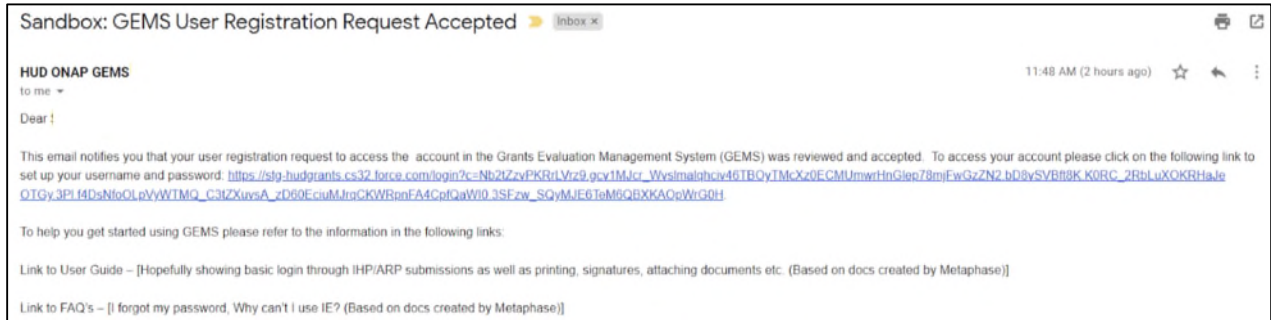
You have successfully submitted your registration to HUD. Your local area ONAP representative will contact you regarding your registration.

- b. If your account already exists in GEMS, then you will receive a message to reset your password. Click the **click here** link and follow the steps to change your password by entering your username.

The email address johnsGems@gmail.com you provided already exists in the Grants Evaluation Management System (GEMS). Please [click here](#) to reset your password.

## II. How to Create, Change, or Reset Your Password

Once your registration request is reviewed and approved by your area ONAP GEMS representative, you will receive the below email message to set up a password. Your username will be created by GEMS. Click the link in the email to setup your password.

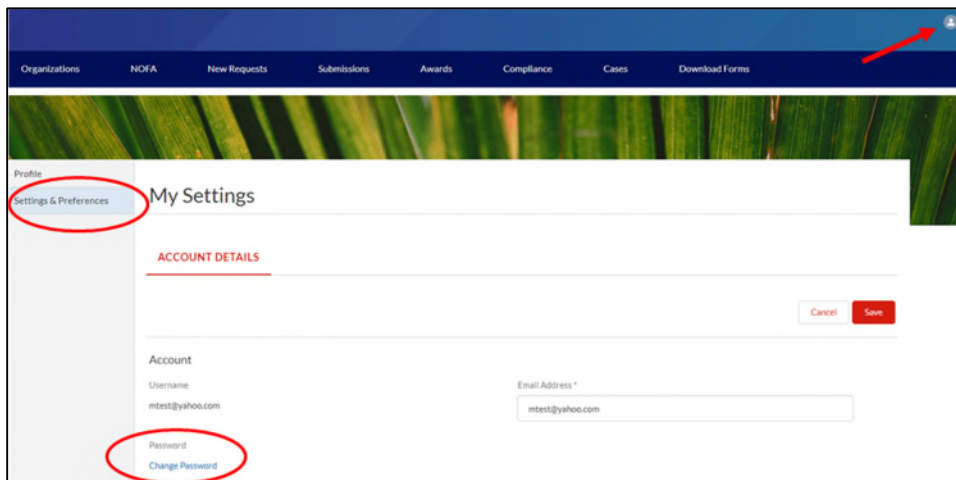


A password change can either be:

- self-initiated while logged-in or
- requested while logged-out, like when you cannot remember your password when logging in.

### *Self-Initiated Password Change While Logged-In*

- Click the person icon in the upper righthand corner and click the **Profile** link from the dropdown.
- Click the **Settings & Preferences** link from the menu on the righthand side and click the **Change Password** link down the screen on the left when the text changes.



- When the page refreshes, enter your current password as well as the new password you would like to use. Please make sure that it has at least ten (10) characters that include one (1) letter, one (1) number, and one (1) special character.

Change My Password

You must adhere to the following password rules:

- \* Your password must be at least 10 characters long.
- \* Your password must include letters and numbers

\* Current Password

\* New Password

\* Verify New Password

Cancel Save

4. Once your password meets the requirements, click the **Save** button.

***Password Change Request While Logged Out***

1. Navigate your internet browser to the GEMS login page at <https://hud-gateway.force.com/GEMS>
2. In the top righthand corner, click the red **Log in** button.
3. When the screen refreshes, click the **Forgot your Password?** link in the lower lefthand corner.

ONAP GEMS

To access this page, you have to log in to HUD ONAP Grants Management

Username

Password

Log In

Remember me

**Forgot Your Password?** Sign Up

US Govt- Department of Housing and Urban Development\*\* employees? Log In

4. When the page refreshes, enter your username, and click the **Continue** button.
5. A password change request email will be sent to your email on file. When you receive the email, click the included link. You may need to check your email inbox and spam folder to find the email.

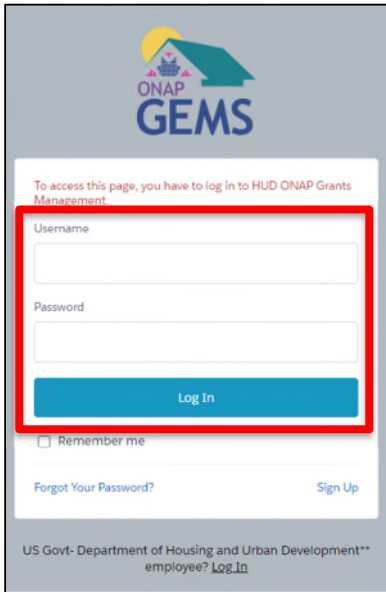
6. A webpage will open that asks you to create a new password. Please make sure that it has at least ten (10) characters that include one (1) letter, one (1) number, and one (1) special character.
7. Once your password meets the requirements, click the **Change Password** button to save the change.



### III. How to Login to Your GEMS Account

If you do not have a GEMS account yet, please follow the steps in [How to Register a User in GEMS](#).

1. Navigate your internet browser to the GEMS login page at <https://hud-gateway.force.com/GEMS>
2. In the top righthand corner, click the red **Log in** button.
3. When the screen refreshes, enter your username and password for GEMS.



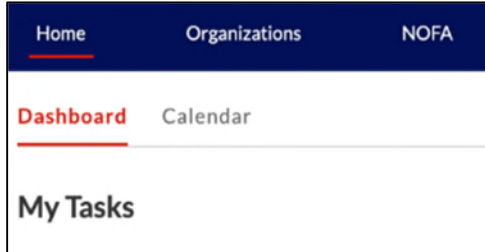
The screenshot shows the GEMS login interface. At the top left is the ONAP GEMS logo, which includes a house icon with a sun. Below the logo, a message states: "To access this page, you have to log in to HUD ONAP Grants Management." The login form consists of two text input fields labeled "Username" and "Password", followed by a blue "Log In" button. A red rectangular box highlights these three elements. Below the form is a "Remember me" checkbox and two links: "Forgot Your Password?" and "Sign Up". At the bottom, there is a footer for "US Govt- Department of Housing and Urban Development\*\* employee? Log\_In".

4. Click the **Log In** button to go to the **Home** tab.

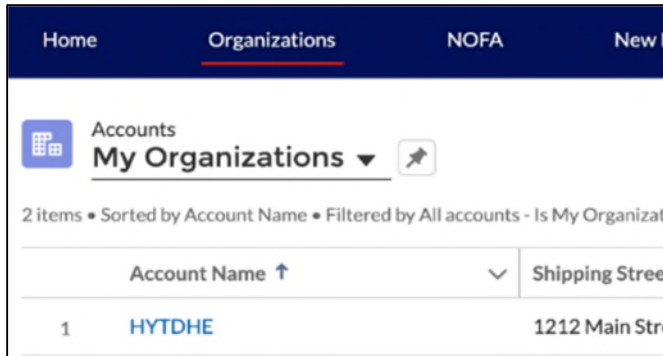
## IV. How to Navigate the GEMS Grantee Portal

There are nine (9) tabs across the top of the portal. Starting on the lefthand side, additional information is provided below about each tab. If there are less than nine (9) tabs across the top of your screen, the tab on the right will say **More**, and the extra tabs can be found by clicking that tab.

1. The **Home** tab has a) a dashboard, where you can find upcoming deadlines and unfinished tasks, and b) a calendar.



2. The **Organizations** tab shows which Tribe and/or TDHE your account is associated with and the Tribe and TDHE hierarchy for these organizations.



3. The **NOFA** tab is coming soon, and this section will be updated when it is available.
4. The **New Submissions** tab allows you to submit new reports, requests, or documents.

Home Organizations NOFA **New Submissions** Submissions

### New Submission - Select a submission you wish to complete

\* Grant Program  
--Select--

\* Submission Type  
--Select--

\* Fiscal Year  
--Select--

\* (1) Grant Number :  
--Select--

Next Section

5. The **Submissions** tab shows the status of the submitted reports or documents for your organization.

Version	FY	Submission Type	Gr...	Grant Nu...	Per...	Status	Decision	Submit...	Recipient Program Year	Account...	Re...
1	2022	SF425 Report (IHBG Formula Read...	IHBG	55IH0222220	12/31/2...	Submitted	Accepted	02/01/2023	1/1/2022 - 12/31/2022	Cedar Park T...	038564
1	2023	SF425 Report (IHBG Formula Read...	IHBG	55IH0222220	03/31/2...	Submitted	Accepted	02/01/2023	1/1/2023 - 12/31/2023	Cedar Park T...	038565
1	2023	SF425 Report (IHBG Formula Read...	IHBG	55IH0222220	06/30/2...	Submitted		02/01/2023	1/1/2023 - 12/31/2023	Cedar Park T...	038566
1	2023	SF425 Report (IHBG Formula Read...	IHBG	55IH0222220	09/30/2...	Submitted		02/01/2023	1/1/2023 - 12/31/2023	Cedar Park T...	038567
1	2023	SF425 Report (IHBG Formula Read...	IHBG	55IH0222220	12/31/2...	Submitted		02/02/2023	1/1/2023 - 12/31/2023	Cedar Park T...	038568
	2019	Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2019 - 12/31/2019	Cedar Park T...	FS-006...
	2019	APR	IHBG	55IH0222220		Submitted	Accepted		1/1/2019 - 12/31/2019	Cedar Park T...	FS-006...
	2020	IHP Waiver Request	IHBG	55IH0222220		Submitted			1/1/2020 - 12/31/2020	Cedar Park T...	FS-010...
	2020	Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2020 - 12/31/2020	Cedar Park T...	FS-010...

6. The **Awards** tab lists the awards packages for your organization.

Grantee Awards

1 item • Sorted by Package Name • Filtered by All packages - Record Type, Package Status • Updated a few seconds ago

Package Name	Record Type	Grant Number	FY	Recipient	Grantee Tribe	Submission Type	Review Decision
PK-000034	Award	55IH0222220	2019	Cedar Park TDHE		Initial Plan (IHP)	In Compliance

7. The **Compliance** tab is coming soon, and this section will be updated when it is available.

8. The **Cases** tab allows you to submit a help ticket to your area ONAP office.

- 9. The **Download Forms** tab allows you to download a blank IHP/APR form, Tribal certification form, and GEMS signature attestation page. These forms should be used when you cannot submit them through GEMS.

<a href="#">Home</a>	<a href="#">Organizations</a>	<a href="#">NOFA</a>	<a href="#">New Submissions</a>	<a href="#">Submissions</a>	<a href="#">Awards</a>	<a href="#">Compliance</a>	<a href="#">Case</a>	<a href="#">Download Forms</a>
<b>Please click a link below to download a form</b>								
For better result please download, save and open it in Internet Explorer.								
<a href="#">Form HUD-52737 (IHP/APR)</a>								
<a href="#">Tribal Certification Form</a>								
<a href="#">GEMS Signature Attestation Page</a>								

## V. How to Complete an Initial IHP

- Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **New Submissions** tab.

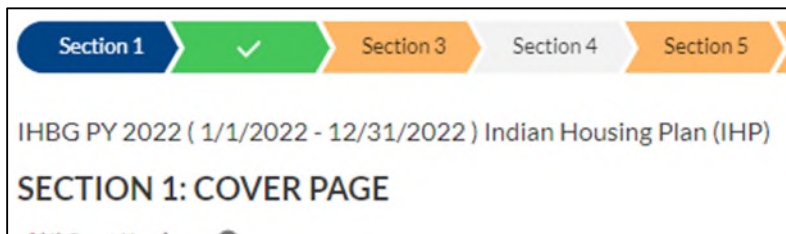


On the *New Submissions* page, use the dropdown menus to start your IHP:

- **Grant Program:** Select **IHBG**
- **Submission Type:** Select **Initial Plan (IHP)**
- **Fiscal Year:** Select the fiscal year for this IHP
- **(1) Grant Number:** Select the grant number for this IHP

 A form with four dropdown menus, each with a red asterisk indicating it is required. The labels are: '\* Grant Program', '\* Submission Type', '\* Fiscal Year', and '\* (1) Grant Number :'. Each dropdown menu currently shows '--Select--' and has a small up/down arrow icon on the right side.

- Click the **Next Section** button in the bottom righthand corner to start the IHP.
- You will advance to *Section 1: Cover Page*. The section bar at the top will show your progress and is color coded. It will be blue for the section you are working on, gray for a section that has not been started yet, yellow for a section that was started but is not completed, and green for a section that is complete. All required fields are indicated with an \* in GEMS:



- You can complete the IHP in one setting or save your work and pick it up later. Each section will have three (3) buttons in the bottom righthand corner to a) go back to the last section (**Previous Section**), b) save your work as a draft (**Save as Draft**), and c) go to the next section (**Next Section**).

- To reopen a saved draft, find the IHP on the **Home** tab. Then click the dropdown arrow at the end of the row and select **Edit**.



5. Complete *Section 1: Cover Page*. Some information is prepopulated and other information will populate when the IHP is submitted; additional information is provided below about each field that you can edit:
- **(10) Contact Person:** Enter the name of the contact person who is authorized to submit the IHP.
  - **(11) Telephone Number:** Enter the phone number of the person listed in field 10.
  - **(16) Fax Number:** Enter the fax number of the person listed in field 10.
  - **(17) Email Address:** Enter the email address of the person listed in field 10.
  - **(18) If TDHE, List Tribes Below:** If you are with a TDHE, you will be able to check the box for the Tribe you serve.
  - **(21) CCR/SAM Expiration Date:** Enter the CCR/SAM expiration date.

A screenshot of a web form titled 'IHBG PY 2022 ( 1/1/2020 - 12/31/2020 ) Indian Housing Plan (IHP)'. At the top, there is a navigation bar with five sections: Section 1 (highlighted in blue), Section 2, Section 3, Section 4, and Section 5. Below the navigation bar, the form content includes:

- SECTION 1: COVER PAGE**
- Field (1) Grant Number: 55IT5167890
- Field (2) Recipient Program Year: 1/1/2020 - 12/31/2020
- Field (3) Federal Fiscal Year: 2022
- Submission Type: Radio buttons for (4) Initial Plan (selected), (5) Amended Plan, and (6) Annual Performance Report.
- Record Type: Radio buttons for (7) Tribe (selected) and (8) TDHE.
- Field (9) Name of Recipient: Western Testing Tribe
- Field (10) Contact Person: Mr Testworths

6. Click the **Next Section** button to go to *Section 2: Housing Needs*.

- Complete Section 2 by selecting which types of need your organization will provide and typing in the text boxes that are applicable. Descriptions for this section are included in GEMS.

**SECTION 2: HOUSING NEEDS**  
NAHASDA § 102(b)(2)(B)

(1) **Type of Need:** Check the appropriate box(es) below to describe the estimated types of housing needs and the need for other assistance for low-income Indian families (column B) and all Indian families (column C) inside and outside the jurisdiction.

*Check all that apply*

**Housing Needs**

(A) Type of Need	(B) Low-Income Indian Families	(C) All Indian Families
(1) Overcrowded Households	<input type="checkbox"/>	<input type="checkbox"/>
(2) Renters Who Wish to Become Owners	<input type="checkbox"/>	<input type="checkbox"/>
(3) Substandard Units Needing Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>
(4) Homeless Households	<input type="checkbox"/>	<input type="checkbox"/>
(5) Households Needing Affordable Rental Units	<input type="checkbox"/>	<input type="checkbox"/>
(6) College Student Housing	<input type="checkbox"/>	<input type="checkbox"/>
(7) Disabled Households Needing Accessibility	<input type="checkbox"/>	<input type="checkbox"/>
(8) Units Needing Energy Efficiency Upgrades	<input type="checkbox"/>	<input type="checkbox"/>
(9) Infrastructure to Support Housing	<input type="checkbox"/>	<input type="checkbox"/>
(10) Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>

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

(3) **Planned Program Benefits.**  
\* (Describe below how your planned programs and activities will address the needs of low income families identified above. Also describe how your planned programs will address the various types of housing assistance needs NAHASDA § 102(b)(2)(B)):

(4) **Geographic Distribution.**  
\* Describe below how the assistance will be distributed throughout the geographic area and how this geographic distribution is consistent with the needs of low income families. NAHASDA § 102(b)(2)(B)(i):

Previous Section
Save as Draft
Next Section

- Click the **Next Section** button to go to *Section 3: Program Descriptions*.
- To complete Section 3, you will need to add each planned program individually. Select the **Add New Program** button to add a program.

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Indian Housing Plan (IHP)

**SECTION 3: PROGRAM DESCRIPTIONS**  
 [102(b)(2)(A)], [233(a)], [235(c)], [404(b)], 24 CFR §1000.512(b)(2) and (3)

In this section, the recipient must provide a description of its planned eligible activities, and intended outcomes and outputs for the One-Year IHP. The recipient can select any combination of activities eligible under NAHASDA and intended outcomes and outputs that are based on local needs and priorities. There is no maximum or minimum number of eligible activities or intended outcomes and outputs. Rather, the One-Year IHP should include a sufficient number of eligible activities and intended outcomes to fully describe any tasks that the recipient intends to fund in whole or in part with IHBG resources during the coming program year.

**Program Descriptions**

Unique Identifier	Program Name	Eligible Activity	Intended outcome number	Actual outcome number
<input type="button" value="Add New Program"/>				

Please select a program

10. The *Add/Edit Program* page will pop up. Fill in each field to describe the activity.

- **1.1a Unique Identifier:** Any number you choose, but it is recommended that you number them in order and include the program year, such as 2023-01.
- **1.1b Program Name:** A few words to summarize what this program is, such as Operation of 1937 Act Housing
- **1.2 Program Description:** Describe what specific types of projects will be developed under the program for year.
- **1.3 Eligible Activity Number:** Select an activity from the dropdown that best fits the program.
- **1.4 Intended Outcome Number:** Select an outcome from the dropdown that best fits the program.
- **1.6 Who Will Be Assisted:** Describe the types of households that will be assisted under the program.
- **1.7 Types and Level of Assistance:** Describe the types and level of assistance that will be provided to each household.
- **Planned Number of Units to be Completed in Year Under this Program:** Estimate the number of IHBG-assisted units to be completed, households to be served, and/or acres to be purchased for IHBG-assisted housing development for each planned activity during the program year.
- **Prior and Current Year IHBG (only) funds to be expended in 12-month program year (L):** The cumulative amount of IHBG funds that are planned to be used for these activities in the program year.
- **Total all other funds to be expended in 12-month program year (M):** The amount of non-IHBG funds that are planned to be used for these activities in the program year.



11. Click the **Save and Continue** button to return to the main Section 3 page. Verify that each of the added programs are displayed and fix any error messages that appear under the **Add New Program** button. If you need to edit an activity, click the dropdown arrow at the end of the row that you need to edit, and select **Edit** to reopen the *Add/Edit Program* page.

Unique Identifier	Program Name	Eligible Activity	Intended outcome number
2022-001	Burrowed Bengal Rentals	(4) Construction of Rental Housing [202(2)]	(7) Create new affordable rental units
2022-003	Brady Apts Rehab	(5) Rehabilitation of Rental Housing [202(...]	(3) Improve quality of substandard units
2021-003	Allentown Semi-Luxury Homes	(11) New Construction of Homebuyer Uni...	(2) Assist renters to become homeowners

Please correct data for program(s): Burrowed Bengal Rentals, Brady Apts Rehab, Allentown Semi-Luxury Homes

12. Repeat Steps 10, 11, and 12 until you have entered all the programs that needs be included in this IHP.

- If an activity is close to one you have already created for this IHP, you can copy it by clicking the dropdown arrow at the end of the row and select **Clone** to open the *Add/Edit Program* page.
- If an activity is entered in error, you can delete it by clicking the dropdown arrow at the end of the row and select **Delete**.

13. Click the **Next Section** button to go to *Section 4: Maintaining 1937 Act Units, Demolition, and Disposition*.

14. Complete Section 4 by typing in the text boxes. Descriptions for this section are included in GEMS.

Section 4 Section 5 Section 6 Section 7 Section 8 Section 9 Attachments Review/Submit

IHBG PY 2020 ( 10/1/2021 - 9/30/2022 ) Indian Housing Plan (IHP)

**SECTION 4: MAINTAINING 1937 ACT UNITS, DEMOLITION, AND DISPOSITION**  
 NAHASDA §§ 102(b)(2)(A)(v), 102(b)(2)(A)(iv)(I-III)

**(1) Maintaining 1937 Act Units**  
 \* (NAHASDA § 102(b)(2)(A)(vi)) (Describe specifically how you will maintain and operate your 1937 Act housing units in order to ensure that these units will remain viable.):

**(2) Demolition and Disposition**  
 \* (NAHASDA § 102(b)(2)(A)(iv)(I-III), 24 CFR 1000.134) Describe any planned demolition or sale of 1937 Act or NAHASDA-assisted housing units. If the recipient is planning on demolition or disposition of 1937 Act or NAHASDA-assisted housing units, be certain to include the timetable for any planned demolition or disposition and any other information that is required by HUD with respect to the demolition or disposition.

Previous Section Save as Draft Next Section

15. Click the **Next Section** button to go to *Section 5: Budgets*.

16. Complete Section 5 by updating the three components as follows:

- In the (1) *Sources of Funding* table, enter dollar amounts in Columns A, B, and D to report the actual funds available for each source. The system will calculate Columns C and E in real time; they will be \$0.00 until information is entered in Columns A, B and D.

**SECTION 5: BUDGETS**  
 NAHASDA §§ 102(b)(2)(C), 404(b)

(1) Sources of Funding (NAHASDA § 102(b)(2)(C)(i), 404(b)) (Complete the non-shaded portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month program year. **APR Actual Sources of Funding** -- Please complete the shaded portions of the chart below to describe your actual funds received. Only report on funds actually received and under a grant agreement or other binding commitment during the 12-month program year.)

Source	(A) Estimated amount on hand at beginning of program year	(B) Estimated amount to be received during 12-month program year	(C) Estimated total sources of funds (A+B)	(D) Estimated funds to be expended during 12-month program year	(E) Estimated unexpended funds remaining at end of program year (C-D)
1. IHBG Funds	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
2. IHBG Program Income	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
3. Title VI	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
4. Title VI Program Income	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
5. 1937 Act Operating Reserves	<input type="text"/>		\$0.00	<input type="text"/>	\$0.00
6. Carry Over 1937 Act Funds	<input type="text"/>		\$0.00	<input type="text"/>	\$0.00
<b>LEVERAGED FUNDS</b>					
7. ICDBG Funds	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
8. Other Federal Funds	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
9. LIHTC	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
10. Non-Federal Funds	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
Total	<input type="text"/>	<input type="text"/>	\$0.00	<input type="text"/>	\$0.00
TOTAL Columns C and H ( 2 through 10 )			\$0.00		

- In the (2) *Uses of Funding* table, check the information in Columns L and M for each of your programs. These dollar amounts will auto-populate from *Section 3: Program Descriptions*. If you fix any of these cells, it will automatically update Section 3 as well. The system will

calculate Column N in real time; it will be \$0.00 until information is entered in Columns L and M.

- o GEMS might not show your programs in the order you expect, so check the program name before entering any figures.

PROGRAM NAME	(L) Prior and current year IHBG (only) funds to be expended in 12-month program year	(M) Total all other funds to be expended in 12-month program year	(N) Total funds to be expended in 12-month program year (L+M)
2021-003: Allentown Semi-Luxury Homes	\$1,700,000.00	\$25,000.00	\$1,725,000.00
2022-001: Burrowed Bengal Rentals	\$900,000.00	\$25,000.00	\$925,000.00
2022-003: Brady Apts Rehab	\$1,200,000.00	\$25,000.00	\$1,225,000.00
Planning and Administration	\$0.00	\$0.00	\$0.00
Loan repayment - describe in 3 & 4 below	\$0.00	\$0.00	\$0.00
<b>TOTAL</b>	<b>\$3,800,000.00</b>	<b>\$75,000.00</b>	<b>\$3,875,000.00</b>

- In the (3) *Estimated Sources of Uses of Funding (NAHASDA § 102(b)(2)(C))* text box, type in any applicable information. A description for this text is included in GEMS.

17. Click the **Next Section** button to go to *Section 6: Other Submission Items*.

18. Complete Section 6 by typing in the text boxes and selecting yes/no on the relevant questions. Descriptions for this section are included in GEMS.

Section 6
Section 7
Section 8
Section 9
Attachments
Review/Submit

**IHBC PY 2020 ( 10/1/2021 - 9/30/2022 ) Indian Housing Plan (IHP)** Section 6 : Help

**SECTION 6: OTHER SUBMISSION ITEMS**  
[102(b)(2)(C)(iii)], [201(b)(5)], [202(6)], [205(a)(2)], [209], 24 CFR §§ 1000.108, 1000.120, 1000.142, 1000.238, 1000.302

\* (1) Useful Life/Affordability Period(s) (NAHASDA § 205, 24 CFR § 1000.142) (Describe your plan or system for determining the useful life/affordability period of the housing it assists with IHBG and/or Title VI funds must be provided in the IHP. A record of the current, specific useful life/affordability period for housing units assisted with IHBG and/or Title VI funds (excluding Mutual Help) must be maintained in the recipient's files and available for review for the useful life/affordability period.)

\* (2) Model Housing and Over-Income Activities (NAHASDA § 202(6), 24 CFR § 1000.108) (If you wish to undertake a model housing activity or wish to serve non-low-income households during the 12-month program year, those activities may be described here, in the program description section of the 1-year plan, or as a separate submission.)

(3) Tribal and Other Indian Preference (NAHASDA § 201(b)(5), 24 CFR § 1000.120) If preference will be given to tribal members or other Indian families, the preference policy must be described. This information may be provided here or in the program description section of the 1-year plan.

\* Does the Tribe have a preference policy?  
 Yes  No  
Complete this field.

(4) Anticipated Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238)  
Do you intend to exceed your allowable spending cap for Planning and Administration?  
 Yes  No

\* (6) Expanded Formula Area - Verification of Substantial Housing Services (24 CFR § 1000.302(3)) If your tribe has an expanded formula area (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the tribe have an expanded formula area?  
 Yes  No  
Complete this field.

If yes, list each separate geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there.

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

Previous Section
Save as Draft
Next Section

19. If your organization has expanded its formula area, answer yes and you will need to add this information in Section 6, Line 6. If not, answer no and skip to Step 23.

20. Click the **Add Expanded Formula Area** button to add the fields you need to complete and add the necessary data. All the fields are required; they are:

- Geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there
- All AIAN Households – IHBG Funds
- AIAN Households with Incomes 80% or Less of Median Income – IHBG Funds
- All AIAN Households – Funds from Other Sources
- AIAN Households with Incomes 80% or Less of Median Income – Funds from Other Sources



\* (6) Expanded Formula Area - Verification of Substantial Housing Services (24 CFR § 1000.302(3)) If your tribe has an expanded formula area (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the tribe have an expanded formula area?

Yes  No

If yes, list each separate geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there.

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

**Add Expanded Formula Area**

 **Expanded Formula Area** 

\* Geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there

\* All AIAN Households - IHBG Funds

\* AIAN Households with Incomes 80% or Less of Median Income - IHBG Funds

\* All AIAN Households - Funds from Other Sources

\* AIAN Households with Incomes 80% or Less of Median Income - Funds from Other Sources

21. Repeat Step 21 until you have entered all the expanded formula areas that need be included in this IHP.

- If you click the **Add Expanded Formula Area** button too many times, click the garbage can icon for any expanded area that needs to be removed.

22. Click the **Next Section** button to go to *Section 7: Indian Housing Plan Certification of Compliance*.

23. Complete Section 7 by selecting yes, no, or not applicable on the six (6) questions. Descriptions for this section are included in GEMS.

IHBG PY 2020 ( 10/1/2021 - 9/30/2022 ) Indian Housing Plan (IHP)

**SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE**  
*NAHASDA § 102(b)(2)(D)*

By signing the IHP, the recipient certifies its compliance with Title II of the Civil Rights Act of 1968 (25 USC Part 1301 et seq.), and ensures that the recipient has all appropriate policies and procedures in place to operate its planned programs. The recipient should not assert that it has the appropriate policies and procedures in place if these documents do not exist in its files, as this will be one of the items verified during any HUD monitoring review.

(1) In accordance with applicable statutes, the recipient certifies that:

- \* It will comply with Title II of the Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, and other applicable federal statutes.  
 Yes  
 No  
Complete this field.

(2) In accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that:

- \* There are households within its jurisdiction at or below 80 percent of median income  
 Yes  
 No  
 Not Applicable  
Complete this field.

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

- \* a. It will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD:  
 Yes  
 No  
 Not Applicable  
Complete this field.
- \* b. Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA:  
 Yes  
 No  
 Not Applicable  
Complete this field.
- \* c. Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA; and  
 Yes  
 No  
 Not Applicable  
Complete this field.
- \* d. Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA  
 Yes  
 No  
 Not Applicable  
Complete this field.

Previous Section Save as Draft Next Section

24. Click the **Next Section** button to go to *Section 8: IHP Tribal Certification*.

25. If your organization is a TDHE, you will complete Section 8 by selecting how the tribal government reviews the IHP and providing the Tribe’s name, as well as the authorized official’s name, title, and signature. Wet signatures may be added on the *Attachments Section*. If your organization is a tribe, you are not required to complete Section 8 so it is hidden.

IHBG PY 2020 ( 10/1/2021 - 9/30/2022 ) Indian Housing Plan (IHP)

**SECTION 8: IHP TRIBAL CERTIFICATION**  
*NAHASDA § 102(c)*

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP or IHP amendment on behalf of a tribe. This certification must be executed by the recognized tribal government covered under the IHP.

(1) The recognized tribal government of the grant beneficiary certifies that:

- (2) It had an opportunity to review the IHP or IHP amendment and has authorized the submission of the IHP by the TDHE; or
- (3) It has delegated to such TDHE the authority to submit an IHP or IHP amendment on behalf of the Tribe without prior review by the Tribe.

(4) Tribe:

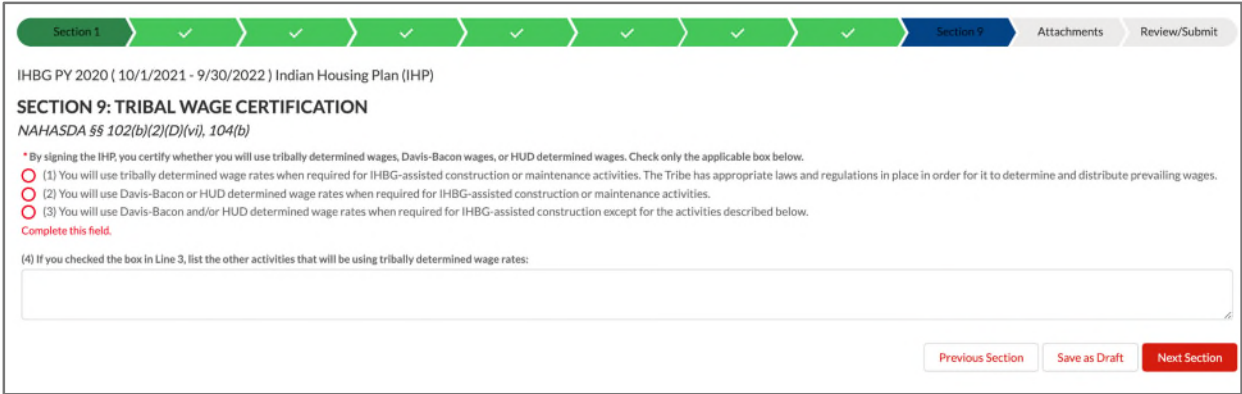
(5) Authorized Official's Name and Title:

(6) Authorized Official's Signature (Enter your name to sign electronically):

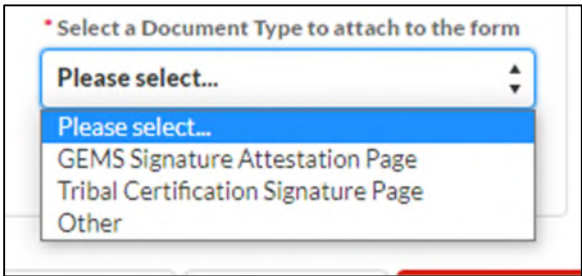
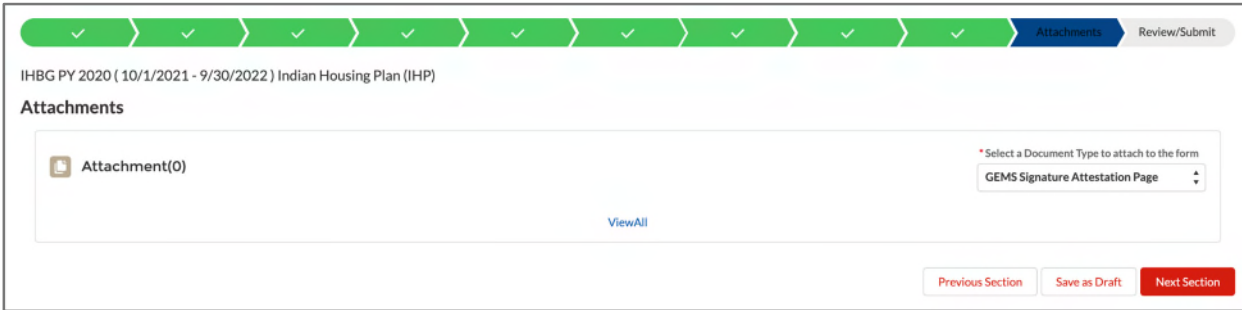
(7) Date (MM/DD/YYYY):  
Jan 4, 2022

Previous Section Save as Draft Next Section

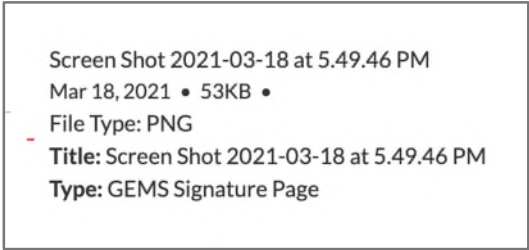
- 26. Click the **Next Section** button to go to *Section 9: Tribal Wage Certification*.
- 27. Complete Section 9 by selecting how your organization will determine wages. A text box is included if more information needs to be included.



- 28. Click the **Next Section** button to go to *Attachments Section*.
- 29. Complete this section by uploading any attachments that need to be added to your IHP. Click the dropdown menu below **Select a Document Type to attach to the form** on the righthand side of the screen. The options are GEMS signature attestation page, tribal certification signature page, and other. (Forms that need signatures can be found from the **Download Forms** tab.)

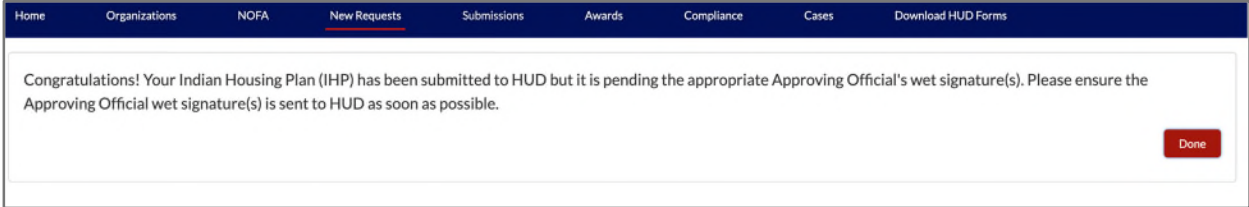


- 30. When you have selected the document type, you will have the option to find where the file is saved on your computer (the **Upload Files** button) or drag and drop the file from a location that you can see.
- 31. Ensure the file's title and type are correct. Verify that your attachment was successfully uploaded.



- 32. Click the **Next Section** button to go to the *Review/Submit Confirmation* section.
- 33. If the IHP is complete, the first 10 section bar items will be green and there will be a checkbox next to each of the sections under the Section Completion Status portion of the screen. Revisit any section that is not yet complete. Once that is complete, someone authorized to submit the IHP should type their name twice and their title.

- 34. Click the **Submit** button. You will receive a message that says your IHP has been submitted and it is pending approval; you may wish to print this page for your records.



- 35. Click the **Close** button to return to the **Home** tab.

36. You can check the status of your IHP from the **Submissions** tab.

Home Organizations NOFA New Submissions <u>Submissions</u> Awards Compliance Case Download Forms										
Version	FY	Submission Display Type		Grant Program	Grant Number	Reporting Period End Date	Status	Recipient Reporting Year		
Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	
Version	FY	Submission Type	G...	Grant N...	Period E...	Status	Decision	Submi...	Recipient Program Ye...	Account ...
1	2022	SF425 Report (IHBG...	IHBG	55IH0222220	12/31/2022	Submitted	Accepted	02/01/2023	1/1/2022 - 12/31/2022	Cedar Park TDHE
1	2023	SF425 Report (IHBG...	IHBG	55IH0222220	03/31/2023	Submitted	Accepted	02/01/2023	1/1/2023 - 12/31/2023	Cedar Park TDHE
1	2023	SF425 Report (IHBG...	IHBG	55IH0222220	06/30/2023	Submitted		02/01/2023	1/1/2023 - 12/31/2023	Cedar Park TDHE
1	2023	SF425 Report (IHBG...	IHBG	55IH0222220	09/30/2023	Submitted		02/01/2023	1/1/2023 - 12/31/2023	Cedar Park TDHE
1	2023	SF425 Report (IHBG...	IHBG	55IH0222220	12/31/2023	Submitted		02/02/2023	1/1/2023 - 12/31/2023	Cedar Park TDHE
	2019	Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2019 - 12/31/2019	Cedar Park TDHE
	2019	APR	IHBG	55IH0222220		Submitted	Accepted		1/1/2019 - 12/31/2019	Cedar Park TDHE
	2020	IHP Waiver Request	IHBG	55IH0222220		Submitted			1/1/2020 - 12/31/2020	Cedar Park TDHE



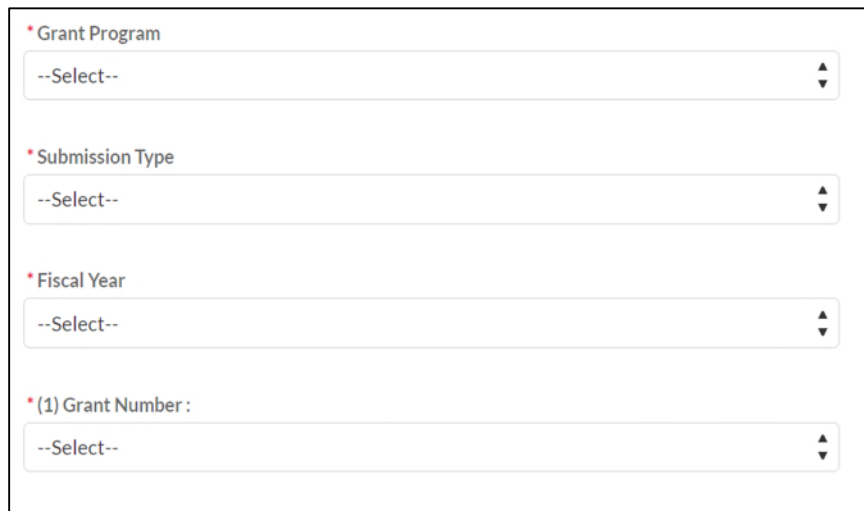
## VI. How to Complete an IHP Waiver

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **New Submissions** tab.



On the *New Submissions* page, use the dropdown menus to start your IHP waiver:

- **Grant Program:** Select **IHBG**
- **Submission Type:** Select **IHP Waiver Request**
- **Fiscal Year:** Select the fiscal year for this waiver
- **(1) Grant Number:** Select the grant number for this waiver

A screenshot of a form with four dropdown menus. Each menu is labeled with a red asterisk and a label: '\* Grant Program', '\* Submission Type', '\* Fiscal Year', and '\* (1) Grant Number :'. Each menu currently displays '--Select--' and has a small upward and downward arrow on the right side.

2. Click the **Next Section** button in the bottom righthand corner to start the IHP waiver request.
3. Complete the request form. Descriptions for this section are included in GEMS, and all required fields are indicated with an \*.

**SECTION 15: IHP WAIVER REQUESTS**  
NAHASDA § 101(b)(2)

THIS SECTION IS ONLY REQUIRED IF THE RECIPIENT IS REQUESTING A WAIVER OF AN IHP SECTION OR A WAIVER OF THE IHP SUBMISSION DUE DATE.

A waiver is valid for a period not to exceed 90 days Fill out the form below if you are requesting a waiver of one or more sections of the IHP. NOTE : This is NOT a waiver of the IHBG program requirements but rather a request to waive some of the IHP submission items.

\* (1a.) Type of Waiver Request  
 Extend IHP Due Date  
 IHP Section Waiver

(1b.) Select the sections of the IHP where you are requesting a waiver and/or a waiver of the IHP due date.  
 1. Cover Page  
 2. Housing Needs  
 3. Program Descriptions  
 4. Maintaining 1937 Act Units, Demolition, and Disposition  
 5. Budgets  
 6. Other Submission Items  
 7. Indian Housing Plan Certification of compliance  
 8. IHP Tribal Certification  
 9. Tribal Wage Rate Certification

\* (2) Describe the reasons that you are requesting this waiver ( Describe completely why you are unable to complete a particular section of the IHP or could not submit the IHP by the required due date.):

\* (3) Describe the actions you will take in order to ensure that you are able to submit a complete IHP in the future and/or submit the IHP by the required due date. ( This section should completely describe the procedural, staffing or technical corrections that you will make in order to submit a complete IHP in the future and/or submit the IHP by the required due date.):

\* (4) Recipient :  
HYTDHE

\* (5) Authorized Official's Name and Title :

\* (6) Authorized Official's Signature (Enter your name to sign electronically):

(7) Date(MM/DD/YYYY):  
Jan 13, 2022

Cancel Save as Draft Submit

4. Click the **Submit** button. You will receive a message that says your request has been submitted and it is pending approval; you may wish to print this page for your records.

Congratulations, your IHBG FY 2021 ( 10/1/2021 - 9/30/2022 ) IHP Waiver Request for HYTDHE : 55-IT-12345 was submitted to HUD successfully and is under review.

Close

- 5. Click the **Close** button to return to the **Home** tab.
- 6. You can check the status of your IHP waiver request from the **Submissions** tab.

Home   Organizations   NOFA   New Submissions <u>Submissions</u> Awards   More													
Version		FY		Submission Display Type		Grant Program		Grant Number		Reporting Period End Date		Status	
Please select		2020		Please select		Please select		Please select		Please select		Please select	
Version	FY	Submission Type	G.	Grant Nu...	Peri...	Status	Decision						
	2020	IHP Waiver Request	IHBG	55IH0222220		Submitted							
	2020	Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance						
	2020	APR	IHBG	55IH0222220		Submitted							

## VII. How to Complete an Interim Funding Request

To submit an interim funding request, your organization must have:

- Previously submitted an IHP for the Fiscal Year that was found in compliance.
    - If the IHP has been submitted but is not listed as being in compliance, please contact your grants management specialist.
  - Received a notification that the funds are available for this grant.
1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **New Submissions** tab.



On the *New Submissions* page, use the dropdown menus to start your interim funding request:

- **Grant Program:** Select **IHBG**
- **Submission Type:** Select **Interim Funding Request**
- **Fiscal Year:** Select the fiscal year for this request
- **(1) Grant Number:** Select the grant number for this request

\* Grant Program

IHBG

\* Submission Type

Interim Funding Request

\* Fiscal Year

2022

\* (1) Grant Number :

55IT5167890

2. Click the **Next Section** button in the bottom righthand corner to start the interim funding request.

**Interim Funding Request**

Name of Recipient : HYTDHE  
Grant Number : 55-IT-12345  
Fiscal Year : 2021  
Program Year : 10/1/2021 - 9/30/2022  
Grant Program : IHBG

\* Requested Interim Funding Amount

\* Describe the reasons why you are requesting Interim Funding

\* Recipient  
HYTDHE

\* Authorized Official's Name and Title

\* Authorized Official's Signature

Date (MM/DD/YYYY)  
Jan 18, 2022

3. Complete the request form. All required fields are indicated with an \* in GEMS:
  - **Requested Interim Funding Amount:** Enter the amount you are requesting with this request (the maximum amount is set forth in the HUD issued notice).
  - **Describe the reason why you are requesting Interim Funding:** Outline why you are requesting interim funding.
  - **Contact Person:** Enter the name of the contact person who is authorized to submit the request.
  - **Telephone Number:** Enter the phone number of the contact person.
  - **Email Address:** Enter the email address of the contact person.
  - **Authorized Official's Name and Title:** Enter the name and title of the person authorized to submit this request.
  - **Authorized Official's Signature:** Enter the name of the person authorized to submit this request.
  
4. Click the **Submit** button. You will receive a message that says your interim funding request has been submitted and it is pending approval; you may wish to print this page for your records.

Congratulations, your IHBG FY 2021 ( 10/1/2021 - 9/30/2022 ) Interim Funding Request for HYTDHE : 55-IT-12345 was submitted to HUD successfully and is under review.

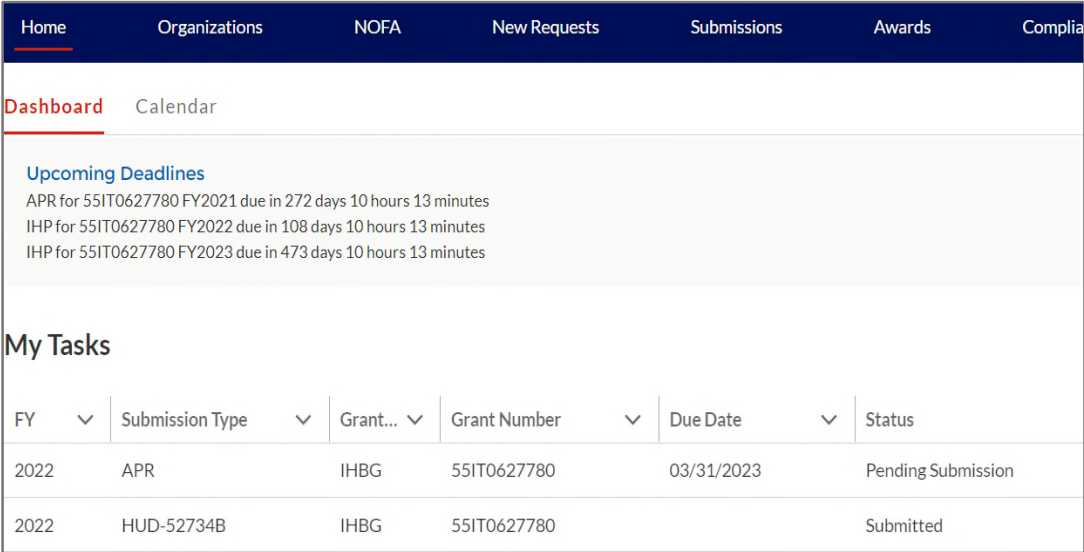
5. Click the **Close** button to return to the **Home** tab.
  
6. You can check the status of your request from the **Submissions** tab.

# VIII. How to Sign Award Packages

To sign an award package, your organization must have:

- Previously submitted an IHP for the Fiscal Year that was found in compliance.
  - If the IHP has been submitted but is not listed as being in compliance, please contact your grants management specialist.
- Received an Award Letter that includes a HUD-52734B signed by your area ONAP Administrator.
- The authorized representative with signature privileges logged in.

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **Home** tab.



2. Look under *My Tasks* for Form HUD-52734B under Submission Type. Click the dropdown arrow at the end of the row for the HUD-52734B that you need to sign and select **Edit**.

Version	FY	Submission Display Type	Grant Program	Grant Number	Reporting Period end Date	Due Date	Status	Recipient Reporting Year
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	06/30/2023	07/31/2023	Pending Submission	1/1/2023 - 12/31/2023
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	09/30/2023	10/30/2023	Not Started	1/1/2023 - 12/31/2023
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	12/31/2023	04/01/2024	Not Started	1/1/2023 - 12/31/2023
	2023	Initial Plan (IHP)	IHBG	55IH123456	10/18/2022		Pending Submission	1/1/2023 - 12/31/2023
	2022	HUD-52734B	IHBG	55IH202222			Submitted	1/1/2022 - 12/31/2022

3. On the **Sign/Submit Award Agreement** page, enter the required information and click **Submit**.

- Review the award documents by clicking the following links:
  - HUD-52734B
  - IHBG Award Letter
- **Authorized Official's Name:** Enter the name of the authorized official for the organization

- **Authorized Official's Title:** Enter the title of the authorized official for the organization
- **Authorized Official's Signature:** Enter the signature of the authorized official for the organization

### Sign/Submit Award Agreement

Name of Recipient : Cedar Park TDHE  
 Grant Number : 55IH0222220  
 Fiscal Year : 2019  
 Program Year : 1/1/2019 - 12/31/2019  
 Grant Program : 1/1/2019 - 12/31/2019  
 Package ID: s17Hv000006DI9IAE  
 Documents:  
 HUD-52734-B  
[IHBG Award Letter](#)

\* Recipient  
 Sarah Tester

\* Authorized Official's Name  
  
Complete this field.

\* Authorized Official's Title  
  
Complete this field.

Authorized Official's Signature

Date (MM/DD/YYYY)  
 Dec 3, 2022

[Cancel](#) [Submit](#)





- To review the signed grant agreement, navigate to the **Awards** tab. Click on the award package you would like to review.

Package N...	Record ...	Grant Number	FY	Recipient	Submission Type	Review Decision	Package Status	Amount
1 <b>PK-000070</b>	Award	55IT0627780	2021	Hines Testing Tribe	Initial Plan (IHP)	In Compliance	Pending Grantee Signature	
2 <b>PK-000090</b>	Award	55IT0627780	2022	Hines Testing Tribe	Initial Plan (IHP)	In Compliance	Pending Grantee Signature	

- Click the red PDF icon in the *View* column next to each document to open it and review the content.

### Generated Documents (4)

4 items • Updated a minute ago

Name	View
1 HUD-52734-B	
2 IHBG Addendum to Grant Agreement	
3 IHBG Award Letter	
4 IHBG Grant Agreement with Special Conditions	

## IX. How to Complete an IHP Amendment

To complete an IHP Amendment, your organization must have:

- Previously submitted an IHP for the Fiscal Year that was found in compliance.
    - If the IHP needs to be submitted, see [How to Complete an Initial IHP](#). When the IHP is found to be compliant, you can return to complete the amendment process.
    - If the IHP has been submitted but the status is not “in compliance”, please contact your grants management specialist.
1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **Submissions** tab to verify the submission status of the IHP you want to amend.

Submissions	Awards	Compliance	Cases	De
✓	Status	Decision		
	Submitted - Pending Tribal Certification	In Compliance		

2. When you have verified that your IHP was found in compliance, click the **New Submissions** tab.



On the *New Submissions* page, use the dropdown menus to start your IHP amendment:

- **Grant Program:** Select **IHBG**
- **Submission Type:** Select **Amended Plan**
- **Fiscal Year:** Select the fiscal year for this request
- **(1) Grant Number:** Select the grant number for this request

**New Submission - Select a submission you wish to complete**

\* Grant Program  
IHBG

\* Submission Type  
Amended Plan

\* Fiscal Year  
2021

\* (1) Grant Number:  
55-17-12345

**Next Section**

3. Click the **Next Section** button in the bottom righthand corner. The IHP that you are amending will copy over in the system, and you will be able to make any necessary changes.



4. From this point, the instructions are the same as submitting the initial IHP. Please see [How to Complete an Initial IHP](#) and start with Step 4.

# X. How to Complete an APR

To complete an APR, your organization must have:

- Previously submitted an IHP for the Fiscal Year that was found in compliance.
  - If the IHP needs to be submitted, see [How to Complete an Initial IHP](#). When the IHP is found to be compliant, you can return to complete the APR submission process.
  - If the IHP has been submitted but the status is not “In Compliance”, please contact your area ONAP office.

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **Submissions** tab to confirm you have a submitted IHP with an ‘In Compliance’ decision.

Version	FY	Submission Display Type	Grant Program	Grant Number	Reporting Period End Date	Status			
Please select	Please select	Initial Plan (IHP)	Please select	Please select	Please select	Please select			
V. ▾	FY ▾	Submission Ty... ▾	Gran... ▾	Grant Nu... ▾	P. ▾	Status ▾	Decision ▾	Su... ▾	Recipient Progra... ↑ ▾
2019		Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2019 - 12/31/2019
2020		Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2020 - 12/31/2020
2022		Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2022 - 12/31/2022
2023		Initial Plan (IHP)	IHBG	55IH0222220		Submitted...			1/1/2023 - 12/31/2023

2. When you have verified that your IHP was found in compliance, click the **New Submissions** tab.



On the *New Submissions* page, use the dropdown menus to start your APR:

- **Grant Program:** Select **IHBG**
- **Submission Type:** Select **Annual Performance Report**
- **Fiscal Year:** Select the fiscal year for this report
- **(1) Grant Number:** Select the grant number for this report

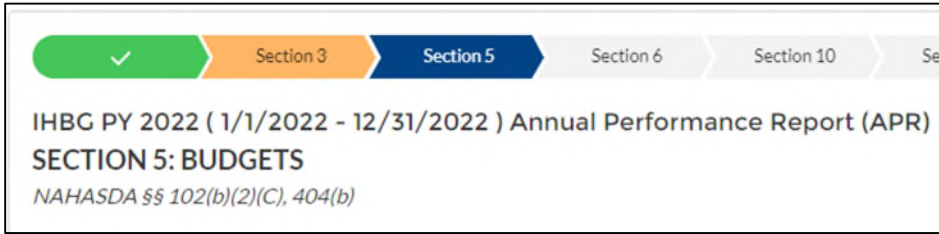
\* Grant Program  
--Select--

\* Submission Type  
--Select--

\* Fiscal Year  
--Select--

\* (1) Grant Number :  
--Select--

3. Click the **Next Section** button in the bottom righthand corner to start the APR.
4. You will advance to *Section 1: Cover Page*. The section bar at the top will show your progress and is color coded. It will be blue for the section you are working on, gray for a section that has not been started yet, yellow for a section that was started but is not completed, and green for a section that is complete. All required fields are indicated with an \* in GEMS.



5. You can complete the APR in one setting or save your work and pick it up later. Each section will have three (3) buttons in the bottom righthand corner to a) go back to the last section (**Previous Section**), b) save your work as a draft (**Save as Draft**), and c) go to the next section (**Next Section**).
  - To reopen a saved draft, find the APR on the **Home** tab. Then click the dropdown arrow at the end of the row and select **Edit**.

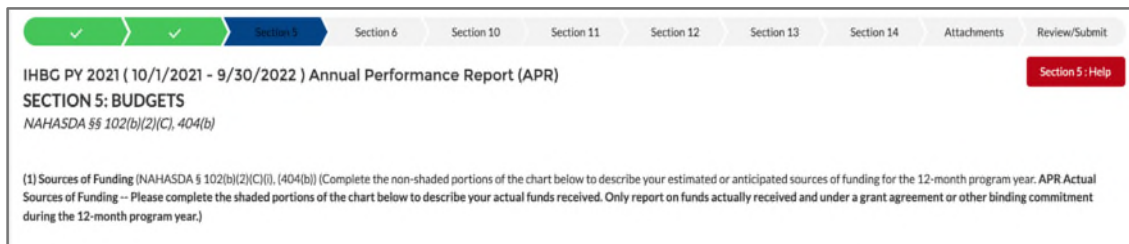


6. Check all fields in *Section 1: Cover Page* to make sure the contact information for report and the CCR/SAM expiration date are correct, as this information could have changed during the Fiscal Year.
7. Click the **Next Section** button at the bottom of the screen to move to *Section 3: Program Descriptions*.
8. Complete Section 3 by opening each program that was on your IHP. Click the dropdown arrow at the end of the row and select **Edit** to open the *Add/Edit Program* page. GEMS might not show your programs in the order you expect, so check the program name before entering any information.

9. Several of the fields will auto-populate from your IHP and will not be able to be edited. Your progress for the Fiscal Year should be included in Lines:

- **1.5. Actual Outcome Number:** Select an outcome from the dropdown that best fit the program.
- **1.8. APR: Describe Accomplishments:** Describe what you were able to accomplish during the program year.
- **1.10. APR Reason Behind Schedule:** Include why the program is behind schedule, if applicable.
- **APR Actual Number of Units Complete:** Enter the number of IHBG-assisted units completed, households served, and/or acres purchased for IHBG-assisted housing development for each planned activity during the program year.
- **Total IHBG (only) funds expended in 12-month program year (O):** The amount of IHBG funds spent for these activities in the program year.
- **Total all other funds expended in 12-month program year (P):** The amount of non-IHBG funds spent for these activities in the program year.
  - i. *Note:* This field no longer breaks down by type of other funds. Just enter the total dollar amount.

10. Click the **Save and Continue** button to return to the main Section 3 page. Verify that each of the added programs are displayed and fix any error messages that appear under the **Add New Program** button.
11. Repeat Steps 9, 10, and 11 until you have entered information for all the programs that needs be included in this APR.
12. Click the **Next Section** button to go to *Section 5: Budgets*.



13. Complete Section 4 by updating the component as follows:

- In the (1) *Sources of Funding* table, enter the dollar amounts in Columns F, G, I, and K to report the actual funds spent and unspent for each source in the Fiscal Year. The system will calculate Columns H and J in real time; they will be \$0.00 until information is entered in Columns F, G, I, and K.

(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F+G)	(I) Actual funds expended during 12-month program year	(J) Actual unexpended funds remaining at end of 12-month program year (H - I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>
<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>
<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>
<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>
<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>
<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>	\$0.00	<input type="text" value="\$0.00"/>

- In the (2) *Uses of Funding* table, check the information in Columns O and P for each of your programs. These dollar amounts will auto-populate from *Section 3: Program Descriptions*. If you fix any of these cells, it will automatically update Section 3 as well. The system will calculate Column Q in real time; it will be \$0.00 until information is entered in Columns L and M.
  - GEMS might not show your programs in the order you expect, so check the program name before entering any figures.

**(2) Uses of Funding (NAHASDA § 102(b)(2)(C)(iii))** (Note that the budget should not exceed the total funds on hand (Column C) and insert as many rows as needed to include all the programs identified in Section 3. Actual expenditures in the APR section are for the 12-month program year.)

PROGRAM NAME	(O)	(P)	(Q)
	Total IHBG (only) funds expended in 12-month program year	Total all other funds expended in 12-month program year	Total funds expended in 12-month program year (O+P)
1:1	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00

**(3) Estimated Sources or Uses of Funding (NAHASDA § 102(b)(2)(C)).**  
 \* (Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses of Funding table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):

**(4) APR (NAHASDA § 404(b))**  
 \* (Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses of Funding table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):

- In the (3) *Estimated Sources of Uses of Funding (NAHASDA § 102(b)(2)(C))* text box, you will not be able to make changes. The information is loaded from your IHP.
- In the (4) *APR (NAHASDA § 404(b))* text box, type in any applicable information. A description for this text is included in GEMS.

14. Click the **Next Section** button to go to *Section 6: Other Submission Items*.

15. Complete Section 6 by answering Question 5 and any fields that may pop up based on your answer. All other information on this page is loaded from your IHP, and you will not be able to make changes.

Section 6   Section 10   Section 11   Section 12   Section 13   Section 14   Attachments   Review/Submit

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR) Section 6: Help

**SECTION 6: OTHER SUBMISSION ITEMS**  
 [102(b)(2)(C)(iii)], [201(b)(5)], [202(6)], [205(a)(2)], [209], 24 CFR §§ 1000.108, 1000.120, 1000.142, 1000.238, 1000.302

\* (1) Useful Life/Affordability Period(s) (NAHASDA § 205, 24 CFR § 1000.142) (Describe your plan or system for determining the useful life/affordability period of the housing it assists with IHBG and/or Title VI funds must be provided in the IHR. A record of the current, specific useful life/affordability period for housing units assisted with IHBG and/or Title VI funds (excluding Mutual Help) must be maintained in the recipient's files and available for review for the useful life/affordability period.):

\* (2) Model Housing and Over-Income Activities (NAHASDA § 202(6), 24 CFR § 1000.108) (If you wish to undertake a model housing activity or wish to serve non-low-income households during the 12-month program year, those activities may be described here, in the program description section of the 1-year plan, or as a separate submission.):

(3) Tribal and Other Indian Preference (NAHASDA § 201(b)(5), 24 CFR § 1000.120) If preference will be given to tribal members or other Indian families, the preference policy must be described. This information may be provided here or in the program description section of the 1-year plan.

\* Does the Tribe have a preference policy?  
 Yes  No

(4) Anticipated Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(i), 24 CFR § 1000.238)  
 Do you intend to exceed your allowable spending cap for Planning and Administration?  
 Yes  No

(5) Actual Planning and Administration Expenses (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238)  
 \* Did you exceed your spending cap for Planning and Administration?  
 Yes  No  
 Complete this field.

If you did not receive approval for exceeding your spending cap on planning and administration costs, describe the reason(s) for exceeding the cap. (See Section 6, Line 5 of the Guidance for information on carry-over of unspent planning and administration expenses.)

\* (6) Expanded Formula Area - Verification of Substantial Housing Services (24 CFR § 1000.302(3)) If your tribe has an expanded formula area (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the tribe have an expanded formula area?  
 Yes  No

If yes, list each separate geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there.

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

[Previous Section](#) [Save as Draft](#) [Next Section](#)

16. Click the **Next Section** button to go to *Section 10: Self-Monitoring*.

17. Complete Section 10 by answering the yes/no questions and typing in the text boxes that are applicable. Descriptions for this section are included in GEMS.

Section 10   Section 11   Section 12   Section 13   Section 14   Attachments   Review/Submit

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR)

**SECTION 10: SELF-MONITORING**  
 NAHASDA § 403(b), 24 CFR §§ 1000.26, 85.37, 85.40

\* (1) Do you have a procedure and/or policy for self-monitoring?  
 Yes  
 No  
 Complete this field.

\* (2) Pursuant to 24 CFR § 1000.502(b) where the recipient is a TDHE, did the TDHE provide periodic progress reports including the self-monitoring report, Annual Performance Report, and audit reports to the Tribe?  
 Yes  
 No  
 Not Applicable  
 Complete this field.

\* (3) Did you conduct self-monitoring, including monitoring sub-recipients?  
 Yes  
 No  
 Complete this field.

\* (4) Self-Monitoring Results. (Describe the results of the monitoring activities, including corrective actions planned or taken.)

[Previous Section](#) [Save as Draft](#) [Next Section](#)

18. Click the **Next Section** button to go to *Section 11: Inspections*.

19. Complete Section 11 by updating the component as follows:

- In the (1) *Inspection of Units* table, enter the numbers by unit type in Columns B, C, D, and E. The system will calculate Column F in real time.
- For Question 2, answer the yes/no question and type in the text box, as applicable. Descriptions for this section are included in GEMS.

Section 11 | Section 12 | Section 13 | Section 14 | Attachments | Review/Submit

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR)

**SECTION 11: INSPECTIONS**  
NAHASDA § 403(b)

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

Activity (A)	Total Number of Units (B)	Results of Inspections			Total Number of Units Inspected (F=C+D+E)
		Units in Standard Condition (C)	Units Needing Rehabilitation (D)	Units Needing to be Replaced (E)	
<b>1937 Housing Act Units:</b>					
a. Rental	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
b. Homeownership	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
c. Other	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>1937 Act Subtotal:</b>					
<b>NAHASDA Associated Units:</b>					
a. Rental	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
b. Homeownership	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
c. Rental Assistance	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
d. Other	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>NAHASDA Act Subtotal:</b>					
<b>Total:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\* (2) Did you comply with your inspection policy:  
 Yes  
 No  
Complete this field.

(3) If no, why not:

Previous Section | Save as Draft | Next Section

20. Click the **Next Section** button to go to *Section 12: Audits*.

21. Complete Section 12 by answering the yes/no question and selecting the date, as applicable. Descriptions for this section are included in GEMS.

Section 11 | Section 12 | Section 13 | Section 14 | Attachments | Review/Submit

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR)

**SECTION 12: AUDITS**  
24 CFR § 1000.544

This section is used to indicate whether a financial audit based on the Single Audit Act and 2 CFR Part 200 Subpart F is required, based on a review of your financial records.

\* Did you expend \$750,000 or more in total Federal awards during the APR reporting period?  
 Yes  
 No  
Complete this field.

If Yes, an audit is required to be submitted to the Federal Audit Clearinghouse and your Area Office of Native American Programs.  
 If No, an audit is not required.

Previous Section | Save as Draft | Next Section



- 22. Click the **Next Section** button to go to *Section 13: Public Availability*.
- 23. Complete Section 13 by answering the yes/no questions and typing in the text boxes. Descriptions for this section are included in GEMS.

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR)

**SECTION 13: PUBLIC AVAILABILITY**  
NAHASDA § 408, 24 CFR § 1000.518

\* (1). Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518)?  
 Yes  
 No  
Complete this field.

\* (2) If you are a TDHE, did you submit this APR to the Tribe(s) (24 CFR § 1000.512)?  
 Yes  
 No  
 Not Applicable  
Complete this field.

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

\* (4) Summarize any comments received from the Tribe(s) and/or the citizens (NAHASDA § 404(d)).  
Enter N/A if this is not applicable.

Previous Section Save as Draft Next Section

- 24. Click the **Next Section** button to go to *Section 14: Jobs Supported by NAHASDA*.
- 25. Complete Section 14 by entering a number in Questions 1 and 2 and typing in the text box, as applicable. Descriptions for this section are included in GEMS.

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR)

**SECTION 14: JOBS SUPPORTED BY NAHASDA**  
NAHASDA § 404(b)

Use the table below to record the number of jobs supported with IHBG funds each year.

Indian Housing Block Grant Assistance (IHBG)

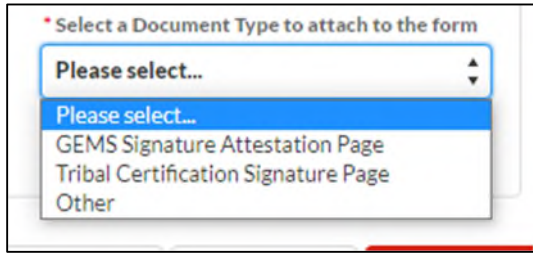
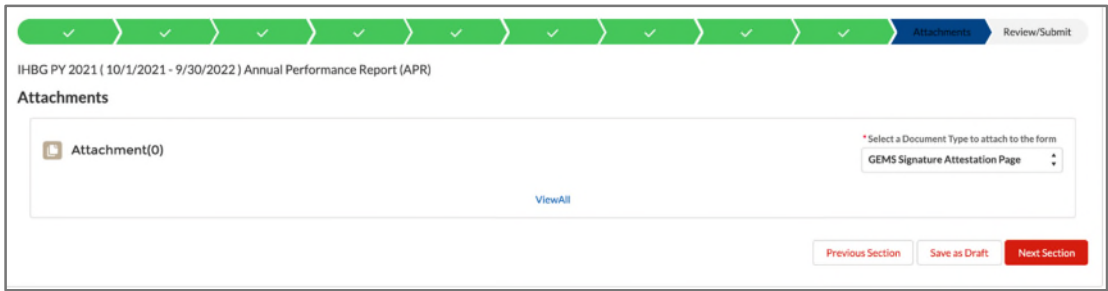
\* (1) Number of Permanent Jobs Supported

\* (2) Number of Temporary Jobs Supported

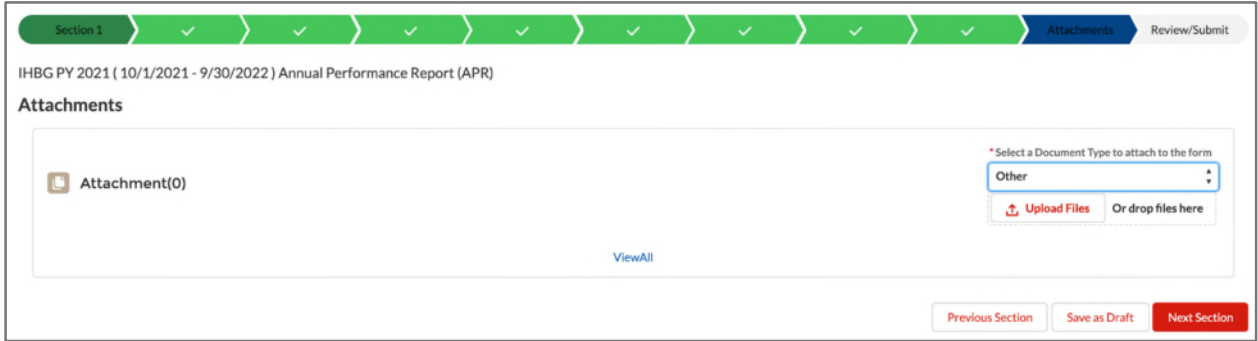
(3) Narrative (optional):

Previous Section Save as Draft Next Section

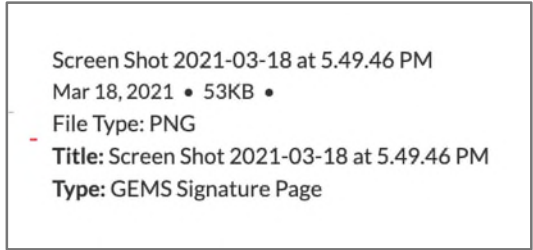
- 26. Click the **Next Section** button to go to the *Attachments Section*.
- 27. Complete this section by uploading any attachments that need to be added to your APR. To add an attachment, click the dropdown menu below **Select a Document Type to attach to the form** on the righthand side of the screen. The options are GEMS signature attestation page, tribal certification signature page, and other. (Forms that need signatures can be found from the **Download Forms** tab.)



28. When you have selected the document type, you will have the option to find where the file is saved on your computer (the **Upload Files** button) or drag and drop the file from a location that you can see.



29. Ensure the file’s title and type are correct. Verify that your attachment was successfully uploaded.



30. Click the **Next Section** button to go to the *Review/Submit Confirmation* section.

31. If the APP is complete, the first 10 section bar items will be green and there will be a checkbox next to each of the sections under the Section Completion Status portion of the screen. Revisit any section that is not yet complete. Once that is complete, someone authorized to submit the APR should type their name twice and their title.

IHBG PY 2021 ( 10/1/2021 - 9/30/2022 ) Annual Performance Report (APR)

**Review / Submit Confirmation**

Section Completion Status

- Section 1
- Section 3
- Section 5
- Section 6
- Section 10
- Section 11
- Section 12
- Section 13
- Section 14

**Certification:** The information contained in this document is accurate and reflects the activities actually planned or accomplished during the program year. Activities planned and accomplished are eligible under applicable statutes and regulations.

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

\* Name of Authorized APR Submitter

\* Title of Authorized APR Submitter

\* Signature of Authorized APR Submitter (Enter your name to sign electronically)  
 Electronically signed by

\* APR Submission Date  
 1/12/2022

32. Click the **Submit** button. You will receive a message that says your APR has been submitted and it is pending approval; you may wish to print this page for your records.

Congratulations! Your Annual Performance Report (APR) has been submitted to HUD but it is pending the appropriate Approving Official's wet signature(s). Please ensure the Approving Official wet signature(s) is sent to HUD as soon as possible.
 Done

33. Click the **Close** button to return to the **Home** tab.

34. You can check the status of your APR from the **Submissions** tab.

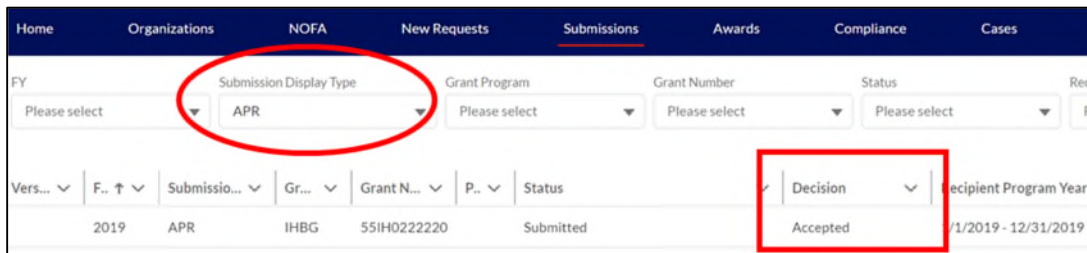
Home   Organizations   NOFA   New Requests <u>Submissions</u> Awards   Compliance   Cases   Download HUD Forms										
FY	Submission Type	Gr...	Grant Number	Due Date	Status	Decision	Recipient Program Year	Account...	Edit	
2021	Interim Funding	IHBG	55-IT-12345		Submitted		10/1/2021 - 9/30/2022	HYTDHE		
2020	Initial Plan (IHP)	IHBG	55-IT-12345	07/18/2019	Submitted - Pending Tribal Certification	Not In Compliance	10/1/2021 - 9/30/2022	HYTDHE		
2021	APR Update	IHBG	55-IT-12345		Submitted		10/1/2021 - 9/30/2022	HYTDHE		
2021	Initial Plan (IHP)	IHBG	55-IT-12345	07/20/2020	Submitted		10/1/2021 - 9/30/2022	HYTDHE		
2021	APR	IHBG	55-IT-12345	12/29/2021	Submitted		10/1/2021 - 9/30/2022	HYTDHE		

# XI. How to Update/Revise an APR

To update or revise an APR, your organization must have:

- Previously submitted an APR for the Fiscal Year that was accepted.
  - If the APR needs to be submitted, see [How to Complete an APR](#). When the APR is accepted, you can return to complete the APR submission process.
  - If the APR has been submitted but is not listed as being accepted, please contact your area ONAP office.

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **Submissions** tab to confirm you have a submitted APR with an ‘Accepted’ Decision.



2. When you have verified that your APR is in the submitted status, click the **New Submissions** tab.



On the *New Submissions* page, use the dropdown menus to update your APR:

- **Grant Program:** Select **IHBG**
- **Submission Type:** Select **Update Annual Performance Report**
- **Fiscal Year:** Select the fiscal year for this report
- **(1) Grant Number:** Select the grant number for this report

**New Submission - Select a submission you wish to complete**

\* Grant Program

\* Submission Type

\* Fiscal Year

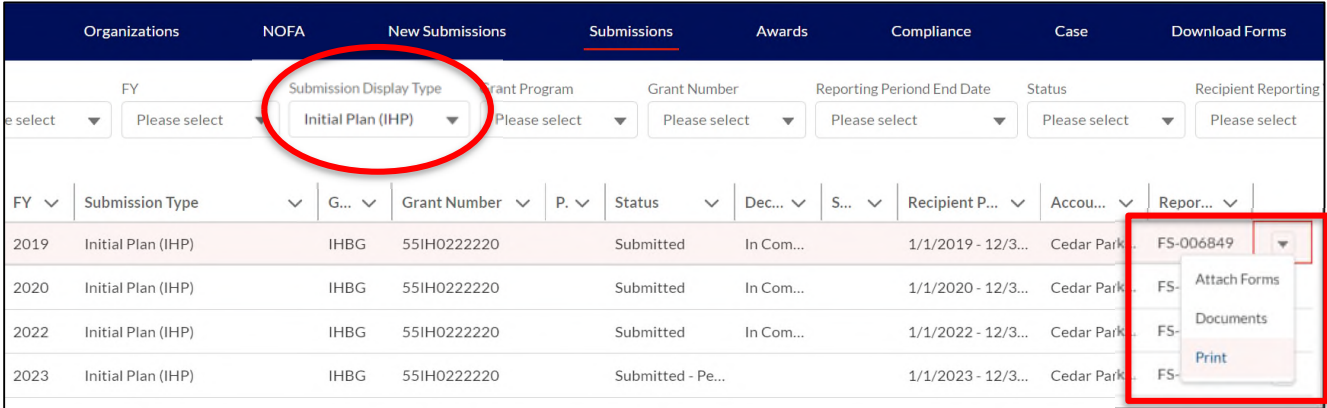
\* (1) Grant Number :

[Next Section](#)

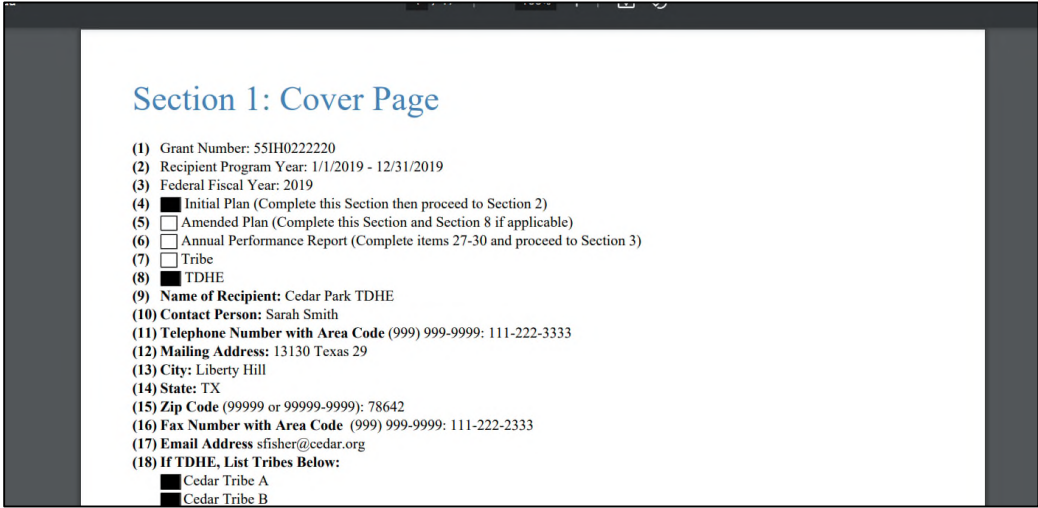
3. Click the **Next Section** button in the bottom righthand corner. The APR that you are amending will be copied in the system, and you will be able to make any necessary changes.
4. From this point, the instructions are the same as submitting the initial IHP. Please see [\*How to Complete an APR\*](#) and start with Step 5.

## XII. How to Print an IHP/APR

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click on either the **Submissions** tab.
2. Locate the IHP or APR you need to print. You can narrow the records that show up by using the submission display type dropdown search. Click the dropdown arrow at the end of the row and select **Print**.



3. Once the PDF is created, the IHP or APR will open in a new pop-up window. You can print and/or save the file.



### XIII. How to Complete an SF-425

If you have any questions about the SF-425 on anything besides how to enter your SF-425 in GEMS, please see PIH Notice 2022-15 at <https://www.hud.gov/sites/dfiles/PIH/documents/2022-15pihn.pdf>.

Unlike other reports you can submit in GEMS, you will see all the SF-425s that you will need to submit during the year. Be sure that you are completing the correct SF-425 by checking the reporting period and due date. If you have any questions, contact your area ONAP GEMS representative.

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click the **Home** tab.
2. Under *My Tasks*, locate the SF-425 you need to complete. You can narrow the tasks that show up by using any of the following filters. With each thing you select, fewer items should appear on the list. You can click **Reset Filters**, on the upper righthand side of the screen, to show everything again:
  - **FY:** Show all things submitted for a specific Fiscal Year
  - **Submission Display Type:** Show all things by document type. Look for SF-425s by selecting *SF425 Report* or *SF425 Report (IHBG Formula)*
  - **Grant Program:** Show all things for a specific grant type
  - **Grant Number:** Show all things for a specific grant
  - **Reporting Period End Date:** Show all things with a specific end date for the reporting period
3. When you locate the SF-425 that you want to submit, click the dropdown arrow at the end of the row and select **Edit** to open the *SF-425* page.

Version	FY	Submission Display Type	Grant Program	Grant Number	Reporting Period End Date	Due Date	Status	Recipient Reporting Year	
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH123456	03/31/2023	05/01/2023	Pending Submission	1/1/2023 - 12/31/2023	HYTDHE
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH123456	06/30/2023	07/31/2023	Pending Submission	1/1/2023 - 12/31/2023	HY
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH123456	09/30/2023	10/30/2023	Pending Submission	1/1/2023 - 12/31/2023	HY
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	12/31/2023	04/01/2024	Pending Submission	1/1/2023 - 12/31/2023	HY

4. Several of the fields will auto-populate with your organization’s information and will not be able to be edited. Your figures for the reporting period should be included in the following lines. All required fields are indicated with an \* in GEMS. GEMS will do the line math, but it is not completed in real time. The figures will update before you submit the report:
  - 5. Recipient Account # or Identifying #
  - 6c. Final Report
  - 7. Basis of Accounting
  - 10a. Cash Receipts Cumulative
  - 10b. Cash Disbursements Cumulative

- 10d. Total Federal Funds Authorized
- 10e. Federal Share of Expenditures
- 10f. Federal Share Unliquidated Obligation
- 10i. Total recipient share required
- 10j. Recipient share of expenditures
- 10l. Total Federal program income earned
- 10n. Program income – additional alternative
- 12a. Current Investment Balance (*available only on IHBG formula grants*)
- 12. Remarks: Enter any explanations
- 13a(i). Name of Authorized Official
- 13a(ii). Title of Authorized Official
- 13b. Signature of Authorized Official
- 13c. Telephone with Area Code
- 13. Email Address

Information	
Status	Grant
Pending Submission	55IH123456
Due Date	Version
5/1/2023	1
Required Submission	Review Decision
Required Submission-002818	
Fiscal Year	Submission Type
2023	SF425 Report (IHBG Formula Read-only)
1. Federal Agency ⓘ	ONAP Account
Alaska	HYTDHE
2. Federal Grant or Identifying Number ⓘ	5. Recipient Account # or Identifying # ⓘ
55IH123456	<input type="text"/>
3(a). Recipient Organization ⓘ	6a. Report Type ⓘ
HYTDHE	Quarterly
<input type="button" value="Cancel"/> <input type="button" value="Save"/>	

5. Click the **Save** button in the bottom righthand corner.
6. You can now review what you entered on the previous screen and add indirect expenses, investment information, notes, and attachments, if applicable. Depending on your computer, the sections to add indirect expenses, investment information, notes, and attachments will either be on the righthand side of the screen (as shown in the screenshot below) or at the bottom of the page.
  - If you need to change any of the information from the previous screen, you can click the **Edit** button at the top righthand corner or double click on the field that you need to edit. Be sure to click the **Save** button at the bottom of the screen when you are done.



**GEMS Required Submission**  
Required Submission-002821

**Information** New

Status Pending Submission	Grant <a href="#">55IH123456</a>
Due Date 4/1/2024	Version 1
Required Submission Required Submission-002821	Review Decision
Fiscal Year 2023	Submission Type SF425 Report (IHBG Formula)
1. Federal Agency Alaska	ONAP Account <a href="#">HYTDHE</a>
2. Federal Grant or Identifying Number	5. Recipient Account # or Identifying #

**Indirect Expenses (0)** New

**Investments (0)** New

**Notes & Attachments (0)** Upload Files

Upload Files  
Or drop files

7. If your organization uses indirect expenses, you need to add this information. If not, skip to Step 10. Click the **New** button in the *Indirect Expenses* box and add the necessary data. All the fields are required; they are:

- a. Type
- b. Rate
- c. Period From
- d. Base
- e. Amount Charged
- f. Federal Share

**New Indirect Expenses**

**Information**

Indirect Expenses ID

\* SF425 Report  
Required Submission-000184

\* a. Type i

\* b. Rate i

\* d. Base i

\* e. Amount Charged i

\* f. Federal Share i

Cancel Save & New Save

8. Click the **Save** button to return to the main page or click the **Save & New** button to add another indirect expense (repeat Steps 7 and 8). The expense will appear in the *Indirect Expenses* box and total on the form.

- If you need to edit an expense, click the dropdown arrow at the end of the row that you need to edit, and select **Edit** to reopen the *Indirect Expenses* page.
- If you need to delete an expense, click the dropdown arrow at the end of the row that you need to delete, and select **Delete**.

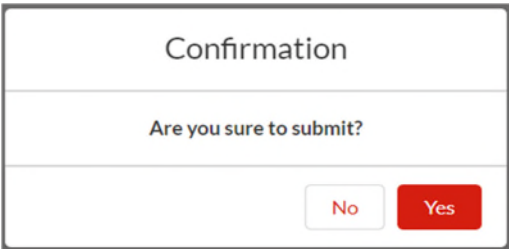
9. Repeat Steps 7 and 8 until you have entered all indirect expenses.
10. If your organization has investment authority and this is your IHBG formula grant's SF-425, you need to add this information. If not, skip to Step 13. Click the **New** button in the *Investments* box and add the necessary data. The following fields should be used when **new** funds are drawn down from eLOCCS and invested. The investment worksheet or other routine reporting methods you use to report interest, etc., should be added as an attachment:
- Draw Down Type
  - Amount Drawn Down
  - Date of Draw Down
  - Date Funds Drawn Down were Invested

The screenshot shows a web form titled "New Investment". The form is divided into two main columns. The left column, under the heading "Information", contains an "Investments ID" field. Below it are four required fields: "Draw Down Type", "Amount Drawn Down", "Date of Draw Down", and "Date Funds Drawn Down were Invested". Each of these four fields has a small information icon (i) to its right. The right column contains an "SF425 Report" dropdown menu, which is currently open and displays "Required Submission-000244" with a close button (X). At the bottom right of the form, there are three buttons: "Cancel", "Save & New", and "Save".

11. Click the **Save** button to return to the main page or click the **Save & New** button to add another investment (repeat Steps 10 and 11). The investment will appear in the *Investments* box and total on the form.
- If you need to edit an investment, click the dropdown arrow at the end of the row that you need to edit, and select **Edit** to reopen the *Investments* page.
  - If you need to delete an investment, click the dropdown arrow at the end of the row that you need to delete, and select **Delete**.
12. Repeat Steps 10 and 11 until you have entered all new investments.
13. If you need to add any notes and/or attachments, you will have the option to add them in the *Notes & Attachments* box. If not, skip to Step 15. You can find where the file is saved on your computer (either of the **Upload Files** button) or drag and drop the file from a location that you can see.
14. When the file uploads, click on the **Done** button to return to the SF-425. The attachment will appear in the *Notes & Attachments* box.

- Click the **View All** link in the box if you need to make a change. Each file will be listed, and you can do the following steps by clicking the dropdown arrow at the end of the row for each file. When you are done, Use the internet browser’s back button to return to the form.
  - Download
  - View File Details
  - Upload New Version
  - Edit File Details
  - Delete

15. Click the **Submit** button in the upper righthand corner. You will receive a pop up message to confirm that you want to submit the SF-425. Click **Yes** to submit the SF-425. When it has submitted, a green success banner will appear for a moment at the top of the screen.



16. You can check the status of your SF-425 from the **Submissions** tab.

Home   Organizations   NOFA   New Submissions <u>Submissions</u> Awards   Compliance   Case   Download Forms										
Version	FY	Submission Display Type	Grant Program	Grant Number	Reporting Period End Date	Status	Recipient Reporting Year			
Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select		
↑	FY	Submission Type	G...	Grant Number	Period End ...	Status	Decision	Submit Date	Recipient Program Year	
1	2022	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	12/31/2022	Submitted	Accepted	02/01/2023	1/1/2022 - 12/31/2022	
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	03/31/2023	Submitted	Accepted	02/01/2023	1/1/2023 - 12/31/2023	
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	06/30/2023	Submitted		02/01/2023	1/1/2023 - 12/31/2023	
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	09/30/2023	Submitted		02/01/2023	1/1/2023 - 12/31/2023	
1	2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	12/31/2023	Submitted		02/02/2023	1/1/2023 - 12/31/2023	
	2019	Initial Plan (IHP)	IHBG	55IH0222220		Submitted	In Compliance		1/1/2019 - 12/31/2019	

## **XIV. How to Update/Revise an SF-425**

Once an SF-425 is submitted, it cannot be updated or revised. To make any changes, you will need to contact your area ONAP office to have the SF-425 returned. They will let you know when changes can be made. Likewise, if your area ONAP office requests a change to your SF-425 and let you know when the changes can be made.

Then return to [How to Complete an SF-425](#) to resubmit your SF-425.

# XV. How to Print an SF-425

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click on either the **Home** tab or the **Submissions** tab.
2. Locate the SF-425 you need to print. You can narrow the tasks that show up by using any of the following filters. With each thing you select, fewer items should appear on the list. If using the **Home** tab, you can click **Reset Filters**, on the upper righthand side of the screen, to show everything again:
  - a. **FY**: Show all things submitted for a specific Fiscal Year
  - b. **Submission Display Type**: Show all things by document type. Look for SF-425s by selecting *SF425 Report* or *SF425 Report (IHBG Formula)*
  - c. **Grant Program**: Show all things for a specific grant type
  - d. **Grant Number**: Show all things for a specific grant
  - e. **Reporting Period End Date**: Show all things with a specific end date for the reporting period
3. When you locate the SF-425 that you want to print, click the dropdown arrow at the end of the row and select **Print**.

**My Tasks** [Reset Filters](#) [Create New Submission](#)

Version	FY	Submission Display Type	Grant Program	Grant Number	Reporting Period End Date	Due Date	Status	Recipient Reporting Year
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	06/30/2023	07/31/2023	Pending Submission	1/1/2023 - 12/31/2023
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	09/30/2023	10/30/2023	Not Started	1/1/2023 - 12/31/2023
1	2023	SF425 Report (IHBG Formula)	IHBG	55IH123456	12/31/2023	04/01/2024	Not Started	1/1/2023 - 12/31/2023

**Success!**  
Select the "View" menu, for this report, to access the generated SF425 PDF from the "Notes & Attachments" table.

Organizations
NOFA
New Submissions
Submissions
Awards
Compliance
Case

4. Because the file takes a moment to generate, the SF-425 will be available in the *Notes and Attachments* list on the SF-425 record. Locate the SF-425 that you want to print again and click the dropdown arrow at the end of the row and select **View**.

Organizations											NOFA	New Submissions	Submissions	Awards	Compliance	Case	Download Forms
FY		Submission Display Type		Grant Program		Grant Number		Reporting Period End Date		Status		Recipient Reporting Year					
Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select	Please select				
FY	Submission Type	G...	Grant Number	Period End...	Status	Decision	Submit Date	R	A	R...							
2022	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	12/31/2022	Submitted	Accepted	02/01/2023	1/1...	Ced...	0385...							
2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	03/31/2023	Submitted	Accepted	02/01/2023	1/1...	<a href="#">View</a>								
2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	06/30/2023	Submitted		02/01/2023	1/1...	<a href="#">Create New Version</a>								
2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	09/30/2023	Submitted		02/01/2023	1/1...	<a href="#">Print</a>								
2023	SF425 Report (IHBG Formula Read-only)	IHBG	55IH0222220	12/31/2023	Submitted		02/02/2023	1/1...	Ced...	0385...							

- When the screen refreshes, scroll to the *Notes and Attachments* section. Find and click on the PDF that you just created; it is likely the first link. If you do not see it, click **View All**.

6b. Period  
4

6c. Final Report i

7. Basis of Accounting i  
Cash

8a. Project/Grant Period From i  
1/1/2022

8b. Project/Grant Period To i  
12/31/2022

9. Report Period Start Date  
10/1/2022

9. Report Period End Date i  
12/31/2022

**Notes & Attachments (6+)** [Upload Files](#)

**GEMS\_SF425\_Report\_S...**  
May 10, 2023 • Attachm...

**GEMS\_Email\_Grantee\_S...**  
May 10, 2023 • Attachm...

**GEMS\_SF425\_Report\_S...**  
May 10, 2023 • Attachm...

**GEMS\_Email\_Grantee\_S...**  
May 10, 2023 • Attachm...

**GEMS\_SF425\_Report\_S...**  
Feb 28, 2023 • Attachme...

**GEMS\_Email\_Grantee\_S...**  
Feb 28, 2023 • Attachme...

[View All](#)

- When the screen refreshes, the PDF will open and you can print and/or save the file.

GEMS - U.S. Department of Housing and Urban Development (HUD)

**Grant Program : IHBG**  
**Fiscal Year : 2023**  
**Program Year : 55IH123456**  
**Name of Recipient : HYTDHE**  
**Report: SF425 Report (IHBG Formula)**

Grantee Information	
Federal Agency and Organizational Element to Which Report is Submitted	Alaska
Federal Grant or Other Identifying Number Assigned by Federal Agency	55IH123456
3(a). Recipient Organization	HYTDHE
3(b). Address	11760 Baltimore Avenue
3(c). City	Beltsville
3(d). State	MD
3(e). Zip Code	20705
4(a). UEI Number	

## XVI. How to View Your Organization's Contacts

- Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click on the **Organizations** tab. In the dropdown arrow on the left side, select *My Organizations*. If you are a TDHE, you will see the Tribe and your organization.

Account Name ↑	Mailing Street	Mailing City	Recipient Program ...	Account
1 Cedar Park TDHE	3450 East Whitestone Boulevard	Cedar Park	01/01 - 12/31	TDHE
2 Cedar Tribe A	4040 Austin Woods Drive	Austin	04/01 - 03/31	Tribe
3 Cedar Tribe B	2020 North Austin Avenue	Georgetown		Tribe

- Click on the organization name in the **Account Name** column to view the information about your organization and the users associated with it. Contact information is read-only; contact your area ONAP GEMS representative if any of the information is incorrect.

Contact Na...	Title	Email	Phone
<a href="#">Peter King</a>	Chief	<a href="mailto:pking@cedar...">pking@cedar...</a>	
<a href="#">Frank D Ma...</a>		<a href="mailto:mttest23333...">mttest23333...</a>	
<a href="#">Sarah Tester</a>	Chief	<a href="mailto:mmuwanguz...">mmuwanguz...</a>	512-111-11

## XVII. How to Submit and Watch a Support Case

Support for GEMS is provided by multiple ONAP staff. You may get a faster response by submitting a help ticket or support case instead of contacting one ONAP staff member directly.

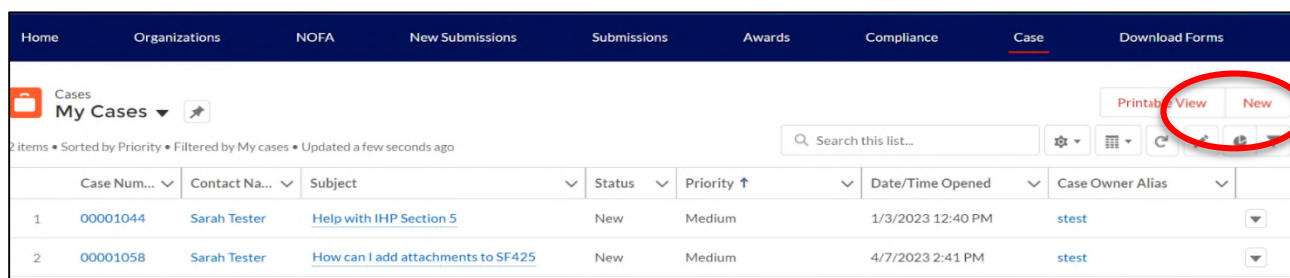
After logging in (Step 1), please continue to the subsections that apply.

1. Once logged-in to GEMS (see [How to Login to Your GEMS Account](#)), click on the **Case** tab.



### *Submit a New Support Case*

2. Click on the **New** button on the righthand side of the screen.



3. Enter information about your question and/or the issue that you are experiencing. Be sure the *Status* of your case is New. Click the **Save** button to submit your support case to your area ONAP GEMS representative, or click the **Save & New** button to submit and create another support case (repeat Step 2)

The image shows a form titled 'New Case: GEMS Grantee Support Case'. The form is divided into sections for 'Case Information'. Fields include Case Number, Account Name, Contact Name, Case Reason (with a dropdown menu showing 'IHP'), Grant Program (with 'Available' and 'Chosen' options), Status (dropdown menu showing 'New'), Priority (dropdown menu showing 'Medium'), and ONAP Region. At the bottom, there are three buttons: 'Cancel', 'Save & New', and 'Save'.



## See the Status of My Support Cases

2. Ensure that the list you are looking at is the *My Cases* list. If you do not see *My Cases* next to the briefcase in the orange square on the lefthand side of the screen, you can change your view by clicking on the dropdown and select *My Cases*. This will show all the support cases you have submitted in the system.
3. Click on the case number in the **Case Number** column to view the details, status, and/or response from your area ONAP staff.
  - a. An ONAP staff member may reach out to you outside of GEMS by email or phone to get additional information and/or troubleshoot the problem you are experiencing.

Home   Organizations   NOFA   New Submissions   Submissions   Awards   Compliance <b>Case</b>						
<div style="display: flex; align-items: center;"> <div> <p>Cases</p> <p><b>My Cases</b> ▼</p> </div> </div>						
2 items • Sorted by Priority • Filtered by My cases • Updated a few seconds ago						
	Case Number ▼	Contact Na... ▼	Subject ▼	Status ▼	Priority ↑	Date/Time Opened ▼
1	<b>00001044</b>	Sarah Tester	<a href="#">Help with IHP Section 5</a>	New	Medium	1/3/2023 12:40 PM
2	00001058	Sarah Tester	<a href="#">How can I add attachments to SF425</a>	New	Medium	4/7/2023 2:41 PM

**Case**  
**Help with IHP Section 5**

Priority: Medium   Status: New   Case Number: 00001044

<p>Case Number: 00001044</p> <p>Account Name: <a href="#">Cedar Park TDHE</a></p> <p>Contact Name: <a href="#">Sarah Tester</a></p> <p>Case Reason: IHP</p> <p>Grant Program:</p>	<p>Status: New</p> <p>Priority: Medium</p> <p>Contact Phone: 512-111-1111</p> <p>Contact Email: mmuwanguzi@yahoo.com</p> <p>ONAP Region: Alaska</p>
---	---

**Attachments (0)**

[Upload Files](#)

Or drop files

**Subject:** Help with IHP Section 5

**ONAP Grantee Comments:** 0

Comments from your local area ONAP representative will be displayed here.

**Description:**