



# 2024 Affordable Housing Program Workshop Cultivating Communities

# 2024 AHP Workshop Agenda

- 8:00-9:00 Morning registration and breakfast
- 9:00-11:30 Part 1: AHP General Fund
  - 2024 Updates
  - Application Preparation
  - Eligibility Requirements
  - Sponsor Capacity
  - Financial Feasibility
  - Scoring
  - Modifications
  - GrantConnect Portal
- 11:30-1:00 Break for lunch
- 1:00-4:00 Part 2: AHP Set Aside Programs and FORTIFIED
  - Homebuyer Equity Leverage Partnership (HELP)
  - FORTIFIED
  - Disaster Rebuilding Assistance (DRA)
  - Special Needs Assistance (SNAP)
  - Income calculation

Light refreshments will be provided. Lunch will not be served.

# Learning Objectives

- 2024 Updates
- Application Preparation
- Eligibility Requirements
- Sponsor Capacity
- Financial Feasibility
- Scoring
- Modifications
- GrantConnect Portal

# About FHLB Dallas

- **Who we are**

- FHLB Dallas is a member-owned cooperative.
- Members are banks, credit unions, savings and thrifts, CDFIs and insurance companies.

- **What we do**

- We provide members with wholesale lending, credit and related financial services.

- **Why we were created**

- To provide capital for mortgage funding during the Great Depression.

**FHLB Dallas' Five-State District**  
Members by State as of September 30, 2023



# Community Investment Products

Affordable  
Housing Program  
(AHP)

Community  
Advance  
Programs

Voluntary Programs

General  
Fund

Set Asides

HELP

SNAP

DRA

CIP

EDP

DRP

HAVEN

PGP

SBB

FORTIFIED

Heirs'  
Property

These highlighted programs require recipients to be at or below 80% AMI



Member driven.  
Community focused.

# AHP General Fund Overview

# 2023 Highlights

- Received **90** applications requesting a total in **\$53.4** million in AHP subsidies
- **\$28.4** million in AHP subsidies were awarded to **43** projects
- **43** rental projects approved for **2,677** units of housing
- Approval rate of **48%** percent



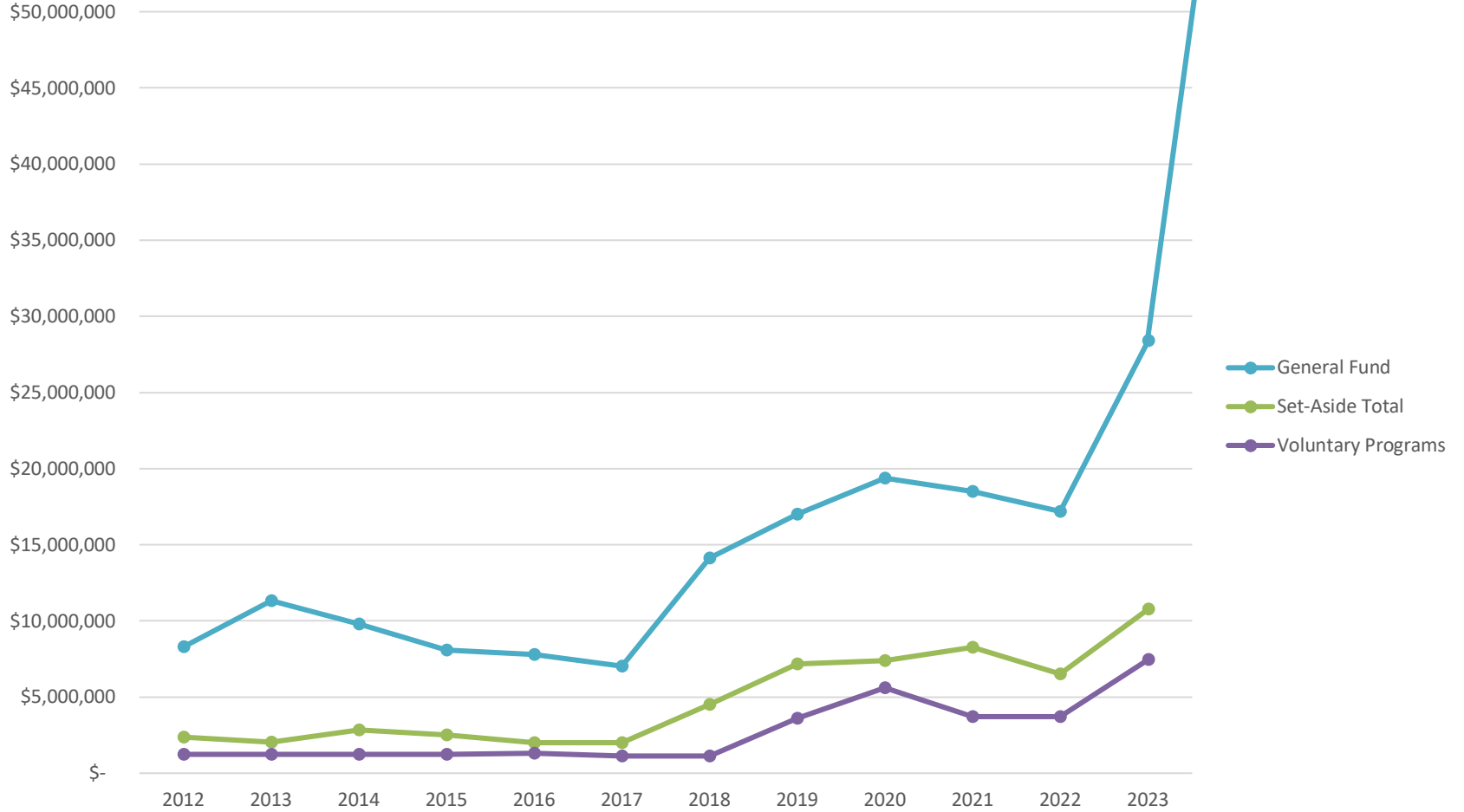
Housing First Community Coalition of San Antonio received \$750,000 to build 76 units of housing for VLI, homeless individuals. Towne Twin Village is a 17.3-acre site that was previously a defunct drive-in movie theater.

# 2023 AHP Subsidies by State





# CID Subsidy Summary



# Benefits of AHP to Members

- Reputational Benefits
- CRA/Community Investment Benefits
- New Business/Loan Opportunities
- Customer Relationship Benefits



# Member or Sponsor

A "Member" for an AHP application is an owner of FHLB Dallas that is willing to apply for AHP funds on behalf of a project owner or developer.

A "Sponsor" is the owner of a rental project or the overseer of an ownership project that will put together the application or coordinate the application and project's completion.

Although a "Member" might be said to "sponsor" an application by submitting it, be sure to understand these terms, because *a "Sponsor" and a "Member" play two different roles in an AHP application.*

***A sponsor cannot apply without a member***

# AHP Roles - Members

- Evaluate the sponsor and project concept
- Set deadline to receive online application to gain necessary approvals
- Review and approve applications before submitting to FHLB Dallas
- Review/approve compliance reports, disbursement requests and extensions
- Maintain project oversight
- Discuss expectations for program compliance with sponsors



Housing and Community Services, Inc. was awarded a \$750,000 AHP subsidy as part of the \$27.5 million Fox Run Apartments.

# AHP Roles - Sponsors

- Create a thorough AHP application with supporting documentation
- Understand AHP compliance requirements
- Promptly inform the member and FHLB Dallas of changes to the project
- Submit documents in a timely manner:
  - Conditional award requirements
  - Disbursement requests
  - Modifications and extensions
  - Semi-annual progress reports



Photos above from project located in Texarkana, Texas. The Housing Authority of Texarkana Texas (HATT) received a \$750K AHP subsidy for the preservation and rehabilitation of a 94 rental for very low-income seniors.

# 2024 AHP Key Points

## AHP Subsidy

- Maximum AHP subsidy is **\$2,000,000**
- Maximum AHP subsidy per AHP unit is **\$80,000**

## Application Period

- The funding round begins **April 2nd** and closes on **May 1st**

## Feasibility Thresholds

- Operating expenses per unit between \$2,500 and **\$6,200**
- Increase the Replacement Reserve limit for new construction to **\$400/unit** from \$300/unit
- Increase the limit for rehabilitation to **\$500/unit** from \$400/unit

# 2024 AHP Key Points

## Scoring Updates

- **Donated Property** - Add an exception for property owned and donated by a Housing Authority, City or County.
- **Community Stability** - Remove the language regarding “no less than a 1:1 exchange with the new project” for RAD projects.
- **Bank District Priority** - Reduce the points for Arkansas to **6** from 8
- **Subsidy Per Unit**
  - Rental projects: Increase the maximum threshold for subsidy per unit to **\$35,000** from \$15,000
  - Owner-occupied projects: Increase the maximum threshold for subsidy per unit to **\$15,000** from \$10,000

# 2024 AHP Key Points

## AHP GrantConnect

- Sponsor registration in the GrantConnect portal
- User affiliation for sponsors and consultants

## AHP Application Workbooks

- Available on the Bank's AHP webpage [here](#)

## Modifications

- Project will be held to application commitments
- Must attempt to cure/stay in compliance with application commitments

## Standardized Development Budget

- Applicants will use a template budget provided by FHLB Dallas



# What is Evaluated in the Application

## Scoring

- Criteria

## Eligibility

- Eligibility Criteria
- Use of Fund
- Need for Subsidy

## Feasibility

- Demand
- Financial Feasibility

## Capacity

- Sponsor Capacity
- Site Control and Zoning



A \$250,000 Affordable Housing Program (AHP) subsidy awarded to the Leona Tate Foundation for Change from Home Bank to convert a historical school building in New Orleans, Louisiana's, lower Ninth Ward into 25 affordable apartments for very low-income seniors and a center for anti-racism training

# Types of Eligible Housing

- First Time Homebuyer Programs
- Multifamily
- Single-Resident Occupancy (SRO)
- Manufactured Homes
- Micro Homes
- Owner-Occupied Rehabilitation
- Re-entry Housing
- Group Homes/Congregate living facilities
- Permanent Supportive/Transitional Housing
- Adaptive Reuse
- Owner-Occupied New Construction



*Photos above from "Community First Village Phase One", Austin, Texas. The project received a \$750,000 AHP Subsidy to construct 76 micro-homes to serve homeless individuals with a special need.*

# Project Eligibility

- At least 20% of the households must be at or below 50% of area median income - **Rental**
- Acquisition, construction and/or rehabilitation of affordable housing
- Demonstrate “Need for subsidy” along with developmental and operational feasibility – the gap between the project’s Sources and Uses of Funds
- **Some or all of the AHP subsidy must be likely to be drawn down by the project or used by the project to procure other funding within 12 months from the date of award approval**
- Sponsors must be qualified and have developed similar types of project’s in the past. If not, sponsors must have secured an experienced development team with affordable housing and compliance experience
- 15- Year Deed Restriction for rental projects and 5 Years for Owner-Occupied

Helpful  
Hint



Applications can be impacted if there are existing or previous AHP projects not in compliance

# Uses of Funds - Rental

## Eligible Costs

### Acquisition

### Hard Construction Costs

- New Construction
- Rehabilitation
- Infrastructure and Site Work

### Soft Costs

- Architect/Engineering Fees
- Appraisal/Phase 1
- Developer/Consultant Fees

## Ineligible Costs

- Contingency Funds
- Operational Funding/Expenses
- Administrative Funding
- Supportive Services
- Relocation Expenses
- Operating Reserves
- Replacement Reserves

# Demand - Rental

- Market study and/or demand data provides information on local housing conditions.
- Market study and/or demand data analyzes competition by evaluating other affordable rental developments.
- FHLB Dallas can conclude the proposed rents are affordable and achievable, considering location, design and intended resident population.
- FHLB Dallas is able to determine the project timeline provides adequate absorption/completion period for the proposed project.



# Owner-Occupied Overview

**Project Types:** Rehabilitation, down payment/closing cost assistance

## Requirements

Different Financial Feasibility, Market Demand and Sponsor Capacity Requirements

## Scoring

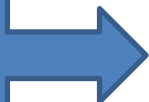
Slight Differences from a Rental Project

## Disbursement

Completed on a unit-by-unit basis with final documents required for each transaction



Helpful  
Hint



Contact the Community Investment department to discuss your owner-occupied project

## Eligible Project Costs

Acquisition

Hard Construction Costs – New Construction or Rehabilitation

Developer Fees

Inspection Fees

Homebuyer Counseling – Not Applicable for Rehab Projects

## Ineligible Project Costs

Contingency Funds

Operational Funding

Administrative Funding

Costs for Empowerment Services

The developer fee may not exceed 10% of the FHLB Subsidy amount. In addition, the combined cost of the third-party inspections and the developer fee paid to the sponsor may not exceed 15% of the total rehabilitation cost.

# Demand – Owner Occupied


## Owner-Occupied Rehabilitation

- Provide the number of eligible households that meet application requirements
- Provide wait lists of interested households
- List size should be 1.5 to 2 times the requested number of units
- Describe the relationship of the characteristics of the housing stock to the proposed homeownership rehabilitation program.

## Demand for AHP Subsidy requested

- How is the project determining the level of subsidy requested at a per unit level?
- How the need for rehabilitation proposed in this application was determined

### Example Questions



- How the project arrived at a budget of \$15,517 per home?
- How project determined that \$10,000 in AHP funds are needed per home?



# Demand – Owner Occupied

## New Construction/First-Time Homebuyer

- Local market analysis documents a need
- The number of homebuyers currently in counseling
- Number of mortgage ready households
- Number of recent applicants
- List size should be 1.5 to 2 times the requested unit amount
- Number of eligible households that meet application requirements

## Demand for Sales/Purchase Prices

- What are the price range of homes?
- Provide information on the availability of homes in the targeted locations and at the targeted price identified in the application
- How will the project make homes affordable moderate-income, “very low-income” and “low income” households based on an “average sales price”

# Sponsor Capacity

- FHLB Dallas will review each AHP application, and prior to each AHP subsidy disbursement, for any “covered misconduct” by the project sponsor
  - “Covered misconduct” is defined in the Federal Housing Finance Agency's (FHFA) Suspended Counterparty Program (SCP) regulation (12 CFR Part 1227) – more information can be found using one of the two links below
- FHFA Suspended Counterparty Program – [Learn more](#)
- FHFA Suspended Counterparties – [See list](#)

Helpful  
Hint



*A project must continue to demonstrate a need for the AHP subsidy at disbursement*

# Sponsor Capacity to Complete

Qualified and able to perform its responsibilities throughout the 15-year retention period  
– includes compliance and monitoring

Demonstrates ability, experience and financial capacity to complete project

## Supporting documentation will show

- ❖ Qualifications of key personnel are provided
- ❖ Resumes of project leadership and organization fact sheets
- ❖ Organizational charts if there are multiple entities
- ❖ Sponsor's experience with similar developments
- ❖ A development team was created with experience with similar projects
- ❖ Compliance in current AHP projects

Helpful  
Hint

Contact FHLB Dallas if this is your organization's first housing project!

# Sponsor Capacity to Complete

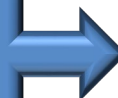
Below is an example of a good exhibit to include with supporting documents.  
Also include resumes, short bios, organizational charts, organizational resumes, etc.



STAFF EXPERIENCE						
Name	Title	Department	Total Years Employed by Organization	Total Years in Current Position	Total Years of Housing/Real Estate Experience	Total Years of Affordable Housing Experience

ORGANIZATION EXPERIENCE					
Project Name	Type	AHP Project (Y/N)	Total Cost	Year Complete	Number of Units

Helpful  
Hint



The charts above **SHOULD NOT** be the only exhibits provided for Sponsor Capacity

# Site Control and Zoning

**Sponsor or ownership entity must have site control at time of application**

Sponsor must provide one of the following items below:

A copy of the executed deed or long-term lease with a term of at least 15 years

An executed purchase option or long-term lease option; option must be effective after the AHP award date

An executed settlement statement or purchase contract that shows the purchase price

- Contract for Sale  
- Warranty Deed

**Site location must be properly zoned**

- June 30 deadline to submit proper zoning approval

*Site Control **is not** required at application for scattered-site home ownership projects*

# Rental Case Study- Village at the Beverly



**Hattiesburg, MS-** Gulf Coast Housing Partnership was awarded a \$450,000 AHP subsidy for the \$9.1M Village at the Beverly III

Village at the Beverly



# Rental Case Study – Cont'd

## Project Overview

### Unit mix:

- 30 units consisting of 6 one-bedroom, 14 two-bedroom, and 10 three-bedroom units.
- 2 two-story residential buildings on 2.30 acres.

### Targeting:

- 12 Low-Income and 24 Very Low-Income units
- 18 or 60% of units reserved for Special Needs

### Financing Sources:

- 9% LIHTCs
- HOME Funding
- Bank Loans



# Rental Feasibility

Criteria	Ranges/Limits	Rental Project
Targeting	At least 20% of the units targeted below 50% of AMI	18 or 60% of units targeted below 50%
Debt Service Ratio	1.15 - 1.45	1.28
Replacement Reserves	New construction: \$400/unit/year	\$350
	Rehabilitation: \$500/unit/year	NA
Operating Expenses	Between \$2,500 and \$6,200/unit/year excluding property taxes	\$5,362.30
Operating Reserves	Not to exceed 6 months of projected operating expenses, debt service payments, and replacement reserves	< 6 months

For zero-debt projects with no DSR. The Bank uses Cash Flow as percentage of Effective Gross Income with a limit of 15%.



# Rental Feasibility

Criteria	Ranges/Limits	Rental Project
Rents	Not to exceed 30% of AMI	Tenants paying ≤ 30%
General Requirements, Builder Overhead and Builder Profit	14% of total construction cost – <b>MUST BE LISTED on Invoices/AIA documents</b>	12.74%
Developers Fee	<b>New Construction or Rehab:</b> 15% of Total Development Cost net of Developers' Fee  <b>Acquisition/Rehabilitation:</b> 15% of Total Development Cost net of Developer's Fee and Acquisition Cost	10.61%
Hard Cost Contingency	Not to exceed 10% new/15% rehab	5.70%
Soft Construction Cost	Not to exceed 30% of TDC	26.44%
Vacancy Ratio	Not to exceed 7.5% (up to 10% for special needs)	7.00%

# Rental Feasibility – Project Costs

The Bank will review the development budget to determine reasonable projects costs. In general, the Qualified Allocation Plan (QAP) in effect for the project state is used as a benchmark.

## In District:

- AR, LA, MS, NM: Utilize the State Housing Finance Agencies' criteria from the QAP
- TX: Prior year average total development cost for new construction projects from the State Housing Finance Agency

## Out of District:

- If a QAP is not available for the project state, then the Bank will utilize the cost guidelines set forth in the implementation plan of the FHLB district which includes the project state

# Operating Cost Adjustment Factors (OCAFs) for 2024 – Planning for Proforma Expenses

The following table provides a detailed breakdown of the Operating Cost Adjustment Factors (OCAFs) for 2024, as released by the Department of Housing and Urban Development (HUD) for the Five-State District.

State	OCAF 2023 (%)	OCAF 2024 (%)	Percent Change
Arkansas	5.9	5.3	-10.2
Louisiana	5.9	5	-15.3
Mississippi	6.2	5.3	-14.5
New Mexico	6	4.9	-18.3
Texas	5.7	5.3	-7
United States	6.1	5.3	-13.1

Note: The data reflects the variable nature of operating costs across the United States and is crucial for effective fiscal planning in the affordable housing sector.

For more detailed information, please refer to the Federal Register [FR Doc No: 2023-26331].

## 2024 Construction Outlook – Planning Construction

- Construction contractors have a mixed outlook for 2024. Demand is projected to remain high, but persistent challenges, including labor shortages, higher interest rates and input costs, and supply chain concerns, still remain, [according to A Construction Market in Transition: The 2024 Construction Hiring and Business Outlook](#) from the Associated General Contractors of America (AGC) and [Sage](#).
- Despite the supply chain challenges, nearly two-thirds of firms cited rising interest rates or financing costs as their biggest concerns for 2024. Other top concerns for the year ahead include the insufficient supply of workers or subcontractors, the likelihood of an economic slowdown, rising direct labor costs, worker quality, and material costs.

# 2023 Rental Rehab Projects

- One independent bid for rehabilitation cost or a physical needs assessment
- A detailed scope of the rehabilitation with photos illustrating the project's condition
- **If AHP funds represent most of the funding source excluding any owner or charitable contributions than a pre- and post-inspection conducted by a qualified independent third party not related to the owner, sponsor, developer or contractor and approved by the member is required**

**Important**

Please prepare an itemized budget or ledger if you are submitting multiple bids/invoices

General Requirements/Builders Overhead/Builders Profit should be listed on bids/cost estimates

Helpful  
Hint


Any bid and/or pre-inspection you receive should be detailed enough so a contractor can price out the work required (i.e., good enough to obtain construction cost estimates).

# 2023 Rental Rehab Projects – Relocation Plan

For projects occupied at the time of application, a relocation plan is required if there is any displacement (temporary or permanent).

## The relocation plan may be either:

- Any plan approved by any federal, state or local government funder(s) involved in the financing of the project or
- A plan approved by FHLB Dallas that at a minimum meets the following:

Minimizes displacement; articulates a resident notification plan	 <b>Relocation budget is required and should appear in Total Project Budget</b>
Provides temporary displacement such as: moving within to a fully renovated unit (permanently or temporarily), storage of personal property onsite, or moving to a hotel for a set period of time	
Detailed accommodations, if any, are planned for those who elect permanent relocation	
Provides a payment for actual reasonable moving/related expenses or a fixed payment for moving expenses	



# Owner-Occupied Project



**Jackson, Mississippi**– Jackson Community Development Corporation was awarded a \$200,000 AHP grant by FHLB Dallas as part of a 20-unit, scattered site, down-payment/closing cost assistance project for very low-income families in Jackson, Mississippi.



# OOP Eligibility Requirements

- **Sponsor Capacity – Track Record and Staff Capacity**

- Assisted over 160 first-time homebuyers with home purchase
- Has previous AHP experience: 9 AHP grants
- Open a homebuyer counseling center
- Partnership with local contractors and building supplier

- **Evidence of Demand - Local**

- Average waiting list of 75 individuals over past 5 years
- Builds 10 to 15 homes per year
- Determined that demand exists for \$150,000 homes
- Explained how Mod, LI and VLI households could afford the homes

- **Site Control/Zoning**

- Site control is not required at application for projects involving scattered site ownership

- **Disbursement**

- Completed on a unit-by-unit basis with final documents required for each transaction



# Owner-Occupied Feasibility

Criteria	Ranges/Limits	Project
Targeting	Less than 80 percent of AMI	100 percent of homes targeted to households < 50 percent of AMI
Subsidy Pass-Through	Clearly demonstrated to homebuyer/homeowner	Loan Estimate and Closing Disclosure to be provided on a home-by-home basis with disbursement requests
Mortgage Term and Amortization Term	Not less than 5 years and 15 years respectively	Homebuyers are applying for 30-year fixed rate mortgages
Developer Fee	Not to exceed 10 percent of the FHLB subsidy amount	Project's fee was 10 percent
Cash Back	Cash back to homebuyer at closing, or as part of the rehab cost, is <b><u>NOT</u></b> allowed	Subsidy is based on need and will not result in cash back

# 2024 Owner-Occupied Rehab Project

## Required when requesting disbursement:

- **Inspections** by a third party selected by the member and unrelated to the sponsor, unless it is a government entity
- **Photos required:** The requested work should be supported by the pre-inspection and photos
- **Home Repair Estimate:** fully executed and signed by the homeowner and member:
  - Located in the 2024 Funding Manual
- Including any developer fee, the cost of required **pre-and post-inspections** may not exceed 15 percent of rehab cost



# Questions?



Member driven.  
Community focused.

# Competitive AHP Scoring

# 2024 AHP General Fund Scoring Overview

Scoring Criteria	Points
Donated property	5
Not-for-profit or government sponsorship	5
Targeting - Income groups	20
Underserved communities and populations	15
Creating economic opportunity	5
Community stability	15
FHLB Dallas District priority	35
<b>Total</b>	<b>100</b>

- 100-point scoring system based on **7** criteria
- Found in Attachment D of the FHLB Dallas [AHP Implementation Plan](#)

# Donated / Conveyed Property

- 1) Units or land donated or conveyed by the federal government instrumentality or unrelated related (at least 20% of units); or
- 2) Property conveyed significantly below market value, meaning it is transferred for 50% or less of fair market value, by an unrelated party

## Key Points:

- The property must be donated or conveyed by an entity not related to or affiliated with the member, project sponsor or project owner through ownership or control **with the exception of property owned and donated by a Housing Authority, City or County and meeting all other conditions of this criterion.**
- Long term leases of 15 years or more with a nominal annual rent payment - payment (**no more than \$10 annually**)
- Evidence of donation should be included with application (i.e., transfer deed, purchase agreement or letter of intent)

• Property is "donated" when it is given to a project for free, for a nominal amount or from the federal government



# Not-for-Profit/Government Sponsorship

**Project Sponsor** means a not-for-profit or for-profit organization or public entity



## 5 points – All Projects

- Housing finance agencies
- Housing authorities
- Not-for-profit entities
- Government agencies
- Native American Tribe



## Rental projects with a Developer Fee

**2 points** if the sponsor receives **< 25 percent** of Developer Fee

**5 points** if the sponsor receives **≥ 25 percent** of Developer Fee

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## Rental Projects

- The project sponsor is the owner of the rental project
- The project sponsor has an ownership interest or the ability to control the entity that is the project owner

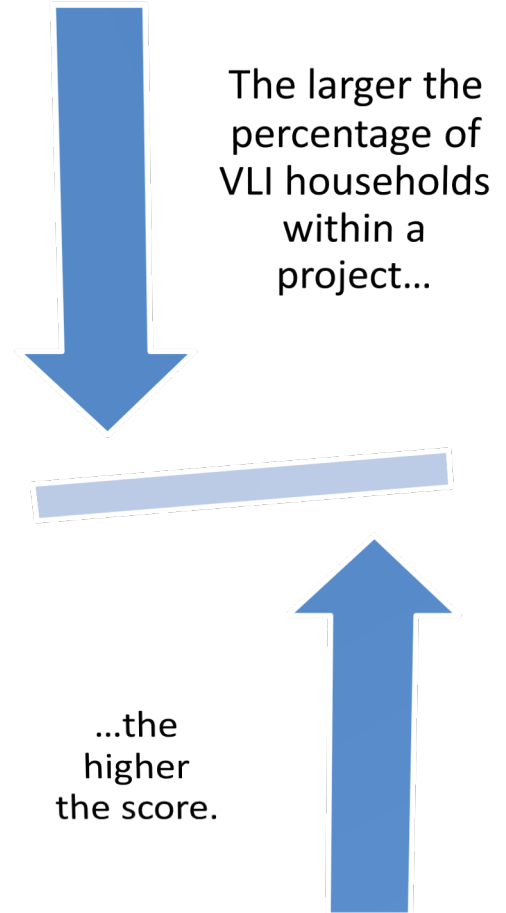


# Income Targeting

- The extent to which a project creates housing for very low- and low- or moderate-income households
- For purposes of this scoring criterion, FHLB Dallas will score rental projects and owner-occupied projects separately

## Rental Projects

- If at least **60%** of units are targeted to families with annual incomes  $\leq$  **50%** of AMI, the receives **20** points
- Include any manager's unit as part of the project's total number of units. Be sure to indicate as "**market-rate**" for above **80%** of AMI on the income targeting page of the online application



# Creating Economic Opportunity

Programs/services assisting residents in attaining life skills or better economic opportunities

## All Projects

- \* Employment
- \* After school or out-of-school services
- \* Mental and behavioral health services
- \* Onsite daycare services (child or adult)
- \* Workforce preparation and integration

## Owner-Occupied Only

- \* Homebuyer Counseling/**Education - Purchase/Construction**
- \* Homeowner Maintenance & Counseling/Education - **Rehabilitation Projects only**
- \* Sweat Equity - **New Construction Projects only**  
(minimum of 300 hours per home)

## Rental Only

- \* Financial literacy education
- \* Residential Services Coordinator

Scoring -  
Owner

1 service = 3 pts

2 service = 5 pts

Scoring -  
Rental

1 service = 4 pts

2 services = 5 pts

# Underserved Communities and Populations

## Homeless Housing – 5 pts

- Rental housing reserving at least 20% of the units for homeless
- Transitional housing with a minimum six-month stay

## Special Needs Housing – 5 pts

- Households with elderly
- Persons with disabilities
- Persons recovering from physical/alcohol/drug abuse
- Persons with HIV/AIDS
- Formerly incarcerated persons
- Victims of domestic/dating violence/sexual assault/
- Unaccompanied youth

## Rural Housing – 5 pts

USDA property eligibility can be found [here](#)

## Homeless/Special Needs points

- 20% to 29% = **1 pt.**
- 30% to 39% = **2 pts**
- 40% to 49% = **3 pts**
- 50% to 59% = **4 pts**
- > 60%= **5 pts**

## Rural Points

Variable points - number of units located in a rural area divided by total number of units

Helpful  
Hint

If you are requesting points for special needs and/or homeless, please ensure your supporting documents **show how the project will qualify** someone meeting FHLB Dallas' definition.

# Community Stability

## Adaptive Reuse -3pts

Converting an existing nonhousing structure into housing

## New Construction – 3pts

Project is 100% new construction

## Demo of Properties – 3pts

20% of the units are new construction in place of demolished structures

## Rehabilitating Properties – 3pts

50% of the units or square footage are vacant, abandoned or foreclosed and are being rehabilitated

## Community/Revitalization Area – 3pts

Located within geographic boundaries  
*Detailed definition next slide*

## Preservation - 6 pts

*Detailed definition next slide*

Projects can receive points for **3** of the top **5** categories for **3** points each (totaling **9**)  
Projects can receive an additional **6** points for preservation

**Maximums:** Without Preservation = **9 points**  
With Preservation = **15 points**

# Community Stability – Cont’d

<p><b>Community/Revitalization Points Project choose from two options</b></p>	<p>located within the geographic boundaries <u>defined by a <b>community revitalization plan</b></u> adopted by the municipality, county or parish in which the project is located;</p>
	<p>part of an <u>approved resolution</u> from the Governing Body of the municipality, county or parish expressly setting forth that the Governing Body supports the AHP application</p>
<p><b>Preservation – <u>within two years</u> after AHP application deadline</b></p> <p><u>May 1<sup>st</sup>, 2026</u></p>	<p>1) face <u>expiring</u> HUD Section 8 project-based rental assistance contracts, reach the end of a tax credit compliance period, or face expiring USDA-RD 515 rental assistance contracts</p> <p style="text-align: center;"><u>and</u></p> <p>2) the project <u>commits</u> to preserve all of the affordable rental units after the expiration of such contract or the end of the tax credit compliance period.</p>
<p><b>RAD</b></p>	<p>Public Housing Development participating in the Rental Assistance Demonstration (RAD) program where the <u>project is replacing</u> the functionally obsolete units with new units or substantially renovated units, as determined by the Bank in its sole discretion</p>

# Bank District Priority

First-time homebuyers- **5 pts**

- 50% - 2.5 pts

- 100% - 5 pts

Units located within District - **8 pts**

Number of rental units – **10 pts**

- 10-25 units – 3 pts

- 26-75 units – 7 pts

- >75 units – 10 pts

Climate resilient building standards- **7 pts**

Subsidy Per Targeted Unit – **5 pts**



*New Mexico Inter-Faith Housing received a \$650,00 AHP subsidy to construct Siler Yard, a 65-unit project that was New Mexico's first net-zero energy multi-family project.*

# Bank District Priority – Cont'd

A project is located within the states of Arkansas, Louisiana, Mississippi, New Mexico and Texas (the “Bank’s District”). This is a variable point score.

A maximum of eight (8) points is available.

## Points are awarded based on the following formulas:

Louisiana, Mississippi and Texas: Bank’s District units / total units \* 5

Arkansas : Bank’s District units / total units \* 6

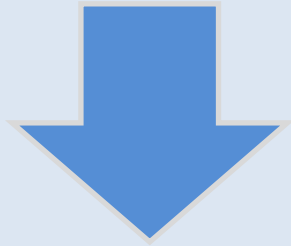
New Mexico: Bank’s District units / total units \* 8

# Bank District Priority – Cont'd

Subsidy Per Targeted Unit – **5 pts**

Rental

Owner-Occupied



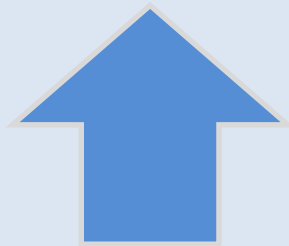
If the subsidy per unit is at **\$35,000** or below...



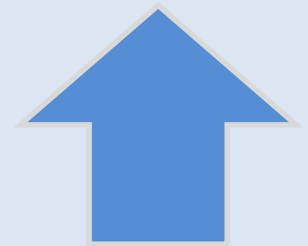
If the subsidy per unit is at **\$15,000** or below...



...the higher the score.



...the higher the score.



Every \$250 per unit increase over \$35,000 decreases score by 0.125 points




Every \$250 per unit increase over \$10,000 decreases score by 0.125 points



# Bank District Priority – Cont'd

## Climate Resilient & Green Housing

Scoring based on the type of resilient housing certification achieved. Emphasis on constructing units that will better withstand potential natural disasters as well as conserve energy and use sustainable materials as required by achieving one of the designations below:

- **Fortified: Multifamily, Gold**  **(7 Pts)**
  - **Fortified: Silver**
  - Enterprise Green Communities Criteria
  - Leadership in Energy and Environmental Design (LEED)
  - International Green Construction Code
  - ICC/ASHRAE - 700 National Green Building Standard (NGBS)
  - HERS Rating: 65 or less for Rehab; 55 or less for New Construction
  - **Fortified: Roof**
  - Energy Star Certified Home/Building  **(3 Pts)**
- 
- (5 Pts)**

# Climate Resilient & Green Housing

Certification Type	Certification	SFO	Rental	Documentation
<b>Enterprise Green Communities</b>	Enterprise	Yes	Yes	Certification @ Pre & Post-Build
<b>LEED-Leadership in Energy &amp; Environmental Design</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	Certification @ Post-Build
<b>ICC/ASHRAE- 700 NGBS</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	Prelim Inspection & Final Certification
<b>IGCC</b>	Local Jurisdictions	Yes	Yes	Inspections throughout process with final inspection
<b>ENERGY STAR</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	Signed & Stamped Certification Application
<b>HERS (Home Energy Rating System)</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	HERS Rating Certificate
<b>FORTIFIED Roof</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	Certification at Completion and certificate issued by IBHS
<b>FORTIFIED Silver</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	Certification at Completion and certificate issued by IBHS
<b>FORTIFIED Gold</b>	Independent 3 <sup>rd</sup> Party	Yes	Yes	Certification at Completion and certificate issued by IBHS

# Application Documentation of Energy Star Certified

## Appendix D

### ENERGY STAR® Homes Version 3.0 Qualification, Scope of Services:

**Includes all items in the Scope of Services for Appendix C HERS Energy Rating in addition to the following,**

- Step by Step certification instructions available [here](#)

1. Before project start, the Rater will verify that:
  - a. The Builder is a current ENERGY STAR Partner
  - b. The HVAC Contractor holds the required H-QUITO credentials.
2. ENERGY STAR Checklists
  - a. Rater will distribute ENERGY STAR Checklists and Program requirements to Builder and HVAC Contractor.
  - b. Rater will be responsible for completing the following Checklists, compliance with these checklists is the responsibility of the contractor:
    - i. Thermal Enclosure System Rater Checklist (TERC)
    - ii. HVAC System Quality Installation Rater Checklist
    - iii. Water Management System Builder Checklist items if requested by Client.
3. Rough Inspection
  - a. Field verification will include all ENERGY STAR Requirements on the:
    - i. Thermal Enclosure System Rater Checklist (TERC)
    - ii. HVAC System Quality Installation Rater Checklist
    - iii. Water Management System Builder Checklist items if requested by the Client.
4. Final Inspection and Testing as per RESNET Standards and ENERGY STAR requirements.
  - a. Pressure Balancing testing of bedrooms.
  - b. Local Exhaust air flow testing.
  - c. HVAC system static pressure.
  - d. Mechanical ventilation, air flow verification.
  - e. Field Verification of remaining ENERGY STAR Checklist items.
5. ENERGY STAR Qualification Documents
  - a. ENERGY STAR certificates and label will be included in Rating documents.
6. Additional services may include other inspection services or performance testing, depending on project requirements and Client preference.

# Application Documentation of NGBS Certification

- Step by Step certification instructions available [here](#)

## EXHIBIT A – SCOPE OF WORK

### WORK PHASE 1 (Develop NGBS Certification Plan)

**MAJOR TASKS.** While the following list is subject to modification based on the project's unique needs, TGHA will accomplish most (or all) of the following tasks.

- Register the project under NGBS ICC 700 with Home Innovation Research Labs.
- Identify NGBS practices that likely apply to the project and, with the architect's counsel, help the developer set a NGBS Certification Path that will achieve the BRONZE certifications at the lowest possible costs.
- Provide the developer with the actual NGBS Scoring Tool (showing a viable path for BRONZE) that will be used during construction to qualify the buildings for certification.
- Create a Scoring Tool extract that specifies what documentation is required for each applicable Practice along with who (builder, architect, civil, rater) is responsible for providing that documentation.

#### DELIVERABLES.

- Scoring Tool extract
- NGBS Scoring Tool

### WORK PHASE 2 (Implement NGBS Certification Plan)

**MAJOR TASKS.** While the following list is subject to modification based on the project's unique needs, TGHA will accomplish most (or all) of the following tasks.

- Rough Inspections. Schedule and conduct site inspections (pre-drywall).
- Final Inspections. Schedule and conduct site inspections (pre-occupancy).

#### DELIVERABLES.

- NGBS Rough Verification Report for the building (sent to NGBS)
- NGBS Final Verification Report for the building (sent to NGBS)

# Application Documentation of Fortified Certification

To Whom It May Concern:

Please be advised that the following items will be included in the design of the subject Development referenced above:

The project will obtain certification from IBHS for the following standards:

- a.  Fortified Roof
- b.  Fortified Gold
- c.  Fortified Silver

- Step by Step certification instructions available [here](#)

# Helpful Hints

# AHP Planning Steps for Sponsors

**Find FHLB Member**

Talk with FHLB Dallas

Funding sources project (including AHP subsidy)

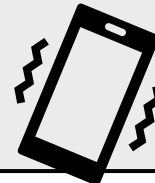
Development costs (valid cost estimates)

Organized supporting docs

Complete the AHP application

**Enter the correct email address of your member contact**

**Call member after submitting application**



# Improving Your Application

- ✓ Provide a detailed “Project Description” and “Financing Summary”
- ✓ Numbers, dates and addresses match between the application and supporting documents
- ✓ Help FHLB Dallas understand your required documents with a summary page describing the contents
- ✓ Review the Implementation Plan, application guides and application workbooks located at the [AHP webpage](#)
- ✓ Meet with FHLB Dallas staff to discuss your application, supporting documents, development budget, cost estimates, operating proformas and unique project features
- ✓ Have FHLB Dallas do a scoring and documentation review before submitting the application

## Note

Make sure your Member Contact is accessible when submitting the application





# Development Budget Template

<b>Development Budget</b>	<b>Total Cost</b>
Total Development Budget	\$ -
<b>Acquisition Costs</b>	<b>Total Cost</b>
Total Acquisition Costs	\$ -
<b>Construction/Rehabilitation Costs</b>	<b>Total Cost</b>
Total Costs Construction/Rehabilitation Costs	\$ -
<b>Architect/Engineering</b>	<b>Total Cost</b>
Total Architect/Engineering Fees	\$ -
<b>Predevelopment Expenses</b>	<b>Total Cost</b>
Total Predevelopment Expenses Costs	\$ -
<b>Interim Financing Costs</b>	<b>Total Cost</b>
Total Interim Financing Costs Financing	\$ -
<b>Other</b>	<b>Total Cost</b>
Total Other Costs	\$ -
<b>Developer Fees</b>	<b>Total Cost</b>
Total Developer Fee	\$ -
<b>Consultant Fees</b>	<b>Total Cost</b>
Total Consultant Fee	\$ -
<b>Reserves</b>	<b>Total Cost</b>
Total Project Reserves	\$ -

The cumulative total shows in the “non-editable” field called “Total Development Budget

Development Budget consists of 9 major cost classifications

Each of the 9 cost categories have their unique categories (next slide)

The “Total” for each category automatic sum based on inputs ”



**Required for every project, no exceptions**

Template is post on website

**Important**

***Failure to provide the FHLB Dallas development budget can impact project eligibility***

# - Expanded sub-categories



Acquisition Costs	Total Cost
Acquisition - Land	\$ -
Acquisition - Building	\$ -
Carrying Cost	\$ -
Legal Fees	\$ -
Closing Costs	\$ -
Title and Recording	\$ -
Other	\$ -
<b>Total Acquisition Costs</b>	<b>\$ -</b>

The Total Cost for each category are "non-editable"

Construction/Rehabilitation Costs	Total Cost
Site Work	\$ -
Grading/Parking/Signage	\$ -
Landscaping/Fencing	\$ -
Construction	\$ -
Rehabilitation	\$ -
Off-Site Infrastructure/Improvements	\$ -
Onsite Infrastructure/Improvements	\$ -
Demolition	\$ -
Builders Overhead	\$ -
Builders Profit	\$ -
General Requirements	\$ -
Contingency	\$ -
Asbestos/Lead Paint Abatement	\$ -
Bond Premium	\$ -
Other	\$ -
<b>Total Costs Construction/Rehabilitation Costs</b>	<b>\$ -</b>

Each item with the "cost category" are editable

Total Costs for each category automatically tabulates

Architect/Engineering	Total Cost
Architect - Design	\$ -
Architect - Supervision Fees	\$ -
Engineering	\$ -
Other	\$ -
<b>Total Architect/Engineering Fees</b>	<b>\$ -</b>

# Checklists for Errors with Development Budgets

## Before submitting my application, I verified the following:

- “Sources and Uses” = Total Development Budget
- The Acquisition costs on the Development Budget/Uses of Funds = supporting documentation
- Total construction/rehabilitation costs on the Uses of Funds = construction estimates and/or cost documentation provided
- General Requirements/Builders Overhead/Builders profit and contingencies are shown on the development budget/cost estimates
- All major costs including acquisition, construction, contingencies, financing, reserves, developer fee and other soft costs are listed***



Helpful  
Hint

*Conceptual design drawings/pre-inspections/Physical Needs Assessments should have sufficient detail to obtain construction cost estimates*

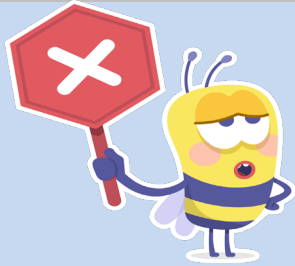
# Submitting Required Documents – Key Points

- All required documents must be uploaded prior to submitting the application to the member
- Documentation will be submitted through GrantConnect as individual PDFs
- Ask the question, “*Will FHLB Dallas understand the documents I am uploading?*”
- Please include a brief summary page
- FHLB Dallas should not have to reconcile conflicting information
- Sources of funds on application must match supporting documentation.*** If not, provide a clarification memo

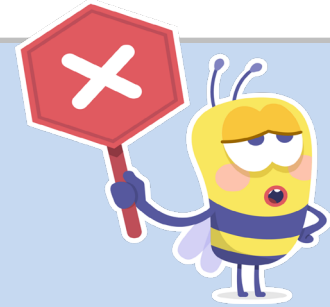
***Application Technical Assistance workbooks can be found below:***

[\*\*\*AHP Rental Housing Workbook\*\*\*](#)  
[\*\*\*AHP Owner Workbook\*\*\*](#)





## What is a modification?



- ✓ A request to change the terms of an approved application and signed agreement
- ✓ More than just changing a score as a project will have to demonstrate “good cause” and justification for the modification in writing
- ✓ “Good cause” includes documentation of steps taken by the project sponsor or owner to adhere to its application commitments. Also, explain why these efforts were unsuccessful or attempted – include the emails, correspondence, etc.
- ✓ Remediation of project noncompliance is NOT in and of itself good cause for a modification

# Modifications

- ❑ Are funding sources compatible, or do they have different requirements?
- ❑ Talk about your AHP commitments before you apply with other funders before it goes to underwriting

## AHP Commitment

### Target/Underserved

#### Income Targeting

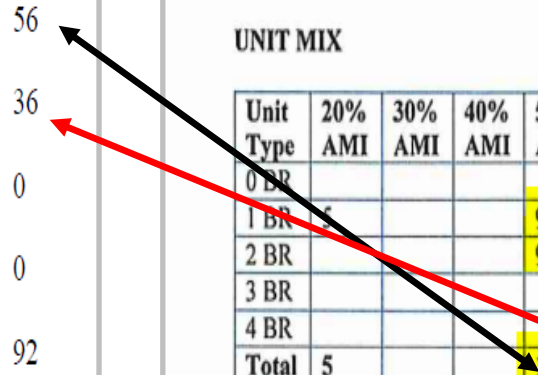
Very Low Income:	56
Low Income:	36
Moderate Income:	0
Above 80% of Median Income:	0
Total Number of Units in Project:	92

## Other Funding Commitment

Affordability and Market Rate Commitments: The Project will contain the number of market rate units, and the number of assisted and unassisted units, by type, for each of the following Area Median Income levels, as set forth below and as more fully described in the Regulatory Agreements:

### UNIT MIX

Unit Type	20% AMI	30% AMI	40% AMI	50% AMI	60% AMI	80% AMI	Market Rate	Total Units
0 BR								
1 BR				9	50			64
2 BR				9	19			28
3 BR								
4 BR								
<b>Total</b>	<b>5</b>			<b>18</b>	<b>69</b>			<b>92</b>



# 2024 AHP Timeline

## Application Process

- **April 2:** 2024 AHP application round opens
- **May 1:** 2024 AHP application round closes
- **May through September:** Community Investment department reviews applications

## Approval

- **Est. October:** FHLB Dallas Board of Directors approves applications
- Award letters are sent
- Member/Sponsor/FHLB Dallas AHP Tri-Party Agreement – send in by 12/31/2024

## Progress

- Annual progress reports (until project completion)
- Communicate with your assigned analyst
- AHP disbursement request submitted (need for subsidy exists)

## Monitoring

- **Before Nov 2028 (or Nov 2030 for Native):** Completion of construction or rehabilitation
- AHP initial monitoring
- Long-term monitoring

# Where do I Begin?

Utilize FHLB  
Dallas

Attend a training  
Call or email CID with questions  
Request a scoring review before you submit the application



Study FHLB  
Dallas  
Directions

Review the following documents:

- 2024 Implementation Plan
- Review the AHP Owner-Occupied/Rental Housing Books

[AHP Rental Housing Workbook](#)  
[AHP Owner Workbook](#)

Secure a  
Member

Find an FHLB Dallas member to support your project,  
and submit your application



# Resources

Additional Resources are located on the

[AHP webpage](#)

## Workbooks



AHP Owner-Occupied Housing  
Workbook



AHP Rental Housing Workbook



Detailed Operating Proforma for  
Sponsors



Development Budget

## Other Helpful Resources



AHP Implementation Plan



AHP Funding Manual for  
Owner-Occupied Projects



AHP Funding Manual For  
Rental Projects



2023 Median Incomes



Income Calculation  
Worksheet



Member driven.  
Community focused.

# Grant Connect

# GrantConnect

## What is GrantConnect?

The online portal where applications are completed and submitted for consideration for an AHP subsidy

## Key Points

- GrantConnect is the place where sponsors/consultants must have a User ID and password.
- It requires first-time users to register before being able to complete an application.
- Open from April 2-May 1.

## Registration Key Points

# Registration and Access

A community housing organization or a developer, known as a sponsor, is required to establish a relationship with an FHLB Dallas member institution to submit an AHP application. The sponsor usually completes the application, while the member institution submits the sponsor's application via an online process.



## GRANTCONNECT

AHP applications may be submitted during the annual round through the GrantConnect online portal on MyFHLB. To learn more about AHP at FHLB Dallas, please contact the Community Investment department at 800.362.2944.

» MyFHLB Login ←

## Register to Access the AHP Application through GrantConnect

An FHLB Dallas member must have a user ID and password to access the application through the GrantConnect portal.

Once you have registered, log on to the system with your user ID and password during the application round. You may complete, submit and track the status of your application. Please take a moment to review the Helpful Resources before starting your application.

Note: The member institution, sponsor and FHLB Dallas' Community Investment department can view an application at the same time while it is being completed online.

# Register through GrantConnect – Key Points

## Sponsors

- First time users will create a User ID/Password and affiliate with a new or existing organization
- If you created a User ID or used AHP Online in previous AHP rounds, do not create a new User ID. Call FHLB Dallas first

## Consultant

- Applications created by a consultant will need to be approved by the sponsor
- Non-Sponsor = Consultant
- All non-sponsors need to register as well

## Members

- Must have a user ID and password
- Cannot access application without PIN**

After registering, log in to the system with your user ID and password during the application round.

The initiator will create the application PIN. The application PIN will need to be shared with each party to complete, submit and track the status of the application.

The member, sponsor and FHLB Dallas' Community Investment department can view an application at the same time while it is being completed online.



# GrantConnect – Registration

## GrantConnect Tips

# GrantConnect - Tips

- ❑ GrantConnect location is <https://app.fhlb.com/grantconnect>
- ❑ GrantConnect has multifactor authentication, you will need either a direct-dial phone line phone (cannot be an extension), cell or an authenticator app on your phone.
- ❑ *If you wait to register, you might not be able to apply because registration approval can take up to 24 hours.*

**Call 1-800-362-2944 for help**

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Login ID

Password [Reset expired/forgotten password](#)

**Sign in**

[Don't have a GrantConnect account? Sign up now](#)

or

[FHLB Employee Sign In](#)



# GrantConnect - Previous Registrants

If you created a User ID in the past , do not create a new User ID. Call FHLB Dallas at 800-362-2944.

- 1) We will reset your password
- 2) You will receive an email
- 3) You will be given a two-hour window to complete the Multi-Factor Authentication setup
- 4) **If you do not complete the process within the two-hour window, you will need to call us again to reset your account.**

If you registered prior to 2021, please go through the self-registration process at <https://app.fhlb.com/grantconnect>

Helpful  
Hint

Chrome browser is suggested

DO NOT use Safari, Internet Explorer, or Edge – will generate errors in the registration process

# GrantConnect – Registration

GrantConnect Recap

# GrantConnect - Recap

## Consultant

- Applications created by a consultant will need to be approved by the sponsor
- Non-Sponsor = Consultant
- All non-sponsors need to register as well

## Sponsors

- First time users will create a User ID/Password and affiliate with a new or existing organization
- If you created a User ID or used AHP Online in previous AHP Rounds, do not create a new User ID call us first

## Members

Must have a user ID and password to access the application through the GrantConnect portal.

## Everyone

Once you have registered, log on to the system with your user ID and password during the application round. You may use the application PIN to complete, submit and track the status of your application.

# Ready to Apply?

## Next Steps

★ Have a member who supports application

Sponsor (or consultant) completes the application in GrantConnect and submits it to member

Go to <https://app.fhlb.com/grantconnect>

★ Call member contact after submitting application

Member reviews and approves the application in GrantConnect and submits it to FHLB Dallas

# Questions?

**For More Information**

**Contact Us!**

**By Phone:**

**800.362.2944**

**By Email:**

**ahp@fhlb.com**

Additional information is available online at [fhlp.com/ahp](https://www.fhlp.com/ahp)

# Community Investment Team



Please utilize the Community Investment department for assistance.

Contact Information	
AHP Department	800.362.2944
Email	ahp@fhlb.com

Staff Information			
Rental		Homeownership	
AHP Rental Projects Manager	Steven Matkovich	Sr. Affordable Housing Analyst	Rene Singleton
Sr. Affordable Housing Analyst	Edgar Burciaga	Sr. Affordable Housing Analyst	Diane Sell
Sr. Affordable Housing Analyst	Alex Fitzgerald	Affordable Housing Analyst	Asher Kripke

Additional information is available online at [fhlp.com/community](https://www.fhlp.com/community)



# 2024 Affordable Housing Program Workshop Set-Aside Programs



# Community Investment Products

Affordable Housing  
Program (AHP)

Community  
Advance  
Programs

Voluntary  
Programs

General  
Fund

Set Asides

HELP

SNAP

DRA

CIP

EDP

DRP

HAVEN

PGP

FORTIFIED

These highlighted programs require recipients to be at or below 80% AMI

# Agenda

1 Homebuyer Equity Leverage Partnership (HELP)

2 FORTIFIED Fund

3 Disaster Rebuilding Assistance (DRA)

4 Special Needs Assistance Program (SNAP)

5 Income Calculations

6 Application Submission Process



Member driven.  
Community focused.



## 2024 Homebuyer Equity Leverage Partnership (HELP)

Application Window Opened January 2, 2024

**Provides down payment & closing cost assistance for qualified, first-time homebuyers on a first-come, first-served basis**

**\$15.5 Million**  
Available for 2024

Each Homebuyer  
can receive up to  
**\$20,000**

**All U.S. property  
locations are eligible**

Each Member Can  
Receive up to  
**\$1,550,000** to pass  
on to borrowers

Up to  $\frac{1}{2}$  of the  
member cap  
**(\$775,000)** can be  
used out of district

# 2024 HELP Funding Manual

The 2024 HELP Funding Manual can be found on [fhlb.com](https://www.fhlb.com)

Home / Community Programs

## Homebuyer Equity Leverage Partnership

Our Community Programs

- Affordable Housing Program
- Community Advance Programs
- Disaster Programs
- FORTIFIED Fund
- Heirs' Property Program
- Homebuyer Equity Leverage Partnership**
- Housing Assistance for Veterans
- Partnership Grant Program
- Small Business Boost
- Special Needs Assistance Program
- Payoff Request
- Community Investment Highlights

**Available Funds as of January 2, 2024: \$15.5 million**

**Current Member Maximum: \$1,550,000**

FHLB Dallas has set aside **\$15.5 million** of its 2024 AIP funds for the Homebuyer Equity Leverage Partnership (HIELP) program. Through member institutions, HIELP assists income-qualified, first-time homebuyers with up to \$20,000 down payment assistance and closing costs.

**Please note that several changes have been made. Please refer to the 2024 Funding Manual.**

FHLB Dallas disburses HIELP funds to members on a first-come, first-served basis, one homebuyer at a time. Members may upload disbursement request submissions through the GrantConnect portal starting January 2, 2024. Access to the portal is for member financial institutions only. Contact Community Investment if you have questions or are unsure about your access.

HIELP funds are available until the funds are exhausted or until December 31, 2024, whichever occurs first.

### PARTICIPATING HELP MEMBERS

Participating members are located within the state of charter origin and are listed in alphabetical order. Please note that members have their own underwriting criteria, lending area or may have reached their FHLB Dallas program cap within a given year.

[View Participating Members](#)

### AHP AND HELP SUBSIDIES

Watch how Red River Bank has made the most of AIP and HIELP in the communities they serve.

Helpful Resources

- 2023 Median Incomes
- GrantConnect Webinar
- Income Calculation Tool
- HELP Funding Manual**
- AHP Implementation Plan

# HELP Program Funding Manual

## Table of Contents

This manual is designed to guide you through the HELP submission and funding process. It provides fillable templates of the required disbursement request forms and descriptive instructions for completing the forms.

Unless otherwise specified, each form must be accurately completed, signed where indicated and provided for each disbursement request. Failure to provide all required forms and supporting documentation will result in delayed processing of the disbursement request.

**Members will upload disbursement request submissions to our online portal, GrantConnect, accessible at MyFHLB.com.**

Questions & Answers.....	<u>3</u>
Request for Disbursement of Funds .....	<u>9</u>
Member Certification .....	<u>10</u>
Household Income Certification Form .....	<u>11</u>
Verification of Income .....	<u>12</u>
Income Documentation Worksheet .....	<u>13</u>
Certification of Zero Income (English and Spanish versions available).....	<u>14</u>
Long-term Retention Documentation.....	<u>16</u>
Loan Certification.....	<u>19</u>
Common Explanation Items.....	<u>20</u>
First-time Homebuyer Attestation (English and Spanish versions available).....	<u>21</u>

**Please note  
the Q&A  
section is a  
great  
resource**



Member driven.  
Community focused.



# HELP Program Member Certification

Member Name: \_\_\_\_\_ FHFA ID#: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ ("Homebuyer")

The undersigned member ("Member") hereby acknowledges that any Homebuyer Equity Leverage Partnership Program ("HELP") subsidy that is funded pursuant to the attached Request for Disbursement of Funds will be subject to the terms and conditions of (i) the HELP Enrollment Application submitted by Member to the Federal Home Loan Bank of Dallas (the "Bank"), (ii) the Homebuyer Equity Leverage Partnership Program Agreement executed by the Bank and Member, (iii) the Bank's Affordable Housing Program Implementation Plan, (iv) the Federal Home Loan Bank Act, (v) the regulations governing Homeownership Set-Aside Programs found at 12 C.F.R. part 1291, (vi) any other documents published by the Bank or the Federal Housing Finance Agency relating to HELP or Homeownership Set-Aside Programs and (vii) any amendments to any of the foregoing documents (the "HELP Documents").

Member hereby certifies that the Homebuyer currently requires the amount of HELP funds requested. Member acknowledges that the requested HELP funds may only be used for the purposes specified in the HELP Documents.

Member hereby certifies that the HELP funds received by Member will be provided to the Homebuyer and the Homebuyer is a low- or moderate-income household, meaning a household that at the time it was income qualified by Member for participation in the HELP Program had an income of 80% or less of the median income for the area. Member hereby certifies that the total household income for the Homebuyer, as shown on the attached Household Income Certification Form, has been verified by the Member. For any person listed on Part I (Household Composition) for whom no income is listed for such person in Part II (Gross Annual Income) of the attached Household Income Certification form, Member hereby certifies such person is either a full-time student, or has no income as evidenced by a completed Certification of Zero Income, or is under the age of 18 years.

Member hereby certifies that if Member is providing mortgage financing to the Homebuyer, the rate of interest, points, fees and any other charges will not exceed a reasonable market rate of interest, points, fees, and other charges for a loan of similar maturity, terms and risk.

Member hereby certifies that any HELP funds received by Member for homebuyer counseling costs have been incurred in connection with the counseling of the Homebuyer who will actually purchase a HELP-assisted Property, and the cost of the counseling has not been covered by another funding source, including the Member.

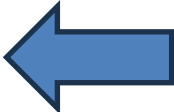
Member hereby certifies that the information set forth in this completed Homebuyer Equity Leverage Partnership Program (HELP) Funding Manual or provided herewith is, to the best of Member's knowledge after reasonable inquiry, accurate and complete in all respects. Member hereby acknowledges that providing false, misleading or incomplete information to the Bank may result in the denial of funding and/or the recapture of the HELP funds by the Bank.

Member's Signature: \_\_\_\_\_

Name: \_\_\_\_\_

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

Date: \_\_\_\_\_



**Member signer  
must have AHP  
or Advances  
Authorization**



Member driven.  
Community focused.



## HELP Program Request for Disbursement of Funds

Date: \_\_\_\_\_

Member: \_\_\_\_\_

FHFA ID#: \_\_\_\_\_

Member Contact: \_\_\_\_\_ Email: \_\_\_\_\_

Prepared By: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ HELP Amount Requested\*:\$ \_\_\_\_\_

**Ensure the amount requested matches the amount listed on the Loan Estimate or Closing Disclosure**

*Please allow 5-7 business days to review and process funding requests. Rush requests cannot be accommodated.*

Please provide the following items with this completed Request for Disbursement of Funds:

- Member Certification (executed by Member)
- Household Income Certification Form
- Documents to verify income (please refer to the Verification of Income form in this Funding Manual)
- Income Calculation Worksheet (if applicable)
- Long-Term Retention Documentation (please refer to the Long-term Retention Documentation form in this Funding Manual to determine what documents to submit)
- Loan Certification
- Closing Disclosure or other settlement statement (HELP funds should be listed separately from other sources).  
The Bank will accept a Loan Estimate with substantially the same information that would be included in the Closing Disclosure to disburse the HELP funds but will require the Closing Disclosure within 30 days of funding.
- First-time Homebuyer Attestation (English and Spanish versions available)
- Homebuyer Counseling Certificate
- Signed Homebuyer Equity Leverage Partnership Program Agreement (if not previously submitted)

\*Maximum HELP assistance: \$20,000 per household

Upload the disbursement request submission to GrantConnect via MyFHLB.com.

Email questions to ahp@fhlb.com or contact us by phone at 800.362.2944.

**Please Note:**  
**5-7 business day review times depend on completeness of request. We cannot guarantee the turnaround time if the request is missing required documentation/has significant deficiencies.**



## HELP Program Household Income Certification Form

The Bank will use the information in this form to verify the income eligibility of each household. Please refer to the Guidelines for Determining Income Eligibility included as Attachment G to the Bank's Affordable Housing Program Implementation Plan when completing this form.

Member Data	
Name of Member:	Member
FHFA ID#:	00000
Date:	1/1/2024

Part I. Household Composition				
Household Member #	Name	Relationship to Head of Household	Age	F/T/ Student (Y or N)
1	John Doe	HEAD	55	N
2	Jane Doe	Spouse	55	N
3	Jack Doe	Child	22	N
4	Jill Doe	Child	16	Y
5				
6				
7				
8				

Part II. Gross Annual Income (Use Annual Amounts)						
Household Member #	(A) Employment or Wages	(B) Social Security/ Pensions	(C) Income From Assets	(D) Payments in Lieu	(E) Alimony/ Child Support	(F) Other Income
1	22,000.00					
2	25,000.00					
3						
4		6,000.00				
5						
6						
7						
8						
Totals	\$ 47,000.00	\$ 6,000.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Add totals from (A) through (F) above					Total Income	\$ 53,000.00

- A) Employment or Wages: enter the full amount (before any payroll deductions) of all wages and salaries, overtime pay, commissions, fees, tips and bonuses and other compensation for personal services. This amount should include all regular pay, special pay and allowances of a member of the Armed Forces. This amount should include any income from operation of a business or profession.
- B) Social Security/Pensions: enter the full amount (before any medical, etc. deductions) of gross periodic payments received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts, including a lump sum payment for the delayed start of a periodic payment.
- C) Income from Assets: enter the full amount of interest, dividends and other net income of any kind from real or personal property.
- D) Payments in Lieu: enter the full amount of any payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, severance pay and welfare assistance payments.
- E) Alimony/Child Support: enter the full amount of any alimony and child support payments, if received regularly.
- F) Other Income: enter the full amount of any other income not covered by categories (A) - (E) above and not excluded from income under the Guidelines for Determining Income Eligibility included as Attachment G to the Bank's Affordable Housing Program Implementation Plan. Provide an explanation below:

All individuals who will be permanent residents of the household must be included on this form

There must be income documents supporting all adults (18+) listed who are not full-time students

The Household Income Certification Form is a required document for all FHLB Owner Occupied related programs



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## HELP Program Income Documentation Worksheet

(Please Show Calculation)

Date: \_\_\_\_\_ FHFA ID#: \_\_\_\_\_

Name of Member: \_\_\_\_\_

Provide verification of income from the applicable categories of documents shown below. An Income Calculation Tool is available on the Bank's website under the Helpful Resources on the HELP web page to assist in the calculation of income for wage earners.

Applicant's Name: \_\_\_\_\_

Please check the box for all that apply. The applicant is using:

- Pay stub(s) (please verify that name is printed on stub; must be dated within three months prior to the date the household was income qualified by the member to participate in HELP).
- A Verification of Employment Form (VOE) (must be signed and dated by Employer, include applicant's name for verification and must be dated within 3 months prior to the date the household was income qualified by the member to participate in HELP).
- Social Security Benefit Letters and/or Social Security Supplemental Income notices.
- A completed and signed U.S. Individual Income Tax Return or Year-End Wage and Tax Statements (i.e., Internal Revenue Service 1040 Forms and W-2 Forms); to use this, the household must be income qualified by the member within the first 3 months of the year, or the applicant must be self-employed or a seasonal worker.
- Financial statements verifying payments received from annuities, pensions, insurance policies, etc.
- Financial statements verifying stock portfolio earnings, dividends, and other interest income.
- Letters or case management forms from public assistance agencies.
- Approved HUD Section 8 certificates.
- State housing agency (e.g., Department of Community Affairs) verifications of income.
- Court orders verifying alimony awards and child support payments.
- Other Income Documentation (please describe):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**This form highlights the income documentation for each person living in the home**

**Submit the associated income documentation for us to cross-reference**

**The Income Documentation Worksheet is a required document for all FHLB Owner Occupied related programs**

## HELP Program Loan Certification

Name of Member: \_\_\_\_\_

FHFA ID#: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Name of institution originating the loan: \_\_\_\_\_

Under the HELP Program, the rate of interest, points, fees, and any other charges for all loans made to homebuyers should not exceed a market rate of interest, points, fees, and other charges for loans of similar maturity, terms and risk. If there is more than one loan, please complete a separate Loan Certification for each loan. **The organization originating a loan to the applicant must complete and execute this form.**

Is the member originating the first mortgage?  Yes  No

Is the loan a Fixed Rate product?  Yes  No

Is the home being purchased a manufactured home?  Yes  No

Is the home being purchased a single family home (1 to 4 unit dwelling)?  Yes  No

Is there a second mortgage on the home that has a monthly payment in addition to the first mortgage payment?  Yes  No

**If yes, please list the APR of the second mortgage: \_\_\_\_\_ term: \_\_\_\_\_ and monthly payment: \_\_\_\_\_**

The homebuyer has been counseled to maintain documentation of expenditures associated with capital improvements of the property. Providing evidence of the improvements could reduce the amount of subsidy owed in case the property is sold or refinanced during the five-year retention period: \_\_\_\_\_

**Lender Initial**

By signing below, the lender certifies to the following:

- 1) The First Mortgage does not defer the repayment of principal or interest.
- 2) The Financing Package does not include interest only or negative amortization loans (excluding property utilized reverse mortgage.)
- 3) The Mortgage term is not less than 5 years, and the Amortization term is not less than 15 years.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

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

Date: \_\_\_\_\_

**This form should be filled out by a representative from the institution originating the first mortgage (member institution, Habitat for Humanity, etc.)**

**Please read each line prior to checking the appropriate box and ensure the lender initials are filled out.**

**Check "Yes" and fill out the applicable information related to a second mortgage only if the second mortgage has a monthly payment in addition to the first mortgage payment.**

# 2024 DEED RESTRICTIONS (Homebuyer Equity Leverage Partnership Program)



Member FHFA ID Number \_\_\_\_\_

THE STATE OF \_\_\_\_\_ {Insert STATE}

COUNTY/PARISH OF \_\_\_\_\_ {Insert COUNTY/PARISH}

The undersigned, \_\_\_\_\_, ("Owner"), is the owner of certain real property and improvements located at \_\_\_\_\_ {Insert PROPERTY ADDRESS}, in \_\_\_\_\_ {Insert CITY} \_\_\_\_\_ {Insert NAME OF COUNTY OR PARISH}, \_\_\_\_\_ {Insert STATE}, and more particularly described on Exhibit A attached hereto and incorporated herein for all purposes (the "Property"). For value received, the adequacy and sufficiency of which are hereby acknowledged, Owner does hereby impress the Property with the following deed restrictions:

- 1) For purposes of these restrictions, the following terms have the meaning indicated:  
"Bank" means the Federal Home Loan Bank of Dallas  
"Direct Subsidy" means the amount funded by the Bank for the benefit of Owner, for the purpose of assisting Owner in the purchase, construction, or purchase in conjunction with rehabilitation of the Property, which Direct Subsidy shall not exceed \$ \_\_\_\_\_ {Insert AMOUNT OF DIRECT SUBSIDY}.  
"HELP" means the Homebuyer Equity Leverage Partnership Program of the Bank.  
"Low- or Moderate-Income Household" means a household that has an income of 80% or less of the median income for the area, with the income limit adjusted for household size in accordance with the methodology of the applicable median income standard selected from those enumerated in the definition of "median income for the area," as defined at 12 CFR 1291.1, unless such median income standard has no household size adjustment methodology. ←  
"Retention Period" means a period of five (5) years beginning on \_\_\_\_\_ {Insert the Disbursement Date from the final Closing Disclosure.}
- 2) The Bank's Community Investment Department is to be given notice of any sale, transfer, assignment of title or deed, or refinancing of the Property by the household occurring prior to the end of the Retention Period.
- 3) In the event of a sale, transfer, or assignment of title or deed during the retention period, the selling Owner shall repay to the Bank an amount equal to the lesser of: (i) a pro rata share of the direct subsidy, reduced by 1/60 for every month the seller owned the Property, or (ii), any net proceeds realized upon the sale, transfer, or assignment of title or deed of the Property, minus the HELP-assisted household's investment, unless the purchaser, transferee, or assignee is a low- or moderate-income household, or the amount subject to repayment is \$2,500 or less.
- 4) In the event of a refinancing during the retention period, the household shall repay to the Bank an amount equal to the lesser of: (i) a pro rata share of the direct subsidy, reduced by 1/60 for every month the occupying household has owned the Property, or (ii) any net proceeds realized upon the refinancing minus the HELP-assisted household's investment, unless the Property continues to be subject to a deed restriction or other legally enforceable retention agreement or mechanism described in this paragraph; or the amount subject to repayment is \$2,500 or less.
- 5) This instrument and these deed restrictions are subordinate to any valid outstanding lien against the Property currently of record. Foreclosure of such prior recorded lien, deed-in-lieu of foreclosure of such prior recorded lien, assignment of such prior recorded lien of a Federal Housing Administration first mortgage to the Secretary of Housing and Urban Development, or death of the HELP-assisted homeowner shall extinguish this instrument and these deed restrictions; however, the Bank's Community Investment Department is to be given notice of any foreclosure of the Property that occurs during the Retention Period.

**A draft of this document must be submitted with the application**

**Do not record the document prior to receiving the grant**

**Fill out the document completely except for the Retention Period start date. This date should be filled in at closing with the "Disbursement Date" as indicated on the Final CD.**

**Remember to fill out page 2 including Exhibit A: Property legal description**

# Draft Closing Disclosure/Loan Estimate

## Loan Estimate

<b>J. TOTAL CLOSING COSTS</b>	<b>\$5,172</b>
D + I	\$5,522
Lender Credits	-\$350

### Calculating Cash to Close

Total Closing Costs (J)	\$5,172
Closing Costs Financed (Paid from your Loan Amount)	\$0
Down Payment/Funds from Borrower	\$5,500
Deposit	\$0
Funds for Borrower	\$0
Seller Credits	\$0
Adjustments and Other Credits - FHLB HELP Grant	-\$10,000
<b>Estimated Cash to Close</b>	<b>\$672</b>

The FHLB HELP Grant and amount must be clearly labeled

Include all other grants and loans (terms of loans must be included on Loan Certification)

Homebuyer contribution must be at least \$500

## Closing Disclosure

<b>L. Paid Already by or on Behalf of Borrower at Closing</b>	<b>\$107,925.99</b>
01 Deposit	
02 Loan Amount	\$97,700
03 Existing Loan(s) Assumed or Taken Subject to	
04	
05 Seller Credit	
<b>Other Credits</b>	
06	
07	
<b>Adjustments</b>	
08 FHLB HELP Grant	\$10,000
09	
10	
11	
<b>Adjustments for Items Unpaid by Seller</b>	
12 City/Town Taxes to	
13 County Taxes 01/01/23 to 08/31/23	\$225.99
14 Assessments to	
15	
16	
17	
<b>CALCULATION</b>	
Total Due from Borrower at Closing (K)	\$108,597.80
Total Paid Already by or on Behalf of Borrower at Closing (L)	\$107,925.99
<b>Cash to Close <input checked="" type="checkbox"/> From <input type="checkbox"/> To Borrower</b>	<b>\$671.81</b>

Homebuyer cannot receive cashback at closing

## HELP Program Common Explanation Items

Please use the spaces below to provide explanations regarding the HELP request, if applicable. This form should be filled out by the institution originating the first mortgage. If none of the items apply, this page can be left blank.

If the housing cost ratio exceeds 45% (monthly income/monthly mortgage payment), please provide an explanation in the box below:

**If any of these criteria are met, we will need an explanation provided with the request.**

If the proposed mortgage loan interest rate on the first mortgage exceeds 2% of the Primary Mortgage Market Survey, as posted by Freddie Mac, please provide an explanation in the box below:

**Primary Mortgage Market Survey can be found at [www.freddiemac.com/pmms](http://www.freddiemac.com/pmms)**

If the Cash to Close on the Loan Estimate or Closing Disclosure reflects an amount greater than \$15,000 coming from the homebuyer, please provide an explanation in the box below:

## HELP Program Attestation for Eligibility as a First-Time Homebuyer

The following Attestation should be executed and signed **by all applicants that will be listed on the Closing Disclosure.**

The following criteria qualify the applicant(s) as First-Time Homebuyer(s) (**please check each criterion that applies**):

- 1) Applicant(s) have NOT owned a home during the three-year period immediately prior to purchase.
- 2) Applicant is a displaced homemaker, meaning an individual who is an adult and:
  - Has not worked full-time, full-year in the labor force for a number of years but has, during such years, worked primarily without remuneration to care for the home and family and
  - Is not employed or is underemployed and experiencing difficulty obtaining or upgrading employment.
- 3) Applicant is a single parent, meaning an individual who:
  - Is unmarried or legally separated from a spouse and
  - Has one or more minor children for whom the individual has custody or joint custody or is pregnant (at point applicant occupies the property).
- 4) Applicant(s) own or owned, as a principal residence during the three-year period immediately prior to purchase, a dwelling unit whose structure is not in compliance with State, local or model building codes, or other applicable codes, and cannot be brought into compliance with such codes for less than the cost of constructing or purchasing a permanent structure.
- 5) Applicant(s) own or owned, as a principal residence during the three-year period immediately prior to purchase, a dwelling unit whose structure is NOT permanently affixed to a permanent foundation in accordance with local or other applicable regulations.
- 6) Applicant(s) own or owned, as a principal residence during the three-year period immediately prior to purchase, a dwelling unit that was substantially destroyed due to a natural disaster or other event of catastrophic loss.

Applicant(s) will use the property as their principal residence.

Applicant(s) understands that any willful misstatement of material fact will be grounds for disqualification.

**This attestation must be signed by the Applicant(s).**

Applicant(s) Signature(s): \_\_\_\_\_

Applicant(s) Name(s): \_\_\_\_\_

Date: \_\_\_\_\_

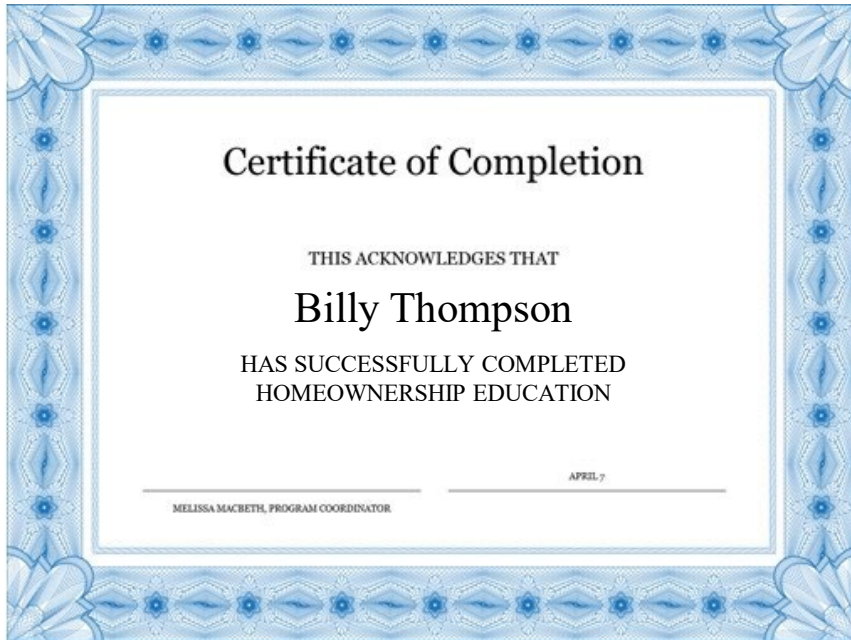
**Please ensure at least one of the criteria is checked/not all criteria are checked, and the form is signed and dated.**

**All applicants who are listed on the Closing Disclosure must meet at least one of the criteria and sign this document.**

**Spanish version also available. You can submit the version the borrower is most comfortable with.**

# Counseling Certificate

**Provide a copy of a homeowner counseling completion certificate from an industry-accepted curriculum provider. FHLB does not have a preferred counseling program, please reference HUD's approved listing if needing a guide.**



- ❖ Up to \$500 of HELP funds may be used for counseling costs
- ❖ Members can reimburse nonprofits who are providing the counseling
- ❖ Should be listed on the Closing Disclosure



## HELP Final Documents

We require two documents to be submitted after the disbursement of funds and closing of the home

### Signed Final Closing Disclosure:

**Due within 30 days** of the disbursement of HELP funds to the member's DDA

The HELP Grant and amount must be clearly labeled

**No cash back** to the borrower(s)

Homebuyer contribution must be **at least \$500** (cash to close or as a deposit)

Must include Disbursement Date of the loan

### Recorded Deed Restriction:

**Due within 60 days** of the disbursement of HELP funds to the member's DDA

The deed restriction must be **entirely filled out**

The deed restriction must be recorded with the county officials where the property is located

**Evidence of recording** must be included on the submitted document

**Ensure the retention start date matches the Final CD's disbursement date**

**Any errors included on the recorded document will require correction/additional cost to be incurred by the member or responsible party.**

# Questions?



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# FORTIFIED Fund Grant Programs

# FHLB Dallas FORTIFIED Fund



The Bank provides grant funds for income qualified homeowners to replace an existing roof or upgrade the roof on a new construction home to a FORTIFIED Roof.

**Target: Home Ownership** projects targeting low to moderate and middle-income homeowners and homebuyers up to **120% Area Median Income (AMI)**

**2024 Commitment: \$4,000,000**

Funding is available first-come, first served

The Federal Home Loan Bank of Dallas's FORTIFIED Roof Grant and FORTIFIED Construction Grant programs (FORTIFIED Fund Grant programs) are solely products/programs of the Federal Home Loan Bank of Dallas. The use of the Insurance Institute for Business & Home Safety's (IBHS) FORTIFIED Roof™ and FORTIFIED™ intellectual property in connection with the FORTIFIED Fund Grant programs does not imply any affiliation or guarantee on the part of the Insurance Institute for Business & Home Safety.

# FHLB Dallas FORTIFIED Fund Grant Programs



## **FORTIFIED Roof Grant**

**Up to \$15,000** to replace an existing roof with a FORTIFIED Roof

## **FORTIFIED Construction Grant**

**Up to \$7,500** to build a FORTIFIED Roof on a newly constructed home

–Homebuyers must be identified for income qualification

# FORTIFIED Fund Grant Programs – Intermediaries

The FORTIFIED Fund Grant programs allow for the involvement of an intermediary organization working in conjunction with an FHLB Dallas member.

**Intermediary Cap:** \$750,000 in total requests per year

## Intermediary Fees

- Pays for qualifying the homeowner and managing the process with the contractor & evaluator
- Not allowed for new construction
- Only allowed for roof replacements on existing homes
  - The intermediary fee may not exceed 10% of the roof cost paid for by the FORTIFIED Roof grant.
  - If the intermediary is also the qualified evaluator, then the combined fees cannot exceed \$1,500.

# FORTIFIED Fund Grant Programs – Evaluators

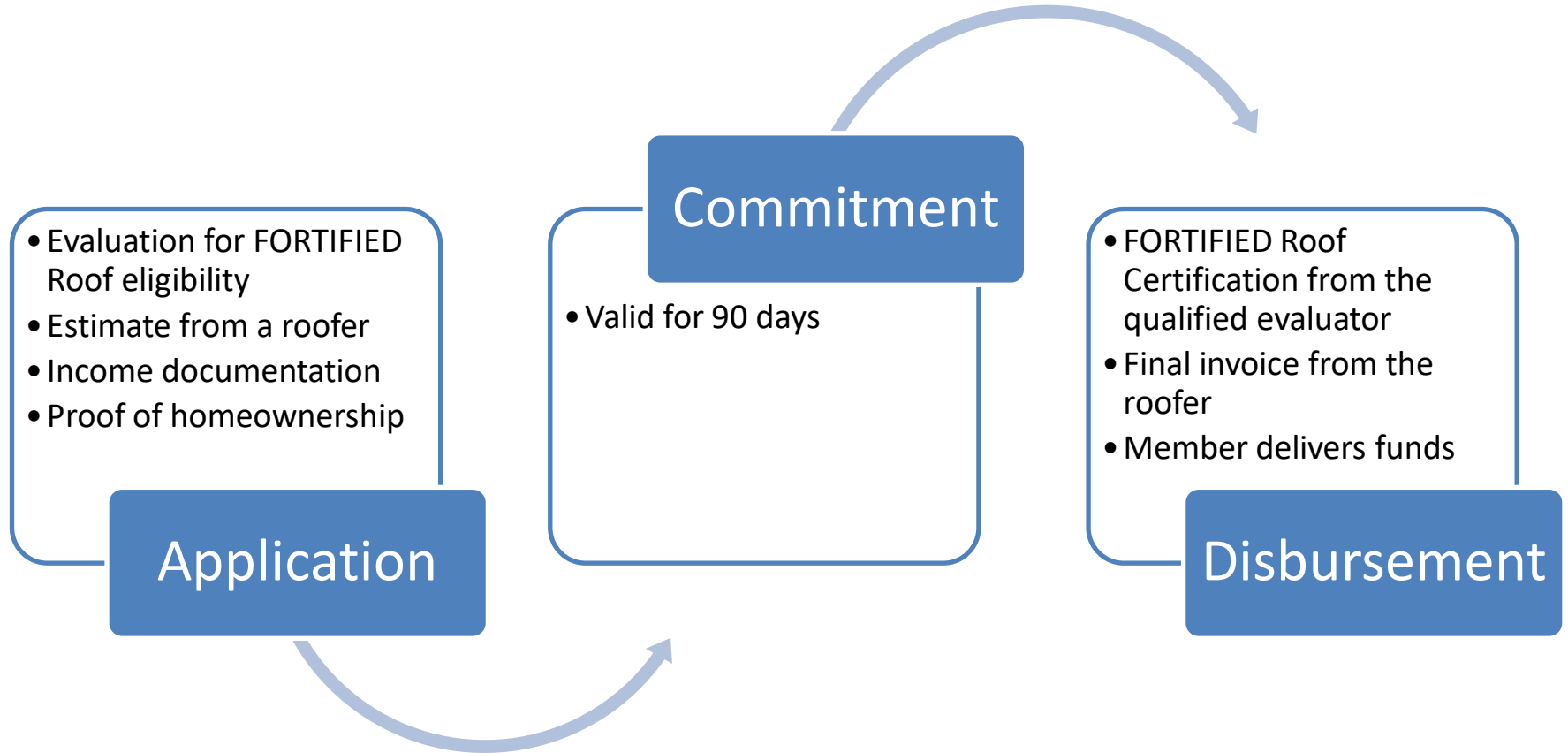
FORTIFIED Evaluators are trained and certified professionals that submit required documentation to IBHS to obtain a FORTIFIED designation.

## Evaluator/Inspection Fees

- Fees vary based on the home's size, the scope of work, and other factors like travel costs
- A portion of [the grant may be used to pay for these fees](#)
  - Allowed for existing homes and new construction

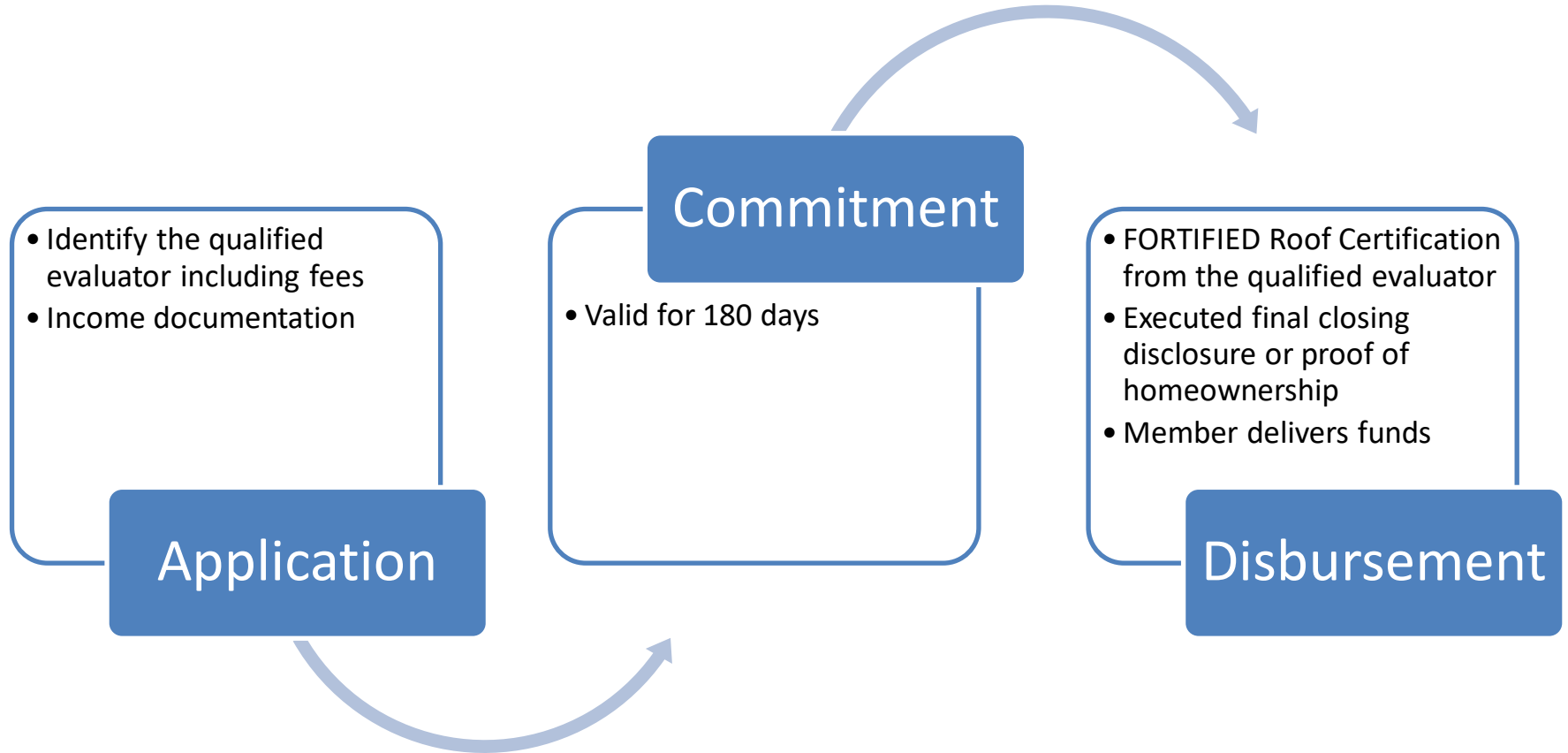
Directory available at <https://ibhs.my.site.com/s/find-a-provider>

# FORTIFIED Roof Grant – Process for Existing Homes





# FORTIFIED Construction Grant – Process for New Construction



# Member Value & Benefits

- Allows members to support climate resilient building in their communities before and after natural disasters strike
- Provides funding that can be stacked with other funding sources for new construction and home rehabilitation projects
- Creates relationships with housing developers, non-profits, and other community organizations
- Generates new business opportunities for customers in the construction and roofing business
- May qualify for Community Reinvestment Act (CRA) credit

## Next Steps

- Member enrollment in the program is not required!
- Download the application from FHLB.com
- Collect required supporting documents from
  - Homeowner
  - Evaluator/Inspector
  - Contractor
- Members email the completed application and supporting documents to: [FortifiedFund@fhlb.com](mailto:FortifiedFund@fhlb.com)
- For more information, call us at [800-362-2944](tel:800-362-2944)



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## Disaster Rebuilding Assistance (DRA)

First offering opened January 2nd, Second offering opens July 8

## Program Specifics

**Provides funding for the repair, rehabilitation, and reconstruction of owner-occupied housing affected by a federally declared disaster for individual assistance.**

Each Homeowner  
can receive up to  
**\$12,000**

**\$2.5 Million** split  
between two  
offerings in 2024

**The property must  
be in the FHLB  
Dallas District**

**Two Funding  
Offerings in 2024:  
January 2 & July 8**

Each Member may  
request **\$175,000/  
Offering\***

**Funds available until  
exhausted or  
Nov. 15, 2024**

# 2024 DRA Funding Manual



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## Disaster Rebuilding Assistance



The 2024 DRA  
Funding Manual  
can be found on  
[fhlb.com](https://www.fhlb.com)

Our Community Programs

Affordable Housing Program

Community Advance Programs

Disaster Programs

Disaster Relief Program Advances

Disaster Rebuilding Assistance

DRA Requirements

DRA Application

DRA Funding Process

FORTIFIED Fund

Heirs' Property Program

Homebuyer Equity Leverage  
Partnership

Housing Assistance for Veterans

Partnership Grant Program

Small Business Boost

Special Needs Assistance Program

Payoff Request

Community Investment Highlights

Available Funds as of January 12, 2024: \$1,250,000

Current Member Cap During the First Offering: \$175,000

A Second Offering of \$1,250,000 will be available on July 8, 2024

Additional Member Cap Available for the Second Offering: \$175,000 or, up to \$350,000

FHLB Dallas has set aside \$2.5 million of its 2024 AHP funds for the Disaster Rebuilding Assistance fund (DRA). Through member institutions, this program provides funds for the repair, rehabilitation and reconstruction of owner-occupied housing affected by a disaster event in federally declared disaster areas within FHLB Dallas' District.

New in 2024, DRA will be provided in two offerings with funding available in January and July. Each offering will be administered on a first-come, first-served basis until the offering funds are exhausted. Any remaining funds available at the end of the first offering will carry over to the second offering, if applicable. The total member cap for 2024 will be \$350,000, with an initial limit of \$175,000 during the first offering.

To qualify for this additional funding, the county or parish, in which the homeowner resides, must have been designated for Individual Assistance by the Federal Emergency Management Agency no earlier than January 1, 2019.

DRA funds are available until the funds are exhausted or until **November 15, 2024**, whichever occurs first.

The maximum DRA award per household is \$12,000. Please note that several changes have been made to the Funding Manual. [Please use the 2024 version when submitting requests](#).





## Disaster Rebuilding Assistance Funding Manual Table of Contents

This manual is designed to help you become familiar with the funding process. It provides fillable templates of the required disbursement request forms and descriptive instructions for completing the forms. Unless otherwise specified, each form, accurately completed and signed where indicated, must be provided for each disbursement request. Failure to provide all required forms and supporting documentation will result in delayed processing of the disbursement request.

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**Please note the  
Q&A section is a  
great resource**



# DRA Request for Disbursement of Funds



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**Please fully execute the Request for Disbursement of Funds. Include the Intermediary Organization, if applicable.**

## Disaster Rebuilding Assistance (DRA) Request for Disbursement of Funds

Date:	2/1/24	FHFA ID#:	99999
Member:	First Bank and Trust		
Intermediary Organization (if applicable):	Rebuilding Disasters		
Member Contact:	Joe Smith	Email:	JoeSmith@FBT.com
Prepared By:	Kim Davis	Email:	kdavis@FBT.com
Applicant's Name:	Jane Doe	FEMA Disaster ID:	4586
Date the applicant was income qualified:	01/25/24	Disaster Amount Requested*:\$	12,000.00

**Include the FEMA Disaster ID associated with the request:**  
<https://www.fema.gov/disaster/declarations>

**Following the checklist will assist in submitting a completed application**

The homeowner(s) or parish must have been designated for Individual Assistance by FEMA no earlier than January 1, 2019.

Please provide the following documents with this completed Request for Disbursement of Funds:

- Member Certification (executed by Member)
- Household Income Certification Form
- Documents to verify income (please refer to the Verification of Income form in this Funding Manual)
- Income Calculation Worksheet (if applicable)
- Sources and Uses of Funds
- Pre-Rehabilitation Inspection Report including photos and if applicable, an invoice (Please refer to the Inspection and Pass-Through Documentation instruction page in this manual.) Please note: A Post-Rehabilitation Inspection Report with applicable documentation and the Final Cost Certification will be required upon completion of the work.
- Executed Home Repair Estimate Form
- Executed Certification of Homeowner's Insurance Status
- Proof of Homeownership

**Please do not include copies of Social Security Cards/Numbers in the DRA Request.**

Maximum DRA assistance:

\*\$12,000 per household

Only list the amount being requested from FHLB Dallas

**Please email all funding requests to [ahp@fhlb.com](mailto:ahp@fhlb.com).**

Email questions to [ahp@fhlb.com](mailto:ahp@fhlb.com) or contact us by phone at 800.362.2944



# Disaster Rebuilding Assistance Member Certification



Member Name: First Bank and Trust FHFA ID#: 99999

Name of Applicant: Jane Doe ("Homeowner")

The undersigned member ("Member") hereby acknowledges that any Disaster Rebuilding Assistance Program ("Disaster") subsidy that is funded pursuant to the attached Request for Disbursement of Funds will be subject to the terms and conditions of (i) the Disaster Rebuilding Assistance Enrollment Application submitted by Member to the Federal Home Loan Bank of Dallas (the "Bank"), (ii) the Disaster Rebuilding Assistance Program Agreement executed by the Bank and Member, (iii) the Bank's Affordable Housing Program Implementation Plan, (iv) the Federal Home Loan Bank Act, (v) the regulations governing Homeownership Set-Aside Programs found at 12 C.F.R. part 1291, (vi) any other documents published by the Bank or the Federal Housing Finance Agency relating Homeownership Set-Aside Programs and (vii) any amendments to any of the foregoing documents (the "Disaster Documents").

Member hereby certifies that the Homeowner currently requires the amount of Disaster funds requested. Member acknowledges that the requested Disaster funds may only be used for the purposes specified in the Disaster Documents. Member hereby certifies that the above applicant is the owner of the home and the damage was due to the disaster.

Member hereby certifies that the Disaster funds received by Member will be provided to the Homeowner and the Homeowner is a low- or moderate-income household, meaning a household that at the time it was income qualified by Member for participation in the Disaster Program had an income of 80% or less of the median income for the area. Member hereby certifies that the total household income for the Homeowner, as shown on the attached Household Income Certification Form, has been verified by the Member. For any person listed on Part I (Household Composition) for whom no income is listed for such person in Part II (Gross Annual Income) of the attached Household Income Certification form, Member hereby certifies such person is either a full-time student, or has no income as evidenced by a completed Certification of Zero Income, or is under the age of 18 years.

Member hereby certifies that if Member is providing mortgage or other financing in connection with the rehabilitation to the Homeowner, the rate of interest, points, fees and any other charges will not exceed a reasonable market rate of interest, points, fees, and other charges for a loan of similar maturity, terms and risk.

Member hereby attests that proper due diligence has been performed to ensure: 1) The Disaster funds requested are for repair or replacement of damaged components for habitability or code compliance. 2) The scope of work being paid for by Disaster funds are not being paid for by insurance, federal or state emergency assistance or any other funding sources. 3) This is the applicant's primary residence. The applicant has owned the home for at least 30 days and was the owner of the property at the time of the disaster declaration.

Member hereby attests that the home inspector was selected by the Member and that proper due diligence has been performed to ensure: 1) The home inspector has the appropriate qualifications. 2) The home inspector is not related to the intermediary, unless the intermediary is a government-controlled entity. Initials: JS

Member hereby certifies that the information set forth in this completed Disaster Funding Manual or provided herewith is, to the best of Member's knowledge after reasonable inquiry, accurate and complete in all respects. Member hereby acknowledges that providing false, misleading or incomplete information to the Bank may result in the denial of funding and/or the recapture of the Disaster funds by the Bank.

Member's Signature: **Need signature** (Advances or AHP Authority)

Name: Joe Smith

Title: VP of Community Development

Date: 2/1/24

**Member MUST  
initial here to  
confirm the  
selection of the  
inspector**

**Member signer  
must have **AHP or  
Advances  
Authorization****



## Certification of Homeowner's Insurance Status

The following certification should be executed and signed by the homeowner(s).

Property address: \_\_\_\_\_

The following criteria qualify the applicant(s) for the DRA program:

(please check each criterion that applies; note: at least one must be checked to qualify)

- 1. I/We do not have homeowner's insurance
- 2. I/We do not have flood insurance
- 3. I/We do have insurance and need assistance with meeting the deductible
- 4. I/We do have insurance but, the cost of repairs exceeds the policy coverage

**Please ensure the applicant checks the appropriate box/boxes, signs and dates the form.**

### Please Note:

- ✓ The rehab work should be related to damages caused by the natural disaster.
- ✓ The homeowner(s) must have owned the home at least 30 days prior to the occurrence of the disaster.

I/We certify that my/our primary residence has been affected and damages to the residence are disaster related.

I/We certify that I/we had owned the home at least 30 days prior to the related disaster.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud.

**This certification must be signed by the applicant(s):**

Applicant(s) Signature(s): \_\_\_\_\_

Applicant(s) Name(s): \_\_\_\_\_

Date: \_\_\_\_\_



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## 2024 Special Needs Assistance Program (SNAP)

Second Offering Application Window: June 4-6

**SNAP provides subsidies for the repair and rehabilitation of owner-occupied housing of eligible, special-needs households.**

**The property must  
be in the FHLB  
Dallas district**

**\$2 Million split  
between two  
offerings in 2024**

**Each Homeowner  
can receive up to  
\$12,000**

**Two Offering  
Windows in 2024:  
Feb. 6-8 & Jun. 4-6**

**Maximum 6 individual  
submissions per  
member per year**

**Each member can  
submit a maximum of  
\$25,000/Offering**

**Each intermediary can  
submit a maximum of  
\$50,000/Offering**

### Special Needs

- Age (55 or older)
- Persons with disabilities
- HIV/AIDS
- Recovering from physical abuse
- Recovering from alcohol or drug abuse

**At least one permanent occupant of the household must meet at least one of the special needs criteria.**

**Below 80% AMI**

# 2024 SNAP Funding Manual

Member driven, Community focused

Membership Products Services **Community Programs** Resources About Us

Home / Community Programs

## Special Needs Assistance Program

Twitter Facebook LinkedIn Email

The 2024 SNAP Funding Manual can be found on [fhlb.com](https://www.fhlb.com)

- Our Community Programs
- Affordable Housing Program
- Community Advance Programs
- Disaster Programs
- FORTIFIED Fund
- Heirs' Property Program
- Homebuyer Equity Leverage Partnership
- Housing Assistance for Veterans
- Partnership Grant Program
- Small Business Boost
- Special Needs Assistance Program**
- SNAP Requirements
- SNAP Funding Process
- SNAP Enrollment Application
- Payoff Request
- Community Investment Highlights

### \$2 Million allocated for 2024

#### First Member Submission Window: February 6-8, 2024

First Window Member Submission Maximum: \$25,000  
First Window Intermediary Submission Maximum: \$50,000

#### Second Member Submission Window: June 4-6, 2024

Second Window Member Submission Maximum: \$25,000  
Second Window Intermediary Submission Maximum: \$50,000

#### Annual Maximum Number of Individual Submissions: Six per Member

FHLB Dallas has set aside \$2 million of its 2024 AIP funds for the Special Needs Assistance Program (SNAP). Through member institutions, SNAP provides subsidies for the repair and rehabilitation of owner-occupied housing of eligible, special-needs individuals.

#### SNAP Maximum Award

The maximum SNAP award per household is \$12,000. (Please refer to the Funding Manual, including an updated list of eligible repairs. **Please use the 2024 version when submitting requests.** Previous versions of the Funding Manual will not be accepted.)

Please note that the GrantConnect portal will close at 5:00 p.m. CT on the final day of each submission window. For more information about the SNAP, call the Community Investment department at 800.362.2944.



#### PARTICIPATING SNAP MEMBERS

Participating members are located within the state of charter origin and are listed in alphabetical order. Please note that members have their own underwriting criteria and lending areas and may have reached their FHLB Dallas program cap within a given year.

[View Participating Members](#)

#### Helpful Resources

- AHP Implementation Plan
- Income Calculation Tool
- GrantConnect Webinar
- 2023 Median Incomes
- SNAP Funding Manual**

## SNAP Funding Manual Table of Contents

This manual is designed to guide you through the SNAP submission and funding process. It provides fillable templates of the required disbursement request forms and descriptive instructions for completing the forms. Unless otherwise specified, each form, accurately completed and signed where indicated, must be provided for each disbursement request. Failure to provide all required forms and supporting documentation will result in delayed processing of the disbursement request.

During the SNAP submission period, members will upload disbursement request submissions to our online portal, GrantConnect, accessible at MyFHLB.com.

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**Please note the Q&A  
section is a great  
resource**

# SNAP Request for Disbursement of Funds



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## SNAP Request for Disbursement of Funds

Date: 1/15/2024 FHFA ID : Member Name/11111

Member: Member Bank

Intermediary Organization (if applicable): **Intermediary Organization**

Member Contact: Jane Member Contact Email: jane@memberbank.com

Prepared By: John Johnson Member Contact Email: John@memberbank.com

Applicant's Name: Homeowners Name SNAP Amount Requested\*: \$10,000.00

Annual maximum number of individual submissions per member is 6 SNAP requests, regardless of any remaining amount available in the established member and/or intermediary caps.

Please provide the following items with this Request for Disbursement of Funds:

- Member Certification (executed by Member)
- Household Income Certification Form
- Documents to verify income (please refer to the Verification of Income form in this Funding Manual)
- Income Calculation Worksheet (if applicable)
- Evidence of Special Needs (please refer to the Question and Answer section of this Funding Manual)
- Sources and Uses of Funds
- Pre-Rehabilitation Inspection Report including photos and if applicable, an invoice (please refer to the Inspection and Pass-through Documentation instruction page in this manual.) **Note:** A Post-Rehabilitation Inspection Report with applicable documentation and the Final Cost Certification will be required upon completion of the work.
- Executed Home Repair Estimate form
- Proof of Homeownership

**Please do not include copies of Social Security Cards/Numbers in the SNAP Request.**

**Maximum SNAP assistance:**

\$12,000 per household

Only list the amount being requested from FHLB Dallas

Upload the disbursement request to GrantConnect via MyFHLB.com.

Email questions to ahp@fhlb.com or contact us by phone at 800.362.2944.

Please fully execute the Request for Disbursement of Funds. Include the Intermediary Organization, if applicable\*.

Following the checklist will assist in submitting a completed application

Please do not include Social Security Cards/Numbers

\*If a developer fee is included in the request, there should be an Intermediary listed on the Request page.



## SNAP Member Certification

Member Name: Member Bank FHFA ID#: Member FHFA ID  
 Name of Applicant: Homeowners Name ("Homeowner")

The undersigned member ("Member") hereby acknowledges that any Special Needs Assistance Program ("SNAP") subsidy that is funded pursuant to the attached Request for Disbursement of Funds will be subject to the terms and conditions of (i) the SNAP Enrollment Application submitted by Member to the Federal Home Loan Bank of Dallas (the "Bank"), (ii) the Special Needs Assistance Program Agreement executed by the Bank and Member, (iii) the Bank's Affordable Housing Program Implementation Plan, (iv) the Federal Home Loan Bank Act, (v) the regulations governing Homeownership Set-Aside Programs found at 12 C.F.R. part 1291, (vi) any other documents published by the Bank or the Federal Housing Finance Agency relating to SNAP or Homeownership Set-Aside Programs and (vii) any amendments to any of the foregoing documents (the "SNAP Documents").

Member hereby certifies that the Homeowner currently requires the amount of SNAP funds requested. Member acknowledges that the requested SNAP funds may only be used for the purposes specified in the SNAP Documents.

Member hereby certifies that the SNAP funds received by Member will be provided to the Homeowner and the Homeowner is a low- or moderate-income household, meaning a household that at the time it was income qualified by Member for participation in the SNAP had an income of 80% or less of the median income for the area. Member hereby certifies that the total household income for the Homeowner, as shown on the attached Household Income Certification Form, has been verified by the Member. For any person listed in Part I (Household Composition) for whom no income is listed for such person in Part II (Gross Annual Income) of the attached Household Income Certification Form, Member hereby certifies that such person is either a full-time student, or has no income as evidenced by a completed Certification of Zero Income or is under the age of 18 years.

Member hereby certifies that if Member is providing mortgage or other financing in connection with the rehabilitation to the Homeowner, the rate of interest, points, fees and any other charges will not exceed a reasonable market rate of interest, points, fees, and other charges for a loan of similar maturity, terms and risk.

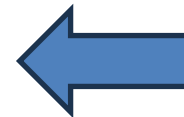
Member hereby attests that proper due diligence has been performed to ensure: 1) The SNAP funds requested are for necessary rehabilitation and/or modification of the home or attached structures for structural and/or safety reasons and are not merely cosmetic improvements. 2) The cost associated with the rehabilitation is reasonable and customary based upon the location of the home and the scope of the proposed work. 3) This is the applicant's primary residence.

Member hereby attests that the home inspector was selected by the Member and that proper due diligence has been performed to ensure: 1) The home inspector has the appropriate qualifications. 2) The home inspector is not related to the intermediary, unless the intermediary is a government-controlled entity. Initials: XX

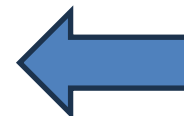
Member hereby certifies that the information set forth in this completed Special Needs Assistance Program (SNAP) Funding Manual or provided herewith is, to the best of Member's knowledge after reasonable inquiry, accurate and complete in all respects. Member hereby acknowledges that providing false, misleading or incomplete information to the Bank may result in the denial of funding and/or the recapture of the SNAP funds by the Bank.

Member's Signature: Member Signature  
 Name: Name  
 Title: SVP  
 Date: Date

**Member MUST initial here to confirm the selection of the inspector**



**Member signer must have AHP or FHLB Signature Card Advances Authorization**



# Special Needs Documentation



## SNAP Verification of Special Needs

The person signing below (the "Verifier") verifies that \_\_\_\_\_ (Name of Applicant) (the "Applicant") has a special need as checked below. The Verifier attests that the Verifier is qualified to make this determination.

The Verifier is releasing this information to the Federal Home Loan Bank of Dallas (the "Bank") with the authorization of the Applicant for the purpose of helping the Applicant's household acquire housing rehabilitation assistance under the Bank's Special Needs Assistance Program.

**Check all that apply:**

- Applicant is a person with disabilities.
- Applicant is recovering from physical abuse.
- Applicant is recovering from alcohol or drug abuse.
- Applicant has HIV/AIDS.

Verifier Name: \_\_\_\_\_  
Verifier Signature: \_\_\_\_\_  
Name of Verifier's Organization (if any): \_\_\_\_\_  
Verifier's Position with Organization (if any): \_\_\_\_\_  
Verifier's professional qualifications/designations: \_\_\_\_\_  
(Examples include Doctor of Medicine, Master of Social Work, Psychologist, Qualified Mental Health Professional, Qualified Substance Abuse Professional, Licensed Physical Therapist)  
Date: \_\_\_\_\_

By signing below, I authorize the release of this information to the Federal Home Loan Bank of Dallas.

\_\_\_\_\_  
Applicant/Guardian

\_\_\_\_\_  
Date

**Driver's License/State ID**  
➤ **Proof of age**

**Social Security Letter**  
➤ **Indicating age and/or disability**

**Executed Verification of Special Needs**  
➤ **Found in SNAP Funding Manual**  
➤ **Should be executed by an applicable professional (Doctor, etc.)**  
➤ **Should not be executed by an employee of the member institution**

## SNAP List of Eligible Repairs

Below is the list of eligible repairs allowable under the SNAP. Only repairs defined in the list below are eligible for a SNAP request. If the repairs submitted in the request are not included in the list below, the repairs will be considered ineligible for SNAP funds. Substitution to replace ineligible repairs after request submission will not be permitted.

- **Walk in/roll in showers, grab bars, ADA toilets or other ADA compliant bathroom modifications**
  - Bathroom modifications that are cosmetic in nature are not eligible for SNAP funds.
- **Widening doorways, cased openings, entryways, etc. needed for accessibility**
  - SNAP funds may be used to cover a new door in conjunction with the wider doorway. New doors not related to a widened doorway are not eligible for SNAP funds.
- **Wheelchair ramp and/or zero step entries**
- **Interior/exterior handrails**
- **Repair/replace exterior steps**
- **Remove tripping/falling hazards related to flooring**
  - Any hazards related to flooring must be specifically noted on an inspection report to be considered eligible for SNAP funds. Repairs beneath the flooring related to the foundation, etc. are not eligible for SNAP funds.
- **Roofing, gutters, downspouts, soffit, fascia**
  - Ceiling repairs, including insulation, may be performed in conjunction with roof repairs and replacement if roof leaks are present and have caused damages to the ceiling. Ceiling repairs as a separate work item without roof work are not eligible for SNAP funds.
- **Repair/replace electrical panel/fuse box**
  - SNAP funds may be used to cover wiring or other electrical repairs performed in conjunction with the repair/replacement of the electrical panel/fuse box. Other electrical repairs not related to the electrical panel/fuse box are not eligible for SNAP funds.
- **Weather stripping, attic and wall insulation**
- **Repair/replace/install HVAC**
- **Repair/replace/install septic system**
- **Repair/replace/install water heater**
- **Repair/replace/install furnace**

An updated **eligible repairs list** has been included for 2024. Please double check that the repair is eligible according to this list. **Substitutions will not be permitted.**



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## Documentation Requirements - SNAP & DRA

# Proof of Homeownership

Please include one of the following documents as evidence of homeownership with each submission. The name(s) on the provided document should match the name(s) of at least one permanent resident of the household as listed on the Household Income Certification Form.

## Acceptable Documents for Proof of Homeownership

- Property tax receipt or bill
- Deed or Official Record
- Home purchase contracts (e.g. Bill of Sale, Bond for Title, Land Installment Contract, etc.)
- Certificate or title for a mobile home
- Other documentation not included in this list are subject to approval by FHLB Dallas

**New this year for SNAP & DRA:**  
Proof of homeownership  
requirement

**\*If proof of homeownership cannot be provided, the request will be considered ineligible for SNAP/DRA funds\***



# Home Repair Estimate

Date: 1/25/24 Business Name: Carpenter Roofing  
 Homeowner: Jane Doe Contractor Name: John Carpenter  
 Address: 123 Main Street, Smithville, Tx Phone Number: 214-555-1234  
 Bid Expiration Date: 6/1/24 Address: 39 Ridge Road, Smithville, TX

Repair Item	Units/#	Material Cost	Labor Cost
shingles	26 squares	\$ 3,620.00	
cap nails	1 box	\$ 35.00	
felt	3 rolls	\$ 400.00	
drip edge	25 pieces	\$ 550.00	
nails	2 boxes	\$ 120.00	
pipe boots	5	\$ 200.00	
water guard	1	\$ 75.00	
venter ridge	10- 4' pieces	\$ 150.00	
Labor (lump sum)			\$ 5,550.00

Signature of Contractor: Contractor Signature Total: \$ 10,700.00

Homeowner hereby acknowledges and agrees that 1) homeowner has reviewed the Home Repair Estimate and understands the work to be performed, and 2) upon signing below, homeowner may no longer request changes of the work to be performed by the contractor. Furthermore, homeowner agrees to sign the Final Cost Certification upon the completion of work. Any change in the scope of the proposed work, any change in the designated contractor as initially presented, and/or any change in sources and uses of funds must be approved by the Federal Home Loan Bank of Dallas prior to any related work being started. Justification outlining and supporting the need for the changes is required and must be submitted by the member. Homeowner accepts the repairs and amount stated above or attached.

Signature of Homeowner: Homeowner Signature Date: 1/16/2024

Signature of Member: Member Signature Date: 1/16/2024

List out each item being repaired, and the quantity of materials required (such as bundles of shingles).

Make sure each party has signed on the appropriate line.

The **Total** amount on the Home Repair Estimate must match the **Rehabilitation** line on the Sources and Uses of Funds.

Breakdown of labor and material cost is required.

### Pre-rehab inspections and “before” photos are required to disburse funds

- ✓ Inspection report must specify eligible items requiring modification/rehab
- ✓ Photos must show the need for rehabilitation (SNAP) and/or damages as a result of the natural disaster (DRA)
- ✓ If applicable, inspection invoice should be included, and the amount listed on the Uses of Funds should be supported by the invoice
- ✓ Inspections to be conducted by an **independent** 3<sup>rd</sup> party
  - Approved by member institution
  - Must not be related to intermediary, unless the intermediary is a governmental entity
- ✓ For SNAP: If not submitted in the original request, pre-inspections are due 45 days after the close of the SNAP window





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## Final Documentation - SNAP & DRA

## Inspection and Pass-Through Documentation

Required evidence of the subsidy passing through from the Member for the benefit of the household.

**SNAP/DRA final documentation is required 60 days post-disbursement.**

### **Post Rehabilitation Documentation:**

- Fully Executed Final Cost Certification(s) - signed and dated by all three parties
- Final Rehab work Invoice(s) - listing final cost, date and homeowner address
- Post-Rehabilitation Inspection Report with “After” Photos and final invoice
  - If a pre-inspection invoice was included with the original request and a cost for inspections was included on the Uses of Funds, a post-inspection invoice is required.

**\*\*Contractor/Dates/Address/Costs should match with the original request unless a change order was requested and approved by FHLB Dallas\*\***

# Final Cost Certification & Final Invoice

## Final Cost Certification

Member Name/FHFA # Member FHFA ID  
 Homeowner: Homeowners Name  
 Property Address: 123 Stree, Anywhere, AR

### CERTIFICATIONS

- All SNAP-funded rehabilitation work has been completed to the satisfaction of the homeowner.
- The contractor's invoices that detail the scope of work performed are accurate.
- All rehabilitation work was completed as of 04/01/2024 (date) by  
 Contractor Name 222-222-222 (Contractor Phone Number)
- The final cost for the completed rehab work is 13,308.00

Note: This is to be signed and dated by all parties after completion of the work on the home.

*Contractor Name* Contractor Name 04/01/2024  
 (Contractor) (Print Name) (Date)

*Homeowner Name* Homeowner Name 04/01/2024  
 (Homeowner) (Print Name) (Date)

*Member Representative* Member Representative 04/01/2024  
 (Member Representative) (Print Name) (Date)

NOTE: Along with the executed Final Cost Certification, please submit the final invoice(s) and post-rehabilitation inspection report with photos.

Include a fully executed, signed version of this document along with a **final invoice** and **post-rehab inspection** report with **photos**

## ABC Home Repair



## INVOICE

INVOICE # 100  
 DATE: 04/01/2024

**Bill To:**  
 Sponsor Name  
 123 Main Street  
 Beechwood, AR  
 Phone: 222-111-2222

**Pay To:**  
 ABC Home Repair  
 450 Hammer away Drive  
 Anywhere, AR  
 Phone: 222-222-2222

Homeowner Name: John Doe  
 Property Address: 123 Street  
 Anywhere, AR

QTY.	DESCRIPTION	MATERIAL COST	AMOUNT TOTAL
1	Front Steps	\$245.00	\$310.00
1	Remove Tub/Install Shower – ADA	\$2,725.00	\$3,528.00
1	Roof Replacement (80 bundles/shingles)	\$3,750.00	\$2750.00

TOTAL	\$13,308.00
R COST	\$0.00
TOTAL	\$13,308.00
PAYMENTS/CREDITS	\$0.00
BALANCE DUE	\$13,308.00

Make all checks payable to ABC Home Repair  
 If you have any questions concerning this invoice, contact Name, Phone, Email

THANK YOU FOR YOUR BUSINESS!


Amount listed on the Certification should match the invoice.

Final Cost Certification should include the date of rehab work completion. The Post-Inspection should occur and be dated after the work is completed as noted on the Final Cost Certification.

# Final Invoice

A final invoice is required upon completion of the repairs.


- The invoice should include:
  - Date
  - Contractor information
  - Homeowner name and address
  - Listing of modifications/repairs
- Multiple contractors requires multiple invoices/Multiple Final Cost Certifications
- Final amount should equal or exceed the SNAP/DRA rehab amount as listed on the Sources and Uses of Funds and match the Final Cost Certification



**ABC Home Repair**

**Invoice**


Date	Invoice #
3/10/18	19


1

<p><b>Bill To</b></p> <p>Sponsor Name 123 Main Street Beechwood, MS</p>	<p><b>Pay To</b></p> <p>ABC Home Repair 456 Hammeraway Drive Vicksburg, MS</p>
---	--

2

Qty.	Description	Material Cost	Amount Total
1	<p>Homeowner Name 123 Meadow St Vicksburg, MS</p> <ol style="list-style-type: none"> <li>1. Replace bad siding. Scrape chipped paint and re-paint exterior of house.</li> <li>2. Secure sagging sheetrock to framing in living room. Tape sand and paint.</li> <li>3. Repair roof leak over back bedroom and hall bath.</li> <li>4. Repair ceiling, wall in back bedroom, hall bath and kitchen. Float and paint.</li> <li>5. Patch floor in middle bedroom and closet.</li> <li>6. Locate source of water entry under Green Room and resolve. Repair bucking floor.</li> <li>7. Install tub surround in bath.</li> <li>8. Repair or replace wall heater in living room.</li> <li>9. Repair entry door casing and install striker plate.</li> <li>6. Clean up and haul away all trash.</li> </ol>		
	<b>Subtotal</b>		\$5,750.00
	<b>Other Cost</b>		\$0.00
	<b>Total</b>		\$5,750.00
	<b>Payments/Credits</b>		\$0.00
	<b>Balance Due</b>		\$5,750.00



Matches Final Cost Cert

# Post-Rehab Inspection Report and Invoice

The final inspection should occur after all rehab work is completed and must confirm that the original scope of work was completed in an acceptable manner.

## The report should include:

- ✓ Confirmation that the work/original scope was completed
- ✓ Homeowner name
- ✓ Property address
- ✓ Photos of completed repairs
- ✓ Invoice (if applicable)

DEF Home Inspection  
Street Address  
City, ST, Zip Code  
Phone:

Date of Inspection  
04/01/2023

Homeowner Name  
Street Address  
City, ST, Zip Code

Dear Homeowner,

The final inspection has been completed and the repaired items/work are marked as completed for [Homeowner's Address]:

### Exterior Repairs

- Replaced Front Steps
- Replaced Roof

### Interior Repairs:

- Removed Tub/Installed Shower- ADA

If you have any questions, please contact me.

Thank you for your business.

## DEF Home Inspection

*If you can't see it, neither can we.*

Street Address  
City, ST, Zip Code  
Phone: Phone Fax: F:

## INVOICE

INVOICE # 100  
DATE: 04/01/2023

### HOME ADDRESS:

Homeowner Name  
Street Address  
City, ST, Zip Code

ITEM	DESCRIPTION	UNIT PRICE	QUANITTIY	TOTAL
Service	Pre- Inspection	\$75.00	1	\$75.00
Service	Post - Inspection	\$75.00	1	\$75.00

SUBTOTAL	\$150.00
TOTAL	\$150.00
PAYMENTS/CREDITS	\$0.00
BALANCE DUE	\$150.00

Make all checks payable to DEF Home Inspection  
If you have any questions concerning this invoice, contact Name, Phone, Email

THANK YOU FOR YOUR BUSINESS!!

Pre and Post Inspections should be completed by the same inspector/company to the greatest extent possible. If the Post-Inspection cannot be completed by the same inspector, contact FHLB to request approval of change.

# Pre and Post Inspection Photos

1.0 The roof covering is old, and the life of covering has expired. The covering does need to be replaced.



## Pre-inspection photos:

- ✓ Capture clear photos of specific items that require modifications or rehab work to be completed.
- ✓ Photos should align with the Home Repair Estimate and Pre-Inspection Report.

## Post-inspection photos:

- ✓ Photos of work completed validating that the repairs have been made as noted on the Home Repair Estimate/Final Invoice and Post-Inspection Report.
- ✓ “After” photos should align with “Before” photos.

1.0 New Roof covering installed.



# Questions?



# Income Calculations



## Income Calculations

All applicants for HELP, SNAP, and DRA must have a household income **at or below 80% Area Median Income (AMI)**

### Steps to Verify Income:

**1. Obtain applicable income documentation**

2. Calculate annual household income

3. Calculate the household Area Median Income

## Tax Return

Submit for Self-Employed & Seasonal Workers

Last **Two** Years of Filed Tax Returns

Must be **Signed**

## Paycheck or VOE

Current Employment

VOE must include the paid-through date

Must be dated within three months prior to the income qualified date entered on GrantConnect

## Non-employment Income

Social Security Award Letters

Supplemental Social Security (SSI) Letters

Pension Statements

Child Support Statements

# Household members income to include

(income from SS, assets etc.)

Household Member	Include Income	Periodic Payments
Head of household	Yes	Yes
Spouse	Yes	Yes
Co-head of household	Yes	Yes
Temporarily absent household member that will reside in the home	Yes	Yes

Children and Adult Students	Include Income	Periodic Payments
Children under 18	No	Yes
Children under 18 claimed on another parents tax returns	No	No
Child that is 18 Years or older that <u>IS</u> a full-time student	No	Yes
Child that is 18 Years or older that <b>IS NOT</b> a full-time student	Yes	Yes

Other Household Members	Include Income	Periodic Payments
Foster Child	No	No
Live-in aide	No	No
Non-Occupant co-borrowers **	No	No

\*\*Non-occupant co-borrowers are only allowed under the HELP program for credit related purposes. If the income of a non-occupant is needed to qualify for the loan, the applicant is not eligible for HELP funds.

## Certification of Zero Income

(To only be completed by household members 18 years of age or older, when applicable)

Name of household occupant declaring no income: \_\_\_\_\_

Property address: \_\_\_\_\_  
*Street City State ZIP*

1. I hereby certify that I do not individually receive income from any of the following sources:
  - a) Wages from employment (including commissions, tips, bonuses, fees, etc.);
  - b) Income from operation of a business;
  - c) Rental income from real or personal property;
  - d) Interest or dividends from assets;
  - e) Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
  - f) Unemployment or disability payments;
  - g) Public assistance payments;
  - h) Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
  - i) Sales/receipts from self-employed or contract resources (Uber, LYFT, Mary Kay, etc.);
  - j) Any other source not named above.
2. I currently have no income of any kind and there is no imminent change expected in my financial status or employment status during the next 12 months.
3. I will be using the following sources of funds to pay for my necessities:  
\_\_\_\_\_

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud.

\_\_\_\_\_  
Signature of Declaring Housing Occupant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**This document must be filled out for all individuals on the Household Income Certification who are 18+, not full-time students, and do not have income**

**Spanish version also available. You can submit the version the applicant is most comfortable with.**

## Steps to Verify Income:

1. Obtain applicable income documentation

**2. Calculate annual household income**

3. Calculate the household Area Median Income

# Income Calculation Tool – Weekly & Bi-Weekly

The income calculation tool is available on [fhlb.com](http://fhlb.com)

The screenshot shows a web form for calculating income. It includes fields for Borrowers Name, Co-Borrowers Name, Pay Frequency (with radio buttons for Weekly, Bi-Weekly, Semi-Monthly, and Monthly), Borrowers VOE or Pay Stub Paid through date, Start Date, YTD Gross Income as shown on VOE or Pay Stub, and Annual Income. Annotations include: a box around the 'Weekly' radio button; an arrow pointing from the 'Start Date' field to a callout box; a box around the 'YTD Gross Income' field with an arrow pointing to a callout box; a box around the 'Annual Income' field with an arrow pointing to a callout box; and a long arrow pointing from the 'Borrowers VOE or Pay Stub Paid through date' field down to another callout box.

## "Start Date:"

This is the Pay Period beginning date of the applicant's first pay stub received in the current year.

- ✓ Enter the Pay Period beginning date of the first pay stub of the year
- ✓ Unless the first pay stub of the year is provided, this date must be manually calculated using a calendar
- ✓ The Start Date typically begins in the prior year (unless the applicant started their job after the first of the year)

## "Borrowers VOE or Pay Stub Paid through date:"

This is the date through which the applicant has actually worked and been paid for as reflected on the pay stub or VOE provided

- ✓ Enter the Pay Period end date of the current pay stub
- ✓ The check date should not be used as the applicant has not been paid through the check date (there may be exceptions for salaried employees where the pay period end date and the check date are the same)



# Income Calculation Tool – Monthly & Semi-Monthly

The income calculation tool is available on [fhlb.com](http://fhlb.com)

The screenshot shows a web form for calculating income. It includes fields for 'Borrowers Name' and 'Co-Borrowers Name'. The 'Pay Frequency' section has four radio button options: 'Weekly', 'Bi-Weekly', 'Semi-Monthly' (which is selected and highlighted with a blue box), and 'Monthly'. Below this are three input fields: 'YTD Gross Income as shown on VOE or Pay Stub', 'Number of times Borrower has been paid this year', and 'Annual Income'. Annotations with arrows point to these fields: 'Input YTD total gross wages' points to the YTD Gross Income field; 'Annual Income automatically populates' points to the Annual Income field; and a downward-pointing arrow points from the 'Number of times Borrower has been paid this year' field to a separate text box below.

**"Number of times Borrower has been paid this year:"**

This is the total number of times the applicant has actually been paid for the year (looking at check dates)

- ✓ Enter the whole number of times the applicant has been paid for the year
- ✓ Semi-Monthly is paid 24 times a year (twice a month), usually the 1st and the 15th or, the 15th and the end of the month
- ✓ Monthly is paid 12 times a year, usually on the 1st or end of the month but, may vary

# Income Calculation Examples

123 - John R. Doe		Pay Period 01/01/23 to 01/07/23		Required Deductions		
Earnings				Federal Income Tax	00.00	00.00
Hours	Rate	This Period	YTD	FICA - Medicare	06.08	12.16
50	9.00	450.00	900.00	WI State Income Tax	00.00	00.00
Gross Pay		450.00	900.00	FICA - Social Security	25.92	51.84
				Other Deductions		
				Health Insurance	00.00	00.00
				401k	00.00	00.00
				Parking	00.00	00.00
				<b>NET PAY</b>	<b>\$418.00</b>	<b>\$836.00</b>
Your Employer 1234 Some Street Milwaukee, WI ZIPCODE				Check Number: XXXXXX		
				Pay Date: 01/13/23		

December 2022

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

January 2023

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6 \$	7
8	9	10	11	12	13 \$	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Borrowers Name: John Doe

Co-Borrowers Name:

- Pay Frequency:
- Weekly
  - Bi-Weekly
  - Semi-Monthly
  - Monthly

Borrowers VOE or Pay Stub Paid through date: 01/07/2023

Start Date: 12/25/2022

YTD Gross Income as shown on VOE or Pay Stub: \$900.00

Annual Income: \$23,400.00

**Lets try it!**

123 - John R. Doe		Pay Period 01/09/23 to 01/22/23		Required Deductions		
Earnings				Federal Income Tax	00.00	00.00
Hours	Rate	This Period	YTD	FICA - Medicare	06.08	12.16
80	9.00	\$720	\$2000	WI State Income Tax	00.00	00.00
Gross Pay		\$720	\$2000	FICA - Social Security	25.92	51.84
				Other Deductions		
				Health Insurance	00.00	00.00
				401k	00.00	00.00
				Parking	00.00	00.00
				NET PAY	\$4 <del>00</del>	\$5 <del>00</del>



### December 2022

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

### January 2023

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12	13 \$	14
15	16	17	18	19	20	21
22	23	24	25	26	27 \$	28
29	30	31				

Your Employer  
1234 Some Street  
Milwaukee, WI ZIPCODE

Check Number: XXXXXX  
**Pay Date: 01/27/23**

### Income Calculation Spreadsheet

AHP Project Number: \_\_\_\_\_

Borrowers Name: \_\_\_\_\_

Co-Borrowers Name: \_\_\_\_\_

Pay Frequency:  Weekly  Bi-Weekly  Semi-Monthly  Monthly

Borrowers VOE or Pay Stub Paid through date: 01/22/2023 Start Date: 12/26/2022

YTD Gross Income as shown on VOE or Pay Stub: \$2,000.00

Annual Income: \$26,000.00



Social Security Administration  
**Supplemental Security Income**  
Notice of Change in Payment

Date: November 28, 2021

1480377270310464 CSR/NA/03/2021/00000000

$\$470 + \$391 = \$861$

$\$861 * 12 = \$10,332$

We plan to increase your monthly Supplemental Security Income (SSI) payment from \$445.00 to \$470.00 beginning January 2022. The amount will change because the cost of living increased during the past year. You will continue to get the new amount each month unless there is a change in the information we use to figure your payment.

The rest of this letter explains more about your SSI payments. It also tells you how to find affordable health care.

We explain how we figured the monthly payment amount on the worksheet(s) at the end of this letter. The explanation shows how your income, other than any SSI payments, affects your SSI payment. We include explanations only for months where payment amounts change.

**When You Will Receive Your Payments**

Your bank or other financial institution will receive your monthly payment of \$470.00 around January 1, 2022, and on the first of each month after that.

**Information Used In Making The Decision**

Our records show that the following income used to figure your payment has also changed:-

Your increased Social Security benefits-before any deductions for Medicare premiums- \$391.00. You should receive the increased Social Security benefit about January 3, 2022. We must count the increase in your benefits for January 2022 even though we are counting your other income for November 2021.

**Always take the monthly amount listed on the letter (before any deductions). FHLB does not "gross up" Social Security Amounts.**



**Income Calculation Spreadsheet**

AHP Project Number:	
Borrowers Name:	
Co-Borrowers Name:	
Pay Frequency:	<input type="radio"/> Weekly <input type="radio"/> Bi-Weekly <input type="radio"/> Semi-Monthly <input checked="" type="radio"/> Monthly
YTD Gross Income as shown on VOE or Pay Stub:	\$861.00
Number of times Borrower has been paid this year:	1
Annual Income:	\$10,332.00

# Tax Returns for Self-Employed & Seasonal Workers

**SCHEDULE C (Form 1040)** **Profit or Loss From Business (Sole Proprietorship)** OMB No. 1545-0074  
**2020** Attachment Sequence No. 09  
 Department of the Treasury Internal Revenue Service (99) ▶ Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information. ▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.  
 Name of proprietor Social security number (SSN)

**A** Principal business or profession, including product or service (see instructions) **B** Enter code from instructions

**C** Business name. If no separate business name, leave blank. **D** Employer ID number (EIN) (see instr.)

**E** Business address (including suite or room no.) ▶  
 City, town or post office, state, and ZIP code

**F** Accounting method: (1)  Cash (2)  Accrual (3)  Other (specify) ▶  
**G** Did you "materially participate" in the operation of this business during 2020? If "No," see instructions for limit on losses . . . . .  Yes  No  
**H** If you started or acquired this business during 2020, check here . . . . .  Yes  No  
**I** Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions . . . . .  Yes  No  
**J** If "Yes," did you or will you file required Form(s) 1099? . . . . .  Yes  No

**Part I Income**

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . .	<input type="checkbox"/>	1
2	Returns and allowances . . . . .		2
3	Subtract line 2 from line 1 . . . . .		3
4	Cost of goods sold (from line 42) . . . . .		4
5	Gross profit. Subtract line 4 from line 3 . . . . .		5
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .		6
7	Gross income. Add lines 5 and 6 . . . . .		7

**Part III Expenses.** Enter expenses for business use of your home only on line 30.

8	Advertising . . . . .	8	18	Office expense (see instructions) . . . . .	18
9	Car and truck expenses (see instructions) . . . . .	9	19	Pension and profit-sharing plans . . . . .	19
10	Commissions and fees . . . . .	10	20	Rent or lease (see instructions):	20a
11	Contract labor (see instructions) . . . . .	11	a	Vehicles, machinery, and equipment . . . . .	20b
12	Depletion . . . . .	12	b	Other business property . . . . .	21
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . .	13	21	Repairs and maintenance . . . . .	21
14	Employee benefit programs (other than on line 19) . . . . .	14	22	Supplies (not included in Part III) . . . . .	22
15	Insurance (other than health) . . . . .	15	23	Taxes and licenses . . . . .	23
16	Interest (see instructions):	16	24	Travel and meals:	24a
a	Mortgage (paid to banks, etc.) . . . . .	16a	a	Travel . . . . .	24a
b	Other . . . . .	16b	b	Deductible meals (see instructions) . . . . .	24b
17	Legal and professional services . . . . .	17	25	Utilities . . . . .	25
25			26	Wages (less employment credits) . . . . .	26
26			27a	Other expenses (from line 48) . . . . .	27a
27a			27b	Reserved for future use . . . . .	27b
28	Total expense before expenses for business use of home. Add lines 8 through 27a . . . . .	28	28		28
29	Tentative profit or (loss). Subtract line 28 from line 7 . . . . .	29	29		29
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . .	30	30		30
31	Net profit or (loss). Subtract line 30 from line 29 . . . . .	31	31		31
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. • If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.	32	32a	All investment is at risk.	32a
			32b	Some investment is not at risk.	32b

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11334P Schedule C (Form 1040) 2020

Need most recent 2 years of **signed** and **filed** tax returns

- Self-employment income is calculated by taking an average of the two years. \*\*
- ✓ Take the Net Profit (or loss) as reflected on the Schedule C's from both years and average the two to get the annual income.
  - ✓ If applicable, add back any non-cash items to the net amounts such as depreciation, amortization or depletion.
  - ✓ The years of returns will depend on the time of year of the request and/or when the individual was income qualified.

\*\* If the two-year average yields a negative number, the self-employment income should be reflected as \$0.  
 \*\* A loss or "negative" income from self-employment should not be deducted from regular wages income, if applicable.

Find the average of the last 2 years.

# Tax Return Example:

\$84,000

$\frac{\$84,000 + \$38,000}{2}$

**= \$61,000**

\$38,000



**SCHEDULE C (Form 1040) Profit or Loss From Business (Sole Proprietorship)**

OMB No. 1545-0074  
**2023**  
 Attachment Sequence No. **09**

Department of the Treasury Internal Revenue Service  
 Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

Name of proprietor: Jane Doe  
 Social security number (SSN): 000-00-0000

**A** Principal business or profession, including product or service (see instructions)

**B** Enter code from instructions

**C** Business name, if no separate business name, leave blank. Example

**D** Employer ID number (EIN) (see instr.)

**E** Business address (including suite or room no.), city, town or post office, state, and ZIP code

**F** Accounting method: (1)  Cash (2)  Accrual (3)  Other (specify)

**G** Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses  Yes  No

**H** If you started or acquired this business during 2023, check here  Yes  No

**I** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions  Yes  No

**J** If "Yes," did you or will you file required Form(s) 1099?  Yes  No

**Part I Income**

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	\$100,000
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	\$100,000
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	0
7	Gross income. Add lines 5 and 6	7	\$100,000

**Part II Expenses. Enter expenses for business use of your home only on line 30.**

8	Advertising	8	
9	Car and truck expenses (see instructions)	9	
10	Commissions and fees	10	
11	Contract labor (see instructions)	11	
12	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	12	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	
14	Employee benefit programs (other than on line 19)	14	
15	Insurance (other than health)	15	\$5,000
16	Interest (see instructions): a Mortgage (paid to banks, etc.) b Other	16a 16b	
17	Legal and professional services	17	
18	Office expense (see instructions)	18	\$5,000
19	Pension and profit-sharing plans	19	
20	Rent or lease (see instructions): a Vehicles, machinery, and equipment b Other business property	20a 20b	
21	Repairs and maintenance	21	\$3,000
22	Supplies (not included in Part III)	22	
23	Taxes and licenses	23	\$3,000
24	Travel and meals: a Travel b Deductible meals (see instructions)	24a 24b	
25	Utilities	25	\$5,000
26	Wages (less employment credits)	26	
27a	Other expenses (from line 48)	27a	
27b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	
28	Total expenses before expenses for business use of home. Add lines 8 through 27b	28	\$16,000
29	Tentative profit or (loss). Subtract line 28 from line 7	29	\$84,000
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. <b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	\$84,000
32	If you have a loss, check the box that describes your investment in this activity. See instructions. SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.	32a 32b	<input type="checkbox"/> All investment is at risk. <input type="checkbox"/> Some investment is not at risk.

**SCHEDULE C (Form 1040) Profit or Loss From Business (Sole Proprietorship)**

OMB No. 1545-0074  
**2022**  
 Attachment Sequence No. **09**

Department of the Treasury Internal Revenue Service  
 Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

Name of proprietor: Jane Doe  
 Social security number (SSN): 000-00-0000

**A** Principal business or profession, including product or service (see instructions)

**B** Enter code from instructions

**C** Business name, if no separate business name, leave blank. Example

**D** Employer ID number (EIN) (see instr.)

**E** Business address (including suite or room no.), city, town or post office, state, and ZIP code

**F** Accounting method: (1)  Cash (2)  Accrual (3)  Other (specify)

**G** Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses  Yes  No

**H** If you started or acquired this business during 2023, check here  Yes  No

**I** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions  Yes  No

**J** If "Yes," did you or will you file required Form(s) 1099?  Yes  No

**Part I Income**

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	70,000
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	
4	Cost of goods sold (from line 42)	4	
5	Gross profit. Subtract line 4 from line 3	5	70,000
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	0
7	Gross income. Add lines 5 and 6	7	70,000

**Part II Expenses. Enter expenses for business use of your home only on line 30.**

8	Advertising	8	10,000
9	Car and truck expenses (see instructions)	9	
10	Commissions and fees	10	
11	Contract labor (see instructions)	11	
12	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	12	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	
14	Employee benefit programs (other than on line 19)	14	
15	Insurance (other than health)	15	5,000
16	Interest (see instructions): a Mortgage (paid to banks, etc.) b Other	16a 16b	
17	Legal and professional services	17	5,000
18	Office expense (see instructions)	18	
19	Pension and profit-sharing plans	19	
20	Rent or lease (see instructions): a Vehicles, machinery, and equipment b Other business property	20a 20b	
21	Repairs and maintenance	21	5,000
22	Supplies (not included in Part III)	22	
23	Taxes and licenses	23	3,000
24	Travel and meals: a Travel b Deductible meals (see instructions)	24a 24b	
25	Utilities	25	4,000
26	Wages (less employment credits)	26	
27a	Other expenses (from line 48)	27a	
27b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	
28	Total expenses before expenses for business use of home. Add lines 8 through 27b	28	32,000
29	Tentative profit or (loss). Subtract line 28 from line 7	29	38,000
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. <b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	\$38,000
32	If you have a loss, check the box that describes your investment in this activity. See instructions. SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.	32a 32b	<input type="checkbox"/> All investment is at risk. <input type="checkbox"/> Some investment is not at risk.



## Steps to Verify Income:

1. Obtain applicable income documentation

2. Calculate annual household income

**3. Calculate the household Area Median Income**

# Median Income Ratios

## AMI information provided on *fhlb.com*:

The screenshot shows the FHLB Dallas website. The 'Community Programs' menu is highlighted with a red box. The 'Homebuyer Equity Leverage Partnership' page is visible, featuring a red banner that reads 'We have exhausted its 2023 AHP funds for the Homebuyer Equity Leverage Partnership (H) program. Through member insti...'. A red box highlights the 'Homebuyer Equity Leverage Partnership' option in the dropdown menu.

### Helpful Resources

A grid of helpful resources is shown. The '2023 Median Incomes' resource is highlighted with a red box. Other resources include 'Income Calculation Tool', 'HELP Funding Manual', 'GrantConnect Webinar', and 'AHP Implementation Plan'.

## HUD AMI Portal:

<https://www.huduser.gov/portal/datasets/il.html>

The screenshot shows the HUD AMI Portal website. The 'Income Limits' dataset is highlighted with a red box. The page includes a search bar, navigation links, and a section titled 'Dataset/Income Limits'. A red box highlights the 'Homebuyer Equity Leverage Partnership' option in the dropdown menu. The page also features a 'Query Tool' section with a year selector set to 2023 and a 'Documents' tab.

# Calculating AMI

PROGRAM	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON
Colorado County, TX FY 2023 MFI: \$74,200					
EXTR LOW INCOME	15400	19720	24860	30000	35140
VERY LOW INCOME	25700	29400	33050	36700	39650
LOW-INCOME	41100	47000	52850	58700	63400

$\$25,700 \times 2 = \$51,400$

Household Income

$\div$

Income at 100% AMI

$\frac{\$26,000}{\$51,400} = 50.58\% \text{ AMI}$

## Additional Notes on Income

### **Overtime, Commissions and Bonuses**

- ✓ Should be included in the annualized calculation based on YTD wages EXCEPT in the case where the applicant's employer provides a statement confirming that overtime, commission, bonus, etc. was a one-time occurrence and will not happen on an on-going basis.
  - If the employer cannot confirm it was a one-time occurrence, any overtime/bonus/commission amounts will be included in the annualized income amount.

### **Child Support**

- ✓ If applicable, take the monthly amount from a Divorce Decree/Court Order etc. and multiple by 12 for the annual amount.
- ✓ Or, if the amount noted in the order is not consistently received/full amount is not being paid etc., calculate an average monthly amount based on payments received (as evidenced by official child support payment statements) and multiply by 12 to get the annual amount.

### **Bank Statements**

- ✓ Bank Statements are generally not an acceptable form of income documentation as they show net amounts of income received as opposed to the gross amounts needed for calculation purposes.

# Questions?



# Application Submission Process

## Funding Process

**Complete requests must be submitted through the member institution via GrantConnect**

**HELP & DRA: 5-7 business days to review and fund requests**  
**SNAP: Variable - most within 3 months from the close of the window**

**Funding is disbursed to the member institution's account with FHLB**

**Member uploads final documentation via GrantConnect**  
**HELP: Final CD – 30 days, Recorded Deed – 60 days**  
**SNAP & DRA: 60 days**

## Submit Documents via GrantConnect

GrantConnect is the system we use to accept and process Set-Aside applications from members. Registrations for use of the portal will only be approved if the individual is employed by a member institution.

### How to Register:

1. Go to <https://app.fhlb.com/GrantConnect>
2. You can create an account by choosing "Sign up now" under the "Sign in" Button
3. Follow the prompts to create a Login ID\* and provide other details we need. Register **as a member**
4. Connect your account to your organization & submit
5. We will review and send an approval over email



## GrantConnect - Tips

- Use Chrome or Edge Browser
- GrantConnect requires multifactor authentication using either a direct-dial phone line phone (cannot be an extension), cell or an authenticator app on your phone.
- Registration approval can take up to 24 hours

Call 1-800-362-2944 for help

**FHLBANK**  
DALLAS | Member driven.  
Community focused.

Login ID

Password [Reset expired/forgotten password](#)

**Sign in**

[Don't have a GrantConnect account? Sign up now](#)

or

[FHLB Employee Sign In](#)

# Questions?

**For More Information**

**Contact Us!**

**By Phone:**

**800.362.2944**

**By Email:**

**ahp@fhlb.com**

Additional information is available online at [fhlp.com/ahp](https://www.fhlp.com/ahp)