



**INSTRUCTIONS FOR SUBMITTING  
THTF COMPETITIVE GRANTS APPLICATION**

1. Complete all pages of the application.
  - ✓ All applicants must submit one copy of their latest audit or audited financial statement through THDA's Participant Information Management System (PIMS). If the audit period covered by the financial audit is more than 12 months prior to the application due date, an explanation and 2024 unaudited financial statements that may include but are not limited to the balance sheet and profit and loss statements must be submitted.
  - ✓ All applicants must complete the Budget and Proforma Worksheet.
  - ✓ All applicants must submit a current Board Resolution approving submission of this application.
  - ✓ All applicants using supportive services toward the match requirement submit the Supportive Services Calculation Worksheet.
  - ✓ All non-profit organizations must also complete **Attachment One: Non-Profit Checklist** and submit supporting documentation, including documentation to be uploaded to PIMS.

Answer all questions individually. If not applicable to your program, please mark N/A.

2. All applicants must complete the Threshold Section of PIMS.
3. PIMS may be accessed from the PIMS Page of the THDA website here: <https://thda.org/government-nonprofit-partners/participant-information-management-system-pims>.
4. Answer all questions individually. If not applicable to your program, please mark N/A.
5. Applications must be typed.
6. The format of this application must not be altered.
7. All attachments to the application must be appropriately labeled.
8. All applications must be uploaded to the EDT – Web Transfer Client System. Email [THTF@thda.org](mailto:THTF@thda.org) for access to the site. The organization name and the name, email address, and phone number of agency staff uploading the application will be needed for access to be provided.
9. All applications must be uploaded to EDT as one pdf document. **Send email to [THTF@thda.org](mailto:THTF@thda.org) after the application has been uploaded.** THDA does not automatically receive notice after EDT uploads.
10. PIMS confirmation email must be included with application.

11. PIMS and EDT are two separate systems. Certain organizational documents including the financial audit must be uploaded to PIMS. Grant Applications, including attachments as requested in the application and as indicated on the Non-profit Checklist, must be uploaded to EDT.
12. Attachments must be labeled and uploaded in the order indicated on the Non-profit Checklist.
13. Applications must be uploaded by **4:00 PM Central Time, Thursday, February 27, 2025.**

**FAXED OR E-MAILED APPLICATIONS WILL NOT BE ACCEPTED.**

**APPLICATION FOR THE 2025 THTF COMPETITIVE GRANTS PROGRAM  
TENNESSEE HOUSING DEVELOPMENT AGENCY**

**PART I**

**1. APPLICANT INFORMATION**

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

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Applicant's E-mail Address: \_\_\_\_\_

Federal Tax Identification #: \_\_\_\_\_

State Legislative District: House: \_\_\_\_\_ Senate: \_\_\_\_\_

Applicant Fiscal Year: State \_\_\_\_\_ Federal \_\_\_\_\_ Calendar \_\_\_\_\_ Other \_\_\_\_\_

**2. APPLICANT TYPE**

\_\_\_\_\_ City or County \_\_\_\_\_ Non-profit Organization

\_\_\_\_\_ Development District \_\_\_\_\_ Public Agency

**3. PROPOSED PROGRAM ADMINISTRATOR**

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

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Proposed Administrator's E-mail Address: \_\_\_\_\_

**4. CONTACT PERSON**

If THDA has questions regarding this application, THDA should contact:

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

Telephone #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

5. **RENTAL PROJECT TYPE:**

Single Family \_\_\_\_\_

Total # of units \_\_\_\_\_

Total # of THTF units \_\_\_\_\_

# of Floating THTF units \_\_\_\_\_

# of Fixed THTF units \_\_\_\_\_

Multi-Family \_\_\_\_\_

Total # of units \_\_\_\_\_

Total # of THTF units \_\_\_\_\_

# of Floating THTF units \_\_\_\_\_

# of Fixed THTF units \_\_\_\_\_

City or County in which your project will be located: \_\_\_\_\_

If a multi-county project, indicate the number of units in each county: \_\_\_\_\_

\_\_\_\_\_

6. **PROPOSED FUNDING SOURCES**

THTF Competitive Grants Project Funds \_\_\_\_\_

THTF Competitive Grants Developer Fee  
(Cannot exceed 7% of total THTF development costs) \_\_\_\_\_

**TOTAL THTF Competitive Grants FUNDS REQUESTED** \_\_\_\_\_

Federal Funds (describe the source(s) of Federal funds) \_\_\_\_\_

Local Government or Agency Funds (describe the source(s) of funds) \_\_\_\_\_

Other (describe the source(s) of Other funds) \_\_\_\_\_

**TOTAL PROGRAM COST** \_\_\_\_\_

7. **AUDIT OR AUDITED FINANCIAL STATEMENT  
MUST BE INCLUDED BY ALL APPLICANTS:**

Copy of latest audit or audited financial statement (**All Applicants must upload through PIMS**)

To the best of my knowledge, I certify that the information in this application is true and correct and that the document has been duly authorized by the governing body of the applicant. I will comply with the program rules and regulations if assistance is approved. I also certify that I am aware that providing false information on the application can subject the individual signing such application to criminal sanction up to and including a Class B Felony.

By signing this application for funds, I am also certifying that all documents required to be electronically uploaded to the THDA Participant Management Information System (PIMS) have been uploaded and that those documents reflect the most recent and complete documents available. All applications will be evaluated based on the supporting documents in the PIMS document repository as of the application deadline.

Mayor, County Executive, Executive Director, or Chairman of the Board:

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

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

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



D. Who (what population or populations) will benefit from the proposed project?

E. If the proposed project will provide housing for older persons, will the housing be solely occupied by persons 62 years of age or older?

F. If the proposed project will provide housing for older persons, will the housing be intended for occupancy by persons 55 years of age or older?

G. If providing housing for persons age 55 or over, describe how the housing will meet each of the requirements as described below:

- i. At least 80 percent of the units must have at least one occupant who is 55 years of age or older;
- ii. The facility or community must publish and adhere to policies and procedures that demonstrate the intent to operate as "55 or older" housing; and
- iii. The facility or community must comply with HUD's regulatory requirements for age verification of residents.

H. How many households will be served from the proposed project?

2. Describe the source or sources and amount of matching funds. A 50% match of project development dollars is required. Developer fees are not required to be matched.

A. Indicate each match source and the value of match to be provided by each source. Please attach additional sheet if necessary.

Match Source	Amount

B. List commitment letters included in the application for each source, if available. Label and include any available commitment letters as attachments to this application.

3. Who will be the administrator of the development phase of the proposed project? Identify his/her relevant experience and training in administering housing programs.

4. Indicate what year the applicant began providing affordable housing and/or affordable housing related services in Tennessee.

5. How many years has the applicant provided affordable housing and/or affordable housing related services in Tennessee?

6. Has the applicant provided affordable housing or affordable housing related services in Tennessee for at least two of the last five consecutive years?      Yes                      No



7. How long has the applicant provided affordable housing and/or affordable housing related services **to the population being served?**
  
8. Describe the applicant’s experience in providing affordable housing, particularly housing to low and very low income households and/or affordable housing related services in Tennessee. Include information on experience in the type of housing and/or services that have been provided.
  
9. Indicate all rental projects successfully developed or underway by the applicant. Identify any projects funded by THDA and the THDA funding source. Use additional sheets if necessary.

<b>Grant Year</b>	<b>Funding Source</b>	<b>Address</b>	<b># of Units</b>	<b>Complete/ Underway</b>	<b>Year Completed</b>

10. Has the applicant selected the individuals or firms to provide architectural, construction management, and/or inspection services? If yes, identify the individual or firm and his or her relevant experience.. Provide information on selected firms even if the THTF request is for acquisition only.



17. If housing units have been identified for acquisition and/or rehabilitation or if sites have been identified for new construction, attach documentation for purchase (sales contract or option) if available.

If the property is already owned by the applicant, attach recorded warranty deed or deeds.

Warranty Deed(s) Attached

Warranty Deeds Are Not Attached

18. If housing units have been identified for acquisition and/or rehabilitation, or if sites have been identified for new construction, attach descriptive data, including:

(1) Architectural Plans or work write-ups. For architectural plans, submit site plan, floor plan, front, back, and side elevations, and rendering of finished units if available.

(2) cost estimates

(3) Photographs

19. If site control has not been secured, describe the applicant's history of securing ownership control of the property type described in the program narrative section of this application over the last 5 years.

20. Will the project be located in a rural or distressed county as described in the THTF 2025 THTF Competitive Grants Program Description, Section 19? If yes, indicate the county or counties where the project will be located.

21. How will the applicant be involved with the following:

(1) Ongoing program administration?

(2) Ensuring the provisions of the compliance period?

(3) Property management?

a. If the applicant will not be providing property management services, has the applicant selected the individuals or firms to provide property management services? If yes, identify the property manager's relevant experience. Please provide description of experience even if the THTF request is for acquisition only.

- b. If the applicant will not be providing property management services, describe the procurement process used in the selection of property management services, if applicable.

22. Explain the need for the proposed project. (Please answer in 200 words or less)

23. How is the proposed project innovative? (Please answer in 200 words or less)

24. How will potential program recipients be made aware of the proposed program?

25. If funded, what efforts will be made to provide outreach to minority and underserved populations?

26. How will recipients of the proposed program be selected?

27. What is the marketing and public relations plan to accentuate the achievements of the proposed project?

28. What is the plan and timetable to keep the Communications Division of THDA involved in the success stories of the project?

29. Will the project target a special needs population? If yes, define the population to be served.

A. Describe any support services that will be provided and attach firm support service commitment letters to the application, if available.

B. List support service commitment letters that are included with the application.

30. If providing housing for individuals with physical, emotional, mental, or developmental disabilities, and these units will exceed 20 % of total units, describe how the housing will meet each of the qualities of settings eligible for reimbursement as described by the Centers for Medicare and Medicaid Services (*See THTF 2025 THTF Competitive Grants Program Description, Section 7 for a description of the requirements*).

31. Will the proposed project set aside the following:

A. 25% of the THTF units for households with incomes between 0% - 30% AMI?	Yes	No
Number of THTF units to be set aside?	_____	

B. 50% of the THTF units for households with incomes between 0% - 50 % AMI?	Yes	No
Number of THTF units to be set aside?	_____	

32. If the project is providing housing for formerly incarcerated individuals, please provide the following:

A. Copy of policies and procedures guiding the operation of the program

B. Description of screening and selection procedures

- C. Documentation confirming that necessary support services will be funded and provided
  - D. Copy of the program’s application for tenancy
  - E. Documentation confirming that your agency is included on the Tennessee Department of Corrections list of approved transitional housing providers
33. If the applicant is a faith-based organization and a religious exemption under the Fair Housing Act is requested, submit an attorney opinion letter as an attachment demonstrating satisfaction of the religious exemption prongs under the Fair Housing Act.
34. If the applicant is serving a special needs or specialized population and will be using a program or occupancy agreement in lieu of a standard lease, submit a copy of the agreement as an attachment, if available.
35. Will rent subsidies be utilized for this project?    If yes, indicate type of rent subsidy.
36. If rent subsidies will be utilized, how many total units will receive a subsidy and how many THTF units will receive a subsidy?
- # of total units receiving a rent subsidy \_\_\_\_\_
- # of THTF units receiving a rent subsidy \_\_\_\_\_
37. If rent subsidies will be utilized, are contracts already in place?    If no, please explain.    Attach any subsidy commitment letters or contracts.

38. Are there any mandatory fees residents will be required to pay? If yes, list the fees and the monthly fee amount.

39. Will the tenants or the applicant/owner be paying utilities? If the tenants will be paying utilities, complete the utility allowance calculation worksheet.

**MONTHLY UTILITY ALLOWANCE CALCULATION WORKSHEET** *(If utilities are paid by tenants)*

*The published High HOME and Fair Market Rents include utilities. The cost of utilities paid by tenants must be subtracted from the published rent to determine the maximum allowable rent. For tenants paying utilities, rent to be charged after subtracting the utility allowance should be entered on the Operating Budget Tab of the Budget and Proforma Worksheet.*

UTILITY TYPE		ALLOWANCE AMOUNT				
		0 BEDRM	1 BEDRM	2 BEDRM	3 BEDRM	4 BEDRM
<i>Heating</i>	Natural Gas					
	Bottle Gas					
	Oil/Electric					
	Coal/Other					
<i>Cooking</i>	Natural Gas					
	Bottle Gas					
	Oil/Electric					
	Coal/Other					
<i>Other Electric</i>						
<i>Air Conditioning</i>						
<i>Water Heating</i>	Natural Gas					
	Bottle Gas					
	Oil/Electric					



	Coal/Other					
<i>Water</i>						
<i>Sewer</i>						
<i>Trash Collection</i>						
<i>Range/Microwave</i>						
<i>Refrigerator</i>						
<i>Other-specify</i>						
<i>TOTAL</i>						

SOURCE OF UTILITY AMOUNTS:     THDA     Local PHA     Other \_\_\_\_\_

**PART III**  
**THTF COMPETITIVE GRANTS SUMMARY FORM**

**RENTAL UNITS**

NOTE: Do not include THTF Developer Fees in these values.

	<b># of Units</b>	<b>THTF Funds Per Unit</b>	<b>Other Funds Per Unit</b>	<b>Total Cost Per Unit</b>
New Construction		\$	\$	\$
Acquisition		\$	\$	\$
Rehabilitation		\$	\$	\$
TOTAL		\$	\$	\$

**PART IV**  
**COMPETITIVE GRANTS PROJECT BUDGET**

<b>Funding Source</b>	<b>Rental Acquisition</b>	<b>Rental Rehabilitation</b>	<b>Rental New Construction</b>	<b>Developer Fees</b>	<b>TOTAL</b>
<b>THTF FUNDS</b>	\$	\$	\$	\$	\$
<b>Federal Funds</b>	\$	\$	\$	\$	\$
<b>Other State Funds</b>	\$	\$	\$	\$	\$
<b>Local Gov't or Agency Funds</b>	\$	\$	\$	\$	\$
<b>First Mortgage Funds</b>	\$	\$	\$	\$	\$
<b>Private Funds</b>	\$	\$	\$	\$	\$
<b>Other (Describe)</b>	\$	\$	\$	\$	\$
<b>TOTAL</b>	\$	\$	\$	\$	\$

**Non-profit Applicants, please enter names and positions for each member of the Board of Directors.  
Attach additional sheet if necessary.**

<b>BOARD MEMBER NAME</b>	<b>POSITION (Chairman, Treasurer, Secretary, Board Member, Other)</b>
1.	
2.	
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4.	
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20.	

**Board Member Information**

Copy as necessary for all Board Members  
(NOTE: Fillable form is available on PIMS website)

To be completed by all Board Members of agency applying for THDA program funds. This form must be uploaded to PIMS for each Board Member.

Name of Agency: \_\_\_\_\_

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

Occupation: \_\_\_\_\_

Board Officer?            Yes            No

If yes, list position: \_\_\_\_\_

Primary Expertise/Contribution to the Board: \_\_\_\_\_

Length of Board Service: \_\_\_\_\_

Date of Board Term Expiration: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

-----**For Organizations Seeking CHDO Designation Only**-----

Low-Income Rep to the Board?            Yes            No

If Yes: \_\_\_\_\_

Resident of low-income neighborhood:            Yes            No

Elected representative of low-income neighborhood organization:            Yes            No

Low-income resident with annual household income below 80% of Area Median Income:            Yes            No

## ***THTF COMPETITIVE GRANTS SCORING MATRIX – UP TO 100 POINTS***

<b>PROGRAM DESIGN</b>		<b>UP TO 35 POINTS</b>
<ul style="list-style-type: none"> <li><i>The program design is complete, adheres to program guidelines, all necessary components are identified in the application, and the program design demonstrates an effective use of THDA resources.</i></li> </ul>		
1. Site Control – Up to 3 points	The Applicant owns the property on which the proposed housing will be developed.	3 Points
	The Applicant has an option or contract to purchase the property on which the proposed housing will be developed.	2 Points
	The Applicant demonstrates a consistent and successful history of securing ownership control of property over the past five years prior to the Application Due Date that is either: (1) at least double the number of single family units proposed in the application or (2) if multifamily housing, at least double the number of multifamily sites proposed for acquisition in the application.	1 Point
2. The project is physically, administratively, and financially feasible with sufficient revenue for the on-going operation of the housing during the compliance period – Up to 10 points	<p>The Project operating revenue supports operating expenses and expected cash flow is positive.</p> <p>If applicable, the project will support debt.</p> <p>The physical unit design is appropriate for the target population such that all individuals, including those with physical disabilities, have full access to all common areas and amenities in the unit.</p>	Up to 10 points
3. Budget and Proforma Worksheet – Up to 5 points	<p>The budget and proforma worksheet is complete, correct and demonstrates the need for THTF Funds.</p> <p>---Deduction if no explanation for operating expenses exceeding 50 % of total annual income. (-2 points)</p> <p>---Possible deduction if expenses are extremely high or low. (up to -2 points)</p>	Up to 5 points
4. Rent Reasonableness – Up to 8 points	<p>Rents are affordable and are in accordance with program guidelines, such that households targeted by the application will not pay more than 30% of their income on rent and utilities.</p> <p>If Rental assistance is provided, the tenant portion of rent is equal to or less than 30 % of the tenant’s gross monthly income.</p>	Up to 8 points

<p>5. Universal Design, <u>New Construction</u> – Up to 2 points</p>	<p>The unit includes universal design features associated with each unit. THDA will award points for the characteristics noted below. <b>1 point</b> (1-4 features) <b>2 points</b> (5 or more features)</p> <ol style="list-style-type: none"> <li>a. One entrance door that is on an accessible route served by a ramp or no-step entrance and which also has a 36” door.</li> <li>b. All interior doors have a minimum of 32 inches of clear passage space except closets of less than 15 square feet.</li> <li>c. All hallways have a clear passage of at least 36 inches, is level with ramped or beveled changes at each threshold.</li> <li>d. Each electrical panel, breaker box, light switch or thermostat is no higher than 48 inches above the floor.</li> <li>e. Each electrical plug or receptacle is at least 15” above the floor.</li> <li>f. Minimum 5’ x 5’ level clear space inside and outside entry door.</li> <li>g. Broad blocking in walls around each toilet, tub and shower for future placement of grab bars.</li> <li>h. Full-extension, pull-out drawers, shelves and racks in base cabinets in kitchen.</li> <li>i. Front mounted controls on all appliances.</li> <li>j. Lever door handles on all doors.</li> <li>k. Loop handle pulls on drawers and cabinet doors.</li> </ol>	<p>Up to 2 points</p>
<p>6. Support Services – Up to 2 points</p>	<p>The application includes firm commitments demonstrating that a range of support services will be available for individuals with disabilities, homeless veterans, youth transitioning out of foster care, and formerly incarcerated individuals. Services are available at the choice of the applicant.</p> <p>Firm commitments for services provided to other populations may receive points under Innovation.</p>	<p>Up to 2 points</p>
<p>7. CMS Quality of Settings Standards–</p>	<p>If more than 20 % of total units are designated for persons with disabilities, the proposed housing meets the goals of the Final Rule for the qualities of settings that are eligible for reimbursement under the Medicaid home and community-based services that have been established by the Centers for Medicare and Medicaid Services (CMS) on January 16, 2014.</p>	<p>Possible point deductions if qualities of settings are not met</p>
<p>8. Matching Funds – Up to 5 points</p>	<p>Firm commitments for at least 50% of requested development dollars are included in the application. Eligible match sources may include:</p> <ul style="list-style-type: none"> <li>• Grants from other agencies;</li> <li>• Federal sources, such as the CDBG program or USDA Rural Development;</li> </ul>	<p>Up to 5 points</p>

	<ul style="list-style-type: none"> <li>• Contributions by local church groups or local agencies;</li> <li>• Contributions by individuals;</li> <li>• Bank loans;</li> <li>• A funding pool established by a local lender for the Applicant;</li> <li>• Value of support services for special needs populations;</li> <li>• Value of property already owned by the applicant upon which the proposed housing will be rehabilitated or constructed</li> <li>• HOME grants from local jurisdictions</li> <li>• Value of donated property upon which the proposed housing will be located</li> </ul> <p><b>**NOTE:</b> Other THDA program funds, including federal sources such as HOME funds and in kind donations for services or labor are not eligible sources of matching funds.</p>	
<b>APPLICANT CAPACITY</b>		<b>UP TO 35 POINTS</b>
<ul style="list-style-type: none"> <li>• <i>The Applicant demonstrates sufficient capacity to carry out the proposed project and to manage the rental housing through the compliance period.</i></li> </ul>		
1. Housing Experience with Targeted Population– Up to 12 points	The Applicant has at least 2 consecutive years successful experience within the last 5 years in providing housing or housing related services in TN. The experience of staff and/or contracted consultants may be considered after the applicant has met the two year requirement.	Up to 12 points
2. Rental Housing Management Experience – Up to 12 points	The Applicant, including its staff or a contracted, third party property management entity, have a demonstrated capacity to manage rental housing.	Up to 12 points
3. Financial Capacity of the Applicant – Up to 11 points	The Applicant’s financial statements demonstrate that the Applicant has a strong financial health, including, but not limited to, a diverse source of revenues, unrestricted cash resources to support the property’s operation if project income is insufficient to meet project expenses. The Applicant’s financial audit does not demonstrate material exceptions or concerns about management and operations.	Up to 11 points
4. Past Performance – Up to 8 points deduction	Applicants with past experience as a recipient of funds under THDA’s Competitive Grants Program or other THDA Programs , may receive point deductions based on the Applicant’s past failure to: <ul style="list-style-type: none"> <li>• Draw funds timely and according to instructions.</li> <li>• Complete the project in a timely manner.</li> <li>• Operate the rental housing in accordance THDA guidelines</li> </ul>	Up to 2 points deduction for each concern



	<ul style="list-style-type: none"> <li>Respond timely to resident concerns or complaints, contractor concerns or complaints, and THDA requests for information and/ or client stories.</li> </ul>	
<b>NEED</b>		<b>UP TO 23 POINTS</b>
<ul style="list-style-type: none"> <li><i>The applicant proposes housing targeted toward extremely low or very low-income households, housing in an area that has not received Competitive Grants funding since July 1, 2020, or housing located in a distressed or rural county..</i></li> <li><i>(*Note - up to 9 income points possible if units are set aside for 30 % AMI &amp; 50% AMI households)</i></li> </ul>		
1. 25% Set Aside for Incomes at or below at 30% AMI	The applicant has elected to set aside 25% of the THTF units for households with incomes at 30% AMI or less	5 points
2. 50% Set Aside for Incomes at or below at 50% AMI	The applicant has elected to set aside 50% of the THTF units for households with incomes at 50% AMI or less	4 points
3. Prior Funding	An Applicant may receive points if the THTF Competitive Grants Program has not awarded funding in the proposed county where the housing will be located since July 1, 2020.	5 points
4. Distressed Counties	The project is located in one of the designated distressed counties as described in the THTF 2025 Competitive Grants Program Description.	5 points
5. Rural Counties	The project is located in one of the designated rural counties as described in the THTF 2025 Competitive Grants Program Description,	4 points
<b>INNOVATION</b>		<b>UP TO 7 points</b>
<ul style="list-style-type: none"> <li><i>The proposal demonstrates a creative approach to the provision of affordable housing.</i></li> </ul>		
1. Creative approach to provision of Affordable Housing – Up to 7 points	<p>The Applicant demonstrates a creative approach to affordable housing for low, very low or extremely low income households through:</p> <ul style="list-style-type: none"> <li>unique partnerships;</li> <li>a variety of funding sources;</li> <li>use of alternative energy sources or energy conservation measures;</li> <li>inclusion of universal design features in housing to be rehabilitated;</li> <li>visitability design elements in housing to be rehabilitated;</li> <li>the provision of housing for individuals who are homeless through a housing first approach and/or;</li> </ul>	Up to 7 points

	<ul style="list-style-type: none"><li>• commitment for services for populations other than individuals with disabilities, youth transitioning from foster care, formerly incarcerated individuals, and homeless veterans.</li><li>• other innovative means to address housing needs.</li></ul>	
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