# Grant Number: **MI0007L5F001912**

**Tax ID Number: 38-6000134**

**DUNS Number: 87743191**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan State Housing Development Authority (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0007L5F001912 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0007L5F001912 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $0 |   |   |
| h. | Supportive services | $0 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $127,818 |   |   |
| k. | Administrative costs |  $8,946 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $136,764 |  | $136,764 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan State Housing Development Authority**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0009L5F001912**

**Tax ID Number: 38-6000134**

**DUNS Number: 87743191**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan State Housing Development Authority (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0009L5F001912 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0009L5F001912 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $0 |   |   |
| h. | Supportive services | $0 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $748,008 |   |   |
| k. | Administrative costs |  $54,692 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $802,700 |  | $802,700 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan State Housing Development Authority**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0017L5F001912**

**Tax ID Number: 38-6000134**

**DUNS Number: 113704139**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan Department of Health and Human Services (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0017L5F001912 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0017L5F001912 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $329,099 |   |   |
| g. | Rental assistance | $0 |   |   |
| h. | Supportive services | $62,000 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $23,678 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $414,777 |  | $414,777 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan Department of Health and Human Services**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

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  (Date)

# Grant Number: **MI0026L5F001912**

**Tax ID Number: 38-2931242**

**DUNS Number: 143402092**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Eastern Upper Peninsual Veterans Foundation (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0026L5F001912 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0026L5F001912 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $0 |   |   |
| h. | Supportive services | $65,000 |   |   |
| i. | Operating costs | $47,812 |   |   |
| j. | Homeless Management Information System | $5,000 |   |   |
| k. | Administrative costs |  $7,678 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $125,490 |  | $125,490 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Eastern Upper Peninsual Veterans Foundation**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0434L5F001905**

**Tax ID Number: 38-1791181**

**DUNS Number: 76389618**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Capital Area Community Services, Inc. (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0434L5F001905 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0434L5F001905 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $79,788 |   |   |
| h. | Supportive services | $22,742 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $5,834 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $108,364 |  | $108,364 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Capital Area Community Services, Inc.**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0435L5F001905**

**Tax ID Number: 38-6111652**

**DUNS Number: 20892659**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and EightCAP, Inc. (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0435L5F001905 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0435L5F001905 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $91,152 |   |   |
| h. | Supportive services | $29,130 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $1,518 |   |   |
| k. | Administrative costs |  $5,000 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $126,800 |  | $126,800 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

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  (Typed Name and Title)

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  (Date)

**RECIPIENT**

**EightCAP, Inc.**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0462L5F001904**

**Tax ID Number: 38-2950406**

**DUNS Number: 131723194**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Channel Housing Ministries, Inc. (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0462L5F001904 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0462L5F001904 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $54,456 |   |   |
| h. | Supportive services | $4,899 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $1,404 |   |   |
| k. | Administrative costs |  $5,517 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $66,276 |  | $66,276 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

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  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Channel Housing Ministries, Inc.**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0463L5F001904**

**Tax ID Number: 38-3313166**

**DUNS Number: 168483022**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Allegan County Community Mental Health Services (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0463L5F001904 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0463L5F001904 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $23,292 |   |   |
| h. | Supportive services | $2,010 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $2,110 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $27,412 |  | $27,412 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Allegan County Community Mental Health Services**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0516L5F001903**

**Tax ID Number: 38-1792679**

**DUNS Number: 39630793**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Human Development Commission (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0516L5F001903 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0516L5F001903 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $225,240 |   |   |
| h. | Supportive services | $88,676 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $13,128 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $327,044 |  | $327,044 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

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  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Human Development Commission**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

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  (Date)

# Grant Number: **MI0559L5F001902**

**Tax ID Number: 38-6000134**

**DUNS Number: 87743191**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan State Housing Development Authority (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0559L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0559L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $0 |   |   |
| h. | Supportive services | $536,730 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $52,046 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $588,776 |  | $588,776 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan State Housing Development Authority**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0560L5F001902**

**Tax ID Number: 38-1797320**

**DUNS Number: 89585350**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Alger Marquette Community Action Board (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0560L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0560L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $108,660 |   |   |
| h. | Supportive services | $98,179 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $13,264 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $220,103 |  | $220,103 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Alger Marquette Community Action Board**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0561L5F001902**

**Tax ID Number: 38-3245099**

**DUNS Number: 158806393**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Housing Services Mid Michigan (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0561L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0561L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $118,608 |   |   |
| h. | Supportive services | $29,510 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $1,200 |   |   |
| k. | Administrative costs |  $11,920 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $161,238 |  | $161,238 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Housing Services Mid Michigan**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0562L5F001902**

**Tax ID Number: 38-1803599**

**DUNS Number: 120359559**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Community Action Agency (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0562L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0562L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $95,883 |   |   |
| g. | Rental assistance | $0 |   |   |
| h. | Supportive services | $82,174 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $8,555 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $186,612 |  | $186,612 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Community Action Agency**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0563L5F001902**

**Tax ID Number: 38-3313166**

**DUNS Number: 168483022**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Allegan County Community Mental Health Services (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0563L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0563L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $115,176 |   |   |
| h. | Supportive services | $20,626 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $8,933 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $144,735 |  | $144,735 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Allegan County Community Mental Health Services**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0564L5F001902**

**Tax ID Number: 38-3313166**

**DUNS Number: 168483022**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Allegan County Community Mental Health Services (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0564L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0564L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $87,696 |   |   |
| h. | Supportive services | $12,166 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $6,576 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $106,438 |  | $106,438 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Allegan County Community Mental Health Services**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0565L5F001902**

**Tax ID Number: 38-6000134**

**DUNS Number: 113704139**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan Department of Health and Human Services (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0565L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0565L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $1,315,596 |   |   |
| h. | Supportive services | $267,733 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $106,060 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $1,689,389 |  | $1,689,389 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan Department of Health and Human Services**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0566L5F001902**

**Tax ID Number: 38-6000134**

**DUNS Number: 113704139**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan Department of Health and Human Services (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0566L5F001902 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0566L5F001902 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $2,591,364 |   |   |
| h. | Supportive services | $702,085 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $226,343 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $3,519,792 |  | $3,519,792 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan Department of Health and Human Services**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0636L5F001900**

**Tax ID Number: 38-6000134**

**DUNS Number: 87743191**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Michigan State Housing Development Authority (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0636L5F001900 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0636L5F001900 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities | $270,469 |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition |  |   |   |
| d. | Rehabilitation |  |   |   |
| e. | New construction |  |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance |  |   |   |
| h. | Supportive services |  |   |   |
| i. | Operating costs |  |   |   |
| j. | Homeless Management Information System |  |   |   |
| k. | Administrative costs |  |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $270,469 |  | $270,469 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Michigan State Housing Development Authority**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0667L5F001900**

**Tax ID Number: 38-2709547**

**DUNS Number: 940007255**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Staircase Youth Services. Inc. (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0667L5F001900 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0667L5F001900 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition | $0 |   |   |
| d. | Rehabilitation | $0 |   |   |
| e. | New construction | $0 |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $140,088 |   |   |
| h. | Supportive services | $29,700 |   |   |
| i. | Operating costs | $0 |   |   |
| j. | Homeless Management Information System | $0 |   |   |
| k. | Administrative costs |  $12,000 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $181,788 |  | $181,788 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Typed Name and Title)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

**RECIPIENT**

**Staircase Youth Services. Inc.**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

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  (Typed Name and Title of Authorized Official)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Date)

# Grant Number: **MI0668L5F001900**

**Tax ID Number: 38-6111652**

**DUNS Number: 20892659**

SPECIAL COVID-19 AMENDMENT TO THE

FY 2019 CONTINUUM OF CARE PROGRAM GRANT AGREEMENT

This Amendment to Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and EightCAP, Inc. (the Recipient).

RECITALS

1. HUD and the Recipient entered into a Grant Agreement, having Grant No. MI0668L5F001900 (the Grant Agreement).

(*Recitals are below. One amendment can include more than one change, such as both a change in budget and adding an eligible activity. Keep the recitals that apply to the amendments you are making and delete the others. Delete this paragraph once you have read and understood it*).

(*recitals for adding eligible activities - Delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to add eligible activities and to shift funds between eligible activities in response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area  and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

 (*recitals for shifting funds from one activity to another without adding eligible activities -* *delete section if not using*)

1. The parties are desirous of amending the Grant Agreement to shift more than 10% from one eligible activity to another to assist in the response to the COVID-19 pandemic.
2. HUD has determined that the change is necessary to better serve eligible persons within the geographic area and to ensure that the priorities established under the Notice of Funding Availability in which the grant was originally awarded, or the most recent NOFA, are met.

AGREEMENTS

The Grant Agreement is hereby amended as follows:

(*if eligible activities are being added or funds are being shifted between BLIs include this – delete section if not using)*

1. (*if the recipient is not a sole recipient or UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds for project number MI0668L5F001900 are now allocated as follows:

(*if the recipient is the sole recipient or an UFA use this)* HUD’s total funding obligation for this grant remains the same, however the funds are now allocated as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Items** | **Original Budget** | **Change** | **Amended Budget** |
| a. | Continuum of Care planning activities |  |   |   |
| b. | UFA costs |  |   |   |
| c. | Acquisition | $0 |   |   |
| d. | Rehabilitation | $0 |   |   |
| e. | New construction | $0 |   |   |
| f. | Leasing | $0 |   |   |
| g. | Rental assistance | $57,936 |   |   |
| h. | Supportive services | $27,977 |   |   |
| i. | Operating costs | $3,252 |   |   |
| j. | Homeless Management Information System | $300 |   |   |
| k. | Administrative costs |  $8,947 |   |   |
| l. | Relocation costs |   |   |   |
| m.  | HPC homelessness prevention activities: |   |   |   |
|   | Housing relocation and stabilization services | $0  |  $0 | $0 |
| Short-term and medium-term rental assistance | $0  |  $0 | $0  |
| **Total Award:** | $98,412 |  | $98,412 |

(*the rest of this form must appear in all amendments)*

This Amendment to Grant Agreement constitutes the entire agreement of the parties as to amendment of the Grant Agreement and will become effective only upon the execution hereof by all parties. The remaining terms of the Grant Agreement remain in full force and effect.   The parties, on the dates set forth below their respective signatures, hereby execute this Amendment to Grant Agreement, as follows:

**UNITED STATES OF AMERICA,**

**Secretary of Housing and Urban Development**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature)

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  (Typed Name and Title)

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  (Date)

**RECIPIENT**

**EightCAP, Inc.**

BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  (Signature of Authorized Official)

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  (Typed Name and Title of Authorized Official)

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  (Date)