

## Before Starting the Project Application

**To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.**

Things to Remember:

- Additional training resources can be found on the HUD.gov at [https://www.hud.gov/program\\_offices/comm\\_planning/coc](https://www.hud.gov/program_offices/comm_planning/coc).
- Questions regarding the FY 2022 CoC Program Competition process must be submitted to [CoCNOFO@hud.gov](mailto:CoCNOFO@hud.gov).
- Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to [e-snaps@hud.gov](mailto:e-snaps@hud.gov).
- Project applicants are required to have a Unique Entity Identifier (UEI) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM) in order to apply for funding under the Fiscal Year (FY) 2022 Continuum of Care (CoC) Program Competition. For more information see FY 2022 CoC Program Competition NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2022 CoC Program NOFO and the FY 2022 General Section NOFO.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with navigational guides, which are also found on the HUD Exchange.
- New projects may only be submitted as either Reallocated, Bonus Projects, Reallocated + Bonus or DV Bonus. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps, particularly the Authorized Representative and Alternate Representative forms as HUD uses this information to contact you if additional information is required (e.g., allowable technical deficiency).
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2022 CoC Program Competition NOFO.

## 1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 08/31/2022

4. Applicant Identifier:

a. Federal Entity Identifier:

5. Federal Award Identifier:

6. Date Received by State:

7. State Application Identifier:

## 1B. SF-424 Legal Applicant

### 8. Applicant

- a. Legal Name: Miriam's House, Inc.
- b. Employer/Taxpayer Identification Number (EIN/TIN): 54-1606543
- c. Unique Entity Identifier: T11QFJHUYQ53

### d. Address

Street 1: 409 Magnolia Street  
Street 2:  
City: Lynchburg  
County:  
State: Virginia  
Country: United States  
Zip / Postal Code: 24503

### e. Organizational Unit (optional)

Department Name:  
Division Name:

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

Prefix: Ms.  
First Name: Kristen  
Middle Name:  
Last Name: Nolen  
Suffix: MSW  
Title: Director of Housing Services  
Organizational Affiliation: Miriam's House, Inc.  
Telephone Number: (434) 847-1101  
Extension:

**Fax Number:** (434) 528-2725

**Email:** kristen@miriamshouse.org

## 1C. SF-424 Application Details

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

**10. Name of Federal Agency:** Department of Housing and Urban Development

**11. Catalog of Federal Domestic Assistance Title:** CoC Program  
**CFDA Number:** 14.267

**12. Funding Opportunity Number:** FR-6600-N-25  
**Title:** Continuum of Care Homeless Assistance Competition

**13. Competition Identification Number:**  
**Title:**

## 1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Virginia  
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: VA-508 HMIS 2022

16. Congressional District(s):

16a. Applicant: VA-006

16b. Project: VA-006  
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 07/01/2023

b. End Date: 06/30/2024

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

## 1E. SF-424 Compliance

**19. Is the Application Subject to Review By State Executive Order 12372 Process?** b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

**20. Is the Applicant delinquent on any Federal debt?** No

If "YES," provide an explanation:

## 1F. SF-424 Declaration

By signing and submitting this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

I AGREE:

### 21. Authorized Representative

**Prefix:** Mrs.

**First Name:** Sarah

**Middle Name:**

**Last Name:** Quarantotto

**Suffix:** MSW

**Title:** Executive Director

**Telephone Number:** (434) 847-1101  
(Format: 123-456-7890)

**Fax Number:** (434) 528-2725  
(Format: 123-456-7890)

**Email:** sarah@miriamshouse.org

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

**Date Signed:** 08/31/2022



# 1G. HUD 2880

**Applicant/Recipient Disclosure/Update Report - form HUD-2880**  
**U.S. Department of Housing and Urban Development**  
**OMB Approval No. 2506-0214 (exp.02/28/2022)**

## Applicant/Recipient Information

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

**Agency Legal Name:** Miriam's House, Inc.

**Prefix:** Mrs.

**First Name:** Sarah

**Middle Name:**

**Last Name:** Quarantotto

**Suffix:** MSW

**Title:** Executive Director

**Organizational Affiliation:** Miriam's House, Inc.

**Telephone Number:** (434) 847-1101

**Extension:** 101

**Email:** sarah@miriamshouse.org

**City:** Lynchburg

**County:**

**State:** Virginia

**Country:** United States

**Zip/Postal Code:** 24503

**2. Employer ID Number (EIN):** 54-1606543

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

#### 4. Amount of HUD Assistance Requested/Received

**4a. Total Amount Requested for this project:** \$25,744.00

(Requested amounts will be automatically entered within applications)

#### 5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

### Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes  
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. No

#### Certification

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

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

I AGREE:

**Name / Title of Authorized Official:** Sarah Quarantotto , Executive Director

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

**Date Signed:** 08/31/2022

# 1H. HUD 50070

## HUD 50070 Certification for a Drug Free Workplace

**Applicant Name:** Miriam's House, Inc.

**Program/Activity Receiving Federal Grant Funding:** CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees — (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted — (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will — (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

## 2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Workplaces, including addresses, entered in the attached project application. Refer to addresses entered into the attached project application.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, submitting, or causing to be submitted a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

X

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

**Authorized Representative**

**Prefix:** Mrs.

**First Name:** Sarah

**Middle Name**

**Last Name:** Quarantotto

**Suffix:** MSW

**Title:** Executive Director

**Telephone Number:** (434) 847-1101  
**(Format: 123-456-7890)**

**Fax Number:** (434) 528-2725  
**(Format: 123-456-7890)**

**Email:** sarah@miriamshouse.org

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

**Date Signed:** 08/31/2022

## CERTIFICATION REGARDING LOBBYING

### Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

**Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)**

**Applicant's Organization:** Miriam's House, Inc.

**Name / Title of Authorized Official:** Sarah Quarantotto , Executive Director

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

**Date Signed:** 08/31/2022

# 1J. SF-LLL

## DISCLOSURE OF LOBBYING ACTIVITIES

**Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.  
Approved by OMB0348-0046**

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

**Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program?** No

**Legal Name:** Miriam's House, Inc.

**Street 1:** 409 Magnolia Street

**Street 2:**

**City:** Lynchburg

**County:**

**State:** Virginia

**Country:** United States

**Zip / Postal Code:** 24503

**11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.**

I certify that this information is true and complete.



**Authorized Representative**

**Prefix:** Mrs.

**First Name:** Sarah

**Middle Name:**

**Last Name:** Quarantotto

**Suffix:** MSW

**Title:** Executive Director

**Telephone Number:** (434) 847-1101  
**(Format: 123-456-7890)**

**Fax Number:** (434) 528-2725  
**(Format: 123-456-7890)**

**Email:** sarah@miriamshouse.org

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

**Date Signed:** 08/31/2022

## IK. SF-424B

### (SF-424B) ASSURANCES - NON-CONSTRUCTION PROGRAMS

OMB Number: 4040-0007  
 Expiration Date: 02/28/2022

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- |    |   |
|----|---|
| 1. | Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.   |
| 2. | Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.   |
| 3. | Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.  |
| 4. | Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.  |
| 5. | Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).  |
| 6. | Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism, (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. |
| 7. | Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.  |
| 8. | Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.  |

- 9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327~333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93~205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

As the duly authorized representative of the applicant, I certify:

Authorized Representative for: Miriam's House, Inc.

Prefix: Mrs.

First Name: Sarah

**Middle Name:**

**Last Name:** Quarantotto

**Suffix:** MSW

**Title:** Executive Director

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

**Date Signed:** 08/31/2022

## 1L. SF-424D

Are you requesting CoC Program funds for No  
construction costs in this application?

No SF-424D is required. Select "Save and Next" to move to the next screen.

## 2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$0

Organization	Type	Sub-Award Amount
This list contains no items		

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

### 1. Describe your organization's (and subrecipient(s) if applicable) experience in effectively utilizing federal funds and performing the activities proposed in the application.

Miriam's House (MH) has a 29 year history of effectively using federal funds and performing the activities proposed in applications. In 1994, through a HUD grant, MH opened a transitional housing program which converted to a permanent supportive housing program in 2017. In 2008, MH became the HMIS Lead for the CoC, in 2013 launched a CoC-funded rapid re-housing (RRH) program, in 2017 became the CoC Collaborative Applicant, in 2018 launched a street outreach program and in 2022 launched a CoC-funded permanent supportive housing program for chronically homeless persons. The Housing First model has been adopted across all MH programs. All barriers to program admission such as drug testing, sobriety requirements, treatment compliance, and criminal background have been eliminated since 2011. MH has implemented harm reduction strategies to increase program retention and exits to permanent housing. All programs employ a voluntary service model where clients' participation in services is not required and does not impact their housing. All MH case managers receive training in best practices such as motivational interviewing, conflict resolution, harm reduction, critical time intervention and housing-focused case management strategies. Recognizing that many of our clients have experienced trauma, including the trauma of homelessness, our staff provide trauma-informed services. MH currently manages five CoC federal grants and two state homeless response grants. In our 29 year history of receiving CoC Competition funding, MH has always drawn down on a regular basis, never returned grants funds and has had no findings on an audit or monitoring visit. MH receives funding through the Emergency Solutions Grant Program provided to Virginia through the Virginia Homeless Solutions Program and has effectively used funds to perform the activities proposed in the application, monthly submitted funding requests and have had no findings on monitoring visits. For all federal grants, MH has had to provide a 25% match which we are always successful in securing. We have an endowment from which we draw down operating funds for programs each year as well as a robust fundraising program aimed at increasing our access to state, local and private sector funds. The endowment housed at the Greater Lynchburg Community Trust valued at more than 2 million dollars and allows an annual 5% payout based on a 12 quarter rolling average. This annual payout provides match for our homeless response programs through the CoC Program. The financial management system used by both the Director of Administration and Finance Manager is QuickBooks.

**2. Describe your organization’s (and subrecipient(s) if applicable) experience in leveraging Federal, State, local and private sector funds.**

Miriam's House acquired its property at 409 Magnolia Street, Lynchburg, VA through the Low Income Housing Tax Credit Program and has provided low income housing for the past 29 years. In addition to receiving funds through the CoC Competition, MH receives state funds through the Virginia Department of Housing and Community Development's Virginia Homeless Solutions Program (partially funded through ESG) and the Virginia Housing Trust Fund. MH is also a recipient of Community Development Block Grant funds, Emergency Food and Shelter National Board Program, and Homeless Education Program funds. Within the private sector, MH receives funds from multiple corporate foundations such as Genworth, Pacific Life, Wells Fargo and Truist. MH also receives funds from local grantmaking bodies such as the Junior League and the Greater Lynchburg Community Foundation, in addition to support from churches, community-based organizations and individual donors. Annually MH manages almost \$500,000 in public funds and \$700,000 in private

**3. Describe your organization’s (and subrecipient(s) if applicable) financial management structure.**

Miriam’s House (MH) is governed by a 19-member board of directors comprised of professionals from a variety of backgrounds including financial planners, lawyers, clergy, medical professionals, college professors, human resource professionals, business owners and many others. The board develops and reviews the following organizational policies: Conflict of Interest Policy, Grievance Policy, Whistleblower Policy, and Fair Housing Policy. In addition, a Consumer Advisory Council comprised of formerly homeless individuals provides quarterly feedback on organizational decisions. The leadership at MH includes an Executive Director, a Director of Housing Services, a Director of Administration and Community Engagement and a Finance Manager. The HUD Richmond Field Office, the Monitoring and Evaluation Committee of the CoC and the Virginia Department of Housing and Community Development have conducted grant audits which have reflected program compliance and sound fiscal management. To ensure adequate financial accounting, MH employs a Finance Manager with oversight provided by the Executive Director, Finance Committee of the Board and an annual external audit through an independent CPA firm. The ED, Finance Manager, Board Treasurer and Finance Committee annually update the organization’s Financial Policies and Procedures to ensure financial best practices. The Board receives monthly financial statements indicating income and expenses during the past month. The Board Treasurer monthly monitors the organization’s checking account, credit card use and other financial statements. The Finance Manager uses Quickbooks as the accounting software which allows division of funds according to grant source. The Finance Manager has provided technical assistance to other HUD recipients in our CoC at the request of our local HUD field office.

**4. Are there any unresolved HUD monitoring or No  
OIG audit findings for any HUD grants (including  
ESG) under your organization?**



### 3A. Project Detail

1. CoC Number and Name: VA-508 - Lynchburg CoC

2. CoC Collaborative Applicant Name: Miriam's House, Inc.

3. Project Name: VA-508 HMIS 2022

4. Project Status: Standard

5. Component Type: HMIS

6. Is your organization, or subrecipient, a victim service provider defined in 24 CFR 578.3? No

7. Is this new project application requesting to transition from eligible renewal project(s) that was awarded to the same recipient and fully eliminated through reallocation in this CoC Program Competition? (Attachment Requirement) No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

### 3B. Project Description

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

Miriam's House manages and organizes the local HMIS system to capture data on homelessness and homeless services for the geographic areas within VA 508 as the HMIS Lead. This project ensures that all HMIS users within the Lynchburg CoC receive regular training and are reporting on the Universal Data Elements as well as the Program Specific Data Elements. This project provides all users with monthly data completeness and data timeliness reports as well as an annual data accuracy and technical standards audit. These four elements (data completeness, timeliness, and accuracy and technical standards) are combined to provide each user with a data quality report card each year. This report card is provided to the user, user's organization and the CoC Board to assist with funding decisions and guide the conversation around the need for additional training and support. This project facilitates quarterly trainings comprised of all HMIS users in the CoC to provide training and support in order to improve data quality as well as offering trainings on security and technical standards. In addition to quarterly trainings, this project facilitates quarterly HMIS Committee Meetings. The committee works to improve data quality, monitor project and system outcomes and review data to ensure accurate and timely submittal of HIC, PIT, LSA and system performance measures. This project annually reviews and updates the Lynchburg CoC Data Quality Plan that continues to improve the oversight and accountability of all HMIS participating projects. Currently all homeless prevention programs, street outreach programs, emergency shelters (with the exception of 3 DV shelters), all rapid re-housing programs and all permanent supportive housing programs within the geographic scope of the CoC participate in the HMIS. These programs participate in the Data and Performance Committee of the CoC and attend regular trainings. The data collected through the HMIS is used to inform decisions of the CoC board in regards to funding and system improvement. This project participates in the CoC's Strategic Plan in order to accomplish system improvement goals. In the area of data, the goal established by the CoC was to "Create a data-driven system to guide decision making and align housing and services with successful outcomes and proven strategies". This overarching 3 year goal was broken down into objectives, action steps, assignments to the CoC Board, Data and Performance Committee and HMIS Lead with priorities established. As the HMIS Lead, Miriam's House will continue leading the Data and Performance Committee and the quarterly trainings within our CoC as well as providing annual updates of the CoC Policies and Procedures and the CoC Data Quality Plan. As HMIS Lead, Miriam's House does not currently receive CoC Competition funding. The funding will support the personnel cost associated with managing an HMIS. This project can begin immediately as it is already in existence.

**2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.**

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment				
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin				
Leased or rental assistance units or structure, and supportive services near 100% capacity				
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements? Yes

### 3C. HMIS Expansion

1. Is this a "Project Expansion" of an eligible No  
renewal project?

## 4A. HMIS Standards

1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the FY 2022 HMIS Data Standard Manual? Yes
2. Does HMIS produce all HUD-required reports and provide data needed for HUD reporting? (i.e., Annual Performance Report (APR)/CoC reporting, Consolidated Annual Performance and Evaluation Report (CAPER)/ESG reporting, Longitudinal System Analysis (LSA)/Annual Homeless Assessment Report, System Performance Measures (SPM), and Data Quality Table, etc.). Yes
3. Is your HMIS capable of generating all reports required by Federal partners including HUD, VA, and HHS? Yes
4. Does HMIS provide the CoC with an unduplicated count of program participants receiving services in the CoC? Yes

**5. Describe your organizations process and stakeholder involvement for updating your HMIS Governance Charters and HMIS Policies and Procedures.**

The Central Virginia Continuum of Care Board, with membership consultation, regularly review and update the HMIS Governance Charters which are part of the Central Virginia Continuum of Care Policies and Procedures. The Charter is reviewed by the Board at least biennially to ensure it remains consistent with the CoC's mission and responsibilities. The Charter may be amended by a two-thirds vote at a meeting of the Board, with a quorum present, provided that the proposed amendment has been submitted in writing to each member at least ten business days before action is taken by the Board. The amended Charter shall be presented to the entire membership at the next regular meeting. The Central Virginia Continuum of Care Policies and Procedures designate the HMIS Lead responsible for developing, updating and implementing the HMIS Policies and Procedures which includes an HMIS Data Quality Plan. The HMIS Lead encourages members of the Central Virginia Continuum of Care to join the Data and Performance Committee of the CoC which regularly reviews and makes suggested edits to the HMIS Policies and Procedures. These suggested edits are brought to the Board for final approval and shared with the full membership at the next regular meeting.

**6. Who is responsible for insuring the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners?**

The Central Virginia Continuum of Care Policies and Procedures indicate the roles and responsibilities of the HMIS Lead which includes ensuring that the HMIS implementation meets all privacy and security standards as required by HUD and other federal partners. Since 2008, Miriam’s House has served as the HMIS Lead for the Central Virginia Continuum of Care and received HMIS implementation funding through FY2020. During monitoring visits by both the Monitoring and Evaluation Committee and the HUD Richmond Field Office, Miriam’s House has always been found to be in compliance with this responsibility.

**7. Does the HMIS Lead conduct Privacy and Security Training and follow up on privacy and security standards?** Yes

**8. What is the CoC’s policy and procedures for managing a breach of Personally Identifiable Information (PII) in HMIS?**

The Central Virginia CoC’s HMIS Policies and Procedures have many protocols in place to prevent a breach of PII. Each year all users have to go through security training to receive a refresher on security requirements: changing their password regularly, not having the password visible, having a computer with appropriate firewalls and cybersecurity, etc. In addition to training, the HMIS Lead agency, Miriam’s House, conducts annual on-site visits of all HMIS users to perform a technical and security audit. At this visit the HMIS Lead ensures that the computer is password protected, that anti-virus software is installed on the computer, that the wireless system is password protected, that the HMIS password is not visible and that the computer system is up to date. HMIS users who do not pass the technical standards audit and/or do not attend the annual security training are not allowed to access the HMIS until these deficiencies are remedied. Each year there is a user agreement and an agency agreement that is signed by each user and each agency using the HMIS that reminds them and receives confirmation of their agreement to comply with strict security standards to protect PII and not allow a security breach. Users and/or agencies who do not sign an annual agreement are not able to access the CoC’s HMIS.

## 4B. HMIS Training

Indicate the last training date or proposed training date for each HMIS training, as applicable.

&nbsp;Activity	&nbsp;Enter date of last training or proposed next training (mm/yyyy)
Basic Computer Training	07/2022
HMIS Software Training for Sys Admin	08/2022
HMIS Software Training	07/2022
Data Quality Training	07/2022
Security Training	01/2022
Privacy/Ethics Training	01/2022
HMIS PIT Count Training	01/2022
Other (must specify)	

## 6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2024? Yes

2. What type of CoC funding is this project applying for in this CoC Program Competition? CoC Bonus

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

4. Select a grant term: 1 Year

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

HMIS

6. If conditionally awarded, is this project requesting an initial grant term greater than 12 months? No  
(13 to 18 months)



## 6H. HMIS Budget

**Instructions:**

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

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

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

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

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

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

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



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

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment		
2. Software		
3. Services		
4. Personnel	1 FTE HMIS Administrator partial salary paid with CoC funds	\$25,744
5. Space & Operations		
<b>Total Annual Assistance Requested:</b>		<b>\$25,744</b>
<b>Grant Term:</b>		<b>1 Year</b>
<b>Total Request for Grant Term:</b>		<b>\$25,744</b>

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

## 6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

### Summary for Match

Total Amount of Cash Commitments:	\$6,436
Total Amount of In-Kind Commitments:	\$0
Total Amount of All Commitments:	\$6,436

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

Type	Source	Name of Source	Amount of Commitments
Cash	Private	Greater Lynchburg...	\$6,436

## Sources of Match Detail

1. **Type of Match commitment:** Cash
2. **Source:** Private
3. **Name of Source:** Greater Lynchburg Community Foundation  
(Be as specific as possible and include the office Miriam's House Trust  
or grant program as applicable)
4. **Amount of Written Commitment:** \$6,436

## 6J. Summary Budget

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

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$0	1 Year	\$0
4. Supportive Services	\$0	1 Year	\$0
5. Operating	\$0	1 Year	\$0
6. HMIS	\$25,744	1 Year	\$25,744
7. Sub-total Costs Requested			\$25,744
8. Admin (Up to 10%)			\$0
9. Total Assistance Plus Admin Requested			\$25,744
10. Cash Match			\$6,436
11. In-Kind Match			\$0
12. Total Match			\$6,436
13. Total Budget			\$32,180

Click the 'Save' button to automatically calculate totals.

## 7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No		
2) Other Attachment(s)	No	Miriam's House Co...	08/30/2022
3) Other Attachment(s)	No		

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Miriam's House CoC Match 2022

## **Attachment Details**

**Document Description:**

## 7D. Certification

### A. For all projects:

#### Fair Housing and Equal Opportunity

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

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

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

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

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

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

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

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

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

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

**Additional for Rental Assistance Projects:**

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

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

**15-Year Operation Rule.**

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

**1-Year Operation Rule.**

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

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

**Name of Authorized Certifying Official:** Sarah Quarantotto

**Date:** 08/31/2022

**Title:** Executive Director

**Applicant Organization:** Miriam's House, Inc.



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

**I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties . (U.S. Code, Title 218, Section 1001).**

X

**Active SAM Status Requirement.**

**I certify that our organization has an active System for Award Management (SAM) registration as required by 2 CFR 200.300(b) at the time of project application submission to HUD and will ensure this SAM registration will be renewed annually to meet this requirement.**

X

## 8B. Submission Summary

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

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	08/31/2022
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	08/31/2022
New Project Application FY2022	Page 42 08/31/2022

<b>1E. SF-424 Compliance</b>	08/31/2022
<b>1F. SF-424 Declaration</b>	08/31/2022
<b>1G. HUD 2880</b>	08/31/2022
<b>1H. HUD 50070</b>	08/31/2022
<b>1I. Cert. Lobbying</b>	08/31/2022
<b>1J. SF-LLL</b>	08/31/2022
<b>IK. SF-424B</b>	08/31/2022
<b>1L. SF-424D</b>	08/31/2022
<b>2A. Subrecipients</b>	No Input Required
<b>2B. Experience</b>	08/31/2022
<b>3A. Project Detail</b>	08/31/2022
<b>3B. Description</b>	08/31/2022
<b>3C. HMIS Expansion</b>	08/31/2022
<b>4A. HMIS Standards</b>	08/31/2022
<b>4B. HMIS Training</b>	08/31/2022
<b>6A. Funding Request</b>	08/31/2022
<b>6H. HMIS Budget</b>	08/31/2022
<b>6I. Match</b>	08/31/2022
<b>6J. Summary Budget</b>	No Input Required
<b>7A. Attachment(s)</b>	08/31/2022
<b>7D. Certification</b>	08/31/2022



*Serving the City of Lynchburg and the counties of Amherst, Appomattox, Bedford and Campbell*

August 17, 2022

Dept. of Housing & Urban Development  
Richmond Field Office  
600 East Broad Street, Third Floor  
Richmond, VA 23219

Dear Sir or Madam:

This will advise that the Greater Lynchburg Community Foundation administers an endowment fund, established January 1, 1998, specifically designated for Miriam's House. According to the original Declaration of Trust, "it is intended that the income be used and applied by the Trustees in a manner so as to assist in defraying the costs of staffing, operating and maintaining the Housing Facility, or otherwise meeting the needs of the Grantor Purpose." As of December 31, 2021, the market value of the Miriam's House Endowment Fund was \$2,223,428.37.

The Board of Directors of the Greater Lynchburg Community Foundation has a current policy of paying out 5% of the market value of its endowment funds, based on a twelve-quarter rolling average. The Greater Lynchburg Community Foundation ensures a \$91,683.00 match in 2022 under the provisions of the Miriam's House Endowed Trust.

Sincerely,

A handwritten signature in blue ink that reads 'Kathryn C. Yarzebinski'.

Kathryn C. Yarzebinski  
President & CEO