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 Exchange at https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/ and https://www.hudexchange.info/programs/yhdp/.
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD via the Youth Demo Mailbox; YouthDemo@hud.gov.
- Project applicants are required to have a Universal 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 Years (FY) 2024 and 2025 Youth Homeless Demonstration Program (YHDP). For more information see FY 2024/5 (Round 9/10) YHDP NOFO.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2024/5 (Round 9/10) YHDP NOFO and the Appendices.
- Detailed instructions can be found on the Hudexchange. They contain more comprehensive instructions related to the project application.
- 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 YHDP project that fails to adhere to (24 CFR part 578) and application requirements set forth in FY 2024/5 (Round 9/10) YHDP NOFO.

1A. SF-424 Application Type

1. Type of Submission:	Application
2. Type of Application:	YHDP New Project Application
If Revision, select appropriate letter(s):	
If "Other", specify:	
3. Date Received:	08/06/2026
4. Applicant Identifier:	
4a. 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:	City of Indianapolis
b. Employer/Taxpayer Identification Number (EIN/TIN):	35-6001063
c. UEI:	UC2LTU2LWHF1
d. Address	
Street 1:	200 East Washington Street
Street 2:	Suite 2042
City:	Indianapolis
County:	Marion
State:	Indiana
Country:	United States
Zip / Postal Code:	46204
e. Organizational Unit (optional)	
Department Name:	Metropolitan Development
Division Name:	Community Investments
f. Name and contact information of person to be contacted on matters involving this application	
Prefix:	Ms.
First Name:	Victoria
Middle Name:	
Last Name:	Jennings
Suffix:	
Title:	Principal Program Manager
Organizational Affiliation:	City of Indianapolis
Telephone Number:	(317) 327-5866
Extension:	

Fax Number: (317) 327-5899
Email: victoria.jennings@indy.gov

1C. SF-424 Application Details

9. Type of Applicant: C. City or Township Government

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: CPD-2600-DC-0035
Title: Youth Homeless Demonstration Program

13. Competition Identification Number:
Title:

1D. SF-424 Congressional District(s)

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

15. Descriptive Title of Applicant's Project: YHDP - 2026 Diversion Expansion

16. Congressional District(s):

16a. Applicant: IN-007, IN-004

16b. Project: (for multiple selections hold CTRL key) IN-006, IN-007

17. Proposed Project

a. Start Date: 10/01/2026

b. End Date: 09/30/2028

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: X

21. Authorized Representative

Prefix:	Ms.
First Name:	Beth
Middle Name:	
Last Name:	Neville
Suffix:	
Title:	Administrator
Telephone Number: (Format: 123-456-7890)	(317) 327-3701
Fax Number: (Format: 123-456-7890)	(317) 327-3701
Email:	Beth.Neville@indy.gov
Signature of Authorized Representative:	Considered signed upon submission in e-snaps.
Date Signed:	08/06/2026

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - form HUD-2880 (Title)
U.S. Department of Housing and Urban Development
OMB Approval No. 2501-0044 (exp.02/28/2027)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name:	City of Indianapolis
Prefix:	Ms.
First Name:	Beth
Middle Name:	
Last Name:	Neville
Suffix:	
Title:	Administrator
Organizational Affiliation:	City of Indianapolis
Telephone Number:	(317) 327-3701
Extension:	
Email:	Beth.Neville@indy.gov
City:	Indianapolis
County:	Marion
State:	Indiana
Country:	United States
Zip/Postal Code:	46204

2. Employer ID Number (EIN): 35-6001063

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: $85,412.00

(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? (For further information, see 24 CFR Sec. 4.3). Yes

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. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Indiana Housing and Community Development Authority; 30 S Meridian St, Suite 900, Indianapolis, IN 46204	Federal Grant	$500,000.00	Hard and Soft Construction Costs
City of Indianapolis; 200 E Washington St., Ste 2040, Indianapolis, IN 46204	Federal or Local Grants	$500,000.00	Hard and Soft Construction Costs
Indiana Housing and Community Development Authority; 30 S Meridian St., Ste 900, Indianapolis, IN 46204	Tax Credit Award	$10,918,908.00	Tax Credit Equity for Construction Costs
Indiana Housing and Community Development Authority; 30 S Meridian St., Ste 900, Indianapolis, IN 46204	Loan	$500,000.00	Hard and Soft Construction Costs

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

Do you need to disclose interested parties for this grant according to the criteria below?	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 non-disclosure, is subject to civil money penalty not to exceed $10,000 for each violation.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true, correct, and accurate. Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil 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.	X
Name / Title of Authorized Official:	Beth Neville, Administrator
Signature of Authorized Official:	Considered signed upon submission in e-snaps.
Date Signed:	08/06/2026

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: City of Indianapolis

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 Federalagency 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: 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)

Authorized Representative

Prefix:	Ms.
First Name:	Beth
Middle Name	
Last Name:	Neville
Suffix:	
Title:	Administrator
Telephone Number: (Format: 123-456-7890)	(317) 327-3701
Fax Number: (Format: 123-456-7890)	(317) 327-3701
Email:	Beth.Neville@indy.gov
Signature of Authorized Representative:	Considered signed upon submission in e-snaps.
Date Signed:	08/06/2026

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:	X

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: City of Indianapolis

Name / Title of Authorized Official: Beth Neville, Administrator

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

Date Signed: 08/06/2026

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB 4040-0013 (exp. 06/30/2028)

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:	City of Indianapolis
Street 1:	200 East Washington Street
Street 2:	Suite 2042
City:	Indianapolis
County:	Marion
State:	Indiana
Country:	United States
Zip / Postal Code:	46204

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. [X]

Authorized Representative

Prefix:	Ms.
First Name:	Beth
Middle Name:	
Last Name:	Neville
Suffix:	
Title:	Administrator
Telephone Number: (Format: 123-456-7890)	(317) 327-3701
Fax Number: (Format: 123-456-7890)	(317) 327-3701
Email:	Beth.Neville@indy.gov
Signature of Authorized Representative:	Considered signed upon submission in e-snaps.
Date Signed:	08/06/2026

IK. SF-424B

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

OMB Number: 4040-0007
Expiration Date: 07/31/2028

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: [X]

Authorized Representative for: City of Indianapolis
Prefix: Ms.
First Name: Beth

Middle Name:	
Last Name:	Neville
Suffix:	
Title:	Administrator
Signature of Authorized Certifying Official:	Considered signed upon submission in e-snaps.
Date Signed:	08/06/2026

1L. SF-424D

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

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: $892,559

Organization	Type	Sub-Award Amount
Outreach, Inc.	N. Nonprofit without 501C3 IRS Status	$892,559

2A. Project Subrecipients Detail

a. Organization Name:	Outreach, Inc.
b. Organization Type:	N. Nonprofit without 501C3 IRS Status
If "Other" specify:	
c. Employer or Tax Identification Number:	35-1989358
d. UEI:	X6MUE2C7EJJ5
e. Physical Address	
Street 1:	2416 E New York St.
Street 2:	
City:	Indianapolis
State:	Indiana
Zip Code:	46201
f. Congressional District(s): (for multiple selections hold CTRL key)	IN-007
g. Is the subrecipient a Faith-Based Organization?	Yes
h. Has the subrecipient ever received a federal grant,either directly from a federal agency or through a State/local agency?	Yes
i. Expected Sub-Award Amount:	$892,559
j. Contact Person	
Prefix:	Ms.
First Name:	Kelsie
Middle Name:	
Last Name:	Stringham-Marquis

Suffix:	
Title:	Sr. Director of Strategic Initiatives
E-mail Address:	kstringham@outreachindiana.org
Confirm E-mail Address:	kstringham@outreachindiana.org
Phone Number:	541-760-0210
Extension:	
Fax Number:	

Note: All projects must have Subrecipient non-profit documentation attached to their application prior to submission.

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.

Outreach has 30 years of experience serving youth and young adults experiencing homelessness in Marion County and has successfully managed YHDP funds for the past 5 years, resulting in the two top scoring projects in the Continuum of Care for 2026. We also currently partner with Stopover, Inc. in handling Runaway and Homeless Youth funding from the Department of Health and Human Services to execute youth-focused street outreach. Outreach also has substantial experience building strong systems for grant management, financial oversight, data collection, performance reporting and compliance with grant requirements for both public dollars and private funding from donors, foundations, churches and corporations to provide crucial services to Indianapolis youth and young adults.

The proposed project builds upon Outreach's extensive experience helping youth move from crisis to stability through housing navigation, diversion, case management, and long-term coaching. Staff work alongside youth to remove barriers to housing, connect them to community resources, and provide ongoing support after housing placement to promote long-term stability and prevent returns to homelessness. This relationship-based approach has enabled Outreach to engage youth who have experienced unsheltered homelessness and those who have not traditionally participated in supportive services.

In 2025, Outreach launched a comprehensive mental health program that provides screening, crisis response, individual and group counseling, and referrals for higher levels of care through partnerships with Fountain Square Counseling and the University of Indianapolis counseling program. In additional to in-house mental health services, Outreach has also fostered strong mental health and substance abuse treatment partnerships with Fountain Square Counseling, Adult and Child, Eskenazi Health, the Damien Center, WeBloom, and the Marion County Health Department. Staff routinely identify youth with mental health and substance use needs and provide service navigation and ongoing support to help them remain engaged in treatment and maintain housing stability.

Youth voice is central to Outreach’s approach through biannual surveys and focus groups, with additional opportunities for youth to give feedback on specific programmatic issues as they arise. Youth feedback has directly influenced service offerings, housing strategies, and organizational priorities. Outreach will also serve as a host and key recruiter for the Indianapolis CoC’s Youth Action Board, creating opportunities for young adults with lived experience of homelessness to shape local policies, programs, and system responses to youth homelessness.

Through its experience managing federal funds, commitment to elevating youth voice, and strong network of community partnerships, Outreach has the capacity and expertise necessary to successfully implement the proposed project and achieve positive outcomes for youth experiencing homelessness.

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

Outreach intentionally aligns multiple funding sources to create a comprehensive continuum of services that addresses both immediate needs and long-term stability. For the past four years, Outreach has successfully administered funding through the U.S. Department of Housing and Urban Development's Youth Homelessness Demonstration Program (YHDP). YHDP funding represents approximately 10-15% of Outreach's annual operating budget and supports housing and supportive services. YHDP funding is coordinated with other funding streams to expand the reach and effectiveness of services.

For example, YHDP-funded housing and supportive services are complemented by local and private investments that support mental health services, employment programming, transportation assistance, basic needs, and housing navigation. This coordinated funding approach allows Outreach to provide comprehensive, wraparound services while maintaining separate accounting and compliance requirements for each funding source.

In addition to YHDP, Outreach has successfully utilized funding from the Indianapolis Foundation, United Way of Central Indiana, IU Health, The Kaleo Fund, The 24 Group, and National Bank of Indianapolis, as well as corporate and individual donors. These investments support program expansion, mental health services, housing initiatives, and other critical supports that strengthen outcomes for youth experiencing homelessness.

By maintaining a diversified funding strategy and intentionally aligning resources across multiple sectors, Outreach has built a sustainable model that maximizes community investment, reduces service gaps, and strengthens outcomes for youth experiencing homelessness. This experience positions Outreach to leverage additional investments and sustain the proposed project.

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

Outreach, Inc. is a 501(c)(3) nonprofit. An active Board of Directors sets strategic direction and reviews financial and organizational performance. Outreach's CEO reports to the Board and oversees a senior leadership team covering programs, development, and administration, keeping authority and reporting lines clear at every level.

Day-to-day financial management runs through the Director of Operations, who supervises the bookkeeper and maintains internal controls: segregation of duties, defined approval thresholds, monthly bank reconciliations, and budget-to-actual reviews. All transactions (payables, receivables, payroll, grant expenditures, and restricted funds) are recorded in QuickBooks. An independent CPA firm audits Outreach annually under GAAP; the FY2025 audit (year ending September 30) resulted in an unmodified opinion.

Outreach has successfully administered past YHDP funds with appropriate restricted-fund tracking, invoicing, expense documentation and reporting practices necessary for local and federal compliance. As with the previous administration of YHDP funds, this grant will be tracked under dedicated budget lines and expense codes in QuickBooks, with reports reviewed by the Director of Operations, CEO and Board on a regular schedule.

Internally, program and finance staff meet regularly to review spending against budget and keep activities aligned with grant terms, which is part of how the organization already runs rather than a separate process layered on top. Externally, partnerships are formalized through written MOU agreements spelling out each party's role, reporting obligations, financial obligations and expected outcomes.

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

5. Does the applicant and subrecipient have access to the Line of Credit Control System (LOCCS)? Yes

5a. If Yes, who is in those roles at your organization or the subrecipient organization?

The City of Indianapolis, as the Collaborative Applicant, is responsible for the contracting, oversight and compliance monitoring of Subrecipients. The Subrecipient will submit all documentation of expenditures to the City of Indianapolis for reimbursement prior to draws from the LOCCS system.

3A. Project Detail

1. CoC Number and Name:	IN-503 - Indianapolis CoC
2. CoC Collaborative Applicant Name:	City of Indianapolis
3. Project Name:	YHDP - 2026 Diversion Expansion
4. Project Status:	Standard
5. Component Type:	SSO
5a. Select the type of SSO Project:	Standalone Supportive Services
7. Is this project applying for Rural costs on screen 6A?	No
8: The applicant certifies that its SAM registration information is accurate and complete and will remain active throughout the application review, award, and grant agreement execution process, if selected for funding.	X

3B. Project Description

1. Provide a comprehensive description of the project, including its full scope, target population, key activities and services, and staffing structure (including staff-to-client ratio). Clearly distinguish which activities and services will be funded with YHDP funds versus those that will be supported through non-YHDP funding sources.

Operating primarily out of Outreach's main location at 2416 E New York St., Indianapolis, IN, this project will expand our current Diversion program serving youth and young adults aged 14-24 experiencing homelessness as defined by HUD Categories 1, 2, 3 and 4. In addition to services at our primary location, Diversion Specialists employed by the program will be able to conduct community meetings and home visits where appropriate for increased flexibility and accessibility of services. Building on the success of Outreach's initial Diversion program, this expansion seeks to apply learnings from the initial grant regarding the demand for services and structure necessary for client success in resolving and preventing homelessness through creative housing problem solving.

Key additions to the program structure include the expansion of current capacity through the addition of two more Diversion Specialists, a Diversion Team Lead, two Advocacy, Relationship and Coaching in High Schools (ARCH) Coaches and an Employment Specialist dedicated to serving enrolled participants.

While the Diversion Specialists and Diversion Team lead will operate to expand the current services to improve access to effective programing and cut down on wait-time for program entry, ARCH coaches will be able to combine focus these same, effective diversion strategies with a focus on education for high school students who are currently underserved due to school district staff capacity. Outreach currently operates the ARCH program in partnership and through contracts with Indianapolis Public Schools, Marion County Charter Schools, Pike Township Schools, Washington Township Schools and Lawrence Township Schools. Through these partnerships, the demand for coaching and housing problem-solving services outstrip what Outreach is currently able to provide. This grant would serve to increase our capacity for prevention and early intervention in high school students' experiences of homelessness, thus interrupting the cycle that leads these same youth to experience homelessness later in their lives.

Outreach has taken initial steps in building an in-house employment program to compliment the many successful employment related partnerships it has built over the last few years. The Employment Specialist position under this grant will allow enrolled clients additional, employment and self-sufficiency focused programing and support that builds on the success of current employment partnerships with employment organizations like Jesus Had a Trade, Victory in the City, EmployIndy's YES program, RecycleForce, Keys to Work, and Job Corps, among others.

Finally, this grant will allow staff to provide temporary, concrete support as youth build toward self-sufficiency and success. These supports include grocery assistance, transportation assistance, moving assistance, utility deposits, and mental health services at critical levels determined by past program success and learning.

Using the creative housing problem solving methods of diversion, clients may be successfully permanently housed on their own in market-rate rental apartments, permanently with family or friends in their natural support networks, in student housing when attending post-secondary education, or in other supportive housing when that is the best placement for the youth.

1a. Specify how this project will incorporate the principles of Positive Youth Development?

The Diversion program embodies principles of Positive Youth Development by engaging youth in their individualized housing stability plans, encouraging youth to identify their goals and collaborate with staff on steps to achieve those goals. Each youth will also identify natural strengths through support network mapping and creative housing problem solving. Youth are encouraged to take steps toward not only using their strengths to achieve their goals, but to expand horizons and see themselves as an important part of community. In service of this goal, Outreach's relational approach is crucial in modeling healthy relationships and connecting with healthy and safe adults, focusing on their immediate safety as well as their long-term thriving.

1b. Specify how this project will incorporate the principles of Trauma Informed Care?

Youth safety is the top and most urgent priority in delivering diversion services. Each youth is assessed for current and past risk of physical violence and relational safety, including but not limited to experiences with domestic violence and human trafficking. Awareness of current and previous concerns around safety or other traumatic experiences informs staff's individualized approach to youth. However, we understand that youth do not always disclose or have insight into experiences that affect them. Because of this, program staff are consistently transparent and honest in communication, and offer youth choice and empowerment whenever possible. Youth are also consistently encouraged and supported in building positive relationships and community with one another in peer support and group programing services.

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	1			
Begin program participant enrollment	60			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	60			
Leased or rental assistance units or structure, and supportive services near 100% capacity	120			
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				

Complete new construction				

*3. Check the appropriate box(s) if this project will have a specific subpopulation focus.

(Select ALL that apply)

Chronic Homeless		Domestic Violence	
Veterans		Substance Abuse	X
Youth (under 25)	X	Mental Illness	X
Families	X	HIV/AIDS	X
		Other (Click 'Save' to update)	
		N/A - Project Serves All Subpopulations	

4. Certify that your project participates 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.	X
Applicants awarded under this NOFO must protect youth safety by not allowing registered sex offenders or individuals with violent criminal records to live in site-based housing projects with youth under 18, except in justice system re-entry programs.	X

Youth Homeless Demonstration Projects

1. What services are provided to engage the family and youth? (You may select more than one)

Family counseling	X
Conflict Resolution	X
Parenting Supports	X
Relative or kinship caregiver resources	
Targeted substance abuse and mental health treatment	X
Housing Search Assistance	X
Landlord-Tenant mediation	X
Legal Services	
Utilty or Security Deposits	X
One time moving assistance	X
Rental Application fees	X
Utility or Rental Arrears	X
Other (if other selected, use textbox to explain the potential service)	

2. Is this a Host Homes Project OR will this project dedicate funding under the Supportive Services budget to host homes? No

3. Will your project offer any specialized services for youth living with HIV/AIDS? Yes

a. If Yes, please provide detail of those services.

For any youth identified as living with HIV/AIDS or engaged in behaviors at higher risk of contracting HIV/AIDS, referrals and coordination to services at the Damien Center will be prioritized.

Special YHDP Activities

1. Is the YHDP New Project Applicant requesting a special YHDP activity, Exemption or Innovative Activity? Yes

2. Check the appropriate box(s) for the Special YHDP Activity the applicant is requesting. (Select all that apply)

Reminder, certain activities require a Supportive Services budget connection. Review the Detailed Instructions to learn more.

1.C.1.a(1) Use 5% of total YHDP funding for Planning grants	☐
1.C.1.a(2) Project admin funds used to employ youth with lived experience for project implementation, execution, and improvement.	☐
1.C.1.a(3) Project admin funds used to attend non-HUD sponsored or approved conferences (must be relevant to youth homelessness)	☐
1.C.1.a(4) Employ youth receiving recipient services (document nature of work and no conflicts of interest)	☐
1.C.1.a(5) YHDP recipients may use housing standards outlined at Section I.C.8 of this appendix for transitional housing projects. Recipients implementing this special YHDP activity must keep documentation of what standards are applied to the units and proof that the units complied with the standards before assistance is provided.	☐
1.C.1.a(6) Provide moving expense more than one time to a program participant	☐
1.C.1.a(7) Provide payments for families that provide housing under host homes and kinship care (up to $500 per month)	☐
1.C.1.a(8) YHDP recipients may continue providing supportive services to program participants for up to 12 months after the program participant exits homelessness, transitional housing or after the end of housing assistance	X
1.C.1.a(9) Projects using grant leasing funds may pay above Fair Market Rent (FMR) for individual units as long as the amount paid is consistent with the reasonable rent standards at 24 CFR 578.51(g)	☐
No Special YHDP Activities Requested	☐

3. YHDP grant funds may be used for the following if they are necessary to assist program participants to obtain and maintain housing. Recipients and subrecipients must maintain records establishing how it was determined paying the costs was necessary for the program participant to obtain and retain housing and must also conduct an annual assessment of the needs of the program participants and adjust costs accordingly. (Select all that apply) - Eligible only to projects with a Supportive Services BLI

I.C.1.a(10)(a) Security deposits (not to exceed 2 months of rent)	X	I.C.1.a(10)(g) Payment of rental arrears (up to 6 months)	X
I.C.1.a(10)(b) Pay for damage to units (not to exceed 2 months rent)	X	I.C.1.a(10)(h) Payment of utility arrears (up to 6 months)	X
I.C.1.a(10)(c) Costs to provide household cleaning supplies	X	I.C.1.a(10)(i) Payment of utilities (Up to 3 months)	X
I.C.1.a(10)(d) Housing start-up expenses (not to exceed $500 per participant)	X	I.C.1.a(10)(j) Pay gas a mileage for participant personal vehicle for trips for eligible services	
I.C.1.a(10)(e) Purchase cell phone and service (cost must be reasonable and housing related)	X	I.C.1.a(10)(k) Payment of Legal fees	X
I.C.1.a(10)(f) Cost of Internet (costs must be reasonable)	X	I.C.1.a(10)(l) Payment of insurance, registration and past driving fines	X

I.C.1.a(11) Recipients may use YHDP funds to pay for owner incentive and retention payments for TH projects before occupancy of the unit, or at any point thereafter, provided that the overall amount paid with program funds per unit does not exceed three times the monthly rent charged for the unit and the incentive and/or retention payment results in the unit being occupied by a program participant. Recipients that utilize this special YHDP activity must maintain documentation that the incentive and/or retention payment resulted in the unit being occupied by a program participant and that incentive and/or retention payment did not create a conflict of interest. These payments may include signing bonuses (a payment offered to an owner as an incentive for leasing a unit to be occupied by a program participant), repairs to bring a unit that failed inspection into compliance with program requirements, or holding fees to reserve a unit for an individual or family expe	
I.C.1.a(12) Recipients of Transitional Housing projects may use Single Room Occupancy (SRO) units to house youth. SRO units are subject to regulations at 24 CFR 982.602 and 24 CFR 982.605. Fair Market Rent (FMR) and utility costs for SROs are calculated as 75% of the zero-bedroom FMR and utility costs, respectively.	
I.C.1.a(13) Rental Assistance may be administered by nonprofit providers, Tribes, and TDHEs, in addition to the organizations listed in 24 CFR 978.51(b).	

None	

4. Check the appropriate box(s) for the Special YHDP Activity - Exemptions the applicant is requesting. if a special activity is selected, the applicant must provide a narrative response addressing the criteria in the special activity. (Select all that apply)

I.C.1.b(1) A recipient may provide up to 36 months of leasing or rental assistance funds in Transitional Housing to a program participant if the recipient describes (1) the method it will use to determine which youth need rental assistance beyond 24 months and (2) the services and resources that will be offered to ensure youth are self-sufficient at the end of the 36 months of assistance.	
I.C.1.b(2) YHDP recipients may continue providing supportive services to program participants for up to 24 months after the program participant exits homelessness, transitional housing or after the end of housing assistance if the recipient demonstrates: 1) the proposed length of extended services to be provided; 2) the method it will use to determine whether services are still necessary; and 3) how those services will result in self-sufficiency and ensure stable housing for the YHDP program participant.	X
I.C.1.b(3) Recipients may continue providing supportive services to program participants for up to 36 months after the program participant exits homelessness or transitional housing, if the services are in connection with housing assistance, such as the Foster Youth to Independence initiative, or if the recipient can demonstrate that extended supportive services ensures continuity of case workers for program participants. Note: Supportive Services for 36 months is only for projects that are pairing supportive services with other housing assistance programs	
I.C.1.b(4)Recipients will not be required to meet the 25% match requirement provided for in II.B of the Youth Homelessness NOFO and 24 CFR 578.73 if the recipient is able to identify multiple non-YHDP resources in the community that assist youth experiencing homelessness and can provide a narrative description of 1) how the resources will assist youth who are clients under the YHDP project and 2) how the recipient will facilitate connections to these resources to ensure that youth are aware of them and able to access the resources. Note: specify why resources cannot be used as match for this project	
I.C.1.b(5)Recipients will not be required to meet the 25% match requirement provided for in III.C of the Youth Homelessness NOFO and 24 CFR 578.73 if the recipient does not have other currently active CoC or YHDP grants. If permitted by future Appropriations Acts, HUD will continue the match exemption for the YHDP grant funded under this NOFO under the first and second renewal or replacement of the project under the Continuum of Care competition.	
I.C.1.b(6) Rental assistance may be combined with leasing or operating funds in the same building, provided that the recipient submits a project plan that includes safeguards to ensure that no part of the project would receive a double subsidy.	
I.C.1.b(7) YHDP recipients may provide payments of up to $1000 per month for families that provide housing under a host home and kinship care model, provided that the recipient can show that the additional cost is necessary to recruit hosts to the program.	
No Exemptions Requested.	

Enter required additional information about your YHDP Special Activity Request. Requirements for YHDP Special Activities can be found in the NOFO citation included on this screen. Please answer ALL requirements prior to submission.

I.C.1.b(2):

For the special YHDP activity identified in III.B.4.b(5)(ii), Outreach is requesting to utilize this permitted activity particularly as we expand the diversion program to include more high school students. For this population, their stability and how it relates to their educational goals may require increased length of services as assessed by program staff. Because eligibility for services begins at age 14, for successful program outcomes Outreach may need to engage in longer-term services to ensure successful completion of high school in certain circumstances.

5. Innovative Activities I.C.1.b(8)

Is the applicant requesting an Innovative Activity that is not currently allowed under 24 CFR 578 or the above YHDP Special Activities?	No

4A. Supportive Services for Participants

1. Describe how program participants will be assisted to obtain and remain in housing.

In our diversion program, each youth will complete a housing stability plan and monthly budget that will allow youth to identify and develop a plan of how to meet their own basic needs. Through this process, diversion specialists will identify gaps in income and/or resources necessary to achieve self-sufficiency, and collaborate with the youth to create a plan to address these gaps that builds on the individual's goals, strengths, and natural support systems.

In addition to improving and focusing on income, employment, education and career goals, a key component of diversion is conflict resolution and mediation. In the absence of abusive or unsafe dynamics, these services, along with the facilitation of room mate agreements, allow youth to address income and resource gaps in the medium term while they work on identified long-term housing stability plans.

Current diversion specialists have also developed relationships with market-rate private landlords, affordable housing providers, and other temporary housing providers to bolster youth's resources including relationships with Intempus, Pershing Place, St. Lucas Lofts, and others.

2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.

When a client enters the Diversion program, part of their assessment includes determination of health insurance status and any behavioral and/or physical health needs. If a client does not have insurance, the diversion specialist works to connect them first with insurance navigation services, then offer options for continued healthcare. Diversion works with a variety of partners including Eskenazi, Centerstone, Valle Vista, Damien Center, and HealthNet. This is in addition to mental health supports available in-house through Outreach's mental health program. Diversion also assesses and refers to partner agencies specializing in services for domestic violence and human trafficking survivors, including Indy Champions, Coburn Place, Domestic Violence Prevention Networks, Grit into Grace, and Ascent 121.

When a diversion client is eligible and could benefit from childcare, nutrition assistance, and affordable housing options, diversion specialists direct and refer clients to FSSA to apply for these benefits to support their transition into self-sufficiency.

3. How will this project leverage non-HUD funded supportive services?

Outreach is a prime example of the outcomes that are possible in public-private partnerships. In addition to HUD funding programing, Outreach utilizes funding from Health and Human Services. Federal funds make up only a portion of our overall portfolio, with individual donors, private foundations, church partners, corporate partners and in-kind donors and partners coming together to make the organization's work possible.

4. For all supportive services available to program participants, indicate who will provide them and how often they will be provided. Click 'Save' to update.

Supportive Services		Provider	Frequency
Assessment of Service Needs		Subrecipient	Weekly
Assistance with Moving Costs		Subrecipient	As needed
Case Management		Subrecipient	Weekly
Child Care		Non-Partner	As needed
Education Services		Partner	Daily
Employment Assistance and Job Training		Subrecipient	Weekly
Food		Subrecipient	As needed
Housing Search and Counseling Services		Subrecipient	As needed
Legal Services		Non-Partner	As needed
Life Skills Training		Non-Partner	As needed
Mental Health Services		Non-Partner	As needed
Outpatient Health Services		Non-Partner	As needed
Outreach Services		Subrecipient	Weekly
Substance Abuse Treatment Services		Non-Partner	As needed
Transportation		Subrecipient	As needed
Utility Deposits		Subrecipient	As needed

5. How will the project respond to the different needs for service type, intensity, and length of supports for youth?

Outreach has been successfully administering a youth-focused diversion program for the past five years. In the 2024-2025 fiscal year, our program goal successfully diverted 35 households, surpassing the program goal of 31 households. Outreach achieved this outcome despite being short-staffed for half of the year. So far, in the 2025-2026 fiscal year, we have successfully diverted 33 clients (as of 7/16/26). Though there are inevitably "negative" exits, oftentimes, it is due to the client disengaging in contact rather than returning to homelessness.

Outreach's current diversion program structure creates successful outcomes through a process that includes mapping each client's strengths and support networks. Each client is supported in creating an individualized housing stability plan to develop a pathway that is achievable in the short-term and practical in the long-term. There are many diversion pathways: self-pay in market-rate housing, reuniting with family, conflict mediation to remain in their current housing, or relocation. Once the pathway is identified, the client and diversion specialist create steps and collaborate to successfully complete the pathway. Diversion specialists utilize creativity and are resourceful in formulating plans that tailor to each client's specific needs and strengths.

Upon entry to the program, the client signs an Expectations and Commitment Form, which has been very successful in holding clients accountable, reducing their risk of termination. The client agrees to a certain amount of communication and action steps, and the diversion specialist checks in regularly to ensure the client is completing their commitments to the housing stability plan.

Although many clients self-refer to the diversion program, we also rely on our Navigation team to refer Diversion-eligible clients who complete CES assessments. Youth experiencing homelessness can often be very transient, changing between types of homelessness frequently. This leads to the diversion program serving youth who have been previously unsheltered or have not previously engaged in services. Our navigation and diversion teams have an open line of communication to ensure clients are referred to the appropriate program for which they meet eligibility. Additionally, one of our diversion specialists has been doing outreach at motels to engage clients who have not yet engaged with any supportive services. Many clients have been found diversion-eligible who are self-paying for motel rooms but do not have sufficient income to sustain and are at risk of literal homelessness.

Multiple external partnerships are relied upon currently to serve the employment, mental health and substance use treatment needs of clients. These are elaborated upon in the following questions.

6. How will supportive services meet the individual needs of program participants?

Outreach operates a relational model to providing services, taking a coaching posture and empowering youth and young adults to identify their own goals and take steps toward those goals. Staff provide support, accountability, and creative problem solving through the process using a variety of tools, including housing stability plans, monthly budgets, and support system mapping. Each diversion specialist or ARCH coach maintains a caseload of no more than 1:20 in order to provide the intensive, directed services necessary for quick resolution to housing crises. As youth successfully exit programing, new spots become available and diversion specialists may take on additional clients. The employment specialist work with a larger number of youth because the structure of their services are tiered and lower-intensity services through group programming are availability to a larger number of youth. However, individual employment services will be offered to a smaller number of youth depending on staff capacity and the level of employment support needed for successful placement and retention. The diversion team lead will carry a small caseload but will also support youth through the supervision, mentorship and additional experience in creative problem solving and conflict resolution to be extended as a resource to other members of the team.

7. How will program participants progress be adequately tracked during their time in transitional housing ?

This is an SSO project. Question is not applicable.

8. What outcomes will your project track to determine success?

Positive housing exit destination	X
Positive School Status	X
Increased income/ employment	X
Community Connections	X
Social and Emotional Well-Being	X
Other	

Will this SSO Non-CE project achieve a positive outcome in at least one of the four core outcomes for youth experiencing homelessness	X

4A. HMIS Standards

1. Is the HMIS currently programmed to collect all Universal Data Elements (UDEs) as set forth in the 2024 HMIS Data Standard Notice?	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.

Governance Charters and HMIS Policies and Procedures are reviewed annually and updated as necessary. Proposed changes and updates are shared with stakeholders directly as appropriate and in bi-monthly HMIS Committee Meetings which are composed of interested stakeholders for approval. Subsequent decisions are communicated out to the CoC through HMIS User Group meetings, e-mail blasts, and HMIS dashboard posts as appropriate, and relevant documents are posted on the CoC website when necessary.

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

The Coalition for Homelessness Intervention and Prevention is responsible for communicating out and monitoring privacy and security standards via user training and support and agency site visits. Privacy and security standards requirements are included in the HMIS Policies and Procedures and in the privacy policy. Agencies, such as HealthNet, are responsible for adhering to HMIS Policies and Procedures including privacy and security practices within their organization as stated in the Agency Agreement.

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?

Per the HMIS Policies and Procedures, the individual witnessing or experiencing a security breach must notify their agency's security officer as well as the HMIS Lead. A security breach consists of an incident where client data and/or system access information as been lost, stolen or missing. The HMIS Lead will then notify the Agency's HMIS Site Administrator of any corrective action, up to and including termination of the User's and Agency's participation in the HMIS.

4B. HMIS Training

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

Activity	Enter date of last training or proposed next training (mm/yyyy)
Basic Computer Training	04/2026
HMIS Software Training for Sys Admin	08/2025
HMIS Software Training	04/2026
Data Quality Training	05/2026
Security Training	12/2025
Privacy/Ethics Training	12/2025
HMIS PIT Count Training	01/2026
Other (must specify)	

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units:

Total Beds:

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
None	---	--	--	

4B. Housing Type and Location Detail

1. Housing Type: None

3. Is this a private or semi-private rooms? No

5A. Project Participants - Households

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	52	12	27	91

Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Persons over age 24				0
Persons ages 18-24	52	12		64
Accompanied Children under age 18	52		27	79
Unaccompanied Children under age 18				0
Total Persons	104	12	27	143

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Substance Disorders	HIV/AIDS	Mental Illness	Survivors	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24				10		15	20			7
Children under age 18							20			32
Total Persons	0	0	0	10	0	15	40	0	0	39

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Substance Disorders	HIV/AIDS	Mental Illness	Survivors	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24				0	0	3	4			5
Total Persons	0	0	0	0	0	3	4	0	0	5

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Mental Illness	Survivors	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18				5		7	10			5
Unaccompanied Children under age 18										
Total Persons	0			5	0	7	10	0	0	5

Click Save to automatically calculate totals

Describe the "Persons Not Represented by a Listed Subpopulation" referred to above:

Although many clients self-refer to the diversion program, we also rely on our Navigation team to refer Diversion-eligible clients who complete CES assessments. Youth experiencing homelessness can often be very transient, changing between types of homelessness frequently. This leads to the diversion program serving youth who have been previously unsheltered or have not previously engaged in services. Our navigation and diversion teams have an open line of communication to ensure clients are referred to the appropriate program for which they meet eligibility. Additionally, one of our diversion specialists has been doing outreach at motels to engage clients who have not yet engaged with any supportive services. This leads to a variety of populations served in the community.

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2026?	Yes
2. What type of CoC funding is this project applying for under the Youth Homeless Demonstration Program?	YHDP
3. Select a grant term:	2 Years
4. If conditionally awarded, is this project requesting an initial grant term greater than 24 months? (25 to 30 months)	No

5. Select the costs for which funding is requested:

Acquisition/Rehabilitation/New Construction	
Leased Units	
Leased Structures	
Rental Assistance	
Supportive Services	X
Operating	
HMIS	X
VAWA	

6F. Supportive Services Budget

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

STAFF ONLY Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1a. Assessment of Service Needs (STAFF COSTS ONLY)		
2a. Assistance with Moving Costs (STAFF COSTS ONLY)		
3a. Case Management (STAFF COSTS ONLY)	2 FTE Diversion Specialists, 1 FTE ARCH Coach, 1 FTE Diversion Team Lead, Cell phones plans	$270,000
4a. Child Care (STAFF COSTS ONLY)		
5a. Education Services (STAFF COSTS ONLY)		
6a. Employment Assistance (STAFF COSTS ONLY)	1 FTE Employment Specialist	$65,000
7a. Food (STAFF COSTS ONLY)		
8a. Housing/Counseling Services (STAFF COSTS ONLY)		
9a. Legal Services (STAFF COSTS ONLY)		
10a. Life Skills (STAFF COSTS ONLY)		
11a. Mental Health Services (STAFF COSTS ONLY)		
12a. Outpatient Health Services (STAFF COSTS ONLY)		
13a. Outreach Services (STAFF COSTS ONLY)		
14a. Substance Abuse Treatment Services (STAFF COSTS ONLY)		
15a. Transportation (STAFF COSTS ONLY)	Staff mileage	$7,000
16a. Utility Deposits (STAFF COSTS ONLY)		
17a. Operating Costs (STAFF COSTS ONLY)		
Total Annual Assistance Requested		$342,000
Grant Term		2 Years
Total Request for Grant Term		$684,000
Total Staff Requested for Project		812,000

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

ACTIVITY ONLY Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1b. Assessment of Service Needs (ACTIVITY COSTS ONLY)		
2b. Assistance with Moving Costs (ACTIVITY COSTS ONLY)	Uhaul rental for clients moving	$5,000
3b. Case Management (ACTIVITY COSTS ONLY)		
4b. Child Care (ACTIVITY COSTS ONLY)		
5b. Education Services (ACTIVITY COSTS ONLY)		
6b. Employment Assistance (ACTIVITY COSTS ONLY)		
7b. Food (ACTIVITY COSTS ONLY)	Grocery cards and client meals	$50,000
8b. Housing/Counseling Services (ACTIVITY COSTS ONLY)		
9b. Legal Services (ACTIVITY COSTS ONLY)		
10b. Life Skills (ACTIVITY COSTS ONLY)		

11b. Mental Health Services (ACTIVITY COSTS ONLY)	Individual/family therapy for clients	$9,000
12b. Outpatient Health Services (ACTIVITY COSTS ONLY)		
13b. Outreach Services (ACTIVITY COSTS ONLY)		
14b. Substance Abuse Treatment Services (ACTIVITY COSTS ONLY)		
15b. Transportation (ACTIVITY COSTS ONLY)	bus passes and gas cards for clients	$12,000
16b. Utility Deposits (ACTIVITY COSTS ONLY)		
17b. Operating Costs (ACTIVITY COSTS ONLY)		
18. Security Deposits (Only use if no Rental Assistance Budget)	Deposits for clients moving into housing	$2,500
Total Annual Assistance Requested		$78,500
Grant Term		2 Years
Total Request for Grant Term		$157,000
Supportive Services BLI Total		$841,000

Click the 'Save' button to automatically calculate totals.

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	Phones, Computers	$3,200
2. Software	HMIS Access for all affiliated staff and supervisors	$3,362
3. Services		
4. Personnel		
5. Space & Operations		
Total Annual Assistance Requested:		$6,562
Grant Term:		2 Years
Total Request for Grant Term:		$13,124

Click the 'Save' button to automatically calculate totals.

6J. 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:	$234,884
Total Amount of In-Kind Commitments:	$0
Total Amount of All Commitments:	$234,884

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

Type	Source	Contributor	Amount of Commitments
Cash	Private	Various Donations	$234,884

Sources of Match Detail

1. Type of Match Commitment:	Cash
2. Source:	Private
3. Name of Source: (Be as specific as possible and include the office or grant program as applicable)	Various Donations
4. Amount of Written Commitment:	$234,884

6K. 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	2 Years	$0
2b. Leased Structures	$0	2 Years	$0
3. Rental Assistance	$0	2 Years	$0
4. Supportive Services	$420,500	2 Years	$841,000
5. Operating	$0	2 Years	$0
6. HMIS	$6,562	2 Years	$13,124
7. VAWA	$0	2 Years	$0
8. Rural	$0	2 Years	$0
9. Sub-total Costs Requested			$854,124
10. Admin (Up to 10%)			$85,412
11. Total Assistance Plus Admin Requested			$939,536
12. Cash Match			$234,884
13. In-Kind Match			$0
14. Total Match			$234,884
15. Total Budget			$1,174,420

Click the 'Save' button to automatically calculate totals.

6L Breakout of BLI Costs

BLI Costs	
1a. Acquisition	0%
1b. Rehabilitation	0%
1c. New Construction	0%
2a. Leased Units	0%
2b. Leased Structures	0%
3. Rental Assistance	0%
4. Supportive Services	90%
5. Operating	0%
6. HMIS	1%
7. VAWA	0%
8. Rural	0%
9. Admin (Up to 10%)	9%
10.Total Assistance plus Admin Requested	$939,536

Breakout of BLI Costs	Totals
Total Leased Units + Leased Structures + Operating + Rental Assistance	0%
Total Supportive Services + HMIS + VAWA + Admin	100%
Total Persons served per Staff	0
Total Staff Cost compared to Overall Budget	73%

6M. Indirect Cost Information

Indirect Cost Information Form
OMB Number: 2501-0044
Expiration Date: 2/28/2027

Program/Activity Receiving Federal Grant Funding:	CoC Program
Applicant Name:	City of Indianapolis

Indirect Cost Rate Information for the Applicant/Recipient:

Please check the box that applies to the Applicant/Recipient and complete the table only as provided by the instructions accompanying this form.

The Applicant/Recipient will not charge indirect costs using an indirect cost rate.	X
The Applicant/Recipient will calculate and charge indirect costs under the award by applying a de minimis rate as provided by 2 CFR 200.414(f), as may be amended from time to time.	
The Applicant/Recipient will calculate and charge indirect costs under the award using the indirect cost rate(s) in the table below, and each rate in this table is included in an indirect cost rate proposal developed in accordance with the applicable appendix to 2 CFR part 200 and, if required, has been approved by the cognizant agency for indirect costs.	

Submission Type:	Initial Submission
Effective Date:	02/03/2026

Certification of Authorized Representative for the Applicant/Recipient: **** Under penalty of perjury, I certify on behalf of the Applicant/Recipient that:** **(1) all information provided on this form is true, complete, and accurate, and** **(2) Applicant/Recipient will provide HUD with an update to this form immediately upon learning change in the information provided on this form, and** **(3) I am authorized to speak for the Applicant/Recipient regarding all information provided on this** ****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, 1014; 31 U.S.C. § 3729, 3802; 24 CFR § 28.10(b)(iii)).**	X

Authorized Representative:

Prefix:	Ms.
First Name:	Beth
Middle Name:	
Last Name:	Neville
Suffix:	
Title:	Administrator
Telephone Number: (Format: 123-456-7890)	(317) 327-3701
Fax Number: (Format: 123-456-7890)	(317) 327-3701
Email:	Beth.Neville@indy.gov
Signature of Authorized Representative:	Considered signed upon submission in e-snaps.

Date Signed: 02/03/2026

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	Outreach IRS Letter	08/05/2026
2) YAB Approval Letter	No	YAB Approval Letter	08/05/2026
3) Other Attachment(s)	No		

Attachment Details

Document Description: Outreach IRS Letter

Attachment Details

Document Description: YAB Approval Letter

Attachment Details

Document Description:

7D. Applicant Certification

Applicant and Recipient Assurances and Certifications - form HUD-424B (Title)
U.S. Department of Housing and Urban Development OMB Approval No. 2501-0017
(expires 01/31/2026)

As part of your application for HUD funding, you, as the official authorized to sign on behalf of your organization or as an individual must provide the following assurances and certifications. The Responsible Civil Rights Official has specified this form for use for purposes of general compliance with 24 CFR §§ 1.5, 3.115, 8.50, and 146.25, as applicable. The Responsible Civil Rights Official may require specific civil rights assurances to be furnished consistent with those authorities and will specify the form on which such assurances must be made. A failure to furnish or comply with the civil rights assurances contained in this form may result in the procedures to effect compliance at 24 CFR §§ 1.8, 3.115, 8.57, or 146.39. By submitting this form, you are stating that to the best of your knowledge and belief, all assertions are true and correct.

1. Has the legal authority to apply for Federal assistance, has the institutional, managerial and financial capability (including funds to pay the non-Federal share of program costs) to plan, manage and complete the program as described in the application and the governing body has duly authorized the submission of the application, including these assurances and certifications, and authorized me as the official representative of the application to act in connection with the application and to provide any additional information as may be required.

2. Will administer the grant in compliance with Title VI of the Civil Rights Act of 1964 (42 U.S.C 2000(d)) and implementing regulations (24 CFR part 1), which provide that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination under any program or activity that receives Federal financial assistance OR if the applicant is a Federally recognized Indian tribe or its tribally designated housing entity, is subject to the Indian Civil Rights Act (25 U.S.C. 1301-1303).

3. Will administer the grant in compliance with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and implementing regulations at 24 CFR part 8, the American Disabilities Act (42 U.S.C. §§ 12101 et.seq.), and implementing regulations at 28 CFR part 35 or 36, as applicable, and the Age Discrimination Act of 1975 (42 U.S.C. 6101-07) as amended, and implementing regulations at 24 CFR part 146 which together provide that no person in the United States shall, on the grounds of disability or age, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance; except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

4. Will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and the implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion sex (including gender identity and sexual orientation), disability, familial status, or national origin and will affirmatively further fair housing; except an applicant which is an Indian tribe or its instrumentality which is excluded by statute from coverage does not make this certification; and further except if the grant program authorizes or limits participation to designated populations, then the applicant will comply with the nondiscrimination requirements within the designated population.

5. Will comply with all applicable Federal nondiscrimination requirements, including those listed at 24 CFR §§ 5.105(a) and 5.106 as applicable.

6. Will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42 U.S.C. 4601) and implementing regulations at 49 CFR part 24 and, as applicable, Section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)) and implementing regulations at 24 CFR part 42, subpart A.

7. Will comply with the environmental requirements of the National Environmental Policy Act (42 U.S.C. 4321 et.seq.) and related Federal authorities prior to the commitment or expenditure of funds for property.

8. That no Federal appropriated funds have been paid, or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of this Federal grant or its extension, renewal, amendment or modification. If funds other than Federal appropriated funds have or will be paid for influencing or attempting to influence the persons listed above, I shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying. I certify that I shall require all subawards at all tiers (including sub-grants and contracts) to similarly certify and disclose accordingly. Federally recognized Indian Tribes and tribally designated housing entities (TDHEs) established by Federally-recognized Indian tribes as a result of the exercise of the tribe's sovereign power are excluded from coverage by the Byrd Amendment, but State-recognized Indian tribes and TDHs established under State law are not excluded from the statute's coverage."

Name of Authorized Certifying Official:	Beth Neville
Date:	08/06/2026
Title:	Administrator
Applicant Organization:	City of Indianapolis
PHA Number (For PHA Applicants Only):	
I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. 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, 1014; 31 U.S.C. §3729, 3802).	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	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	08/06/2026
1E. SF-424 Compliance	07/30/2026
1F. SF-424 Declaration	07/30/2026
1G. HUD 2880	07/30/2026
1H. HUD 50070	07/30/2026
1I. Cert. Lobbying	07/30/2026
1J. SF-LLL	07/30/2026
IK. SF-424B	07/30/2026
1L. SF-424D	07/30/2026
2A. Subrecipients	08/06/2026
2B. Experience	07/30/2026
3A. Project Detail	07/30/2026
3B. Description	08/05/2026
Youth Homeless Demonstration Projects	08/05/2026
Special YHDP Activities	08/05/2026
4A. Services	08/05/2026
4A. HMIS Standards	No Input Required
4B. HMIS Training	No Input Required
4B. Housing Type	07/30/2026
5A. Households	No Input Required
5B. Subpopulations	08/05/2026
6A. Funding Request	08/05/2026

6F. Supp Srvcs Budget	08/05/2026
6H. HMIS Budget	08/05/2026
6J. Match	08/05/2026
6K. Summary Budget	No Input Required
6L Breakout of BLI Costs	No Input Required
6M. Indirect Cost Information	08/05/2026
7A. Attachment(s)	08/05/2026
7D. Certification	08/06/2026

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248467585
July 18, 2012 LTR 4168C E0
35-1989358 000000 00
00023645
BODC: TE

OUTREACH INC
% ERIC HOWARD
2822 E NEW YORK ST
INDIANAPOLIS IN 46201-3322

25295

Employer Identification Number: 35-1989358
Person to Contact: Mrs Pamela Skiles
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your July 09, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 1996.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

S. A. Martin, Operations Manager
Accounts Management Operations

Indianapolis Continuum of Care

Youth Action Board

August 3, 2026

The Indianapolis CoC hosted a focus group on July 22, 2026, of youth with lived experience to review the project applications submitted by local, grass roots organizations. The Indianapolis CoC hosted the focus group at a program center for youth and young adults within the Indianapolis CoC, a place where youth and young adults can find a hot meal, shower, laundry, computer lab, and peer support services. I facilitated the meeting and walked the three persons who joined the focus group through the four project applications and scoring, as well as facilitated the development of a priority listing for those project applications.

On behalf of the full Youth Action Board (YAB), we confirm YAB members reviewed and approved the applications of selected projects and believe it to be in alignment with the Indianapolis' Coordinated Community Plan to Prevent and End Youth and Young Adult Homelessness.

Sincerely,

Kendra Hathaway

Indianapolis Youth Advisory Board Support Coordinator