

United States Department of the Treasury

HAF Annual Report

State of Hawaii - HAF AR 2024

Participant Information:

Entity Name	Hawaii
Type of Recipient	State/DC
UEID	L1SGJ7LKJKT3
TIN	990275730
DUNS+4	809930217
FAIN#	HAF0002
Address	415 South Beretania Street, 5th Floor
City	Honolulu
State	Hawaii
Zip	96813-0000

Please report discrepancies (if any) on the above information.	
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Report Status:	Submitted
Date Submitted:	11/19/2024 7:56 PM
Submitted by	
Certified by	

Point of Contact List:

Name	Title	Email	Roles
	Reporter		HAF - Account Administrator;HAF - Point of Contact for Submission;HAF - Point of Contact for Reporting;HAF - Authorized Representative;CPF - Account Administrator

Community Engagement and Outreach:

1. Did you continue outreach to communities once your HAF Program(s) began?	Yes
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2. Please quantify the total amount of funds spent on outreach.	\$3,045.75
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3. You identified the Community-based Organizations listed below in your HAF Participant Plan or a previous report. Please indicate whether or not you have performed outreach to these organizations using the checkboxes in the "Outreach performed" column.

Community-Based Organization	Type	Added on this report?	Outreach Performed?
Saint Michael's and All Angels Church	Community Organization	<input type="checkbox"/>	<input type="checkbox"/>
Vibrant Hawaii	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nourish Kauai	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hawaii Habitat for Humanity Association	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hawaii Community Lending	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Council for Native Hawaiian Advancement	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
HOPE Services	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Neighborhood Place of Puna	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The Salvation Army	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hawaii County Economic Opportunity Council	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kauai Federal Credit Union	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hawaii HomeOwnership Center	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hawaiian Community Assets	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Community-Based Organization	Type	Added on this report?	Outreach Performed?
Legal Aid Society of Hawaii	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Council for Native Hawaiian Advancement	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Habitat for Humanity Maui, Inc	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hale Mahaolu	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Performance Goals:

Title	Program Design Element	Status	New	Continue
Non-Mortgage Related	Payment Assistance for Homeowners Utilities	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mortgage Related Goals	Mortgage Payment Assistance	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mortgage Related Goals	Mortgage Reinstatement	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Non-Mortgage Related	Payment Assistance for Delinquent Property Taxes	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Non-Mortgage Related	Payment Assistance for HOA fees or liens	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Non-Mortgage Related	Payment Assistance for Homeowner's Insurance	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mortgage Related Goals	Facilitate Mortgage Interest Rate Reduction	Not On Track	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage Related Goals	Mortgage Principal Reduction	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Methods for Targeting:

	<p>Awards of HAF funds are targeted first to applicants at 100% AMI or below, then to socially disadvantaged applicants, with remaining funds targeted to applicants at 150% AMI or below. What this means in practice is that 100% AMI applications are processed first, followed by socially disadvantaged applications, then the rest, in a chronological order, so as to allow for continuous application intake.</p> <p>Targeting efforts include mailer distributions to rural areas known to be underserved with internet access. Additionally, the Maui program is using local</p>
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channels to ensure Limited English Proficiency populations are reached

1. Please provide an update on your targeting plan including challenges, successes, etc.

	and aware of how to access the program.
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2. Is the targeting plan put forth in the HAF Plan achieving the desired results?	Yes
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Best Practices and Coordination:

1. Have you coordinated with any of these agencies? (FHA, VA, USDA, GSE's, State or Local Agencies that hold mortgage portfolios)	Yes
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If so, please provide best practices and information on coordination efforts.	The Hawaii HAF Program verifies homeowner eligibility and coordinates with the agency to request relevant information. The HUD-approved housing counselors verify all information for completeness and use it to assess and strategize how best to keep the homeowner in their home.
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2. Have you coordinated with servicers?	Yes
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	We have encountered delays in onboarding several servicers to the program. We have finally received a collaboration agreement from the Hawaii
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Community FCU following 7 unsuccessful attempts to connect. This success will ensure that a Hawaii senior receives the HAF assistance necessary to remain in their home.

We continue to face delays in receiving records from servicers, which in turn hampers our ability to determine the appropriate amount of HAF funds a homeowner is eligible to receive. Staff is diligently sending follow-up communications to servicers to obtain necessary information and to ensure tasks

If so, please provide best practices and information on coordination efforts.

	are completely in a timely manner.
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Certification:

Statement

I certify that the information provided is accurate and complete after reasonable inquiry of people, systems, and other information available to the HAF participant. The undersigned acknowledges that any materially false, fictitious, fraudulent statement, or representation (or concealment or omission of a material fact) in this submission may be the subject of criminal prosecution under the False Statements Accountability Act of 1996, as amended, 18 USC 1001, and also may subject me and the HAF participant to civil penalties, damages, and administrative remedies for false claims or otherwise (including under 31 USC 3729 et seq.) The undersigned is an authorized representative of the HAF participant with authority to make the above certifications and representations on behalf of the HAF participant.

1. How much in interest did you earn on HAF award funds in your last fiscal year?	\$668,763
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2. If you earned interest in excess of \$500, did you remit that excess earned interest to the Department of Health and Human Services Payment Management System (PMS)?	No
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The State of Hawaii has not yet remitted excess earned interest to the Department of Health and Human Services payment Management System (PMS) because it is still in the process of receiving remittances of interest earned on HAF award funds during the FY 2024 Federal fiscal year from our subrecipients. As soon as the returned interest has been processed, the State of Hawaii will remit the excess earned interest to PMS.

If no, please explain.