

FY26 Continuum of Care Program NOFO Pre-Test Guide

Why a Pre-Test?

HUD is forecasted to publish the FY 26 Continuum of Care Notice of Funding (CoC NOFO) by June 1st, 2026. The Indiana Balance of State Board has approved a "Pre-Test" for all current and prospective grantees as a benchmarking tool ahead of the funding competition. This pre-test is NOT a formal part of the CoC Internal Competition. While strongly encouraged, participation is voluntary and scores generated by the pre-test will have no bearing on applicant's scores during the Internal Competition. Ranking and scores from the pre-test will **not** be shared publicly.

A full list of the pre-test questions can be found on the [IN BoS Website's Internal Competition Page](#). The pre-test will require all currently funded applicants to run two reports in HMIS per project: System Performance Measures (SPM) and the Annual Performance Report (APR). IHCD staff will provide written instructions for running these reports as well as post office hours times on the [IN BoS Website's Internal Competition Page](#).

The pre-test has the following goals:

For current grantees (renewal projects)

1. Provide current grantees with an anticipated score based on performance measures and answers to potential application questions
2. Benchmark current grantee scores relative to the "average score", "median score", and score range quartiles of all current projects
3. Allow current grantees time to consider potential changes to their project plans prior to the FY26 CoC NOFO Competition

For new, prospective grantees (first time grantees, former grantees who were not funded in FY24-25 and wish to re-apply, or current grantees with new project ideas)

1. Inform the IN BoS Board & IHCD staff of your interest in applying so that IHCD staff can provide technical assistance ahead of the FY26 Competition
2. Allow the IN BoS Board to determine outreach needs and plan for state-wide coverage of the homelessness response system

Application Link

<https://ihcda.jotform.com/form/fy26-CoC-pre-test>

Due Dates

The pre-test is due by **May 11, 2026 at 5pm EST**. If you need to make changes to your submitted pre-test due to a discrepancy or misunderstanding, IHCD A will allow for changes between 4/22/26 – 5/11/26. Please

Pre-Test Branches

Please select the option below that most accurately represents the applicable project type.

Option 1: This project is currently CoC-Funded and our organization prefers to re-apply as a renewal with the same project components OR consider renewing our current project with similar components through a transition grant

Option 2: This project is not currently CoC-Funded and would be new, but our organization has another current CoC-Funded project

Option 3: This project is not currently CoC-Funded and would be new. My organization is also brand new to CoC Funding OR it has been 3+ years since we last received CoC Funds

Organization Info

Organization's Legal Name (As it appears with the Indiana Secretary of State)	Unscored
Primary Contact Name	
Primary Contact's Professional Title	
Primary Contact's Email	
Organization's Primary Address*	
Is your agency's registration current in SAM (www.sam.gov)	
Is the agency registration current with the Indiana Secretary of State?	
Did your organization participate in the most recent Point-IN-Time Count held in January 2026?	+1 point
Did your agency participate in a Regional Planning Council in the past year?	+2 points
Do you have at least one board member who has a recent experience of homelessness?	Threshold Requirement, Unscored
If yes to the above, Do you have more than one board member with a recent experience of homelessness (in the last 7 years)?	+1 point
Does your organization participate in HMIS? Or will you be willing to if selected for funding? [All CoC-funded projects are required to use HMIS. DV Providers may use DV ClientTrack or another comparable system.]	+ 2 points

Option 1: Renewal Project Information

Please select the subpopulations the project will serve.	<i>Unscored</i>
Was this project an IHEDA Subrecipient or HUD-Direct	<i>Unscored</i>
Were claims submitted monthly in the last 2 years?	<i>IHEDA-subrecipients only +5 points</i>
Were claims submitted quarterly in the last 2 years?	<i>HUD-Direct Funded Only +5 points</i>
Please acknowledge each of the following statements regarding timeliness:	
Please acknowledge each of the following statements regarding engaging individuals and minimizing trauma:	
<i>I acknowledge the project will engage served individuals</i>	<i>Threshold Requirement</i>

<i>in regular opportunities to provide input into project policies and operations.</i>	
<i>I acknowledge person-centered planning as a guiding principle for this project, which focuses on the individual, what they would like to accomplish in terms of relationships, community participation, achieving control over their lives, and developing the skills and resources needed to accomplish goals.</i>	Threshold Requirement
<i>I acknowledge required services from staff (including sub-contractors or healthcare providers as described in this application) will be trained in clinical and non-clinical strategies to support participant engagement including motivational interviewing, trauma informed approaches.</i>	Threshold Requirement
Does your organization currently have on-site substance use treatment services? OR Will your project plan to offer on-site substance use services if awarded	+ 5 points
Will your project provide opportunities for employment services such as job search assistance, career counseling, job training, etc.?	+ 5 points
As a part of this project, will your organization track whether participants increase TOTAL income in HMIS?	+ 2 points
As a part of this project, will your organization track whether participants increase EMPLOYMENT income in HMIS?	+1 point
Will at least 50% of this project's activities be provided in an Opportunity Zone? https://www.hud.gov/opportunity-zones	+ 1 point
<i>The next four questions are for information gathering purposes only. Responses have no bearing on project rank or score.</i>	
If your current permanent housing project (RRH, PSH, DVRRH) does not score high enough, would you consider a transition grant project (SSO or TH) instead of a standard renewal?	Unscored
Would you like to propose any changes greater than 10% of the current total project budget? (for example, increase supportive services by decreasing leasing) If yes, please explain	Unscored
Is there anything the IN BoS Collaborative Applicant (IHCD) can do this year to better assist you in the renewal application process? (optional)	Unscored
What are some of the biggest barriers the project is currently facing? Are there solutions IHCD and/or the Indiana Balance of State CoC can implement to assist with these barriers? (optional)	Unscored

Transition Grant Project

This section will only appear if applicants answer “Yes” to the Renewal Project Question: “If your current permanent housing project (RRH, PSH, DVRRH) does not score high enough, would you consider a transition grant project (SSO or TH) instead of a standard renewal?”

Current Project Type (select one)	Unscored
Anticipated Project Type (select one)	Unscored
Would this transition grant project serve the same sub-population as the current project? If no, please explain how the population served would change.	Unscored
Given the unique nature of this year's Federal CoC Competition, it is encouraged that New Projects and Transition Grant Projects apply as sub-recipients of IHCD in order to allow additional opportunities for Technical Assistance and/or support. Are you willing to operate this project as a sub-recipient of IHCD?	Unscored
Do you have an idea how your project budget might change if you utilize the transition grant process? (optional)	Unscored

Options 2 & 3: New Project Info

This section applies to new PROJECTS. It can be completed by organizations who are currently CoC-funded and have a new project idea AND new organizations not currently funded by the CoC. **New projects will not be scored as part of this pre-test.**

Project Type - Select One	<i>Unscored</i>
Please select the subpopulations the project will serve.	<i>Unscored</i>
Given the unique nature of this year's Federal CoC Competition, it is encouraged that New Projects apply as sub-recipients of IHCD in order to allow additional opportunities for Technical Assistance and/or support. Are you willing to operate this project as a sub-recipient of IHCD?	<i>Unscored</i>
Does the project agree to follow all Written Standards set forth by the IN BoS CoC Board; including using Coordinated Entry for all referrals to openings in the program?	<i>Unscored</i>
Do you currently serve clients from the CoC coordinated entry system?	<i>Unscored</i>
Do you intend to apply as an IHCD Subrecipient or HUD-Direct?	<i>Unscored</i>
Given the unique nature of this year's Federal CoC Competition, it is encouraged that New Projects and Transition Grant Projects apply as sub-recipients of IHCD in order to allow additional opportunities	<i>Unscored</i>

for Technical Assistance and/or support. Are you willing to operate this project as a sub-recipient of IHCD?	
Please acknowledge each of the following statements regarding engaging individuals and minimizing trauma:	<i>Unscored</i>
Will the project team engage individuals experiencing homelessness in regular opportunities to provide input into project policies and operations.	<i>Unscored</i>
Will the project team commits to person-centered planning as a guiding principle, which focuses on the individual, what they would like to accomplish in terms of relationships, community participation, achieving control over their lives, and developing the skills and resources needed to accomplish goals.	<i>Unscored</i>
Will project staff (including sub-contractors or healthcare providers as described in this application) be trained in clinical and non-clinical strategies to support participant engagement including motivational interviewing, trauma informed approaches.	<i>Unscored</i>
Will use service use treatment be provided on-site if awarded?	<i>Unscored</i>
Will your project provide opportunities for employment services such as job search assistance, career counseling, job training, etc.?	<i>Unscored</i>
As a part of this project, will your organization track whether participants increase TOTAL income in HMIS?	<i>Unscored</i>
As a part of this project, will your organization track whether participants increase EMPLOYMENT income in HMIS?	<i>Unscored</i>
Will this project track income information at program EXIT?	<i>Unscored</i>
Will at least 50% of this project's activities be provided in an Opportunity Zone? https://www.hud.gov/opportunity-zones	<i>Unscored</i>
Has your organization ever received a federal grant, either directly from a federal agency or through a state/local agency?	<i>Unscored</i>
If yes to the above, has your organization ever had a federal grant revoked due to noncompliance?	<i>Unscored</i>
Is there anything else you'd like to share about your new project? (optional)	<i>Unscored</i>

Organizational Financial Capacity

Does your organization have the financial capacity to administer this project on a reimbursement basis for up to SIX months?	+5 points
Does your organization have the financial capacity to administer this project on a reimbursement basis for up to THREE months?	+3 points
Does your organization have an accounting system that clearly meets federal standards as described at 2 CFR 200.302?	Threshold Requirement
Does your organization have a CFO, controller or similar executive financial officer in addition to the Executive Director or CEO?	
Please select the option that best describes your organization's accounting or financial department:	Up to 3 points
<i>We have an accounting or finance department that is separate from program staff and the executive team</i>	
<i>Program Staff (Department managers) or Executives (ED, CEO, etc) handle all fund management</i>	
<i>Other</i>	
Prior to project implementation, would you be able to provide written commitments (cash or in-kind) of at least 25% of the overall dollar amount requested?	Threshold Requirement
For in-kind match, do you acknowledge fully executed Memoranda of Understanding must be in place prior to the project start date?	Threshold Requirement
For cash match, do you acknowledge proof of the match amount and proof of sources must be provided prior to the project start date?	Threshold Requirement
Does the organization have unresolved HUD or IHCD monitoring findings?	Threshold Requirement
Does the organization have outstanding obligations to HUD in arrears?	Threshold Requirement
Per the grant agreement, if a subrecipient expends \$1,000,000 or more in federal awards during the subrecipient's fiscal year, it must submit its single audit to IHCD. If the subrecipient expends less than \$1,000,000 in federal awards, it must submit its audited financial statements or 990 (IRS Form 990, (Return of Organization Exempt from Income Tax). Does your agency have a system in place to ensure this requirement is met?	Threshold Requirement
Does the organization have unresolved or adverse Financial Audit findings?	Threshold Requirement
Has your organization returned grant funds to HUD or IHCD in the last 2 years?	-2 Points

System Performance – Calendar Year 2025

Report dates (1/1/25 – 12/31/25)

Project-Level SPM reports will need to be run by each subrecipient for each project in HMIS for the calendar year 2025. This is a new report and different from the APR. IHCD staff will provide instructional materials via email and host office hours to assist with running this new SPM report.

SPM Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations	
% of Returns in Less than 6 Months	Up to 4 points
Total % of Returns in 2 years	Up to 2 points
SPM Measure 4: Employment and Income Growth for Homeless Persons in CoC Program funded Projects	
SPM 4.1 - Percentage of Adults who increased earned income	Up to 3 points
SPM 4.3 - Percentage of Adults who increased total income	Up to 2 points
SPM 4.4 - Percentage of Adults who increased earned income	Up to 3 points
SPM 4.6 - Percentage of Adults who increased total income	Up to 2 points
SPM Measure 7: Change in PH exits to permanent housing destinations or retention of permanent housing	
% Successful Exits/Retention	Up to 4 points
For APR Metric: Exits to Unsubsidized Housing	
Number of people who exited to unsubsidized housing INCLUDING those staying with friends or family permanent tenure	Up to 4 points
Number of people who exited to unsubsidized housing EXCLUDING those staying with friends or family permanent tenure	
APR Q6a - Data Quality: Personally Identifiable Information	
Overall Score Meets 2024 Benchmark	Up to 1 point
APR Q6b - Data Quality: Universal Data Elements	
Veteran Status (3.07)	Up to 1 point
Disabling Condition (3.08)	Up to 1 point
APR Q6c - Data Quality: All CoC-funded Projects Data Quality: Income and Housing Data Quality	

Destination (3.12)	Up to 4 points
Income and Source (4.2) at Start	Up to 2 points
Income and Source (4.2) at Annual Assessment	Up to 2 points
Income and Source (4.2) at Exit	Up to 2 points
APR Q6e - Data Quality: Timeliness	
Recorded in 6 days or less	Up to 2 points
Recorded in more than 6 days	Up to 2 points
Budget Utilization	
12 Month Utilization Projection %	Up to 13 points
If you have un-utilized funding, are you willing to voluntarily reallocate it? Collaborative Applicant staff will reach out after completing this section's scoring to discuss with you, if so.	<i>Bonus Points to be determined by Collaborative Applicant</i>

HUD 2026 Policy Priorities

HUD may include the following certification of policy priorities in funding contracts as a condition of any organization receiving funding.

Do you certify that your organization will undertake no activities to subsidize or facilitate racial preferences or other forms of illegal discrimination or activities that rely on or otherwise use a definition of "sex other than as binary in humans"?	Unscored
Do you acknowledge that HUD may conduct a risk review of program performance in accordance with Section V Part C of FR-6900-N-25 (page 89 of 2025 NOFO)?	Unscored
Do you certify that your organization will not operate drug injection sites or "safe consumption sites," knowingly distribute drug paraphernalia on or off of property under their control, permit the use or distribution of illicit drugs on property under their control, or conduct any of these activities under the pretext of "harm reduction"?	Unscored
Do you certify that your project commits to cooperating, assisting, and not interfering or impeding with law enforcement or co-response to connect violators of public camping or drug use laws with services?	Unscored
Will this project require participation in supportive services?	Unscored
Will this project be able to demonstrate a partnership with a local public housing authority (PHA)?	+ 3 points
Will this project be able to demonstrate a partnership with local first responders and law enforcement?	+ 5 points
Will this project be able to demonstrate a healthcare partnership through service agreements, an MoU, or similar prior to project start?	+ 3 points
Will your project provide (through either external partnerships or internally) childcare for working parents experiencing homelessness?	+ 3 points