



**Proposition 202 Tribal Gaming
Application Sponsorship/Support Form
Requesting Pinal County serve as the Fiscal Agent/Pass Through Entity**

Name of the Tribal Community: Gila River Indian Community

Due date of the application to the Tribal community: 04/01/2024

The following information will be used by Pinal County to 1) send the resolution and grant documents for the applicant to submit to the Tribal community, 2) send the funds, if awarded.

Name of the Non-profit: Horizon Health and Wellness

Contact person/title: Mary Jo Silcox, Chief Strategic Initiatives Officer

Email address: maryjo.silcox@hhwaz.org

Address: 625 N Plaza Drive, Apache Junction Az 85120

Project name: Horizon House



Amount being requested: \$363,000

Project summary: Horizon proposes to renovate a current vacant house into a 5 bedroom/5-bathroom non-congregate shelter for homeless individuals and families in Apache Junction. The planned shelter would be a short-term solution to individuals experiencing homelessness. HHW would then provide supportive services to the shelter residents and assist them into either transitional or permanent housing. This project would be able to serve approximately 65 people per year.

Beneficiaries: This project will serve both the individuals experiencing homelessness as well as the community by offering safe and secure short-term housing with support services to assist individuals in securing and maintaining long term housing.

Supervisor District: District 5

The undersigns hereby certifies they have read and comply with the responsibilities set forth in the PINAL COUNTY TRIBAL GAMING GRANT PROGRAM
Request for fiscal agent/pass through support documentation.

 
Director name and signature



Gila River Indian Community Grant Application Grant Cycle 2024

Cover Sheet

Click field or use up/down arrow keys to move among fields

Municipality Information	
1. Date of Application: 2/21/2024	
2. Name of City, Town or County: Pinal County	
3. Mayor (City or Town) or Board of Supervisor's Chairman (County): Mike Goodman - Pinal County Board of Supervisors Chairman	
4. Mailing Address: P.O. Box 1348	
5. City: Florence	State: Arizona Zip Code: 85132
6. Acknowledgement of Submission by Authorized Municipality Representative: Typed Name/Title: Heather Patel, Grants Administrator Email Address: heather.patel@pinal.gov Signature:	
Applicant Information	
7. Department/Organization Name: Horizon Health and Wellness	
8. Select Organization Type: 501c3 Non-Profit <input checked="" type="checkbox"/> If Non-profit please attach IRS Determination Letter	
9. Application Contact Person: Mary Jo Silcox Title: Chief Strategic Initiatives Officer	
10. Phone Number: 480-983-0065 X 45520	
11. Mailing Address: 625 N. Plaza Dr.	
12. City: Apache Junction	State: Arizona Zip Code: 85120
13. Email Address: maryjo.silcox@hhwaz.org Website Address: https://www.hhwaz.org	
Project Information	
14. Project Name: Horizon House	
15. Purpose of Grant: Horizon Health and Wellness is submitting a one time capital request to repair and remodel an existing vacant 3 bedroom house into a 5 bedroom/5 bathroom house to be utilized for a homeless shelter for residents of Apache Junction and Florence. The house will be able to serve both individuals and families experiencing homelessness.	
16. Priority Funding Area	Public Safety
17. Annual amount requested	\$363,000
18. Number of years that funding is requested	1 year
19. Total amount requested (annual amount x number of years)	\$363,000
20. Has your organization received past funding from GRIC? If yes, list each year and amount	No

For Office Use Only:		
Data Entry	Receipt	Evaluation
<input type="checkbox"/> Approval – Amount/Term		<input type="checkbox"/> Denial



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21. Geographic area served	Pinal County – Apache Junction/Florence area
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Narrative

Please structure your proposal to provide the following information in the order indicated. Provide the narrative in paragraph form in the text field provided. Please be thorough but strive for brevity.

1. Briefly describe your organization's history, mission and goals.

Horizon Health and Wellness (HHW) is a non-profit 501(c)(3) integrated health care agency licensed by the State of Arizona and accredited through the Joint Commission to deliver an extensive array of services for all ages and stages in life. HHW offers outpatient primary and behavioral health care, substance use residential treatment, preventative healthcare services, and housing services at various sites around Arizona. For more than 40 years, HHW has been serving the underserved and unserved residents of Arizona meeting both their behavioral health and primary healthcare needs as well as addressing the social determinants of health in this population such as employment, housing, food insecurity and transportation. The mission of HHW is "Horizon Health and Wellness is committed to providing the best care possible by providing integrated health care that addresses the whole person and promotes wellness, thereby helping patients sustain their health and the health of their families." Our philosophy is "Kindness Matters" and this relates to customer service as well as to staff. We value creating clinic environments and services that value, honor and respect our patients. We are committed to providing excellent care.

2. To determine eligibility for this grant, if the applying organization is non-municipal or non-profit, please describe your relationship with the supporting municipality, how this project will benefit the municipality, and the municipality's role in this project, if applicable. If the applying organization is a municipality or a municipal sub-division please enter the text "Not applicable" and go to item 3.

HHW is a non profit 501(c)(3) organization and will be sponsored by Pinal County. Pinal County will present this grant proposal to their Board of Supervisors for approval to submit to the Gila River Indian Community. If approved, Pinal County will act as a pass-through for funding from the Gila River Indian Community to HHW presenting a check to us once they receive it. Prior to presenting HHW with a check, the County will execute an agreement with HHW. An authorized signature from Pinal County will be included in this application as required. HHW has been involved with several collaborative projects with Pinal County over the years especially in working to house the homeless and low income population of the County. HHW is involved in important initiatives and meetings/task forces that Pinal County leads such as the Pinal County Local Coalition to end Homelessness and the Pinal County Substance Use Wellness Coalition. HHW has also



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been awarded several grants for housing from Pinal County. HHW is always open to partnering and collaborating with Pinal County and appreciates their partnership.

3. Describe the proposed project, objectives, and your plan to implement.

HHW proposes to renovate a current vacant house into a 5 bedroom/5 bathroom non-congregate shelter for homeless individuals and families in Apache Junction. The planned shelter would be a short term solution to individuals experiencing homelessness. The Apache Junction area currently does not have a homeless shelter but has a large homeless population. HHW would then provide housing supportive services to the shelter residents and assist them into either transitional housing or permanent housing. This project would be able to house approximately 65 people per year which in essence is removing 65 people off the streets into safe and secure housing. HHW currently owns the property and has a general contractor that is able to start the work immediately after receiving funding. It is also in an area that is appropriately zoned for a shelter. HHW is projecting that the renovations would take 4-5 months with the shelter able to open and start operations within 6 months of funding.

4. Describe how the proposed project satisfies one or more of the priority funding areas identified by the Gila River Indian Community.

Horizon House would satisfy the public safety priority funding area. Homeless individuals are often living in the local parks, alleys, streets and often trespass on private property. Providing housing and support services to this population will help keep them off the streets, in addition, the support services will assist them not only with housing but also with benefits applications, getting into work programs and permanent housing solutions. This project will also provide healthcare to the shelter residents, many homeless individuals suffer from mental health issues, substance use issues and chronic health issues. As a Federally Qualified Health Center, HHW can leverage our current primary care and behavioral health care and offer this service to the shelter residents which can be seen at the Apache Junction clinic for any treatment needed. This combined treatment and housing with case management services will increase the successful outcomes such as numbers permanently housed, number enrolled in services outside of housing, number enrolled in benefit programs such as AHCCCS and other Disability programs.



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5. Identify the needs/problems to be addressed, target population and number of people to be served by the project.

Horizon House proposes to serve 65 individuals/families per year with short term housing. HHW plans to also provide case management services, benefit enrollments and treatment (primary care, behavioral healthcare and Substance use treatment services) to the residents living in the shelter.

6. Define the project as a new or continuing program. Has GRIC previously funded this project?

This is a new project, Gila River Indian Community has not previously funded this project.

7. Provide a brief timeline including start and finish dates. Indicate if the timeline is flexible.

Contruction/Renovation: to be started upon funding and completed within 5 months. Shelter staff will be hired within 4 months of funding and will be trained and ready to begin shelter operations within 6 months of funding. This timeline can be pushed either forward or backwards depending on construction company and permitting processes.

8. Identify other organizations, partners or funders participating in the project and their roles.

HHW participates in the Pinal County Coalition to End Homelessness and will utilize this membership to assist with the outreach to homeless individuals and families in the area. In addition, Horizon House is located right next door to the Salvation Army in Apache Junction and will partner with them to provide some ancillary services. HHW also has a strong partnership with the Genesis Project in Apache Junction and will utilize that partnership to provide both outreach and emergency services such as food and clothing to the new shelter residents and to the newly housed individuals. In addition, HHW has the mobile crisis team that often comes in contact with the homeless population and this team can refer and even provide transportation to Horizon House. HHW also has a newly implemented homeless street outreach team funded through DES to locate and work with the homeless population in Pinal County and get them safely to shelters.

9. Would you be able to implement the proposed plan if your organization received partial funding for this project?



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HHW would utilize partial funding to complete a partial renovation and would look for other funding to provide the rest of the renovation. The house could be renovated for less rooms and bathrooms if needed and still be utilized as a shelter serving fewer people.

10. Describe your plan for project financial sustainability beyond the grant period. If this is a program/project previously funded by the Gila River Indian Community describe efforts made towards the previously described sustainability plan.

This is a one time capitol funding request to fund the renovations needed to create the homeless shelter. HHW will utilize other funding avenues for continued operations of the shelter.

11. Describe your plan to document progress and results.

HHW has a robust data system and electronic record system that can capture any data needed. It is the plan to document all services that are offered to the shelter residents in a clinical record. HHW also provides housing support services and permanent housing units and captures outcome data on these programs. Horizon House would be added to this data management system. Data will include the number served, the number discharged and discharge location, number entering treatment, number enrolled in benefits, and number entering the workforce and permanent housing programs.

12. Indicate any application to and/or awards made by a tribe other than the Gila River Indian Community for state shared revenues for this and any other project for the past five (5) years. If this information is included in a separate attachment, please indicate that here.

Horizon Health and Wellneess has been awarded the following grants in the past 5 years

1. Tohono O'ohdam Prop 202 Grant: this was awarded to renovate our vacant Southern House to provide Permanent Supported Housing for 4 low or no income individuals or families in Apache Junction
2. Ak Chin Prop 202 Grant: This was awarded to renovate our vacant Morrison Property to provide 4 units of permanent supported housing for low or no income individuals in Casa Grande



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Project Budget

Budget Period: [Click here to enter text.](#)

For each budget item listed here please provide a narrative description on the following Project Budget Detail page.

Proposed Budget Expense (list each budget item)	Amount requested from GRIC	Amount requested or secured from other sources	In Kind contributions	Total Budget
1. Construction & Labor	\$313,000	\$0	\$0	\$313,000
2. Misc Expense/Incidentals (construction)	\$15,000	\$0	\$0	\$15,000
3. Furniture	\$25,000	\$0	\$0	\$25,000
4. Appliances	\$10,000	\$0	\$0	\$10,000
5. shelter Staff	\$0	\$115,600	\$0	\$115,600
6. Housing support staff	\$0	\$53,646	\$0	\$53,646
7. Click here to enter text.	\$0	\$0	\$0	\$0
8. Click here to enter text.	\$0	\$0	\$0	\$0
9. Click here to enter text.	\$0	\$0	\$0	\$0
10. Click here to enter text.	\$0	\$0	\$0	\$0
11. Click here to enter text.	\$0	\$0	\$0	\$0
12. Click here to enter text.	\$0	\$0	\$0	\$0
13. Click here to enter text.	\$0	\$0	\$0	\$0
14. Click here to enter text.	\$0	\$0	\$0	\$0
15. Click here to enter text.	\$0	\$0	\$0	\$0
Total Budget	\$363,000	\$169,246	\$0	\$532,246



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Project Budget Detail

Please provide a narrative description for each of the project budget items listed on the previous page. Include the dollar figure and how it was derived.

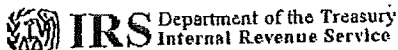
1. Construction and Labor (\$313,000) – quote from AZ Home Services LLC – includes the following: plans, permits, demo, plumbing for new bathrooms, flooring work to support new plan, drywall/texture, kitchen remodel (cabinets, counters, sink) bathroom install and remodel (toilets, showers, sinks) Laundry room, electrical work, new HVAC, New windows, roof repair, exterior and interior paint, fence
2. Misc Expense/Incidentals (15,000) – quote from Az Home Services LLC – projected hidden costs from past experience
3. Furniture (25,000) beds, couches, chairs, dining room furniture, tv's, childrens furniture, all linens, dishes, misc items – cost derived from previous experience with start up projects for residential programs and housing programs
4. Appliances (\$10,000) washer, dryer, refrigerator, stove, microwave, oven - costs from Home Depot
5. Shelter Staff – 2.0 FTE BHT level staff – using current Horizon pay structure and ERE costs, staff will monitor the shelter and clients for safety
6. Housing Support Staff – 1.0 FTE BHT Level – current employee costs - will work with shelter residents on longer term housing solutions
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Other explanation: [Click here to enter text.](#)

To ensure a complete application and proper submission please refer to the Grant Application Instructions.



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248167147
Jan. 22, 2016 LTR 4168C 0
86-0554593 000000 00

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BODC: TE

HORIZON HEALTH AND WELLNESS INC
625 N PLAZA DR
APACHE JCT AZ 85120



17738

Employer ID Number: 86-0554593
Form 990 required: Yes

Dear Taxpayer:

This is in response to your request dated Jan. 13, 2016, regarding your tax-exempt status.

We issued you a determination letter in October 1986, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

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Jan. 22, 2016 LTR 4168C 0
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HORIZON HEALTH AND WELLNESS INC
625 N PLAZA DR
APACHE JCT AZ 85120

Sincerely yours,

Doris P. Kenwright

Doris Kenwright, Operation Mgr.
Accounts Management Operations 1