

**North Carolina Housing Finance Agency
2021 Essential Single-Family Rehabilitation Loan Pool (ESFRLP)
Post-Approval Documentation**

ESFRLP2111	Gaston County (Gaston)
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A. Instructions

Your Application for Funding under the 2021 cycle of the Essential Single-Family Rehabilitation Loan Pool (ESFRLP21) was approved for \$190,000 and assigned Funding Agreement number 2111. As a Member of the ESFRLP21 "Pool", \$190,000 has been set aside in the pool for your project and may be reserved (set up) on a unit-by-unit basis once units have been selected and required documents have been received and approved by the North Carolina Housing Finance Agency (the Agency). In accordance with ESFRLP21 Program Guideline (PG) 3.2.2 you may reserve funds for up to 5 units under your original \$190,000 set-aside. Funds for additional units may be reserved from the pool, depending on availability, on a unit-by-unit, first come, first served basis in accordance with PG 3.2 up until December 31, 2023.

Please provide the information and documentation requested in this packet and forward it to Mark Lindquist mwlindquist@nchfa.com. The Case Manager assigned to your ESFRLP project is Donna Coleman and they can be reached at 919-981-5006 or via email at djcoleman@nchfa.com.

B. Status of Other Funds - Attach

If the Application for Funding stated that other funds would be available to assist with the rehabilitation of the proposed housing units, the Member must provide documentation for each source of funds identified, with the exception of Rural Development 504 funds. The table immediately below summarizes the proposed amount of matching funds according to your application.

Source of Funds	Amount
Volunteer labor	\$0
Donated material	\$0
Matching local funds	\$2,000
Other	\$0
Total of matching funds committed to the ESFRLP21 project	\$2,000

C. Assistance Policy - Attach

Because ESFRLP21 beneficiaries are not necessarily pre-selected and approved through a public hearing process, it is especially important that ESFRLP21 Members **adopt** an Assistance Policy that thoroughly and clearly identifies the eligibility criteria for assistance, and for prioritizing applicants once they have been determined eligible. This policy should be fair, open and non-discriminatory. In addition, other facts, policies and procedures affecting potential applicants and/or recipients of assistance should be clearly communicated in your Assistance Policy. Be sure to include your policy on temporary relocation, if applicable. Please submit your **proposed** Assistance Policy as part of the completed Post Approval Documentation to the Agency. A model Assistance Policy is located on the NCHFA website, www.nchfa.com. You may choose to use the model as a template to develop your own policy.

D. Procurement and Disbursement Policies - Attach

ESFRLP21 Members must submit a copy of their Procurement Policy that is specific to ESFRLP21 and is written in accordance with 2 CFR 200, and 24 CFR 92.350 (equal opportunity standards), and a copy of their Disbursement Policy, to the Agency, for review and approval. Please submit a copy of your *proposed* Procurement Policy and a copy of your *proposed* Disbursement Policy for ESFRLP21, to the Agency, as part of your PAD.

E. Service Area Requirements and Public Contact

Your Application for Funding was approved for the following service area and amount:

Service Area	Approved Program Funds
Gaston	\$190,000

Your public contact's phone number will be published on the Agency website which is linked by several government and other resources. This person should be able to receive phone calls during most normal business hours and be knowledgeable about who in your organization can assist the public with access to the ESFRLP program.

Name	Phone	E-mail
Pat Laws	(704) 866-3771	Pat.Laws@gastongov.com

F. Fiscal Year and Audits. (Complete this section)

Members will be required to submit reports as required under NC State General Statue 143C-6-23 (Non-Government Organizations) or NC State General Statue 159-34 (Units of Local Government). Fiscal year begins July 1st and ends June 30th.

G. Acknowledgement of Audit Compliance Reporting Responsibilities - Attach

Please have the financial person from your organization, responsible for coordinating the annual audit, complete and sign the enclosed "Audit Compliance Responsibilities" form and the FFATA questionnaire acknowledging their receipt. Then, return both documents with this PAD.

H. Organizational Documents. (Non-Government Organizations Only) - Not Applicable

1. Please provide a copy of your Conflict of Interest Policy in accordance with GS 143C-6-23.
2. Please provide a written statement, made under oath and completed by your board of directors or appropriate governing body stating that your organization does not have any overdue taxes, as defined by GS 105-243.1 at the federal, state and local level.
3. Please provide copies of organizational documents, including articles of incorporation, by-laws, and a listing of all directors, officers and staff.

I. Intergovernmental Agreement - Not Applicable

Please provide a copy of an intergovernmental agreement between your governmental entity and the governmental entity in which you will be providing services under ESFRLP21, as required by GS 160-456.

J. Minimum Housing Codes - Attach

In those jurisdictions with an adopted minimum housing code, all units rehabilitated with ESFRLP funds must meet or exceed all local codes, rehabilitation standards, ordinances and zoning ordinances upon the completion of rehabilitation. Please attach any adopted minimum housing codes in your county service area. Contact your Case Manager if you have questions.

K. Requisition Approval Authorization Form, W9 and Direct Deposit - Attach

1. Enclosed in the PAD packet is a Signatory Certification and Project Access Authorization Form. Please have this signed by each individual authorized by your organization's governing board who will be requisitioning ESFRLP21 funds. Return the signed form to the Agency as part of the completed PAD. Be sure to provide a copy of the resolution passed by the governing board authorizing the requisitioning of funds by those persons whose signatures appear on the enclosed certification.
2. Enclosed is the Form W-9 Request for Taxpayer Identification Number and Certification. Please complete this form with the requested information and return the completed form with the PAD.
3. Enclosed is a form for Electronic Payments, which will authorize the Agency to make the required direct deposit of Program funds into your designated checking account. Please complete this form with the requested information and return the completed form with the PAD.

L. Language Access Plan - Attach

As recipients of federal funds, ESFRLP Members are required to comply with Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000(d) and Executive Order 13166 requiring them to take responsible steps to ensure meaningful access by persons with limited English proficiency. ESFRLP Members are required to provide the Agency with their four-factor analysis used to establish the need for a Language Access Plan (LAP) and the LAP if required by the analysis. See the attached "NCHFA Guidance for Developing a Language Access Plan" and the Agency's LAP at www.nchfa.com as an example if you need to perform a four factor analysis or create a plan.

M. ESFRLP Budget for Soft Costs

The Agency recommended ESFRLP21 budget for soft costs is provided below for your review and acceptance or your organization may propose to adjust the recommended budget.

Please check the appropriate response.

- ☐ a. Member accepts Agency-recommended budget (per table below); or
☐ b. Member proposes to adjust the budget as follows (awardee complete on page 4)


ESFRLP Soft Costs/unit		2111
1.	Outreach & Advertising	\$300
2.	Environmental Review preparation	\$500
3.	Asbestos testing/clearance	\$600
4.	Radon testing (required)	\$100
5.	LBP inspection/risk assessment	\$600
6.	LBP clearance	\$400
7.	Loan document execution, recording & legal fees	\$500
8.	Pre-rehab Inspection including scope of work	\$900
9.	Work write-ups	\$1,500
10.	Cost estimate	\$400
11.	Project & construction management	\$3,500
12.	Flood Insurance (units in Flood Hazard Zones)	\$500
13.	Post-rehab value certification	\$200
Total ESFRLP Soft Costs/unit		\$10,000

Proposed Adjusted Budget


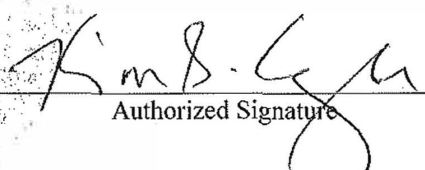
ESFRLP Proposed Soft Costs/unit		2111
1.	Outreach & Advertising	\$640
2.	Environmental Review preparation	\$940
3.	Asbestos testing/clearance	\$225
4.	Radon testing (required)	\$200
5.	LBP inspection/risk assessment	\$300
6.	LBP clearance	\$250
7.	Loan document execution, recording & legal fees	\$600
8.	Pre-rehab Inspection including scope of work	\$540
9.	Work write-ups	\$1,150
10.	Cost estimate	\$855
11.	Project & construction management	\$4,000
12.	Flood Insurance (units in Flood Hazard Zones)	\$0
13.	Post-rehab value certification	\$300
Total Proposed ESFRLP Soft Costs/unit		\$10,000

N. Certification

The Member certifies that the information provided herein and herewith is complete and accurate and that, if approved by the North Carolina Housing Finance Agency, it will be made part of the Funding Agreement by reference, superseding any conflicting information contained in the original Application for Funding without otherwise affecting said Application.



 Attest
 Clerk to the Board
 Title

 Authorized Signature
 County Manager
 Title

Date
 4/26/21

Date
 4/26/21



GASTON COUNTY Financial & Management Services Director

128 West Main Avenue

Phone (704) 868-3048

P.O. Box 1678

Fax (704) 868-3147

Gastonia, North Carolina 28053-1678

e-mail: Matthew.Rhoten@Gastongov.com

March 22, 2021

NCHFA

PO Box 28066

Raleigh, NC 27611-8066

919-877-5705

To Whom It May Concern:

Please accept this letter as confirmation that Gaston County has committed matching funds in the amount of \$2,000 for the 2021 ESFRLP program.

Gaston County is appreciative of the assistance that the NC Housing Finance Agency has provided in recent years to Gaston County residents and eagerly looks forward to assisting more homeowners in the future through the program.

Sincerely,

Matthew Rhoten

Assistant County Manager

Mission Statement

Gaston County seeks to be among the finest counties in North Carolina. It will provide effective, efficient and affordable services leading to a safe, secure and healthy community, an environment for economic growth, and a favorable quality of life.

Acknowledgement of Audit Compliance Reporting Responsibilities

Please X applicable section(s) and return this form with your PAD

 We are a **non-profit organization(sub-recipient)** and will comply with North Carolina General Statute 143C-6-23 to submit grant reports and the requirement to submit an audited financial statement.

If your organization received **less than \$500,000** in state and/or federal funds in the fiscal year, the following reports must be submitted:

1. A program report of activities and accomplishments. Also, a grant expenditures report providing an accounting how grant funds were expended. The reports are due three (3) months after your fiscal year-end date. Submit reports to: subreport.rehabteam@nchfa.com.
2. An Audited Financial Statement. The audit is due nine (9) months after your fiscal year-end date. Submit a PDF version electronically to: caxtell@nchfa.com.

If your organization received **\$500,000 or more** in state and/or federal funds in the fiscal year, the following reports must be submitted:

1. A program report of activities and accomplishments. Also, a grant expenditures report providing an accounting how grant funds were expended. The report is due three (3) months after your fiscal year-end date. Submit report to: subreport.rehabteam@nchfa.com.
2. A Single or Yellow Book audit. The audit is due nine (9) months after your fiscal year-end date. Submit a PDF version electronically to: caxtell@nchfa.com.

 X We are a **local governmental organization** and will comply with North Carolina General Statute 159-34 to submit an independent audit. The Statute reads, "This audit, combined with the audit of financial accounts, shall be deemed to be the single audit described by the "Federal Single Audit Act of 1984."

The annual audit is due nine (9) months after your fiscal year-end date. Submit a PDF version electronically to: caxtell@nchfa.com.

I acknowledge receipt of the information regarding compliance reporting. I am the person responsible for coordinating the submission of reports that comply with state and federal regulations pertaining to this funding.

Signed: _____

Date: _____

Name Pat Laws

Title Grants Manager

Organization Gaston County

Federal Tax ID Number _____ Fiscal Year End Date June 30

Address 128 W. Main Avenue, Gastonia, NC 28052-2306

Email Pat.Laws@gastongov.com Phone (704) 866-3771

Award: ESFRLP21

Federal Funding Accountability and Transparency Act (FFATA) Questionnaire

Please have your chief financial officer answer the following.

Question #1 – In the preceding fiscal year, were your organization's total annual expenditures less than \$300,000?

☐ yes ☒ no

Question #2 - In the preceding fiscal year, was 80 percent or more of your organization's annual gross revenue from Federal procurement contracts (and subcontracts) and Federal financial assistance?

☐ yes ☒ no

If yes to above question #2:

Question #3 - In the preceding fiscal year, did your organization have \$25,000,000 or more in annual gross revenue from Federal procurement contracts (and subcontract) and Federal financial assistance?

☐ yes ☐ no

Signed: _____

Printed Name: _____

Organization: _____

Tiffany R Murray

Tiffany R Murray

Date

3/22/2021

Gaston County

Essential Single-Family Rehabilitation Loan Pool Portal

Signatory Certification and Project Access Authorization Form

Project: ESFRLP2111

Member: Gaston County

Contact Name: Pat Laws

Contact Email: Pat.Laws@gastongov.com

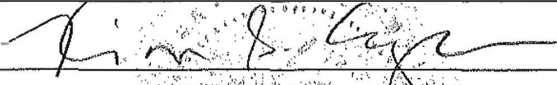
Level of Access

Printed Name	Title	E-mail	Phone	1	2	3
Marc Bolick	Rehab. Manager	Marc.Bolick@gastongov.com	(704) 866-3559	X	X	
Pat Laws	Grants Manager	Pat.Laws@gastongov.com	(704) 866-3771	X	X	
Lauren Lewis	Rehab. Specialist	Lauren.Lewis@gastongov.com	(704) 866-3114	X	X	
Matthen Rhoten	Deputy County Mgr.	Matthew.Rhoten@gastongov.com	(704) 877-3048			X

Select the level of access

1. Access to enter units, but not approve requisitions/invoices
2. Full access to enter units and approve requisitions/invoices
3. Contract Signing Authority approves Funding Agreement Modification-Must have at least one

The above individuals are authorized to access the ESFRLP project at the assigned level of access.

Certifying Official	
Title	Dr. Kim Eagle/County Manager
Date	4/26/21

Attest:  4/26/21
Clerk to the Board

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Gaston County

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☒ Other (see instructions) ►

Local Government

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

PO Box 1578

6 City, state, and ZIP code

Gastonia, NC 28053

Requester's name and address (optional)

7 List account number(s) here (optional)

Print or type.
See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

____ - ____ - ____ - ____ - ____ - ____

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

[Signature]

Date ►

12/16/2020

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

North Carolina Housing Finance Agency
Four Factor Analysis
Gaston County, North Carolina

In order to avoid discrimination on the grounds of national origin, all programs or activities administered by Gaston County will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) have meaningful access and an equal opportunity to participate in benefits and services for which such persons qualify.

The 2011-2015 American Community Survey (ACS) 5-Year Estimates are the most recent estimates available for Gaston County, North Carolina. ACS estimates Gaston County's population to be 196,813; five percent of the county's total population is 9,840.65. None of Gaston County's LEP populations are greater than 5%. Figure 1 details the proportions of LEP persons eligible to be served in Gaston County based on 2011-2015 ACS estimates. This chart does not include LEP populations with 0% population estimates. The top five largest LEP populations are Spanish (2.5%), Vietnamese (.127%), Chinese (.084%), Japanese (.061%), and Tagalog (.06%).

During the 2018 Single Family Rehabilitation (SFR) program, zero LEP individuals came into contact with the program. However, Gaston County has a variety of resources available to program applicants and recipients at no cost. Gaston County's Department of Health and Human Services provides qualified interpreter services and Gaston County's Human Resources Department has a Spanish bilingual contact who is available to interpret or obtain an outside interpreter. Gaston County will regularly assess changes in demographics, types of services, and other needs that may require reevaluation of policies and procedures. Effective communication is crucial to the SFR program; these resources ensure that persons with LEP have meaningful access and an equal opportunity to participate in the program.

LEP Population	Percentage of total population
Spanish or Spanish Creole	2.5%
French	.014%
Italian	.002%
Portuguese	.005%
German	.037%
Other West Germanic languages	.005%
Russian	.008%
Persian	.01%
Gujarati	.01%
Hindi	.018%
Urdu	.006%
Other Indic languages	.009%
Chinese	.084%
Japanese	.061%

Korean	.024%
Mon-Khmer, Cambodian	.007%
Hmong	.025%
Laotian	.023%
Vietnamese	.127%
Other Asian languages	.026%
Tagalog	.06%
Arabic	.011%
African languages	.034%

Figure 1. LEP populations and percentages of total population in Gaston County, North Carolina

Table: ACSDT5Y2015.B16001

LANGUAGE SPOKEN AT HOME BY ABILITY TO SPEAK ENGLISH FOR THE POPULATION 5 YEARS AND OVER		United States™ Census Bureau
Note: The table shown may have been modified by user selections. Some information may be missing.		
DATA NOTES		
TABLE ID:	B16001	
SURVEY/PROGRAM:	American Community Survey	
VINTAGE:	2015	
DATASET:	None	
PRODUCT:	ACS 5-Year Estimates Detailed Tables	
UNIVERSE:	Population 5 years and over	
FTP URL:	https://www2.census.gov/programs-surveys/acs/summary_file/2015/data/	
API URL:	https://api.census.gov/data/2015/acs/acs5	
USER SELECTIONS		
GEOS	Gaston County, North Carolina	
EXCLUDED COLUMNS	None	
APPLIED FILTERS	None	
APPLIED SORTS	None	
WEB ADDRESS	https://data.census.gov/cedsci/table?q=ACSDT1Y2019.B16001&g=05000000US37071&tid=ACSDT5Y2015.B16001&hidePreview=true	

Table: ACSDT5Y2015.B16001

<p>TABLE NOTES</p>	<p>Supporting documentation on code lists, subject definitions, data accuracy, and statistical testing can be found on the American Community Survey website in the Data and Documentation section.</p> <p>Sample size and data quality measures (including coverage rates, allocation rates, and response rates) can be found on the American Community Survey website in the Methodology section.</p>
	<p>Tell us what you think. Provide feedback to help make American Community Survey data more useful for you.</p> <p>Although the American Community Survey (ACS) produces population, demographic and housing unit estimates, it is the Census Bureau's Population Estimates Program that produces and disseminates the official estimates of the population for the nation, states, counties, cities and towns and estimates of housing units for states and counties.</p>

Table: ACSDT5Y2015.B16001

	<p>Explanation of Symbols: * An "***" entry in the margin of error column indicates that either no sample observations or too few sample observations were available to compute a standard error and thus the margin of error. A statistical test is not appropriate.</p> <p>* An "-" entry in the estimate column indicates that either no sample observations or too few sample observations were available to compute an estimate, or a ratio of medians cannot be calculated because one or both of the median estimates falls in the lowest interval or upper interval of an open-ended distribution.</p> <p>* An "-" following a median estimate means the median falls in the lowest interval of an open-ended distribution.</p> <p>* An "+" following a median estimate means the median falls in the upper interval of an open-ended distribution.</p> <p>* An "****" entry in the margin of error column indicates that the median falls in the lowest interval or upper interval of an open-ended distribution. A statistical test is not appropriate.</p> <p>* An "*****" entry in the margin of error column indicates that the estimate is controlled. A statistical test for sampling variability is not appropriate.</p> <p>* An "N" entry in the estimate and margin of error columns indicates that data for this geographic area cannot be displayed because the number of sample cases is too small.</p> <p>* An "(X)" means that the estimate is not applicable or not available.</p>
	<p>Estimates of urban and rural population, housing units, and characteristics reflect boundaries of urban areas defined based on Census 2010 data. As a result, data for urban and rural areas from the ACS do not necessarily reflect the results of ongoing urbanization.</p>

Table: ACSDT5Y2015.B16001

	While the 2011-2015 American Community Survey (ACS) data generally reflect the February 2013 Office of Management and Budget (OMB) definitions of metropolitan and micropolitan statistical areas; in certain instances the names, codes, and boundaries of the principal cities shown in ACS tables may differ from the OMB definitions due to differences in the effective dates of the geographic entities.
	Methodological changes to data collection in 2013 may have affected language data for 2013. Users should be aware of these changes when using multi-year data containing data from 2013. For more information, see: Language User Note.
	Data are based on a sample and are subject to sampling variability. The degree of uncertainty for an estimate arising from sampling variability is represented through the use of a margin of error. The value shown here is the 90 percent margin of error. The margin of error can be interpreted roughly as providing a 90 percent probability that the interval defined by the estimate minus the margin of error and the estimate plus the margin of error (the lower and upper confidence bounds) contains the true value. In addition to sampling variability, the ACS estimates are subject to nonsampling error (for a discussion of nonsampling variability, see Accuracy of the Data). The effect of nonsampling error is not represented in these tables.
	Source: U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates
COLUMN NOTES	None

Table: ACSDT5Y2015.B16001

	Gaston County, North Carolina		
Label	Estimate	Margin of Error	5% of Population
Total:	196,813	±61	9,840.65
Speak only English	181,357	±727	
Spanish or Spanish Creole:	11,385	±593	
Speak English "very well"	6,400	±656	
Speak English less than "very well"	4,985	±449	
French (incl. Patois, Cajun):	270	±112	
Speak English "very well"	242	±108	
Speak English less than "very well"	28	±31	
French Creole:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	
Italian:	40	±45	
Speak English "very well"	36	±42	
Speak English less than "very well"	4	±8	
Portuguese or Portuguese Creole:	67	±65	
Speak English "very well"	58	±62	
Speak English less than "very well"	9	±14	
German:	366	±108	
Speak English "very well"	293	±95	
Speak English less than "very well"	73	±46	
Yiddish:	5	±8	
Speak English "very well"	5	±8	
Speak English less than "very well"	0	±28	
Other West Germanic languages:	72	±59	
Speak English "very well"	62	±52	
Speak English less than "very well"	10	±15	
Scandinavian languages:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	
Greek:	82	±78	
Speak English "very well"	82	±78	
Speak English less than "very well"	0	±28	
Russian:	100	±90	
Speak English "very well"	84	±86	
Speak English less than "very well"	16	±27	

Table: ACSDT5Y2015.B16001

	Gaston County, North Carolina		
Label	Estimate	Margin of Error	5% of Population
Polish:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	
Serbo-Croatian:	42	±45	
Speak English "very well"	42	±45	
Speak English less than "very well"	0	±28	
Other Slavic languages:	33	±37	
Speak English "very well"	33	±37	
Speak English less than "very well"	0	±28	
Armenian:	20	±32	
Speak English "very well"	20	±32	
Speak English less than "very well"	0	±28	
Persian:	37	±52	
Speak English "very well"	17	±21	
Speak English less than "very well"	20	±35	
Gujarati:	134	±97	
Speak English "very well"	114	±83	
Speak English less than "very well"	20	±23	
Hindi:	109	±102	
Speak English "very well"	73	±56	
Speak English less than "very well"	36	±52	
Urdu:	173	±124	
Speak English "very well"	161	±113	
Speak English less than "very well"	12	±18	
Other Indic languages:	194	±184	
Speak English "very well"	177	±178	
Speak English less than "very well"	17	±26	
Other Indo-European languages:	7	±11	
Speak English "very well"	7	±11	
Speak English less than "very well"	0	±28	
Chinese:	392	±163	
Speak English "very well"	227	±106	
Speak English less than "very well"	165	±105	
Japanese:	179	±125	
Speak English "very well"	58	±37	

Table: ACSDT5Y2015.B16001

	Gaston County, North Carolina		
Label	Estimate	Margin of Error	5% of Population
Speak English less than "very well"	121	±123	
Korean:	197	±166	
Speak English "very well"	150	±157	
Speak English less than "very well"	47	±49	
Mon-Khmer, Cambodian:	14	±22	
Speak English "very well"	0	±28	
Speak English less than "very well"	14	±22	
Hmong:	75	±104	
Speak English "very well"	26	±38	
Speak English less than "very well"	49	±67	
Thai:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	
Laotian:	60	±44	
Speak English "very well"	14	±16	
Speak English less than "very well"	46	±37	
Vietnamese:	398	±224	
Speak English "very well"	149	±100	
Speak English less than "very well"	249	±144	
Other Asian languages:	99	±95	
Speak English "very well"	48	±48	
Speak English less than "very well"	51	±52	
Tagalog:	417	±248	
Speak English "very well"	298	±181	
Speak English less than "very well"	119	±118	
Other Pacific Island languages:	51	±45	
Speak English "very well"	51	±45	
Speak English less than "very well"	0	±28	
Navajo:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	
Other Native North American languages:	7	±15	
Speak English "very well"	7	±15	
Speak English less than "very well"	0	±28	
Hungarian:	11	±18	

Table: ACSDT5Y2015.B16001

	Gaston County, North Carolina		
Label	Estimate	Margin of Error	5% of Population
Speak English "very well"	11	±18	
Speak English less than "very well"	0	±28	
Arabic:	161	±163	
Speak English "very well"	140	±130	
Speak English less than "very well"	21	±35	
Hebrew:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	
African languages:	259	±219	
Speak English "very well"	193	±191	
Speak English less than "very well"	66	±80	
Other and unspecified languages:	0	±28	
Speak English "very well"	0	±28	
Speak English less than "very well"	0	±28	