## **UNDER \$5,000 ASSET CERTIFICATION**

For households whose combined net assets do not exceed \$4999.99.

Complete one form for households with joint assets or one form per person with separate assets. If a household contains both joint and separate assets, use separate forms and list the joint asset on both forms with the statement (Joint) next to the applicable asset.

Household Nam	ie:		Unit No				
Development Na	ame:						
Complete the fo	ollowing:						
<b>OR</b> .□. My/	e do not have any assets our assets include:	1	draw a line through the (A) Cash Value*	asset informa (B) Int. Rate	(A*B) Annual Income	zero in #3, sign and date)  Source	
\$	\$	Savings Account	\$		\$	_ Checking Account	
	\$		\$		\$	_ Safety Deposit Box	
	\$	EBT/Debit Visa or MC	\$		\$	_ Certificates of Deposit	
_\$	\$	Stocks	\$		\$	_ Money market funds	
\$	\$	IRA Accounts	\$		\$	_ Bonds	
\$	\$	Keogh Accounts	\$		\$	_401K Accounts	
\$	\$	Equity in real estate	\$		\$	_ Trust Funds	
\$	\$	Lump Sum Receipts	\$		\$	_ Capital investments	
\$		Life Insurance Policies (ex	cluding Term)				
\$	\$	Other Retirement/Pension	Funds not named al	bove:			
_\$	\$	Personal property held as an investment**:					
\$	<u>\$</u>	Other (list): etirement, Pension, Trust) may or may not be (fully) accessible to you. Include only those amounts which are.					
*Cash value is of penalties, etc. **Personal proper	defined as market value mini erty held as an investment r	ment, Pension, Trust) may or may no us the cost of converting the asset to nay include, but is not limited to, go ed to, household furniture, daily-use	cash, such as broker's	fees, settlem art, antique	ent costs, outstand	ing loans, early withdrawal include necessary personal	
year <b>OR</b> □. Wit	e have <u>not</u> sold or given rs. thin the past two (2) ye ow their fair market valu	away assets (including cash, rears, I/we have sold or given a lee (FMV). Those amounts* are leen FMV and the amount received.	way assets (includ included above and	ing cash, i l are equal	real estate, etc.) to a total of: \$_	for more than \$1,000	
•		# CFR 813.102) above do not 6 \$ This :					
knowledge. The	undersigned further un	that the information present derstand(s) that providing false the termination of a lease agree	representations her				
Applicant/Tenar	nt	Date A	oplicant/Tenant			ate	

CA Tax Credit Allocation Committee (January 2017)

## INSTRUCTIONS FOR COMPLETING UNDER \$5000 ASSET VERIFICATION FORM

This form is to be completed by tenants whose <u>combined</u> total net assets do not exceed \$4999.99. Complete one form per households with joint assets or on form per person with separate assets. If a household contains both joint and separate assets, use separate forms and list the joint asset on both forms with the statement (**Joint**) next to the applicable asset.

Household Name Enter Last name of the Head of Household

Unit No. Enter the Unit number the household is occupying

Development Name Enter the name of the Property

City: Enter the name of the City where the Property is located

## **Complete the Following:**

Question 1: Tenant must select **one** of the two options:

Option 1 – I / we do not have any assets at this time. If this box is checked, draw a line through the

Asset information below, sign and date form.

**Option 2** – My / our assets include. If this box is checked, the tenant must list all applicable assets, interest rates and annual income. A zero notation should be put in any columns that do not apply.

Question 2: Tenant must select **one** of the two options:

Option 1 - I/we have not sold or given away assets (including cash, real estate, etc.) for less than fair

market value during the past two (2) years. If this box is checked, go onto Part 3.

**Option 2 -** Within the past two (2) years, I/we have sold or given away assets (including cash, real estate, etc.) for more than \$1,000 below their fair market value (FMV). Those amounts\* are included above and are equal to a total of: \$\_\_\_\_\_\_\_\_(\*the difference)

between FMV and the amount received, for each asset on which this occurred). If this box is checked and the total amount when added to the total annual income from the asset, does not exceed \$5000, go onto Part 3. If the amount exceeds \$5000, then 3<sup>rd</sup> party verification of all

assets (including those noted above) must be obtained.

Question 3: The net family assets (as defined in 24 CFR 813.102) above do not exceed \$5,000 and the total

annual income (add all annual income columns) from the net family assets is \$\_\_\_\_\_

**This amount is included in total gross annual income.** All totals in the Annual Income column should be added together and the number written on the line. If no assets are present or Question 1

indicates that there are no household or individual assets, place a Zero on the line.

## **Signature Statement**

It is the responsibility of the tenant(s) to sign and date the document, as accurate under penalty of perjury. Management should ensure that the form is filled out completely and in its entirety.

These instructions should not be considered a complete guide on tax credit compliance. The responsibility for compliance with federal program regulations lies with the owner of the building(s) for which the credit is allowable.