## **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	e:						
Development Na	ame:						
Complete the fo	ollowing:						
<b>OR</b> .□. My/	e do not have our assets in	clude:	this time. (if this box is checked,	draw a line through the a	usset informa	tion below, place a	zero in #3, sign and date)
(A) Cash Value*	Please complete (B) Int. Rate	fully. Put a zero (A*B) Annual Income	in any columns that do notapply)  Source	(A) Cash Value*	(B) Int. Rate	(A*B) Annual Income	Source
_\$		5	_ Savings Account	\$		\$	_ Checking Account
\$	§	8	Cash on Hand	\$		\$	_ Safety Deposit Box
\$		8	EBT/Debit Visa or MC	\$		\$	_ Certificates of Deposit
\$		8	Stocks	\$		\$	_ Money market funds
\$	5	5	_ IRA Accounts	\$		\$	Bonds
_\$		\$	_ Keogh Accounts	\$		\$	_401K Accounts
_\$	§	8	_ Equity in real estate	\$		\$	_ Trust Funds
\$		8	_ Lump Sum Receipts	\$		\$	_ Capital investments
\$		\$	Life Insurance Policies (ex	xcluding Term)			
_\$	\$ Other Retirement/Pension Funds not named above:						
_\$	\$\$		Personal property held as an investment**:				
\$		6	Other (list):ent, Pension, Trust) may or may not be (fully) accessible to you. Include only those amounts which are.				
*Cash value is a penalties, etc. **Personal prope	lefined as mar erty held as ar	ket value minus i investment may	the cost of converting the asset to y include, but is not limited to, g to, household furniture, daily-use	cash, such as broker's f	ees, settleme art, antique	ent costs, outstand cars, etc. Do not	ing loans, early withdrawal
year <b>OR</b> □. Wit	e have <u>not</u> sors.  hin the past ow their fair	two (2) years	vay assets (including cash, r s, I/we have sold or given a (FMV). Those amounts* are n FMV and the amount rece	away assets (includi	ng cash, ro are equal	eal estate, etc.) to a total of: \$_	for more than \$1,000
columns) from t	assets (as de the net fami	ly assets is \$_	_	amount is included	in total gi	ross annual inc	come.
knowledge. The	undersigned	d further unde	hat the information present rstand(s) that providing false e termination of a lease agre	e representations her			
Applicant/Tenant			Date A	pplicant/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.