## **Annual Owner Certification**

## Instructions

It is the responsibility of the project owner to annually certify to MFA that the project meets the requirements of Section 42 of the Internal Revenue Code (the Code), whichever set aside is applicable to the project.

The owner (or general partner authorized to sign for the ownership entity) is required to sign this certification. The owner of any exempted project must certify to the Agency on an annual basis that the project is in compliance with the requirements for RHCDS (FmHA) assistance on the tax-exempt bond financing guidelines, as applicable, and that all requirements of Section 42 of the Internal Revenue Code are also being met. The owner must inform the MFA of any non-compliance or if the owner is unable to make one or more of the required certifications.

The LIHTC Annual Certification (in conjunction with the Annual Report) is due by January 31st of each calendar year throughout the LIHTC compliance period. Failure to annually certify project compliance is consisted non-compliance under the Code and MFA shall report such failure to file the Annual Certification to the IRS in accordance with the Code.

The attached form must be submitted to MFA as this is the most current version.



## ANNUAL OWNER CERTIFICATION OF CONTINUING PROGRAM COMPLIANCE

Housing New Mexico Certification Period: January 1, 2022-December 31, 2022 Project Name: Project #: Project Address: City, Zip Code: **Ownership Entity** Fed Tax ID #: Ownership Name: Owner Contact Person: Title: Street Address: City, State, Zip Code: Phone: Cell Phone: Fax: E-mail: Date Entity Commenced Ownership of Project: Date of Contact Change: (If applicable) Management Management Company Name: Management Contact Person: Title: Street Address: City, State, Zip Code: Phone: Cell Phone: Fax: E-mail: **Date Company Commenced** Management of Project: Date of Contact Change: (If applicable) On-site Contact Person: On-site Phone: On-site Contact E-mail: (the The undersigned\_ on behalf of "Owner"), hereby certifies that: If credit allocation was received but the credit period has not yet begun, please check the appropriate box below:

MFA LIHTC 12/2022

No buildings were placed in service during the reporting period.

At least one building was placed in service but owner does not elect to begin credit period in the following year. If either of the above applies, please check the appropriate box, and proceed to page to sign and date this form.

1.	The project meets the minimum requirements of: (check one)					
	40 - 60 test und The Average Inc	er Section 42(g)(1)(A) er Section 42(g)(1)(B) ome Test under Sectio 'deep rent-skewed" pi	of the Code			
2.	There has been <b>no change in t</b> project:	he applicable fraction	(as defined in Section 42(c)(1)(B) of the Code) for any building in the			
	☐ NO CHANGE	YES CHANGE				
	If <b>"YES CHANGE"</b> , list the appli year on page 5:	cable fraction to be re	eported to the IRS for <u>each building</u> in the project for the certification			
3.	The owner has received an annual Tenant Income Certification from each low-income resident and documentation to support that certification, or the owner has obtained self-certifications based on HERA rules. This guidance can be found on the MFA website. It outlines the requirements for 100% TC properties and annual recertifications.					
	YES	□ NO				
4.	Each low-income unit in the proj	ect has been rent-rest	ricted under Section 42(g)(2) of the Code:			
	YES	NO				
5.		Il low-income units in the project are and have been for use by the general public and used on a non-transient basis (except or transitional housing for the homeless provided under Section 42 (i)(3)(B)(iii) of the Code):				
	YES	□NO	HOMELESS			
6.	discrimination includes an adve	rse final decision by th on by a substantially ed	ct, 42 U.S.C 3601-3619, has occurred for this project. A finding of the Secretary of Housing and Urban Development (HUD), 24 CFR quivalent state or local fair housing agency, 42 U.S.C 3616a(a)(1), or an			
	☐ NO FINDING	FINDING				
7.	Each building in the project is and has been suitable for occupancy, taking into account local health, safety, and building codes (or other habitability standards), and the state or local government unit responsible for making building code inspections did not issue a report of a violation for any building or low income unit in the project:					
	YES	NO				
	If "NO", state nature of violation documentation of correction.	on on page 5 and atta	ach a copy of the violation report as required by 26 CFR 1.42-5 and any			
8.	There has been <b>no change in the</b> certification submission:	<b>e eligible basis</b> (as def	ined in Section 42(d) of the Code) of any building in the project since last			
	☐ NO CHANGE	YES CHANGE				
		out charge, or the pr	on area has become commercial space, a fee is now charged for a tenant oject owner has received federal subsidies with respect to the project ity in writing) on page 5.			

9.	All tenant facilities included in the eligible basis under Section 42(d) of the Code of any building in the project, such as swimming pools, other recreational facilities, parking areas, washer/dryer hookups, and appliances were provided on a comparable basis without charge to all tenants in the buildings:				
	YES	□ NO			
10.		mparable or smal	during the year, reasonable attempts were or are being made to rent that ler size to tenants having a qualifying income before any units were or will		
11.			building increased above the limit allowed in Section 42(g)(2)(D)(ii) of the er size in that building was or will be rented to residents having a		
	YES	NO			
12.	section 42(h)(6)(B)(iv) that an owner voucher or certificate of eligibility under the section and applications of the section 42(h)(6)(B)(iv) that an owner vouche are section 42(h)(6)(B)(iv) that are section 42(h)(6)(B)(6	er cannot refuse to under Section 8 of ant based solely on special provisions	scribed in section 42(h)(6) was in effect, including the requirement under to lease a unit in the project to an applicant because the applicant holds a the United States Housing Act of 1937, 42 U.S.C. 1437s. Owner has not in their status as a holder of a Section 8 voucher and the project otherwise is, as outlined in the extended low-income housing commitment (not 87-1989):		
	YES	□NO	□ N/A		
13.	The owner received its credit allocation from the portion of the state ceiling set-aside for a project involving "qualified non-profit organizations" under Section $42(h)(5)$ of the code and its non-profit entity materially participated in the operation of the development within the meaning of Section $469(h)$ of the Code.				
	☐ YES	□NO	□ N/A		
14.	There has been no change in the ownership or management of the project:				
	☐ NO CHANGE	YES CHANGE	<u>E</u>		
	If "YES CHANGE", complete page 6	detailing the char	nges in ownership or management of the project.		
15.	The owner has obtained accurate, allowable, current utility allowances for use in the calculation of rents for the project. In addition, the owner acknowledges this process to be an annual requirement of the LIHTC program and certifies to adhere to this requirement for the duration of the compliance period for the project.				
	YES	□NO	□ N/A		
16.	For the proceeding 12-month period (pursuant to IRS Revenue Ruling 2004-82) the owner has complied with §42(h)(6)(E)(ii)(I) that an existing tenant of a low-income unit has not been evicted or had their tenancies terminated for anything other than good cause.				
	☐ YES	□NO	□ N/A		
17.	The owner has complied with § 42( respect to any low-incomeunit.	h)(6)(E)(ii)(II) and	not increased the gross rent above the maximum allowed under § 42 with		
	YES	□NO	□ N/A		

18.	18. The project has complied with the Violence Against Women Act (VAWA), which provides protections for residents are applicants who are victims of domestic violence, dating violence or stalking, and any other situation or incidence mandated VAWA. Compliance requirements mandated by VAWA include, but are not limited to, honoring civil protection orders, eviction protection and bifurcation of lease when necessary.		
	YES	□ NO	
19.	The owner has received	an annual Student Self	Certification for each low-income household.
	YES	□NO	□ N/A
20.			it agreed to in its application for Credit authority, including all federal and imitments for which it received points or other preferential treatment in
	YES	□NO	□ N/A
21.	The property has not suf	ffered a casualty loss re	esulting in the current displacement of residents.
	YES	□NO	□ N/A
	s 22-25 are only applicable ents, questions 22-25 woul		dditional exhibits listed in the LURA. For properties without additional
22.		ervices and conducting	e coordination requirements per the LURA including on site office hours, an annual survey. If yes include the number of hours and the number of he next section.
	YES	□NO	□ N/A
23.	The property has complequalified household.	eted PSH Commitment	to Quality checklist for every Permanent Supportive Housing for each
	YES	□NO	□ N/A
24.	The property has provid	ed all required service	enrichments according to the schedule listed in the LURA.
	YES	□NO	□ N/A
25.	The property is incomplian	ice with the Smoke Free a	at Home Program.
	YES	□NO	□ N/A

PLEASE EXPLAIN ANY ITEMS THAT WERE ANSWERED "NO", "YES CHANGE" OR "FINDING", ON QUESTIONS 1 – 18: Question # Explanation Attach additional pages if necessary. Note: Failure to complete this form in its entirety will result in noncompliance with program requirements. In addition, any individual other than an owner or general partner of the project is not permitted to sign this form, unless permitted by the state agency. The project is otherwise in compliance with the Code, including any Treasury Regulations, the applicable State Allocation Plan, and all other applicable laws, rules and regulations. This Certification and any attachments are made UNDER PENALTY OF PERJURY. Subscribed and sworn to before me this (Ownership Entity) \_\_\_\_\_ day of\_\_\_\_\_\_\_\_, 20\_\_\_\_\_. By: \_\_\_\_\_ Notary Public My Commission Expires: \_\_\_\_\_ Date:\_\_\_\_\_

<u>CHANGES IN OWNERSHIP OR MANAGEMENT</u> (to be completed **ONLY if "CHANGE"** marked for question 14 above)

		TRANSFER OF OWNERSHIP
Date of Change:		
Taxpayer ID Number:		
Legal Owner Name:		
General Partnership:		
Status of Partnership (LLC,	etc.):	
	•	CHANGE IN OWNER CONTACT
Date of Change:		
Owner Contact:		
Owner Contact Phone:		
Owner Contact Fax:		
Owner Contact E-mail:		
		CHANGE IN MANAGEMENT CONTACT
Date of Change:		
Management Company Na	me:	
Management Address:		
Management City, State, Zip:		
Management Contact:		
Management Contact Phone:		
Management Contact Fax:		
Management Contact E-mail:		
On-Site Manager:		
Phone:		

Fax:

Please make additional copies as needed

	Building	1st Year of Credit Period*	Applicable Fraction
1.	NM -		
1.			
2.	NM -		
3.	NM -		
4.	NM -		
5.	NM -		
6.	NM -		
7.	NM -		
8.	NM -		
9.	NM -		
10.	NM -		
11.	NM -		
12.	NM -		
13.	NM -		
14.	NM -		
15.	NM -		
16.	NM -		
17.	NM -		
18.	NM -		
19.	NM -		
20.	NM -	or at the election of the taxpayer, the succeeding	

<sup>\*</sup>The taxable year in which the building is placed in service, or at the election of the taxpayer, the succeeding taxable year.