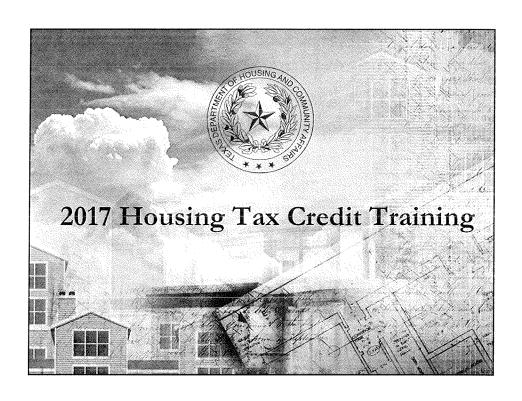
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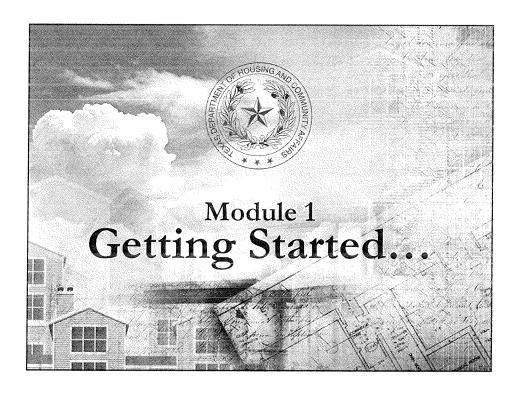
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Contact Information Physical Address: Mailing Address TDHCA TDHCA 221 East 11th Street PO Box 13941 Austin, Texas 78701 Austin, Texas 78711-3941 Website: www.tdhca.state.tx.us

Housekeeping Announcements

- * Breaks: Morning and Afternoon
- * Lunch: 12-1 p.m.
- * Cell Phones (and pagers): Silence or turn off
- * Conclusion: approximately 4:30 p.m.
- Certificates will be presented at the conclusion of the class
 - > Must be present to receive





- Who are the key players in the Housing Tax Credit program?
- How does the Housing Tax Credit program work?
- Qualified Allocation Plan
- Getting an award of tax credits
- Timelines

Key Players

- Internal Revenue Service ("IRS")
 - > Section 42 of Internal Revenue Code
 - > 8823 Audit Guide (revised January 2011)
- > Treasury Regulation 1.42
 - 1.42-5 (Tax Credit Compliance Monitoring; updated February 2016)
 - □ 1.42-10 (Utility Allowance; updated March 2016)
 - > Revenue Rulings, Procedures and Notices
 - > Treasury Decisions
 - Process Tax Returns
 - > Responsible for recapturing credits



Department of the Treasury Internal Revenue Service

---6

* US Department of Housing and Urban Development ("HUD") Chapters 3 and 5 of the 4350.3 (Change 4: 11/2013) Outlines income and asset inclusions/exclusions Defines who counts as a household member Publishes the Multifamily Tax Subsidy Program ("MTSP")

Key Players Texas Department of Housing and Community Affairs ("TDHCA") State Housing Finance Agency ("SHFA") for Texas Allocates tax credits Publishes QAP Compliance Monitoring Rules (Title 10, Chapter 10, Subchapter F of the Texas Administrative Code) □ Most recently effective 1/8/2015 • §10.607(d), §10.622 and §10.623 amended 7/12/2015 §10.614 amended 12/4/2016 Reports to the IRS TEXAS DEPARTMENT OF HOUSING & COMMUNITY AFFAIRS Provides technical assistance 8

How it Works

- Each state has a State Housing Finance Agency ("SHFA")
 - > TDHCA
- Each state receives an allocation of credits based on the state's population
- Up to the SHFA to determine how to disperse the credits

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Qualified Allocation Plan ("QAP")

- * Developed by the SHFA
- Updated annually in Texas
- Identifies the state's housing priorities in that year
- Document under which an application for credits will be considered for an allocation

Qualified Allocation Plan ("QAP")

- * QAP sets the minimum standards for an application to be considered
 - > Threshold Criteria
- Because the demand is greater than the resources available, the QAP also provides additional criterion to make an application more competitive
 - > Selection Criteria

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Qualified Allocation Plan ("QAP")

- * All applications are scored
- Every application must meet the threshold criterion
 - > Varies by the number of units
- Owner can pick and choose from selection criteria to increase the score

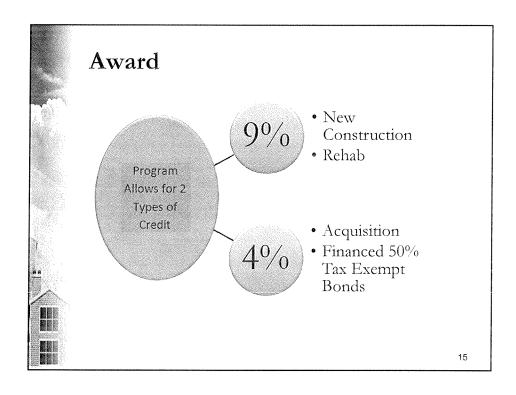
Qualified Allocation Plan ("QAP")

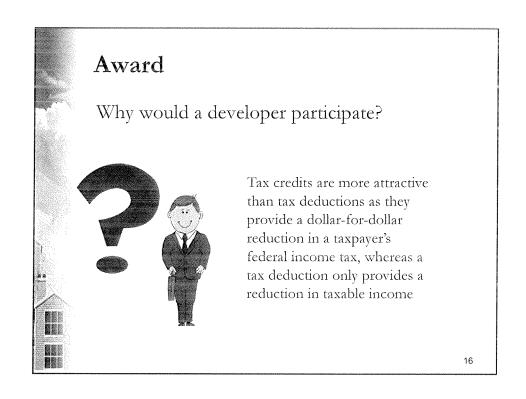
- * Examples of Selection Criteria:
 - > Size and Quality of the Units
 - > Income Levels of Tenants
 - > Tenant Services
 - > Tenant Populations with Special Housing Needs
 - > Pre-application Participation
 - > Extended Affordability

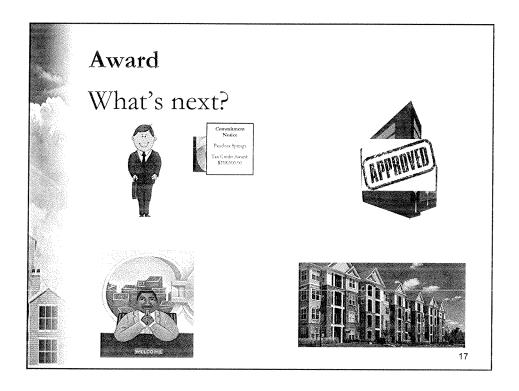
13

Award

- * Total amount of credit awarded is based on:
 - 1. Specific cost incurred with development
 - 2. Percentage of units that are to be rented to low-income households
 - 3. Applicable credit percentage
- Generally, credits applied to Federal Income Tax Return over a 10 year period

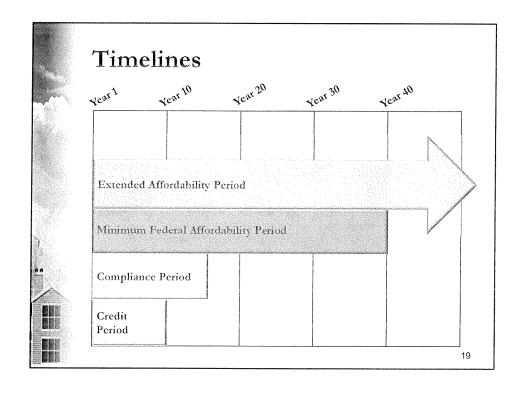


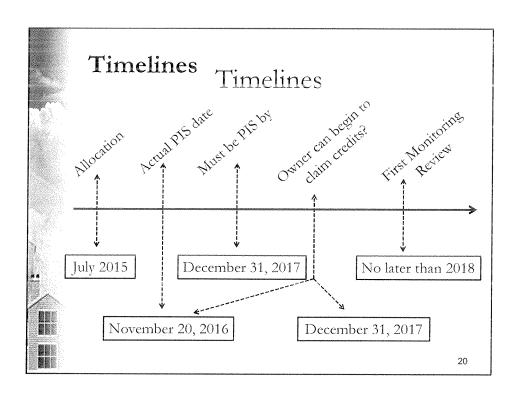


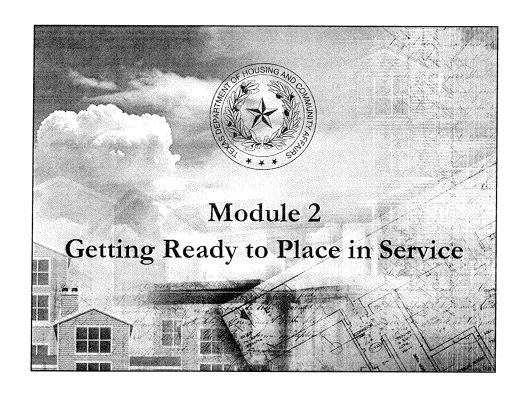


Timelines

- * Place in Service: no later than the end of the second calendar year after the year of award
- Credit Period: year placed in service or defer to the next calendar year
- First Monitoring Review: no later than the second calendar year after the last building is placed in service
 - > At least every 3 years thereafter







Getting Ready to Place in Service

- State Reporting Requirements (Setting up CMTS)
- Creating Written Policy and Procedures
- Creating and Implementing an Affirmative Marketing Plan
- Placing in Service
- Income and Rent Limits
- Utility Allowance

State Reporting Requirements

- Required setup for reporting in the Compliance Monitoring and Tracking System (CMTS)...
- CMTS Online Reporting

Set Up to Report Online

If you have not received a user id and password from the Department, two steps are required to initiate online compliance reporting:

- 1. Read, complete and submit the 2017 CMTS Filing Agreement (DOCX)
- Read the <u>Instructions for Completing the Unit/Building Setup Spreadsheet (PDF)</u>, then
 complete and submit the <u>Unit/Building Setup Spreadsheet (XLS)</u> to the Department
 This is a one-time setup process.

Once you have completed the Forms and Spreadsheet, submit via email to <u>cmts requests@itdhca state bt us</u> and we will process your request and send you an Administrator of Accounts id and password. Please allow three (3) to five (5) business days to process your request.

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State Reporting Requirements

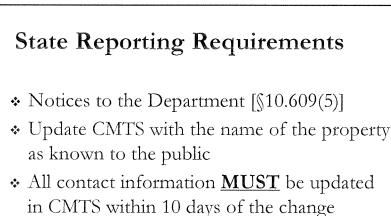
- * Timelines to first sign up for CMTS:
 - > 9% credit- 10% test
 - > 4% credit- Post Bond Closing Documents
 - > All other- September 1st following the year of the award

State Reporting Requirements

- Set up your Buildings and Units in CMTS
 - > You now have the ability to...
 - □ [ADD] buildings and units directly into CMTS
 - ☐ Make edits to unit data
 - For this, you must contact the Department to "unlock" the buildings for editing
 - Once edited, the building will be locked again
 - Currently working on instructions
 - ☐ Until then, you can continue to use the <u>Unit/Building</u>
 <u>Setup Spreadsheet (XLS)</u> and submit to
 <u>cmts.requests@tdhca.state.tx.us</u>

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State Reporting Requirements Reporting Requirements for CMTS (§10.607): Annual Owner's · 4 Parts and the Annual Owner Financial Certification Compliance Due April 30th for the previous calendar year 1st report due the second year after an award Report ("AOCR") Periodic Unit Due on the 10th day of January, April, July and Status Reports 1st report due after leasing commences ("USR") Onsite Monitoring · Date due identified in notification of review Review



Failure to comply is a Finding!

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State Reporting Requirements

- * CMTS: Username and Passwords
 - 1. Administrator of Account (starts with "adm")
 - Designated by an owner representative that is authorized to sign on behalf of the owner
 - The owner is authorizing an administrator to maintain property records in CMTS:
 - 1. Contact information
 - 2. Certify the accuracy of the answers to the AOCR
 - 3. Manage manager login
 - □ If you are NOT the person designated as the Administrator of Account:
 - Execute new 2017 CMTS Filing Agreement to update the records submitted to cmts.requests@tdhca.state.tx.us
 - It is <u>NOT</u> appropriate to use the login information for an account not assigned to you
 - 2. Manager Accounts (starts with "mgr")
 - If you need to reset your password contact your Administrator of Accounts;
 TDCHA is unable to reset manager password



- * Changes to the Unit Status Report
 - > The Household Screen has been changed to allow for demographic data to be entered for each household member
 - Must ALWAYS designate a Head of Household
 - > You are unable to submit the USR until ALL data for each household member is entered

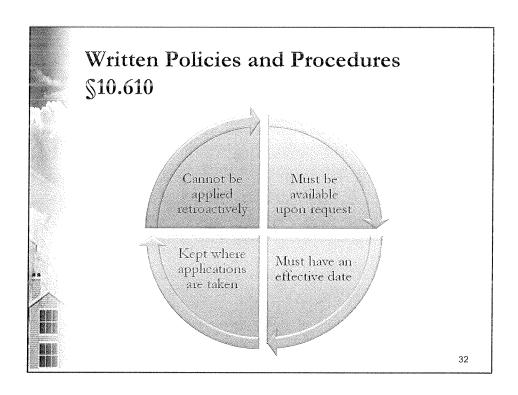
State Reporting Requirements

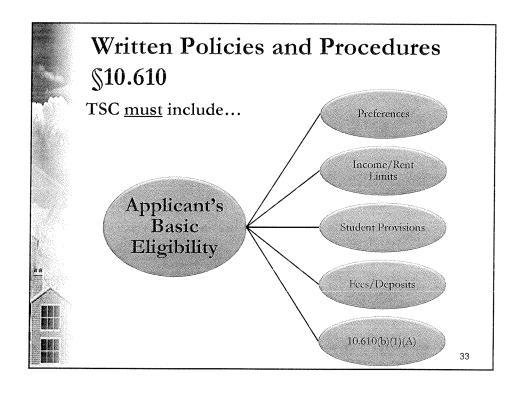
- * Exercise:
 - Setting Up Your Property in CMTS...

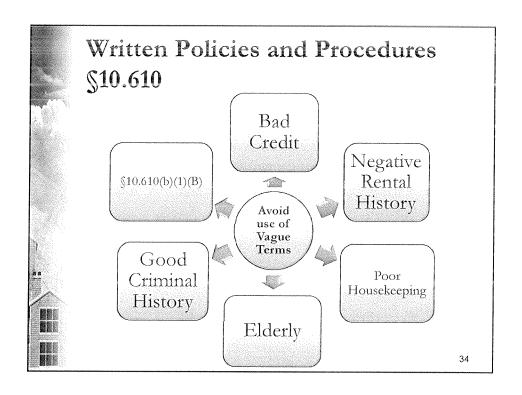
CMTS Filing Agreement CMTS Login

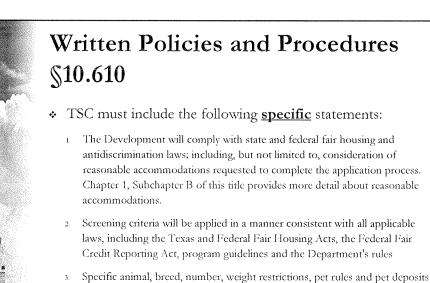
Written Policies and Procedures §10.610

- * The following are required:
 - 1. Tenant Selection Criteria ("TSC") §10.610(b)
 - 2. Reasonable Accommodation Policy §10.610(c)
 - 3. Wait List Policy §10.610(d)
 - 4. Denied Application Policy §10.610(e)
 - 5. Non-renewal and/or Termination Notices §10.610(f)
 - 6. Unit Transfer Policy §10.610(g)
- * Effective April 24, 2016









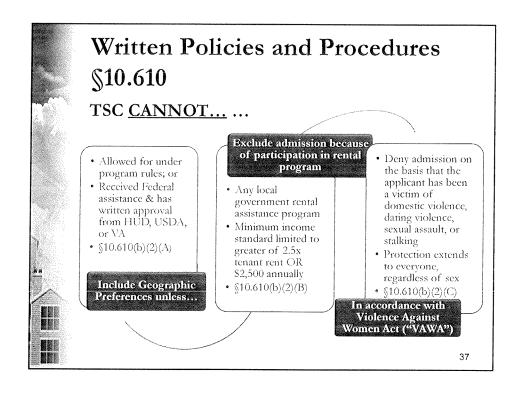
Written Policies and Procedures §10.610

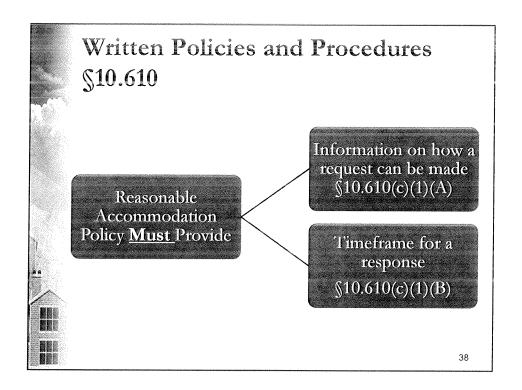
will not apply to households having a qualified service/assistance animal(s)

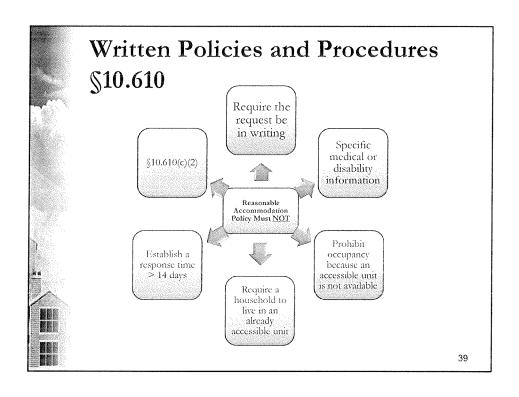
Occupancy Standards

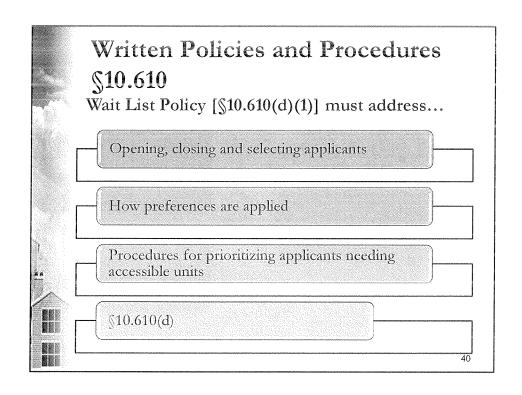
(10.610(b)(D))

- > If fewer than 2 persons (over the age of 6) per bedroom, must include written justification
- Violence Against Women Act ("VAWA")
 Notice
- List specific age requirements when Elderly exempted under HOPA or Elderly Preference





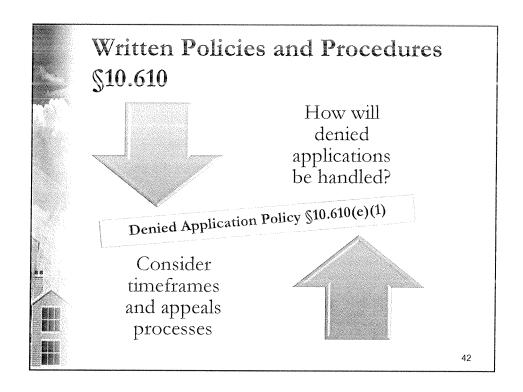


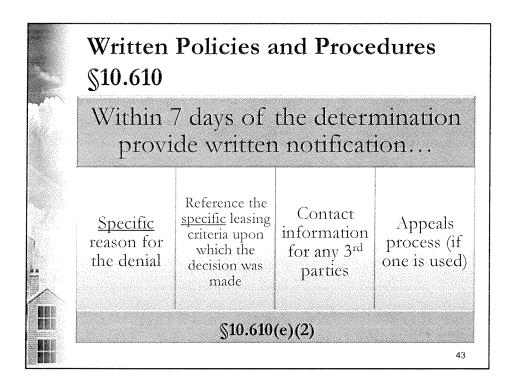


\$10.610

Written Policies and Procedures

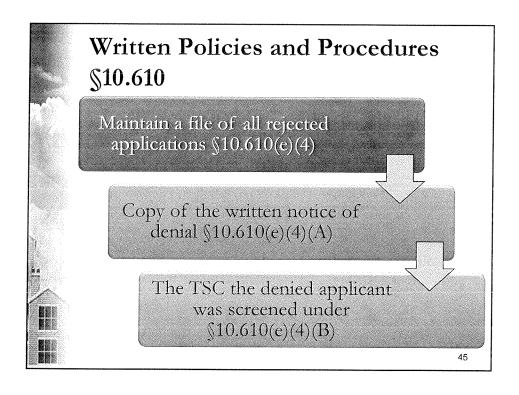
- * When you have additional rent & occupancy restrictions (30%, 40%, or 50%)
 - > Must maintain a waiting list for these lower set asides
 - Open to both existing tenants and prospective applicants
 - > All unit sizes must be available at the lower rents limits
 - unless otherwise approved at application, underwriting and cost certification
 - > Address how list will be managed
 - > Cannot prioritize prospective applicants over existing tenants
- **❖** §10.610(d)(2)

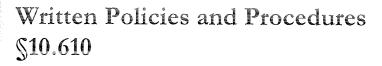




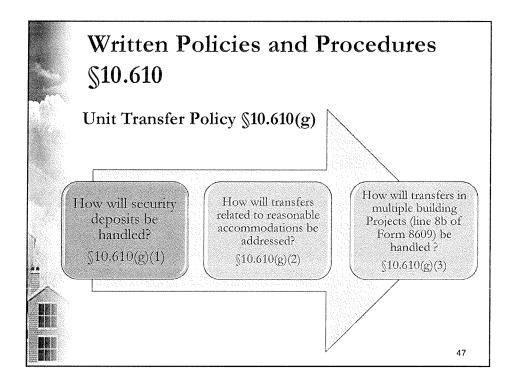
Written Policies and Procedures §10.610

- * Keep a log of denied applications
 - > Only applicants that completed the application process
 - Include:
 - Basic household demographics and rental assistance information
 - □ Specific reason for the denial
 - □ Date decision was made
 - ☐ Date notice was mailed or hand delivered to the applicant
- **❖** §10.610(e)(3)



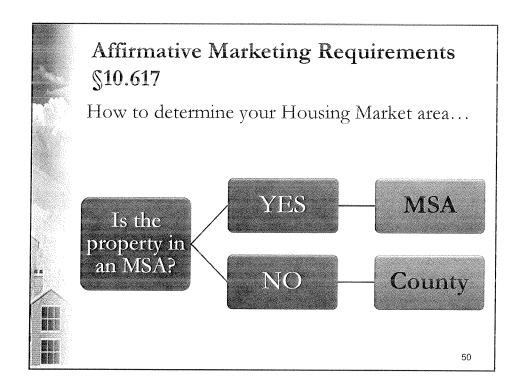


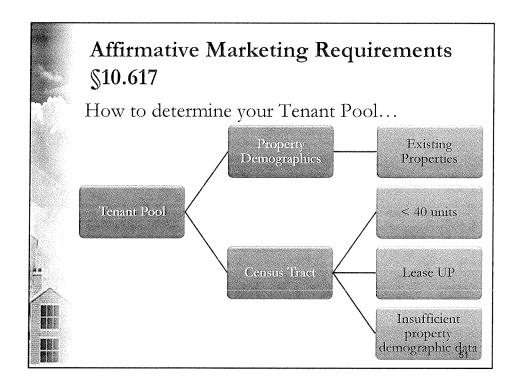
- For any notice of non-renewal and/or notice of termination of tenancy, include:
 - > Specific reason
 - > Information on rights under VAWA
 - > How a person with a disability may request a reasonable accommodation in relation to the notice
 - > Information on an appeals process (if one is used)
- **⋄** §10.610(f)

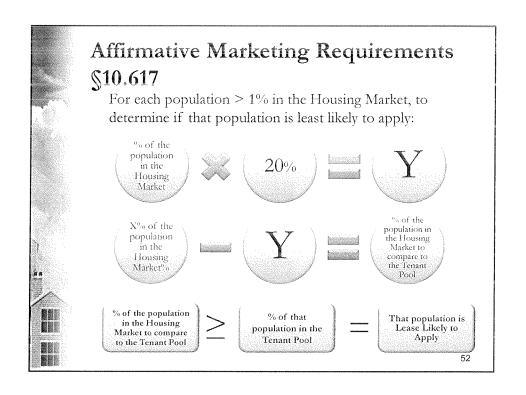




	Affirmative Marketing Requirements \$10.617
	 \$\\$10.617(b): Must develop and carry out an Affirmative Fair Housing Marketing Plan to provide for marketing strategies and documentation of outreach efforts to prospective applicants identified as "least likely to apply". Persons with Disabilities are always required General definition of least likely to apply:
1	Based on your completed Worksheet 1, indicate which demographic group(s) in the housing market area is/are least likely to apply for the housing without special outreach efforts. (check all that apply)
<u>aa</u>	☐ White ☐ American Indian α Alaska Native ☐ Asian ☐ Black or African American
	Native Hawaiian or Other Pacific Islander Hispanic or Latino Persons with Disabilities
	Families with Children Other ethnic group, religion, etc. (specify)









Marketing and Outreach

Rental Applications must be accepted by mail or at the Development site or leasing office at minimum. (Applications must include address, email or other contact information for alternate ways to submit an application)

Marketing and advertising materials must include the Fair Housing Logo and provide contact information if reasonable accommodations are needed. At minimum in English and Spanish

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Affirmative Marketing Requirements §10.617

AFM Timeframes

AFHMP must be updated every 2 years (or as required for HUD/USDA funded properties) New properties
must begin
Affirmative
Marketing efforts
six months prior to
the 1st building
being ready for
occupancy

Biennial plan review; include how, by whom and what process the owner will use to collect and evaluate the AFHMP for success



Affirmative Marketing Requirements §10.617

- What else do you need to know about Affirmative Marketing requirements......
 - > Applies to properties with five (5) or more units
 - > Must market to all groups identified as least likely to apply
 - The LURA may require additional affirmative marketing to veterans or other special populations
 - Records of the AFHM plans and outreach efforts records must be maintained for the greater of 3 years or what is specified in the LURA
 - Affirmative marketing is always required unless the property's waitlist is closed
 - Maintain reasonable documentation on the development, (re) evaluation and strategies used for the AFHM plan

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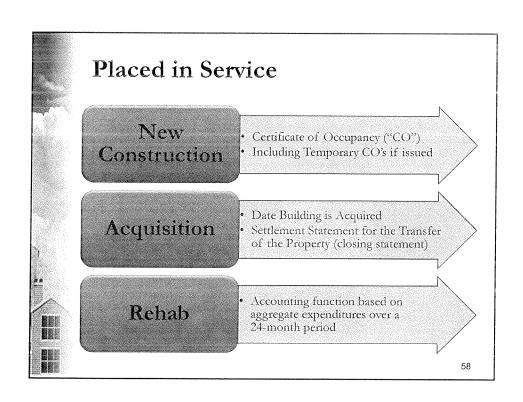
Affirmative Marketing Requirements §10.617

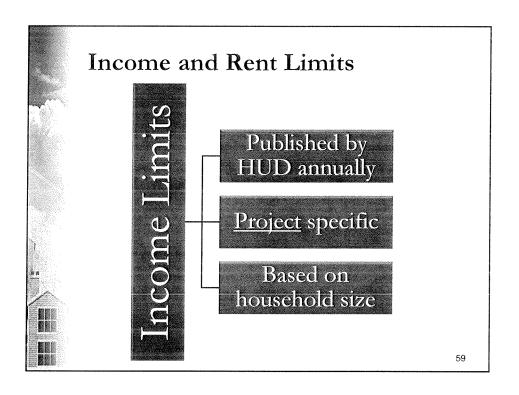
- Exercise: Complete the Affirmative Marketing Plan for Pandora Springs
 - > What is the Housing Market?
 - ➤ What are populations least likely to apply?
 - > How to find organization to market to?

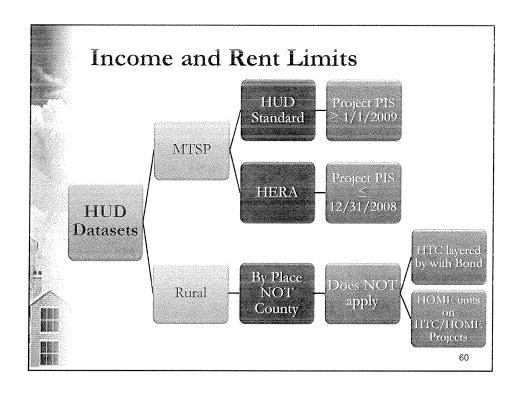
2017 Affirmative Marketing Web Tool
Policy Map
Outreach Census Data

Placed in Service

- * Date on which the <u>first</u> unit in the project is certified as being ready and available for its intended use
 - > IRS Notice 88-116

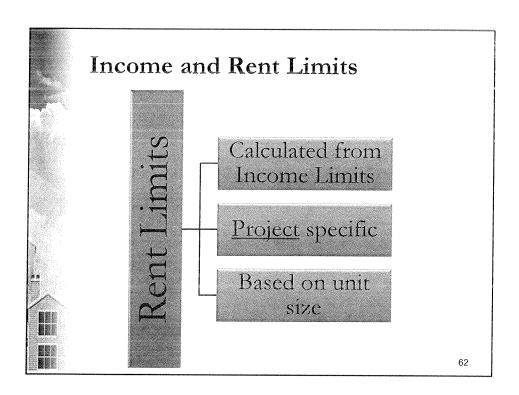






Income and Rent Limits

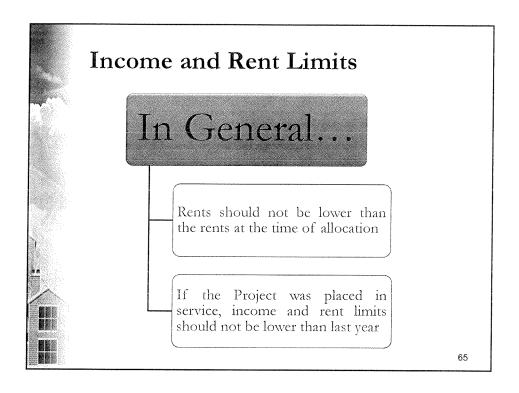
- * Once your property is placed in service your income limits will not decrease.
- * Income limits are determined on a **Project** basis

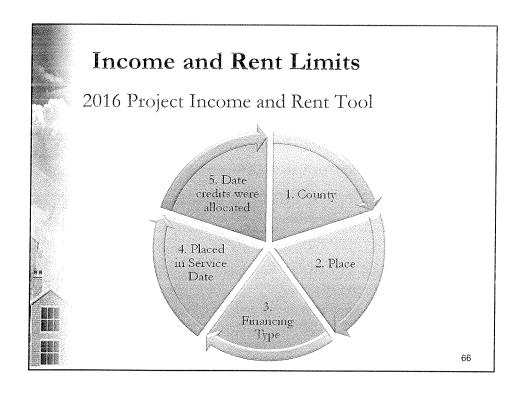


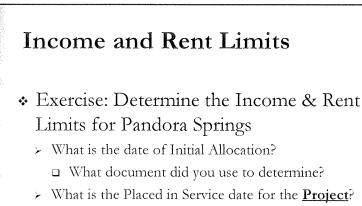


- * Gross Rent Floor
 - > Revenue Procedure 94-57
 - > The maximum amount of rent that can be collected will never be less than the rent limits that were in effect at the time the credits were allocated

Income and Rent Limits Determining Initial Date of Allocation Activity Initial Date of Allocation 9% Credit Date Carryover Agreement signed by the Department 4% Credit Effective date of the Determination Agreement TCAP Same date as accompanied credit Exchange Effective date of the Sub Award Agreement







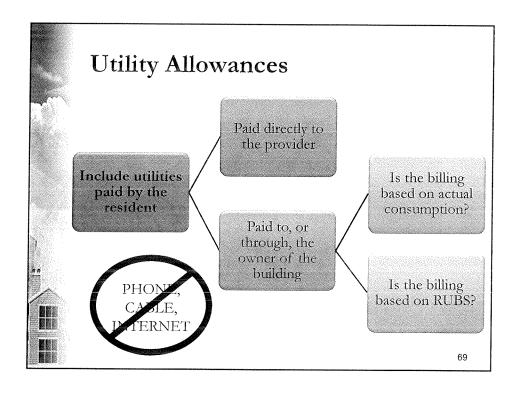
2016 Project and Rent Tool

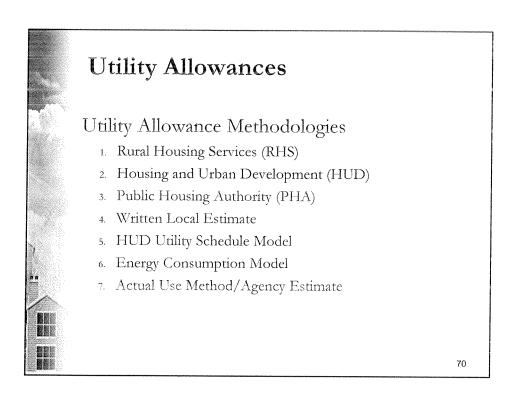
□ What document did you use to determine?

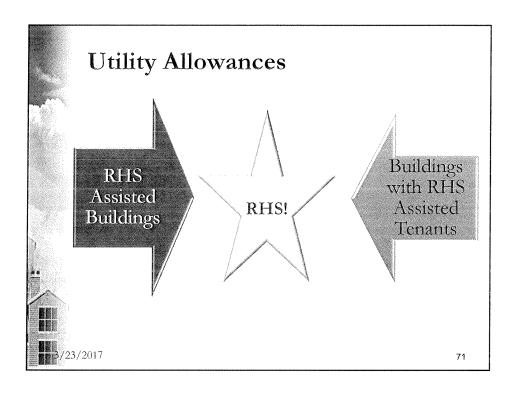
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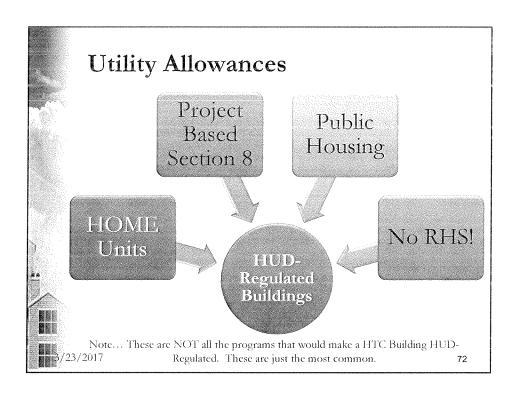
Utility Allowances

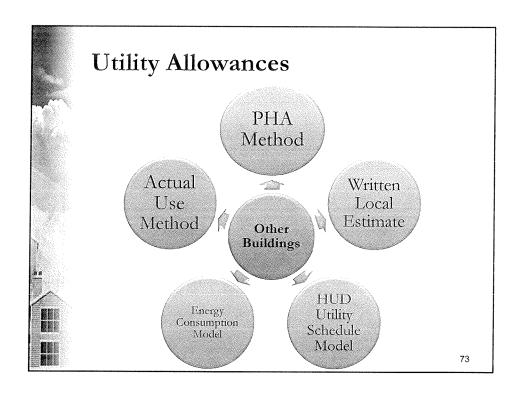
- Treasury Regulation 1.42-10
 - > Federally approved methodologies
 - > Recently revised March 3, 2016
- 8823 Audit Guide, Chapter 18
 - > Identifies compliance
- ❖ 10TAC§10.614
 - > TDHCA's rule that details how methodologies are implemented in Texas
 - > Amended December 4, 2016

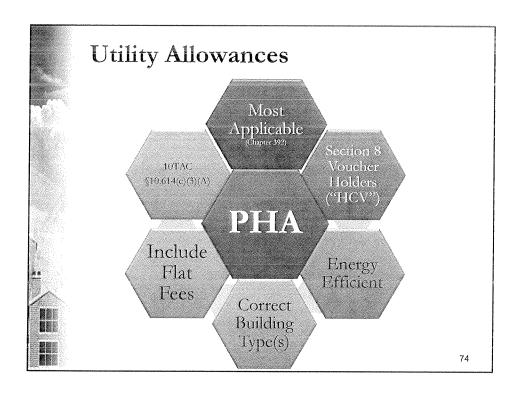


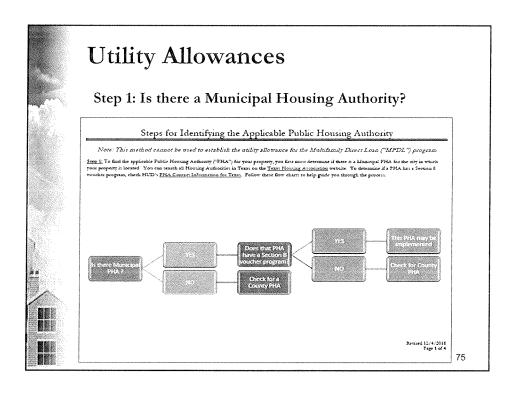


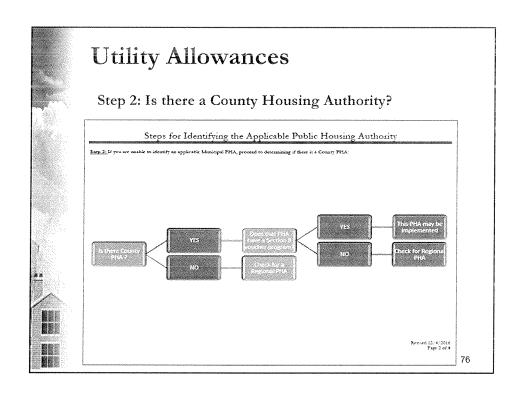


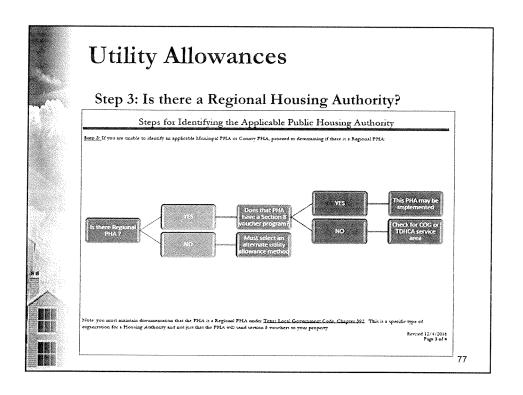


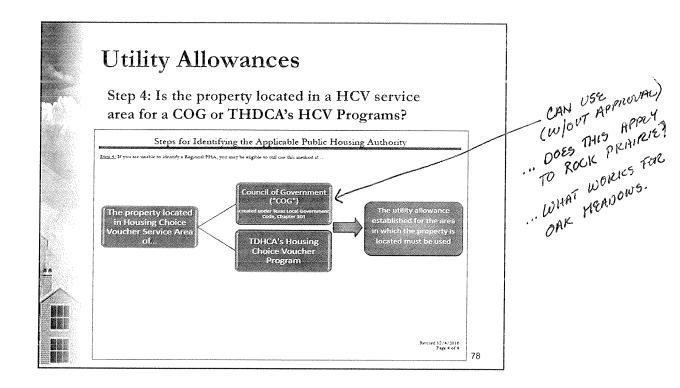




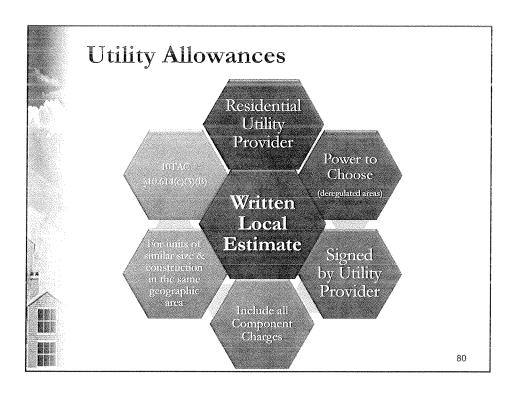


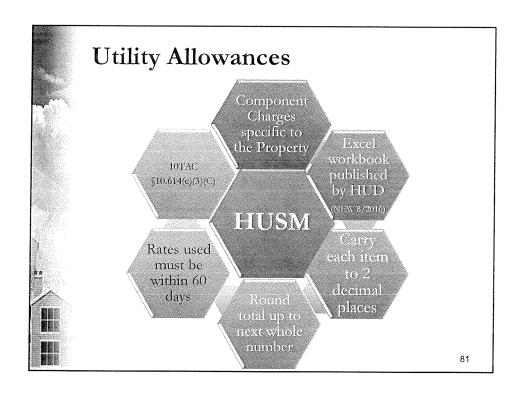


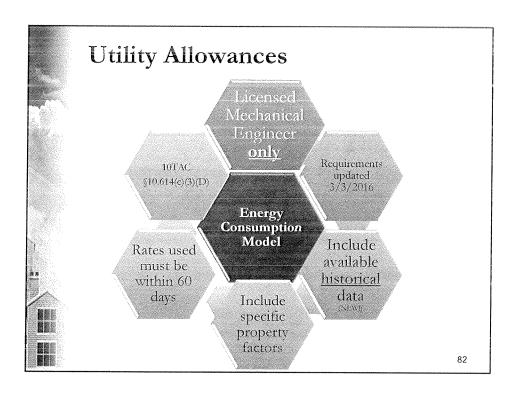


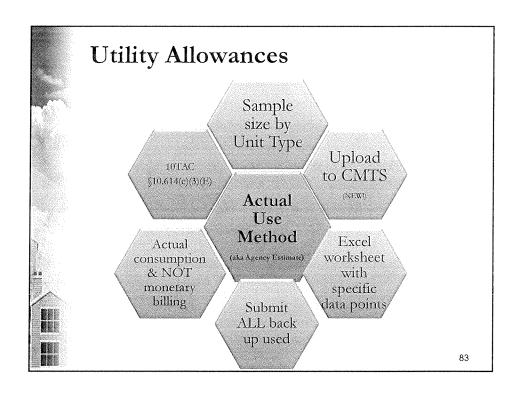


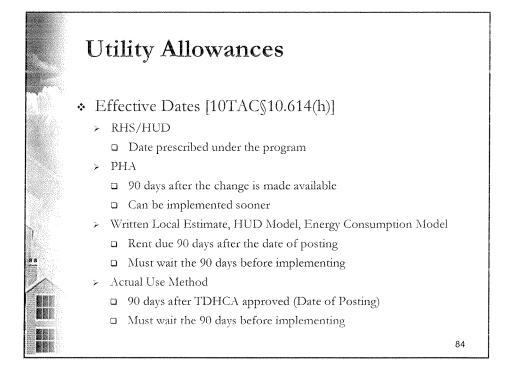
Utility Allowances How to determine what PHA is applicable to a development? Step 1: What are the PHAs in your county? * http://www.txtha.org/index.php/by-county/ Step 2: Does that PHA operate a HCV Program? * https://portal.hud.gov/hudportal/HUD?src=/program offic es/public indian housing/pha/contacts/tx









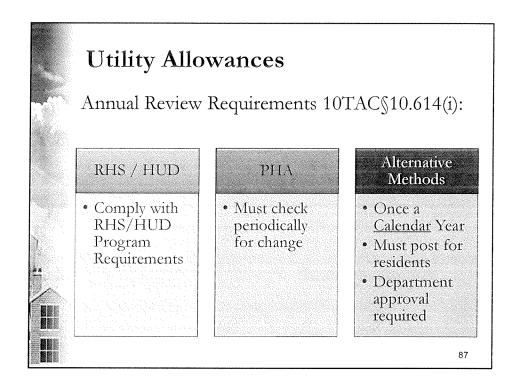


When does the 90-day notification begin?	
Beginning of 90 Days	
Date of letter from Utility Provider	
Date entered as "Form Date"	
60 days after the end of the last montl of the 12-month period for which date was used to compute the estimate	
Date allowance is approved by TDHC	
The state of the s	

Utility Allowances

10TAC§10.614(f)(2)

"...If the Owner fails to post the notice to the residents and submit the request to the Department by the beginning of the 90 day period, the Department's approval or denial will be delayed for up to 90 days after Department notification."



Utility Allowances

- Combining Methodologies
 - > With the exception of RHS buildings and HUD regulated buildings, owners may combine methodologies
 - > Be careful... different methods have different annual review requirements and effective dates!



- Changing Methodologies 10TAC§10.614(j)
 - > Owner must obtain prior approval to:
 - □ Change the methodology and/or
 - □ Start charging for a utility
 - > To obtain approval, submit a request to the Department and include:
 - □ Completed Utility Allowance Questionnaire
 - □ All applicable back-up (based on methodology)

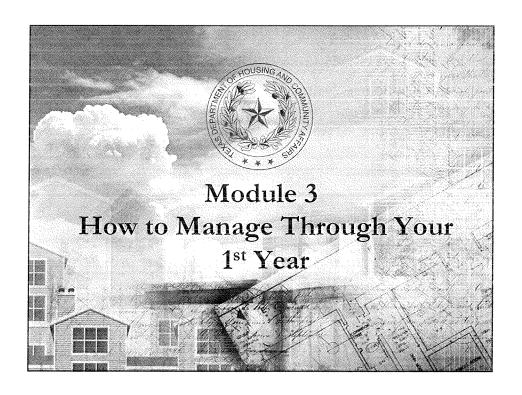
Utility Allowances

§10.614(n)...NEW!

All requests described in this subsection must be complete and uploaded directly to the Development's CMTS account using the "Utility Allowance Documents" in the type field and "Utility Allowance" as the TDHCA Contact. The Department will not be able to approve requests that are incomplete and/or are not submitted correctly

Utility Allowances

- * Exercise: Determine the utility allowance for each building at Pandora Springs
 - 1. What is the utility allowance for building 1?
 - 2. What is the utility allowance for building 2?
 - 3. What is the utility allowance for building 3?
 - 4. What is the utility allowance for building 4?
 - 5. What is the utility allowance for building 5?
 - 6. What is the utility allowance for building 6?
 - 7. What is the utility allowance for building 7?



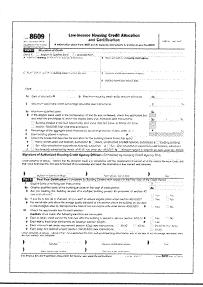


- Lease Requirements
- Land Use Restriction Agreement (LURA)
- * Rents
- Fees

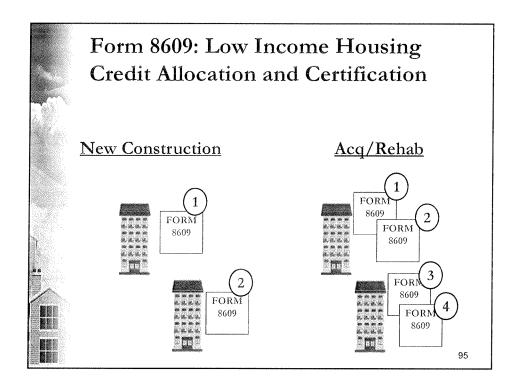
Eligible Basis

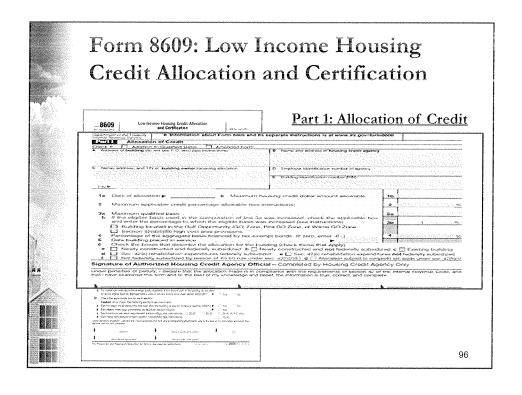
93

Form 8609: Low Income Housing Credit Allocation and Certification

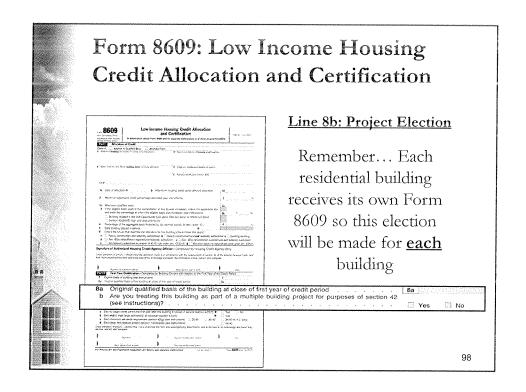


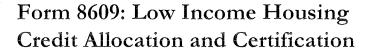
- Each residential building with low-income units receives an individual Form 8609
- This form is the owner's tax record to let the IRS know that the building is ready to start receiving credit





Credit Allocation	n and Certification
Les browns (versing Condit Allocation and Confidence) Les browns (Les brown	Part II: First Year Certifica
E minimi minimi diduk yani minimi Anno (2) Sana majangana kumi E minimi inna manangka Sana (2) Sana majangana kumi E minimi inna manangka Sana (2) Sana majangana kumi E Manangkana kumi inna manangkana kumi inna manangkana kumi E Manangkana kumi inna manangkana	
	ading Owners with respect to the First Year of the Credit Period
Eligible basis of building (see instructions) An Original qualified basis of the building at close of the Are you treating this building as part of a multiple.	first year of credit period Ne building project for purposes of section 42
(see instructions)? 9a If box 6a or box 6d is checked, do you elect to red b For market-ase units above the average quality stands	duce eligible basis under section 42(92)(5)? ☐ Yes ☐ No eds of low-income units in the building, do you elect
to reduce eligible basis by disproportionate costs of no 10 Check the appropriate box for each election: Caution: Once made, the following elections are is	Land the Land to Land the Lan
 Elect to begin credit period the first year after the Elect not to treat large partnership as taxpayer (se 	building is placed in service (section 42(f(x1)) ► ☐ Yes ☐ No ection 42(f(x2)) ► ☐ Yes
 Elect minimum set-asside requirement (section 42(d) d. Elect deep rent skiewed project (section 142(d)43). Under penative of perury, ill declare that ill have examined this to see true, correct, and complete. 	gi) (see instructions)
Separation Control of the Control of	Temponya Mandingsian number Data

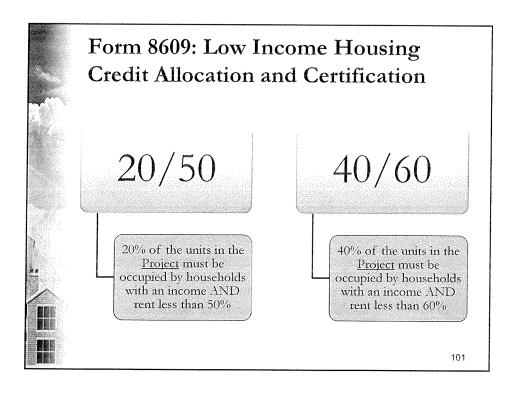


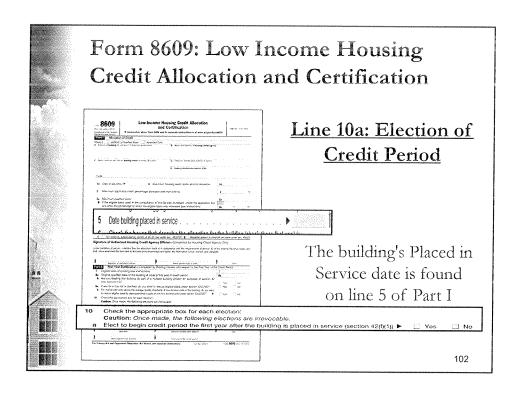


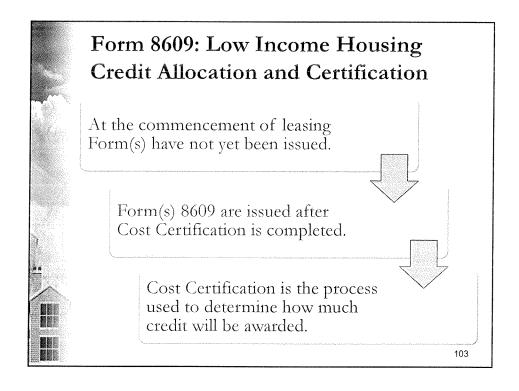
- * Statement for Multiple Building Election
 - > No required/standard format
 - > Must include
 - 1. Name and Address of the property and each building in the project
 - 2. The BIN of each building in the project
 - 3. The aggregate credit dollar amount for the project (not applicable for Exchange properties)
 - 4. The credit allocated to each building in the project (not applicable for Exchange properties)
 - > Failure to attach the required statement will result in each building monitored as a separate project

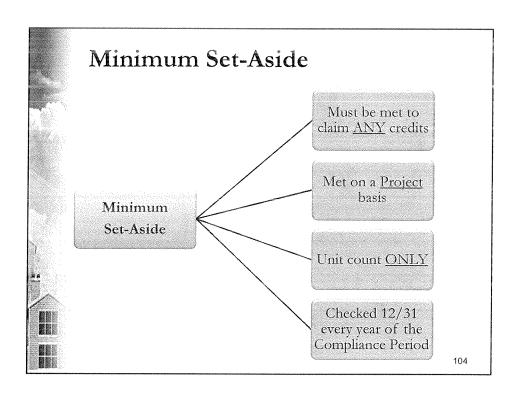
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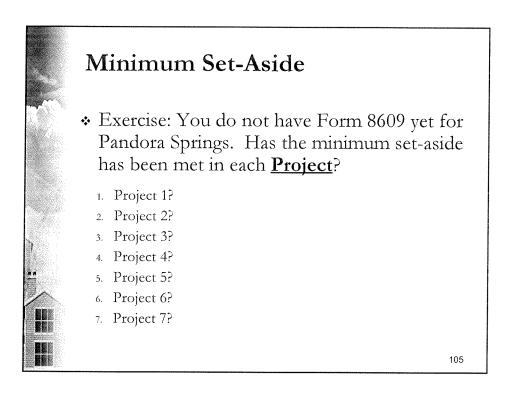
Form 8609: Low Income Housing Credit Allocation and Certification Qualified low-income housing project: Qualified low-income housing project: Any residential rental project that meets one of two requirements elected by the owner on Form 8609, line 10c [IRC§42(g)(1)] Ce Elect minimum sel-aside requirement (section 42(g)) (see instructions) Ce Elect minimum sel-aside requirement (section 42(g)) (see instructions) Ce Elect minimum sel-aside requirement (section 42(g)) (see instructions) Contact and co

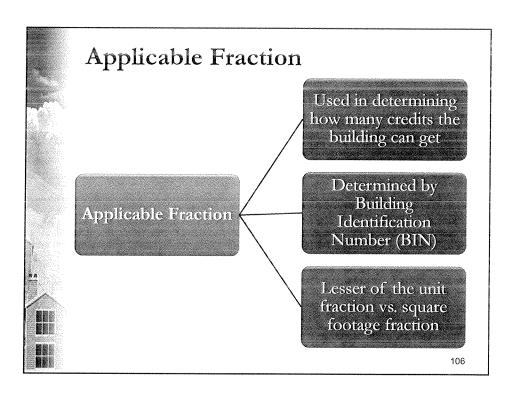






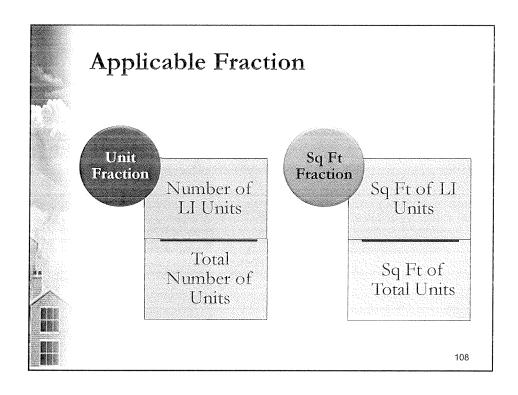


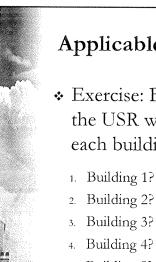




Applicable Fraction

- * Applicable Fraction
 - > Smaller of the unit fraction or the square footage fraction [IRC§42(c)(1)(B)]
 - > Most owners choose to rent additional units to low-income households in excess of the required minimum set-aside to increase the credit award

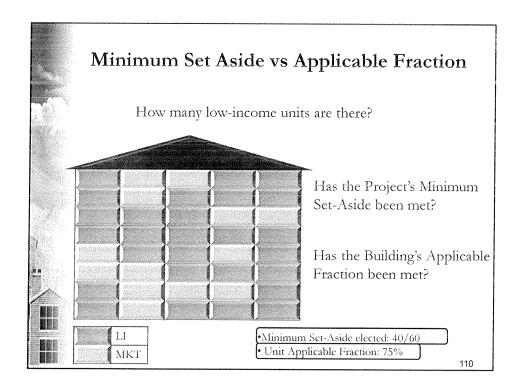


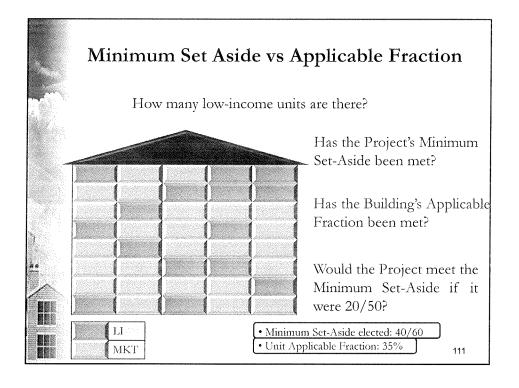


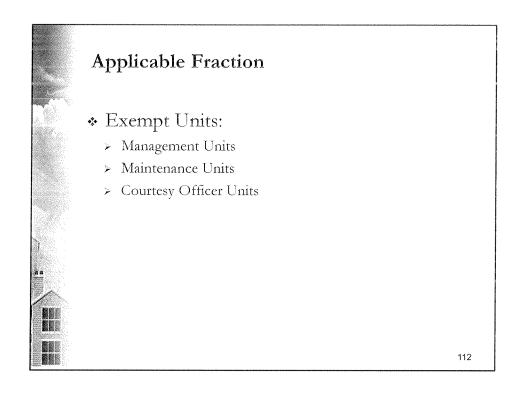
Applicable Fraction

- * Exercise: Based on the unit designations on the USR what is the Applicable Fraction for each building at Pandora Springs?

 - 5. Building 5?
 - Building 6?
 - 7. Building 7?







Applicable Fraction

Revenue Ruling 92-61 and Revenue Ruling 2004-82

"The adjusted basis of a unit occupied by a full-time resident manager is included in the eligible basis of a qualified low-income building under Section 42(d)(1) of the Code, but the unit is excluded from the applicable fraction under Section 42(c)(1)(B) for purposes of determining the building's qualified basis."

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Applicable Fraction

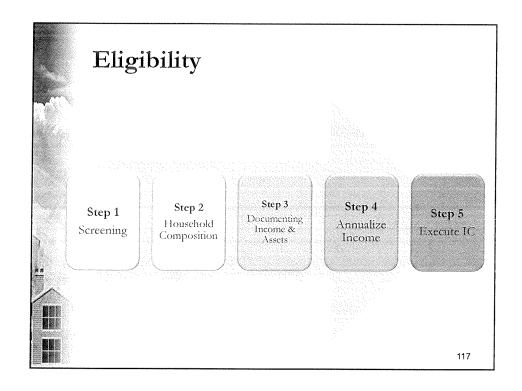
- * If a building is 100% low-income, it's easy to maintain the required applicable fraction with an employee in a unit.
- ❖ If the building is mixed income (both lowincome and market units), you must maintain the required applicable fraction with one less unit.

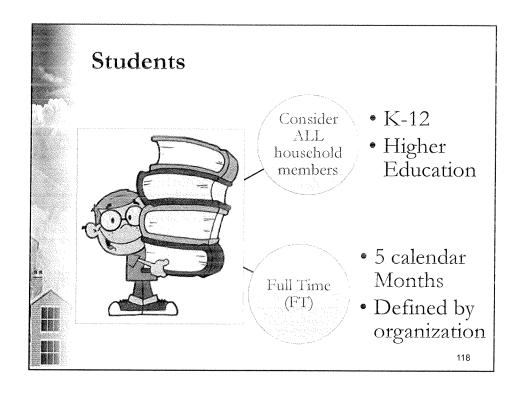


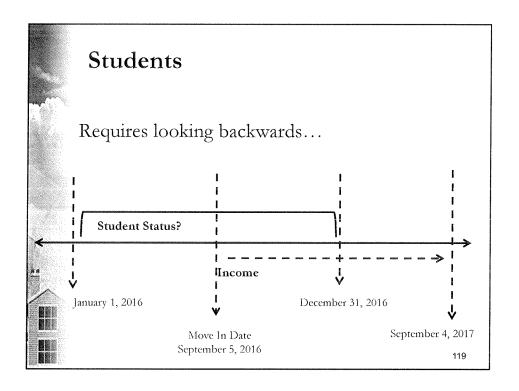
- If in a later year of the credit period the unit is no longer occupied by an employee, the unit is now included in both the numerator and denominator of the Applicable Fraction for that year
- To maintain compliance the unit needs to be leased to an eligible household as soon as possible (100% low-income buildings)

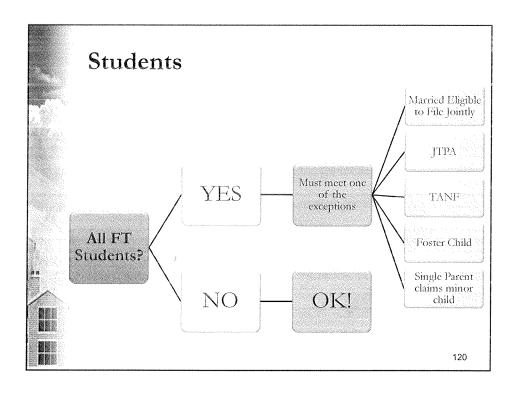
Applicable Fraction

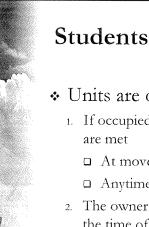
- Model Units
 - > Considered a residential rental unit
 - Included in Eligible Basis
 - > In general, remove unit from the numerator of the Applicable Fraction
 - ☐ Example: Property has a total of 250 low-income units and 1 model unit. The unit fraction would be 249/250 or 99.6%











- Units are out of compliance
 - 1. If occupied by all FT students and none of the exceptions
 - □ At move-in OR
 - ☐ Anytime during the certification
 - 2. The owner fails to verify the household's student status at the time of move-in OR
 - 3. Annual student status verification was performed late and after notification of state agency review

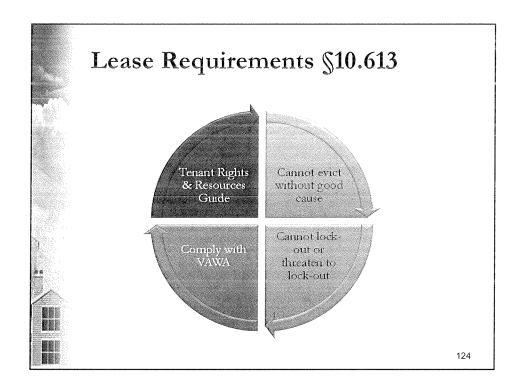
Students

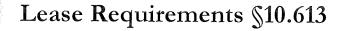
- ❖ The unit will be considered back in compliance
 - > When documented as no longer occupied entirely by full time students or
 - > The tenant qualifies under one of the exceptions



Students

- Student status must be verified by the registrar's office
- Full-time status defined by the educational organization attended
- * Status should be verified on a semester basis
- * Verify part-time status
 - Noncompliance will be cited if student status is not verified each semester

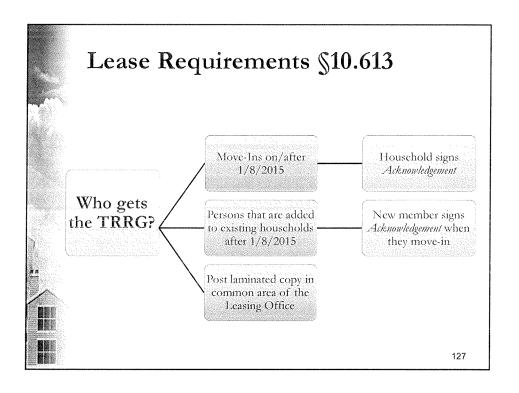


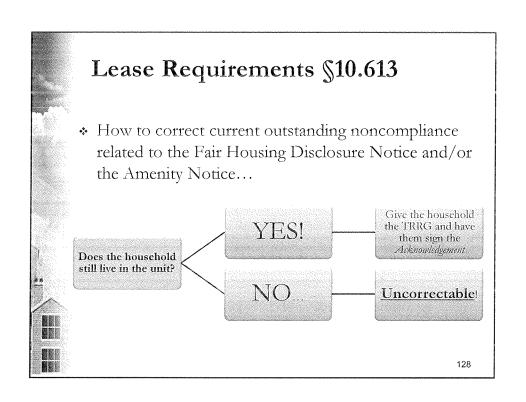


- Lease Requirements
 - Supportive housing program where the owner receives a rental payment for the unit regardless of physical occupancy can collect vacancy payments for 60 days (previously limited to 30 days)
- **❖** §10.613(i)

Lease Requirements §10.613

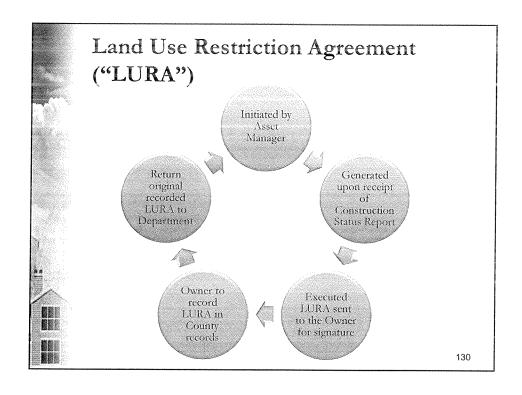
- Tenant Rights and Resources Guide ("TRRG")
 - > Electronically available
 - Must customize with property specific unit/common amenities and services
 - All households that move-in on/after January 8, 2015 must be given the TRRG
 - ☐ Sign the Acknowledgement to certify receipt
- * §10.613(j)-(k)





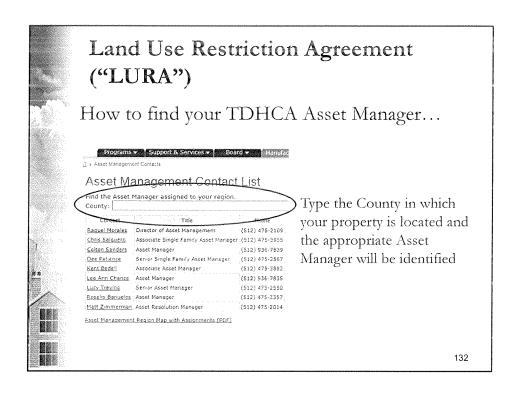
Land Use Restriction Agreement ("LURA")

- * Extended Use Agreement
 - > No credit shall be allowed with respect to any building for the taxable year unless an extended low-income commitment is in effect as of the end of such taxable year [IRC §42(h)(6)(A)]



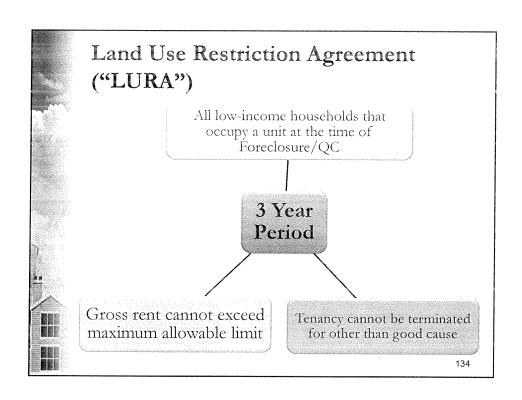
Land Use Restriction Agreement ("LURA")

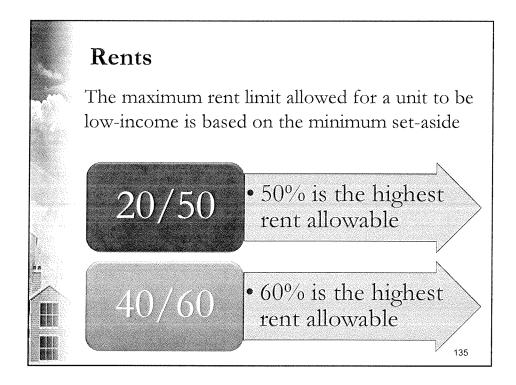
- LURA must be fully executed by the end of the 1st year of the credit period for the owner to be eligible to claim credits
- Form(s) 8609 will not be issued until the LURA is executed

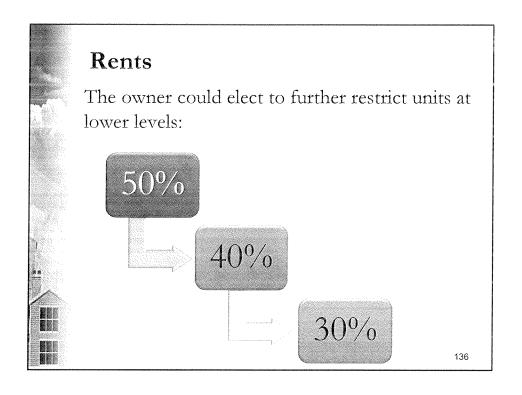


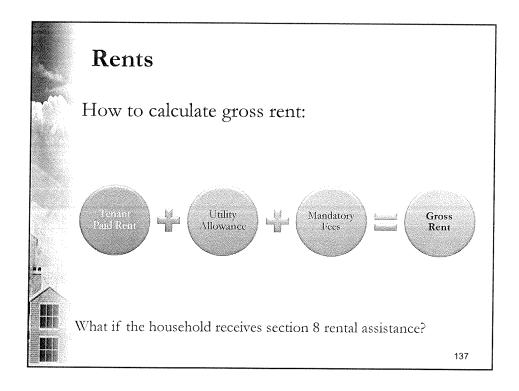
Land Use Restriction Agreement ("LURA")

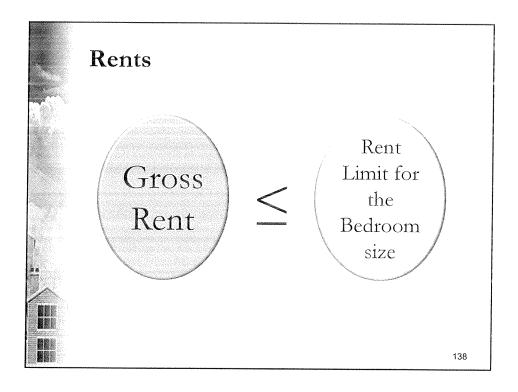
- * When does the LURA terminate?
 - Last day of the Extended Use Period unless...
 - □ Building is acquired by foreclosure (or instrument in lieu of foreclosure)
 - ☐ The owner request a Qualified Contract and after one (1) year period, the Department is unable to present a buyer

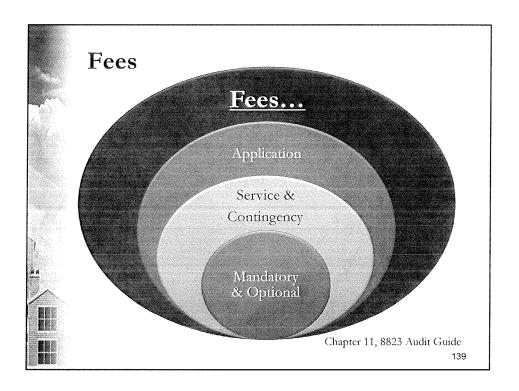






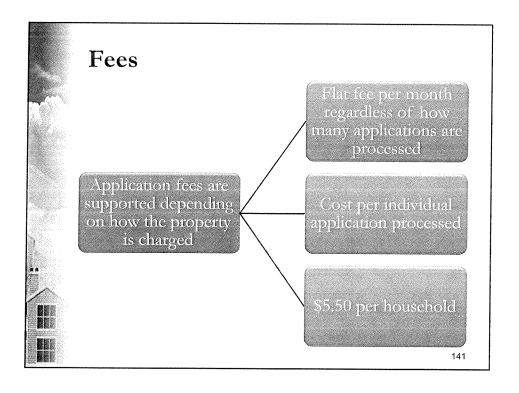


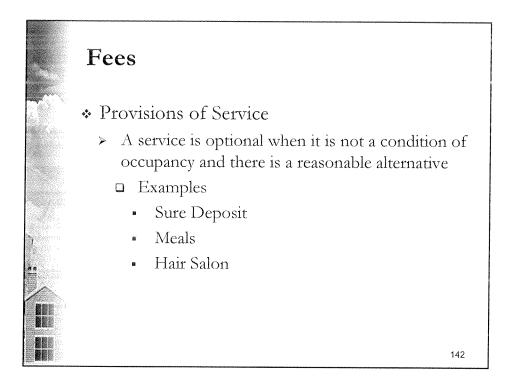




Fees

- * Application Processing
 - > Limited to the actual out-of-pocket cost to owner of checking tenant's income, credit history and landlord references
 - > 10TAC§10.622(c)(1) allows for an additional \$5.50 per household





Fees

- Contingency Fees are allowable
 - All of these types of fees are items that the resident does not have to pay unless they take or fail to take required action
 - > Not included in the gross rent calculation
 - Examples
 - Late rent fee
 - Re-letting fee
 - Fee to replace a key

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Fees

- Fees as a Condition of Occupancy (Mandatory)
 - ➤ Treasury Regulation §1.42-11(a)(3): the cost of services that are required as a condition of occupancy must be included in gross rent
 - > Examples
 - □ Month-to-month fee
 - □ Mandatory renter's insurance
 - □ Utilities paid to the owner of the building where the billing type is based on an allocation formula or RUBS

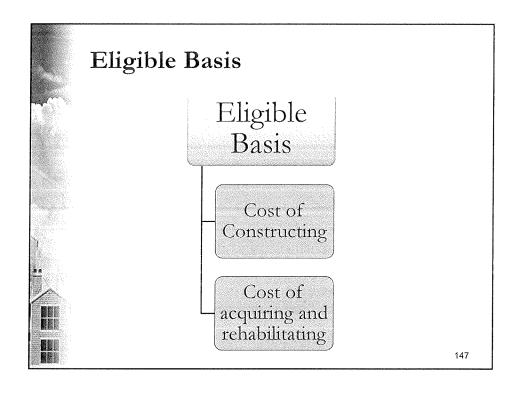
Fees

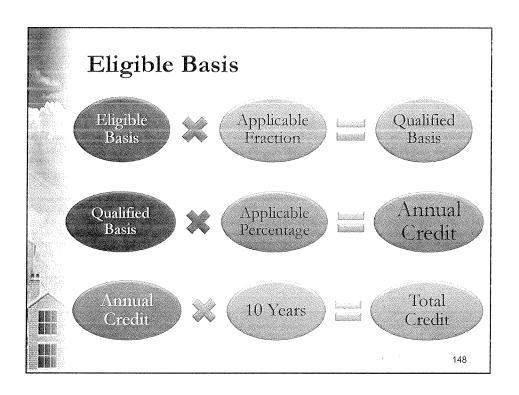
- * Fees for preparing a unit for occupancy must not be charged; owners are responsible for physically maintaining LIHTC units in a manner suitable for occupancy"
- Charging unallowable fees will result in a finding of noncompliance
 - Remains out of compliance for the taxable year in which the event occurred

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Fees

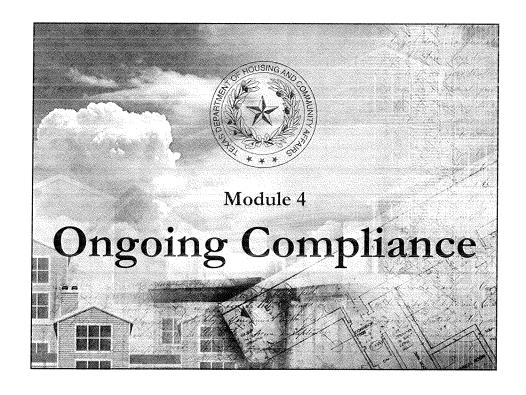
- * Do not charge a separate fee for facilities included in eligible basis:
 - > Common Examples
 - □ Community Room
 - □ Swimming Pool
 - □ Garages
 - Covered Parking
 - □ Storage





Eligible Basis

- Exercise: How much credit will each building at Pandora Springs generate?
 - 1. Building 1?
 - 2. Building 2?
 - 3. Building 3?
 - 4. Building 4?
 - 5. Building 5?
 - 6. Building 6?
 - 7. Building 7?



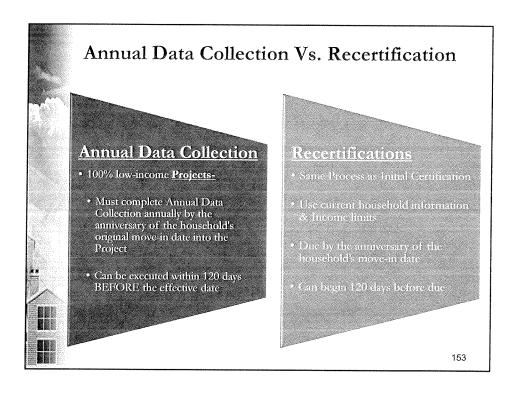
Ongoing Compliance

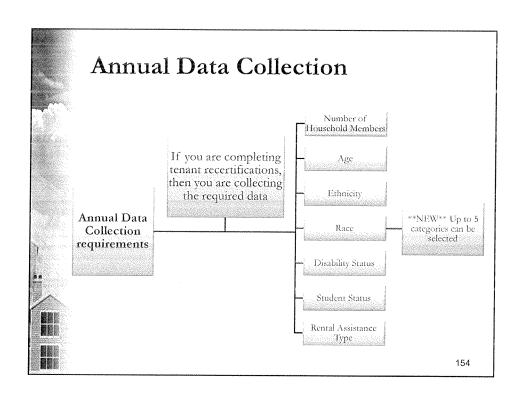
- Annual Data Collection
- * Recertification
- ❖ Available Unit Rule
- * Adding an additional household member
- Transfers
- * Managing Additional Rent and Income Restrictions
- Services
- Non-Profit/HUB
- Rent Rules
- * Monitoring After the Compliance Period
- Acquisition and Rehab

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Minimum Set Aside

- Exercise: You now have Forms 8609 for each building at Pandora Springs. How many Projects are there?
 - 1. Project 1:
 - a. What buildings are in Project 1?
 - b. Has the minimum set-aside been met in Project 1?
 - 2. Project 2:
 - a. What buildings are in Project 2?
 - b. Has the minimum set-aside been met in Project 2?





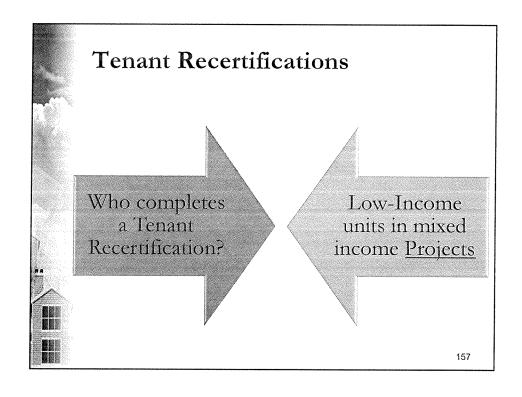
Annual Data Collection

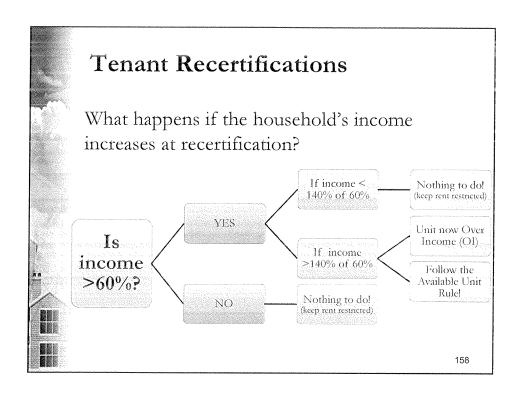
- * What can be used to collect the data?
 - 1. Income Certification form
 - 2. Annual Eligibility Certification ("AEC") form
 - 3. HUD Income Certification (Form HUD-50059)
 - 4. USDA Income Certification (Form RD 3560-8)

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Annual Data Collection

Which buildings at Pandora Springs are required to comply with only the Annual Data Collection requirement?





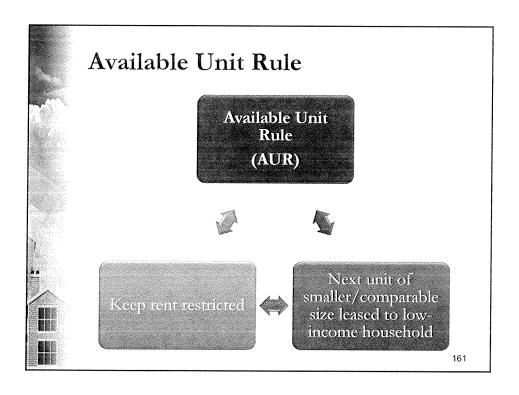
Tenant Recertifications

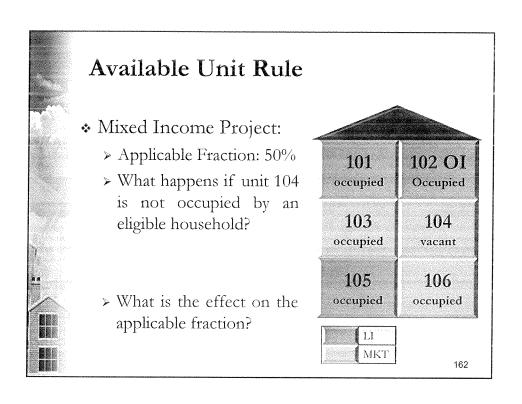
- Which buildings at Pandora Springs are required to complete a full annual recertification?
 - > Why?
- What happens if all the Buildings are part of 1 Multiple Building Project?

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Tenant Recertifications

- 4 §42(g)(2)(D) and Treasury Regulation 1.42-15:
 - > Building based rule
 - When a household's income exceeds 140% of the current income limit at recertification, the unit is OI and the Available Unit Rule MUST be followed
 - > If the rule is not followed, ALL OI units in the building lose their low income status

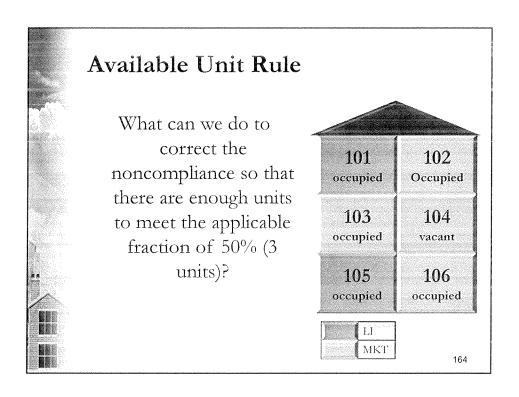




Available Unit Rule

❖ How to correct if the AUR is not followed...

Move out the market household you just moved in?



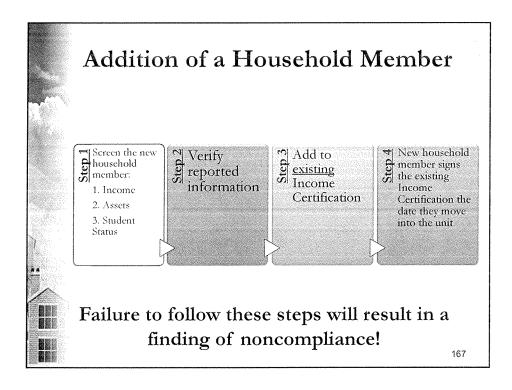
Available Unit Rule

- * 100% low-income projects:
 - Owners that lack appropriate/sufficient due diligence will be unable to demonstrate compliance with the Available Unit Rule in the case of an IRS audit

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Available Unit Rule

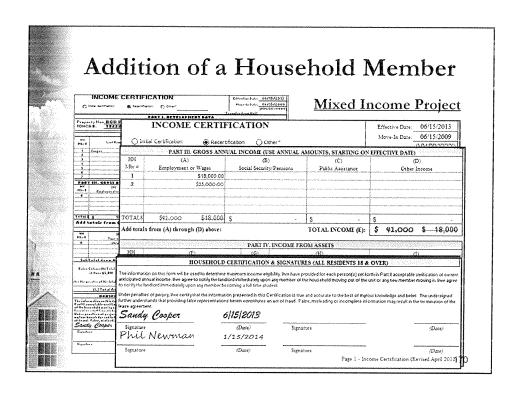
- * Based on a review of the USR for Pandora Springs, are there any units that are OI?
 - > Was the NAUR followed?
 - > What was the effect?
 - > How can it be corrected?

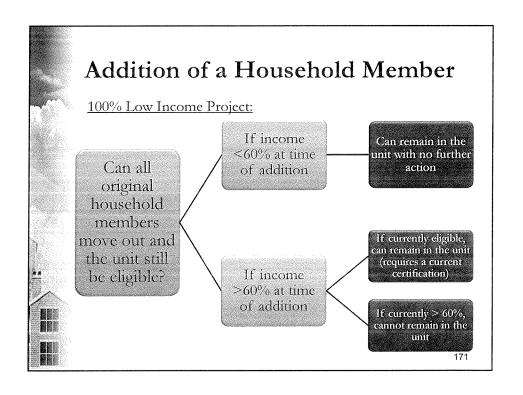


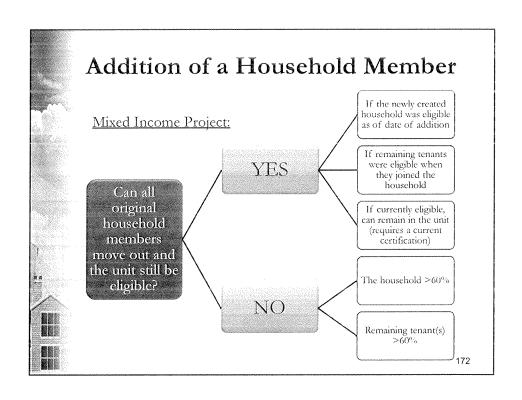
Addition of a Household Member

- Do not re-verify the existing (original)
 household member's income/assets when a
 new household member moves in
- * If, when you add the new household member's income/assets to the existing household's total annual income, the new total exceeds 140% of 60%, then you must follow the Available Unit Rule (AUR)

& Tribe Combani	ME CERTIFICATION	Transcript Page		Low Income 1	<u>Pro</u>
Presenty New AB		-is	11141 L		
***************************************	HH (A)	SS ANNUAL INCOME (USE :	ANNUAL AMOUNTS, START	ING ON EFFECTIVE DATE) (D)	
PILLE E	Mbr ii Employment or War				
1 2-34	The state of the s	UAL INCOME (USE ANNUAL	technik (Creamann creamann cr		7
****	(A)	(B)	(C)	(D)	igits
	Employment or Wares	Social Security/Pensions	Public Assistance	Other Income	ecor
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tetact s		3	<u> </u>	\$ -	
Add totals from	is from (A) through (D) above:		TOTAL INCOME (E):	\$ 42,000 \$ 25,000	
					- S0
Ha y		PART IV. INCOME F			4
	(F) Type of Asset	(G)	(H)	(D)	1
		CONTROL CONTRO	Sin Value of Asset	Annual Income from Asset	
\$ + 1 Y + 1 + 1 F + 4 +	HOU	SEHOLD CERTIFICATION &	SIGNATURES (ALL RESID	ENIS 18 & OVER)	ASSESSED.
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(L)1644	further understands that providing false rep lease agreement.	zeseskations herein constitutes an a	ot of traud. False, misteading or in	complete information may result in the termin	ation of t
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Transfers

Within the same Building

• Regardless of income

Within the same Project

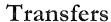
 As long as the household was not OI at the last certification

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Transfers

- * When transferring...
 - ➤ The two units swap status

 □ One household CANNOT qualify 2 units
 - > It is not necessary to certify the household at the time of transfer
 - Certification date follows the household NOT the unit



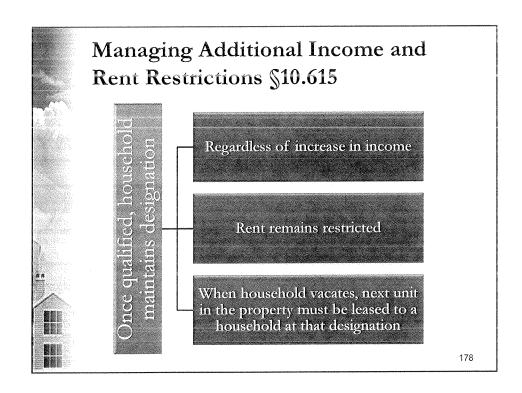
- Households moving from one <u>Project</u> to another <u>Project</u> must be low-income
 - > NOT A TRANSFER!!!
 - > Requires you to certify the household under current circumstances

Transfers

- * Based on the USR for Pandora Springs, can the following household transfer?
 - 1. Unit 4 transfer to unit 1?
 - 2. Unit 23 transfer to unit 3?
 - 3. Unit 12 transfer to unit 46?
 - 4. Unit 21 transfer to unit 15?
 - 5. Unit 18 transfer to unit 2?

Managing Additional Income and Rent Restrictions §10.615

- * Owners may elect to restrict units to a lower AMI
 - > 30%, 40% and 50%
- ❖ If applicable, these restrictions are recorded in the LURA



Managing Additional Income and Rent Restrictions §10.615

- * Exception:
 - > Mixed income projects must follow the Available Unit Rule when the household's income exceeds 140% of the maximum allowable limit

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Managing Additional Income and Rent Restrictions §10.615 How to comply with this rule: The household is NOT considered OI until their income exceeds 140% of the 60% AMI; No such thing as 140% of 30% AMI 30% AMI 140% of 60% AMI 180

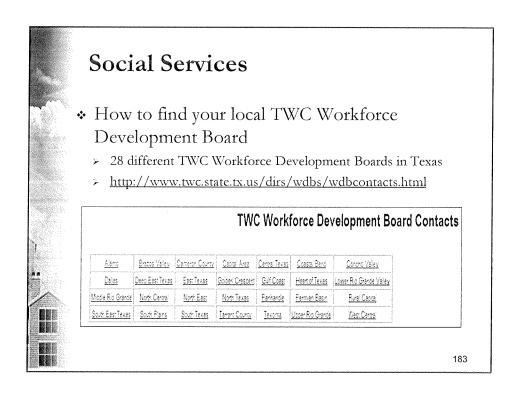
Social Services

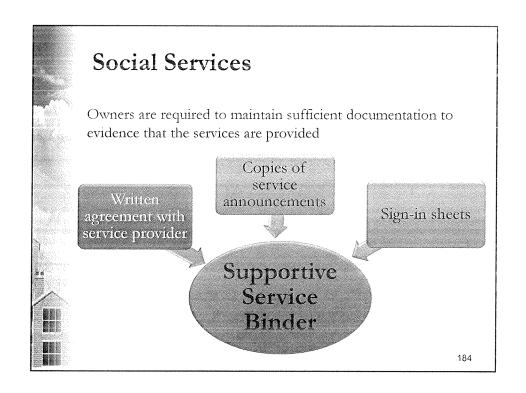
- ❖ Monitoring for Social Services [§10.619]
 - > Found in Appendix A of the LURA
 - □ Type of services
 - Length of provision
 - Provider is required
 - In general, services must be provided onsite with no charge to the household
 - > If off site, transportation provided

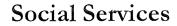
181

Social Services

- State workforce development and welfare programs are administered through The Texas Workforce Commission and Workforce Solutions-Workforce Boards
- You will need to identify your local TWC Workforce Development Board



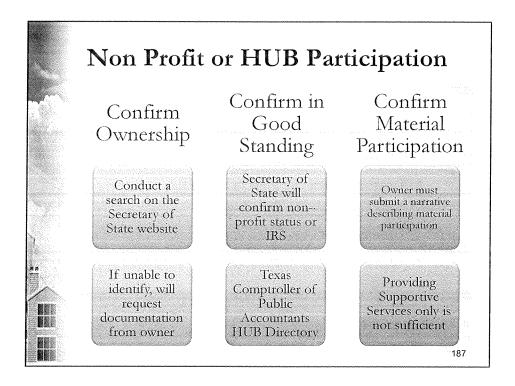




- * Tips:
 - 1. Organize binder by service
 - 2. Maintain contracts
 - 3. Craft services by what is in LURA
 - 4. Flyer and sign in sheets dated
 - 5. One event CANNOT satisfy 2 services
 - 6. Must be services not otherwise available to tenants

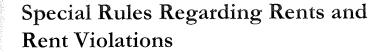
Non-Profit or HUB Participation

- If a LURA requires the material participation of a Non-profit or HUB, Department will confirm the requirement is met
- Reviewed at <u>EVERY</u> onsite that the provision is met on an ongoing basis during the Compliance Period
- * Chapter 22, 8823 Audit Guide
- **❖** §10.620



Special Rules Regarding Rents and Rent Violations

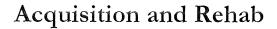
- ❖ If rent is overcharged at the 30%, 40% and/or 50% level, to correct
 - 1. Reduce the rent and notify the household of reduction
 - Refund (<u>NOT credit</u>) the total amount of rent overcharged
 - 3. If household has already vacated, a trust account must be established and remain open for 4 years
- ❖ §10.622



- For properties that have completed the 15 year compliance period ("Post 15"); and,
- Properties that have undergone a Foreclosure or Qualified Contract (during the 3 year period)
 - > If gross rent exceeds ANY rent limit, including 60%, to correct:
 - 1. Reduce the rent and notify the household of reduction
 - 2. Refund (NOT credit) the total amount of rent overcharged
 - 3. If household has already vacated, a trust account must be established and remain open for 4 years

Acquisition and Rehab

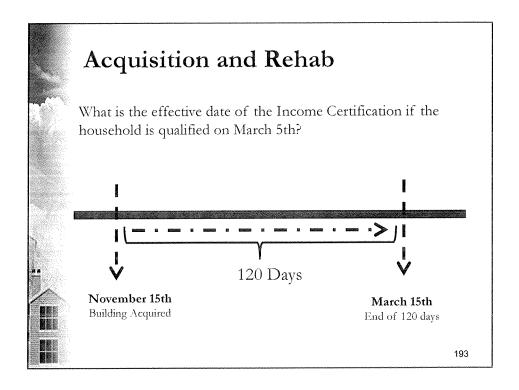
- Owners can receive credits for the Acquisition and Rehabilitation of existing properties
- Most times, these properties have residents that already live there
- The new owner is required to income qualify those existing residents for the allocation of credits



- If the existing household is qualified as eligible with 120 days of the date the building is acquired
 - 1. The effective date of the Income Certification is the date of the acquisition (all annual requirements are triggered from that date)
 - 2. Use the income limits in effect at the time of the acquisition

Acquisition and Rehab

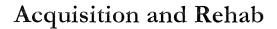
- If the existing household is qualified as eligible more than 120 days after the date the building is acquired
 - 1. The effective date of the Income Certification is the date the household signs the form (all annual requirements are triggered from that date)
 - 2. Use the income limits in effect at the time the household signs the form



Acquisition and Rehab

Note...

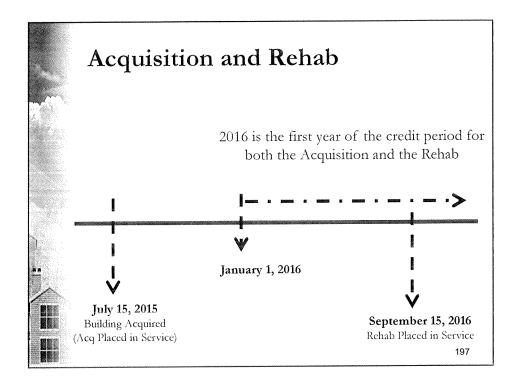
> There is no requirement to qualify existing households as eligible within 120 days of the date of acquisition but all households (both those that existed at the time of acquisition and new move ins after the date of acquisition) must be qualified as eligible by beginning of the first year of the credit period



- * There are 2 different placed in service dates
 - 1. For the Acquisition, it is the date the building is acquired
 - 2. For the Rehab, this is a date selected by the owner during a 24-month period based on the amount of rehab funds expended (an accounting function)

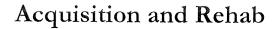
Acquisition and Rehab

- The credit period for the Acquisition and the Rehab run concurrently
 - > Even though the Acquisition is placed in service prior to the Rehab, the credit period cannot start until the Rehab is placed in service
 - > Revenue Procedure 2003-82 addresses Safe Harbors for tenants that are OI when the credit period starts



Acquisition and Rehab

- If an existing household is NOT income eligible at the time of Acquisition (or when the credit period starts), the unit is not eligible for credits until it is occupied with an eligible household unless...
 - 1. The building has an existing allocation of credits and is currently bound by an Extended Use Agreement, AND
 - 2. The household was properly certified as low income at the time of initial occupancy

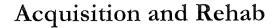


- * Remember....
 - > Until Form 8609 is issued, the owner has not made an election about the project
 - > When there is no election, each building is its own project
 - > If moving household's around from building (Project) to building (Project) to rehab units, the household must be certified as low-income

Acquisition and Rehab

* 8823 Audit Guide, Chapter 4

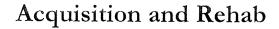
"... any household determined to be income qualified at the time of move-in for purpose of the extended use agreement is a qualified low-income household for any subsequent allocation of IRC §42 credit."



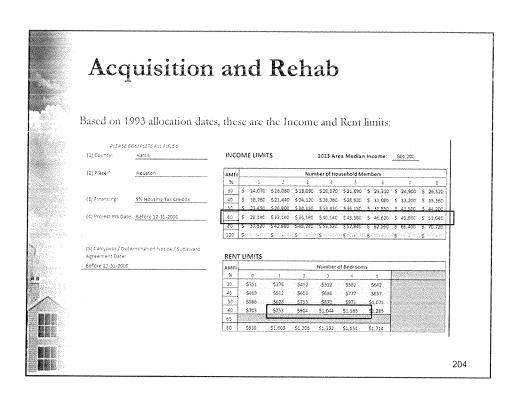
- How it works when the property is bound by an Extended Use Agreement for an existing allocation of credits and receives a new allocation:
 - 1. For the existing households that were initially income eligible, they will continue to be treated as eligible
 - 2. For any new move ins after the building is Acquired, they must be income eligible under the income limits in effect at the time they move in

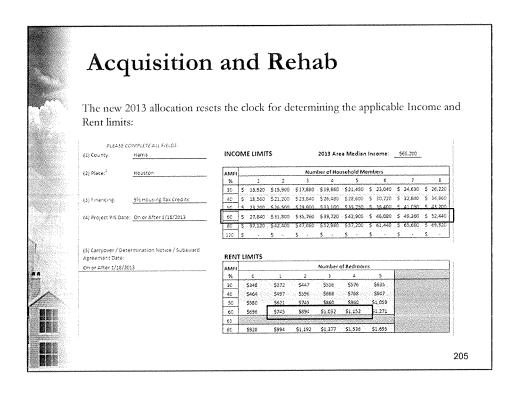
Acquisition and Rehab

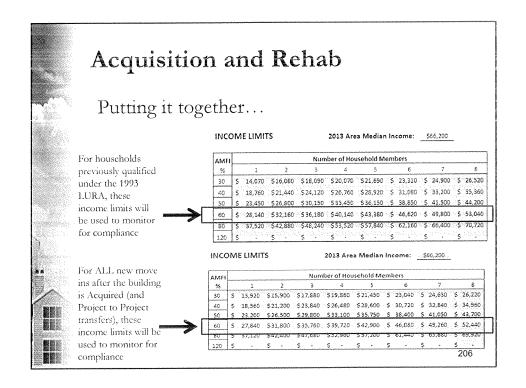
- * As of the new placed in service date, the Department will begin monitoring all rent under the rent limits in effect at the time of the Acquisition for the new allocation of credits
 - This may require a decrease in the tenant's rent
 - > Includes proper calculation of a utility allowance under Treasury Regulation §1.42-10

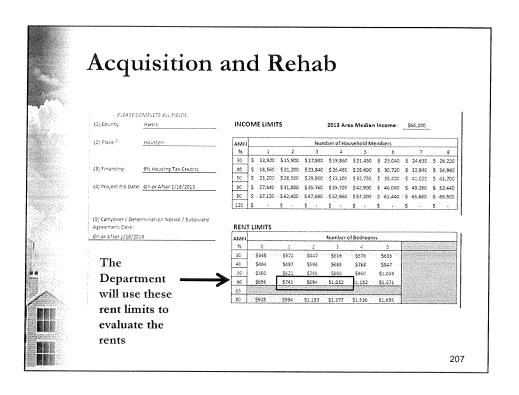


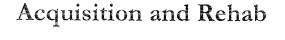
- * Example:
 - Villas of Grove Manor received an allocation of Housing Tax Credits in 1993
 - ➤ In 2013, a new owner received Housing Tax Credits to Acquire and Rehab the property
 - > The property has 1, 2 and 3 bedroom units and all units must be income and rent restricted at 60%



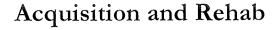








- Remember, the Department monitors properties that have completed the Compliance Period under 10TAC§10.623
- All of the provisions allowed for under this rule will no longer apply and the property will be expected to comply will all aspects of Section 42

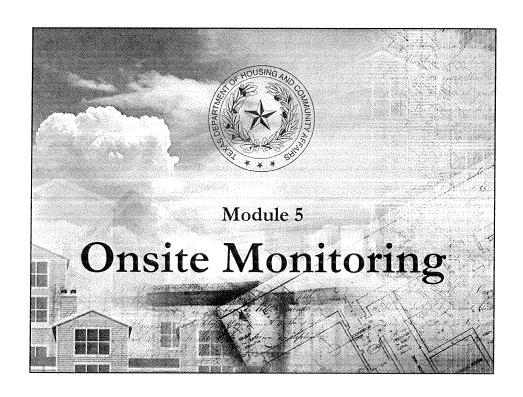


If the rehab combines Housing Tax Credits with any other Federal funds (HOME, NSP, Rural Development, HUD, etc...), be sure to review the Uniform Relocation Act (URA) to ensure compliance

209

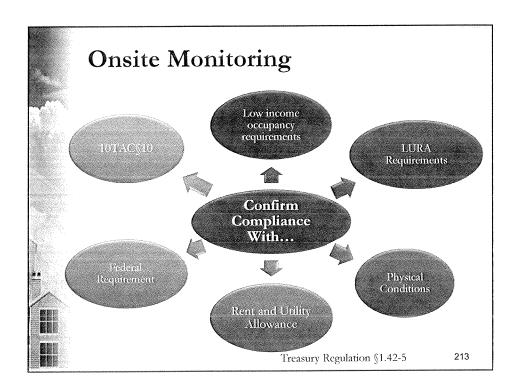
Putting it Together...

- Pandora Springs has 26 low-income units of the total 48 units. Review the USR and, based on how the units are designated, determine the following:
 - ❖ Is the income for each household ≤ the income limit for the household size based on how the household is designated (30% or 60%)
 - ❖ Is the gross rent for each household ≤ the rent limit for the unit size based on how the household is designated (30% or 60%)
 - * What issues of noncompliance do you see?



Onsite Monitoring

- * Notice of Onsite Review
- Preparing for Onsite Review
- Onsite Review
- * Corrective Action Period



Onsite Monitoring

- Notification sent to owner, management company and property via email to the contacts in CMTS
- Unit Status Report ("USR") and Entrance Interview Questionnaire ("EIQ") must be submitted electronically through CMTS

Onsite Monitoring

- * Log into CMTS to:
 - > Access the Attachment System
 - > Update the USR
 - > Complete the EIQ

CMTS

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Onsite Monitoring

Before uploading files, please make sure that you are not creating files with file sizes that are unnecessarily large. For example, a 10 page file should be less than 200 KB in size, not 5 to 10 MB. If you scan to PDF, the resolution on your scanner should be set to 200 dots per inch (DPI) or less. If you convert files from Word or Excel to PDF, please research how to optimize file sizes with the PDF software you use.

Onsite Monitoring * In an effort to best prepare for the onsite, the

- following additional information is requested:

 > Affirmative Marketing Plan
 - > Utility Allowance Documentation
 - > Written Leasing Criteria
 - > Waitlist Policy
 - Form 8609(s) with Part II completed for each building
 - > Supporting documentation for application fee
 - Narrative explaining material participation of HUB and/or Non-Profit (as applicable)

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Review 20% of the low-income households in the Project Compliance Review... Compliance Fees paid? All aspects on 10TAC§10 Subchapter F Appendix A of the LURA

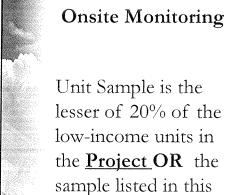


chart (Revenue

Procedure 2016-15)

Number of Low income	Number of Low-Income Units			
Units in the Project	Selected for Inspection or Low-			
***************************************	Income Certification Review			
	(Minimum Unit Sample Size)			
1	1			
2	2			
3	3			
4	4			
5-6	5			
7	6			
8-9	7			
10-11	8			
12-13	9			
14-16	10			
17-18	11			
19-21	12			
22-25	13			
26-29	14			
30-34	15			
35-40	16			
41-47	17			
48-56	18			
57-67	19			
68-81	20			
82-101	21			
102-130	22			
131-175	23			
176-257	24			
258-449	25			
450-1461	²⁶ 219			
1462-9999	27			

Onsite Monitoring

- Exercise: based on the Form 8609 elections for Pandora Springs:
 - > Project 1: How many units will be reviewed?
 - > Project 2: How many units will be reviewed?
- * What happens if each building was its own Project?

Onsite Monitoring

- Years 1-15, the SHFA is required to monitor under Treasury Regulation §1.42-5
 - > Updated February 2016
- * In year 16, the SHFA has some latitude in monitoring
 - > "Post 15" Properties
 - > §10.623

221

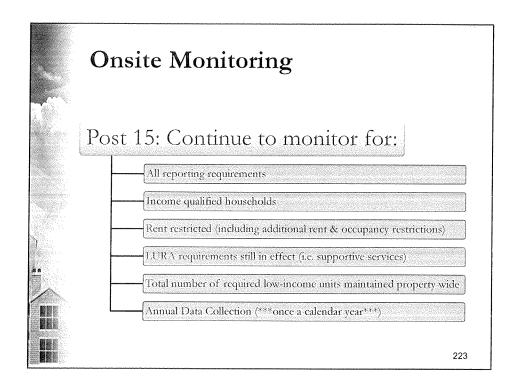
Onsite Monitoring

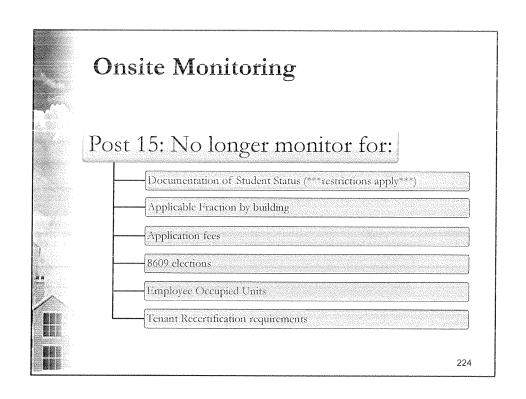
Post 15: File Monitoring

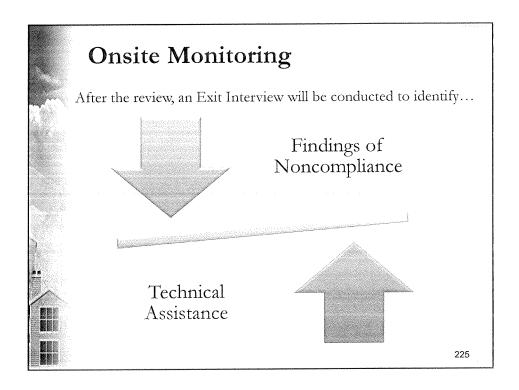
• Frequency and depth based on risk assessment

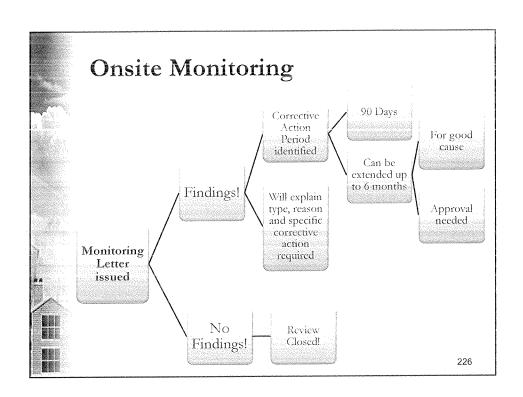
Post 15: Physical Inspection

• Every 3 years











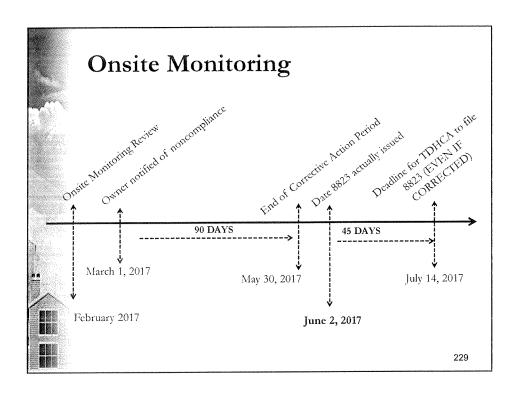
- Preparing your response
 - For findings of noncompliance cited, the Findings Report will identify specific Supplemental Corrective Action required to correct the finding
 - > Submit exactly what is requested
 - > If requested documentation is not available, contact the monitor for further guidance

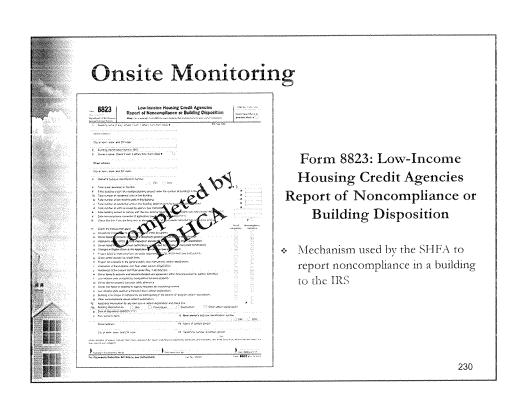
227

Onsite Monitoring

At the end of the Corrective Action Period

- Findings of noncompliance will be reported to the IRS on Form 8823 (when applicable)
 - Must report all noncompliance whether corrected or not corrected

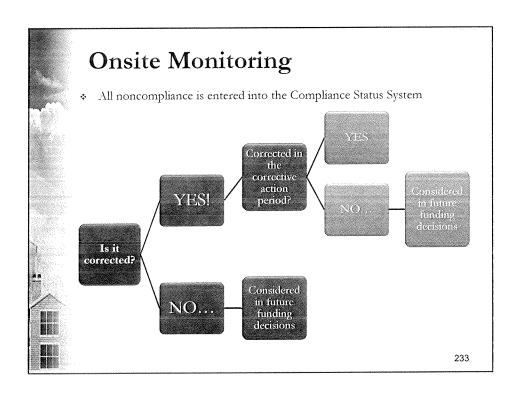


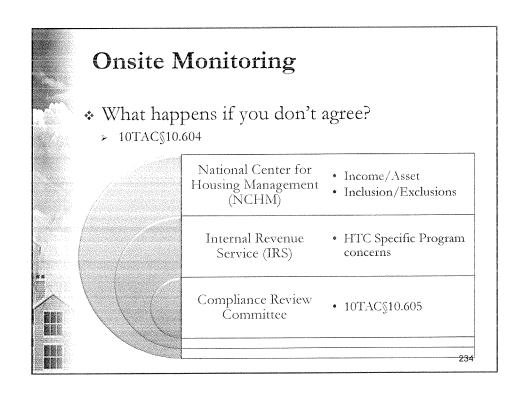


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store	Seem value of Communication of Communica			
11 ab c d d e f g h i j k l m n o p q 12	Additional information for any item above. Attach explanation and c	ome recertification nons (attach explanation) re insocurate certifications consistency rest (see instructions) copplanation) copplanation copplanatio		
	The dates in 1922 and in 1922	Each category has a corresponding Chapt the IRS Guide to Completing Form 8823 23		



- If ALL findings of noncompliance are not corrected during the Corrective Action Period
 - > The Owner will be referred to the Department's Enforcement Committee
 - □ May assess monetary penalties
 - □ See Penalty Table in 10TAC§2.302







AOCR for reporting year 2016 is due April 30, 2017

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Contact Information

TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

221 E. 11th Street, Austin, TX 78701P.O. Box 13941, Austin, TX 78711-3941Toll Free: 800-643-8204

Web: www.tdhca.state.tx.us Email: info@tdhca.state.tx.us

ADDITIONAL REFERENCE MATERIALS

Acronym Key

Certificate of Occupancy

Compliance Profile Report

Affirmative Fair Housing Marketing Plan – Multifamily Housing (HUD form 935.2A)

2015 Carryover Allocation Agreement

Steps for Identifying the Applicable Public Housing Authority

Acronym Key

 \leq = Equal to or less than

 \geq = Equal to or greater than

AEC = Annual Eligibility Certification

AFHMP = Affirmative Fair Housing Marketing Plan

AMI = Area Median Income

AOCR = Annual Owner Compliance Report

BIN = Building Identification Number

CMTS = Compliance Monitoring and Tracking System

CO = Certificate of Occupancy

EIQ = Entrance Interview Questionnaire

FT = Full Time

HCV = Housing Choice Voucher

HERA = Housing and Economic Recovery Act

HH = Household

HTC = Housing Tax Credit

HOH = Head of Household

HOPA = Housing for Older Persons Act

HUB = Historically Underutilized Business

HUD = Housing and Urban Development

IC/TIC = Income Certification/Tenant Income Certification

IRS = Internal Revenue Service

LEP = Limited English Proficiency

LI = Low Income

LURA = Land Use Restriction Agreement

MSA = Metropolitan Statistical Area

MTSP = Multifamily Tax Subsidy Program

NAUR/AUR = Next Available Unit Rule/Available Unit Rule

NSP = Neighborhood Stabilization Program

OI = Over Income

PHA = Public Housing Authority

PIS = Placed in Service

PT = Part Time

QAP = Qualified Allocation Plan

RD = Rural Development

RHS = Rural Housing Services

RUBS = Ratio Utility Billing System

SHFA = State Housing and Finance Agency

Sq. Ft. = Square Foot

TDHCA = Texas Department of Housing and Community Affairs "the Department"

TRRG = Tenants Rights and Resource Guide

TSC = Tenant Selection Criteria

TWC = Texas Workforce Solutions

UA = Utility Allowance

URA = Uniform Relocation Act

USDA = United States Department of Agriculture

USR = Unit Status Report

VAWA = Violence Against Women Act

BUILDING ADDRESS: LEGAL DESCRIPTION: 1501 CIRCLE S- BLDG 1

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 205 Four or Less Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

3560

SPRINKLER SYSTEM:

13R

CODE YEAR:

10

CODE TYPE:

IRC

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR:

Arrow Construction, I.J.C

THIS IS TO CERTIFY THAT THE BUILDING OR STRUCTURE AT THE ADDRESS LISTED ABOVE HAS BEEN INSPECTED FOR COMPLIANCE WITH THE REQUIREMENTS OF THE AUSTIN CITY CODE FOR THE GROUP AND DIVISION OF OCCPANCY LISTED ABOVE.

NEITHER THE ISSUANCE OF THIS CERTIFICATE NOR THE INSPECTIONS MADE SHALL LESSEN THE RESPOSIBILITY OR LIABILITY OF ANY PERSON, FORM OR CORPORATION

OWNING, OPERATING, CONTROLLING OR INSTALLING ANY APPLIANCE OR MATERIAL UPON THE PREMISE, OR DOING ANY WORK WHATSOEVER ON SUCH PREMISE.

THE CITY OF AUSTIN DOES NTO ASSUME ANY RESPONSIBILITY OR LIABILITY BY REASON OF THE INSPECITON OR REINSPECTION OF THE PREMISE; OR THE ISSUANCE OF THIS "CERTIFICATE OF OCCUPANCY"; OR BY ANY REASON OF ANY APPROVAL OR DISAPPROVAL.

BUILDING CODE REVIEWER: Troy Williams

May Wh



BUILDING PERMIT NO. 2015-123452

ISSUE DATE: 1/15/2016

BUILDING ADDRESS:

1501 CIRCLE S-BLDG 2

LEGAL DESCRIPTION:

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 205 Four or Less Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

2966

SPRINKLER SYSTEM:

13R

CODE YEAR:

10

CODE TYPE:

IRC

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR:

Arrow Construction, I.I.C

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BUILDING CODE REVIEWER: Troy Williams

Iray Wh



BUILDING PERMIT NO. 2015-123453

ISSUE DATE:

1/15/2016

BUILDING ADDRESS: LEGAL DESCRIPTION: 1501 CIRCLE S- BLDG 3

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 205 Four or Less Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

2966

SPRINKLER SYSTEM:

13R

CODE YEAR:

10

CODE TYPE:

IBC

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR:

Arrow Construction, LLC

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BUILDING CODE REVIEWER: Troy Williams

May Wh



BUILDING PERMIT NO. 2015-123454

ISSUE DATE:

1/15/2016

BUILDING ADDRESS:

1501 CIRCLE S- BLDG 4

LEGAL DESCRIPTION:

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 205 Four or Less Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

2966

SPRINKLER SYSTEM:

13R

CODE YEAR:

10

CODE TYPE:

IRC

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR:

Arrow Construction, LLC

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BUILDING CODE REVIEWER: Troy Williams

Iray Wh

BUILDING ADDRESS: LEGAL DESCRIPTION: 1501 CIRCLE S-BLDG 5

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 105 Five or More Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

4629

SPRINKLER SYSTEM:

13R

CODE YEAR:

CODE TYPE:

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR: Arrow Construction, IMC

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BUILDING CODE REVIEWER: Troy Williams

Iran Wh



BUILDING PERMIT NO. 2015-123456

ISSUE DATE: 2/1/2016

BUILDING ADDRESS:

1501 CIRCLE S- BLDG 6

LEGAL DESCRIPTION:

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 105 Five or More Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

4863

SPRINKLER SYSTEM:

13R

CODE YEAR:

10

CODE TYPE:

IRC

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR:

Arrow Construction, ILC

THIS IS TO CERTIFY THAT THE BUILDING OR STRUCTURE AT THE ADDRESS LISTED ABOVE HAS BEEN INSPECTED FOR COMPLIANCE WITH THE REQUIREMENTS OF THE AUSTIN CITY CODE FOR THE GROUP AND DIVISION OF OCCPANCY LISTED ABOVE.

NEITHER THE ISSUANCE OF THIS CERTIFICATE NOR THE INSPECTIONS MADE SHALL LESSEN THE RESPOSIBILITY OR LIABILITY OF ANY PERSON, FORM OR CORPORATION

OWNING, OPERATING, CONTROLLING OR INSTALLING ANY APPLIANCE OR MATERIAL UPON THE PREMISE, OR DOING ANY WORK WHATSOEVER ON SUCH PREMISE.

THE CITY OF AUSTIN DOES NTO ASSUME ANY RESPONSIBILITY OR LIABILITY BY REASON OF THE INSPECITON OR REINSPECTION OF THE PREMISE; OR THE ISSUANCE OF THIS "CERTIFICATE OF OCCUPANCY"; OR BY ANY REASON OF ANY APPROVAL OR DISAPPROVAL.

BUILDING CODE REVIEWER: Troy Williams

May Will



BUILDING PERMIT NO. 2015-123457

ISSUE DATE:

3/15/2016

BUILDING ADDRESS: LEGAL DESCRIPTION:

1501 CIRCLE S-BLDG 7

AS RECORDED IN TRAVIS COUNTY RECORDS

PROPOSED OCCUPANCY:

C- 105 Five or More Family Bldg New- New Multi-Family Residential Apts

BUILDING GROUP/DIVISION:

R-2 Apartments, Covents, Dorms

NEW BUILDING SQUARE FOOTAGE:

14830

SPRINKLER SYSTEM:

13R

CODE YEAR:

10

CODE TYPE:

TRO

FIXED OCCUPANCY: 0

NON FIXED OCCUPANCY:

TYPE OF CONSTRUCTION:

New

CONTRACTOR:

Arrow Construction, ILC

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BUILDING CODE REVIEWER: Troy Williams

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Ν

Annual

0

TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS **COMPLIANCE PROFILE** Overview

Property ID #5167

Property Name Pandora Springs

Address 1501 Circle S, Austin, TX-78711

County/MSA TRAVIS/Austin-Round Rock-San Marcos

Owner Pandora Springs, Ltd

Address 10583 I H 49, Burnet, TX-78611

Contact Name Sam Morgan

Contact Phone

Management Co. ABC Property Management Address 11523 Parmer Lane, Austin, TX-78750

Contact Name Wendy Smith

Contact Phone

Total Units 48

Property Type Dwelling Type

Building Config

Year Constructed Last Desk Review Date

Last Onsite Review Date Last RD Onsite Date

Individual/Family Multi Family Residential

Apartment

Rural **HOME 40/50** Program(s):

LIHTC #15129 Year 2015

Onsite Manager Sally Jones

Phone 1 - (512) 353-1234

Noncompliance Score

Elderly Type

7 **Fair Housing Construction Total Bldgs** First Bldg in Svc Date **USR Report Frequency Uncorrected Findings?** Last Bldg in Svc Date

Floors in Tallest Bldg Elevator Ν Ν **Scattered Site** Ν Ν

Name History

Pandora Springs

Other Programs

HOME

City of Austin

Program Requirements

Rent Income HOME(L) BOND HTF AHDP PRES HOME(I) HOME(L) BOND HTF **AHDP** PRES HTC HOME(I) AMI HTC

10

30 10

60 16

16

Rent Election AMI Bond Eligible Tenant Min Set-Asides #Units %

LIHTC 15129 20 60 40

Bedroom Size

Disability Units Special Needs Program Units # Mobility # Vis/Hear Type

Support Services

TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS **BUILDING REPORT**

Printed Date 03/16/17

Property ID # 5167 Property Name Pandora Springs Address <NA>, Austin TX-78711

Program(s):

LIHTC #15129 Year 2015

BIN#	PIS Date	Credit Period (Start Date)	Total Units		LI Units
TX1501201			4		4
TX1501202			4		2
TX1501203			4		1
TX1501204			4		3
TX1501205			6		6
TX1501206			6		3
TX1501207			20		7
Total Bins 7		Total U	nits 48	Total LI Units	26

Affirmative Fair Housing Marketing AFHM Plan - Multifamily Housing

Previous editions are obsolete

U.S. Department of Housing and Urban Development Office of Fair Housing and Equal Opportunity

OMB Approval No. 2529-0013 (exp. 1/31/2010)

1a. Applicant's Name, Address (including City, State & Zip code) & Phor	ne Number 1c. Project/Contract Number	1d. Number of Units		
	1e. Rental Range	1f. Type of Housing		
	From \$	Elderly Family		
		Mixed (Elderly/Disabled)		
	To \$ 1g. Approximate Starting Date	Lancourd		
	Advertising	(
	Occupancy			
	Occupancy			
1b. Development's Name, Location (including City, State and Zip code)	1h. Housing Market Area	1i. Census Tract		
	1j. Managing Agent's Name & Address	(including City, State and Zip Code)		
2. Type of Affirmative Marketing Area (check all that apply) a. Plan New Update Reason for Update: 3. Direction or likely to apply efforts) White	f Marketing Activity (Indicate which grouply for the housing because of its location at	e Asian		
		ian or Other Pacific Islander		
b. Area Hispan White (non-minority) Area Minority Area	ic or Latino Persons with Disabilities	Families with Children		
Other				
The state of the s	e.g. specific ethnic group, religion)	T. Landing and the state of the		
4a. Marketing Program: Commercial Media (Check the type of media Newspapers/Publications Radio TV	Billboards Other (specify)	.		
Name of Newspaper, Radio or TV Station Group	Identification of Readers/Audience	Size/Duration of Advertising		
4b. Marketing Program: Brochures, Signs, and HUD's Fair Housing	g Poster			
(1) Will brochures, letters, or handouts be used to advertise? Yes	No If "Yes", attach a copy or su	ubmit when available.		
(2) For development site sign, indicate sign sizex; Logo	type sizex Attach a ph	otograph of sign or submit when available.		
(3) HUD's Fair Housing Poster must be conspicuously displayed wherev the Rental Office Real Estate Office	rer sales/rentals and showings take place. Model Unit Other (specify)	Fair Housing Posters will be displayed in		

ref. Handbook 8025.1

all requested information.)		***	espondence to be mailed to these groups/organizations.			
	Group	Approximate Date				
Name of Group/Organization	Identification	(mm/dd/yyyy)	Person Contacted (or to be Contacted)			
Address & Phone Number	Method	of Contact	Indicate the specific function the Group/Organization vundertake in implementing the marketing program			
Future markeing Activities Mark the box(e marketing activities to fill vacancies as they been initially occupied. Newspapers/Publications Ra Brochures/Leaflets/Handouts	occur after the projection	ct has 6a. ity Contacts 6b.	erience and Staff Instructions (See instructions) Staff has affirmative marketing experience. No Yes On separate sheets, indicate training to be provided to staff on Federal, State and local fair housing laws and regulations, as well as this AFHM Plan. Attach a copy			
Additional Considerations Attach additional	I sheets as needed.					
Review and Update By signing this form, the ntinued compliance with HUD's Affirmative F	ne applicant agrees air Housing Marke	to review their AFHM ting Regulations (24 0	Plan at least every 5 years and update as needed to CFR 200.620).			
nature of person submitting this Plan & Date	of Submission (mm	/dd/yyyy)				
ame (type or print)						
le & Name of Company						
For HUD-Office of Housing Use	Only	100	For HUD-Office of Fair Housing and Equal Opportunity Use Only			
viewing Official:		Approved	Disapproved (Check One)			
nature & Date (mm/dd/yyyy)		Signature & E	Date (mm/dd/yyyy)			
ne (type or print)		Name (type o	r print)			
9		Title				

2015 CARRYOVER ALLOCATION AGREEMENT

(The Owner named below must be the actual ownership entity, itself, not a General Partner or an Affiliate)

Development								
Name: F	Pandora Spr	ings Apartments (th	e "Develo	opment")		_ TDI	HCA #:	15129
Development Ad Description of L		1501 Circle S		Å				
City: Austin		County	Travis		State:	<u>TX</u>	ZIP:	78711
Development Ty	ype: <u>New</u>	Constructions ²						
Building Identification (BINs) Reserved				TX-15-01201 thro	ugh TX	-15-01	299	

The Texas Department of Housing and Community Affairs (the "Department") hereby issues this Carryover Allocation of 2015 tax credit authority in the annual amount of \$218,000.00³ pursuant to Section 42(h)(1)(E) or (F) of the Internal Revenue Code of 1986, as amended (the "Code"). The allocation is subject to the terms and conditions stated in the Commitment Notice and Carryover Allocation Manual, and all the representations and undertakings set forth in the Application on which the allocation is based, the violation of any of which shall be cause for the cancellation of this Carryover Allocation.

PANDORA SPRINGS LTD, a Texas limited partnership liability company,⁴ (the "Owner") hereby certifies that each building for which this allocation is being made does or will meet the requirements of Section 42(h)(1)(E)(ii) of the Code (for a project which includes one building) or Section 42(h)(1)(F) of the Code (for a project which includes more than one building) and Treasury Regulation 1.42-6. The Owner hereby certifies that no later than the date that is one year after the effective date of the Carryover Allocation, the Owner will have incurred expenditures amounting to more than 10% of \$3,975,000,⁵ which is the Owner's reasonably expected basis in the Development for purposes of Treasury Regulation 1.42-6.⁶ The effective date of the Allocation is the date this Carryover Allocation Agreement is executed by the Department. For the purpose of meeting the requirements of the 2015 Qualified Allocation Plan and Uniform Multifamily Rules (10 TAC Chapters 11 and 10), the Owner agrees that documentation of expenditures comprising more than 10% of said reasonably expected basis will be submitted to the Department by July 1, 2016.

The Owner understands and agrees that this allocation is subject to fulfilling the requirements of the Construction Status Report as set forth in the 2015 Uniform Multifamily Rules, §10.402(h). The Owner agrees to submit promptly to the Department a copy of each inspection report conducted by the lender(s) and/or equity investor as the reports become available.

¹ For multiple sites, reference "Exhibit A" and attach a list of addresses or descriptions of the locations as the exhibit.

² The Development Type must be new construction, rehabilitation or acquisition/rehabilitation, only. Determine the appropriate carryover classification in consultation with your attorney or CPA.

³ The figure entered here should be consistent with the figure reflected in the 2015 HTC Commitment Notice.

⁴ The Development Owner must be legally formed or the carryover allocation is not valid. **DO NOT use the name of a** General Partner, Affiliate or any name other than the name of the organization that is the Development Owner.

⁵ The allocation must be justified by the amount of the reasonably expected basis.

⁶ Treasury Regulation 1.42-6(a)(2) refers to a 6-month period that does not reflect the Code's current one-year period for meeting the 10%- of-basis requirement.

The Owner hereby certifies that each building for which this allocation is made will be placed in service no later than December 31, 2017, and such placement in service shall meet the requirements of the Internal Revenue Service. Upon completion of the Development or any building therein, the Department may undertake, at the expense of the Owner, such inspection(s) and/or financial audit(s) as it deems desirable in order to verify that the Development was constructed or rehabilitated according to the representations contained in the Application and that reported expenditures were actually incurred. The Department also may require that additional work be done if necessary to meet housing quality standards or other deficiencies noted in the inspection.

All owners that receive a 2015 Carryover Allocation must request issuance of IRS Forms 8609 upon the filing of cost certification documentation as required by the Department's Post Carryover Activities Manual, as in effect at the time of filing. The documentation must be filed no later than January 15, following the first year of the credit period. The anticipated first year of the credit period is 2017.

The Owner hereby agrees and acknowledges that all requirements stated in the Post Carryover Activities Manual for receiving IRS Forms 8609 must be met to the satisfaction of the Department before such forms will be issued with respect to the Development. The Owner hereby further agrees and acknowledges that all conditions, restrictions, and obligations in addition to those applicable under Code Section 42, which the Owner undertook in applying for this Carryover Allocation, are incorporated herein and to the extent appropriate, will be reflected in a Declaration of Land Use Restrictive Covenants (the "Declaration") with respect to the Development. Such Declaration will also incorporate provisions requiring compliance with the Internal Revenue Code and with Chapter 2306, Texas Government Code (the "Act"), including but not limited to requirements for: annual reporting and periodic inspections; payments of the fees, charges and expenses of the Department in connection with its monitoring and compliance activities under the Code and the Act; management, operating, maintenance and repair standards for the Development; tenant selection and income certification; limitations on rents, charges, and fees payable by tenants; and development cost controls and management selection. The Owner hereby acknowledges that any rule or requirement applicable to the Development Owner, Application, award, or allocation and any representation made in the Application, as may be amended from time to time, or other materials provided to the Department in connection with the Application may be included in the Declaration and the Development Owner agrees (i) to execute such Declaration in substantially similar form to that provided, subject to such modifications as may be required by the Department, in its reasonable discretion, in order to reflect changes in federal or state law, and policy or program requirements, and (ii) to abide by all the terms and conditions contained in the Declaration. Any failure to comply with the terms of any such conditions, restrictions, or obligations prior to issuance of IRS Forms 8609 with respect to the Development may be cause for cancellation or modification of this Carryover Allocation by the Department and such other action as the Department determines to be appropriate.

The Owner hereby acknowledges that it has thoroughly reviewed and agrees to abide by all terms and conditions stated in the Qualified Allocation Plan and Uniform Multifamily Rules, Commitment Notice, and 2015 Carryover Allocation Procedures Manual. The Owner hereby agrees to the return of any unused credit authority at the time of final allocation should the Department determine that a reduction in the credit amount is appropriate in accordance with the Department's rules and under Section 42(m)(2).

Applicable Percentage Election

The Owner hereby irrevocably elects, pursuant to Section 42(b)(1)(A)(ii) of the Code, to fix the applicable credit percentage for the Development as the percentage prescribed by the Secretary of the Treasury for the month in which this Carryover Allocation Agreement was executed by **BOTH** the Owner and the Department. The Department and the Owner acknowledge that this Carryover Allocation constitutes an agreement binding upon the Department, the Owner, and all successors in interest to the Owner as owners of the Development, subject to compliance by the Owner with the requirements of Section 42 of the Code and the requirements of the Department. Owners are advised to review IRS notice 2008-106 and subsequent changes in law related to the applicable credit percentage.

Eligible Basis Boost

The Department has determined that the Development is not receiving an allocation of credit dollar amount in excess of the amount required for its financial feasibility, and has further determined that the development is eligible for an increase in the eligible basis of the development by up to 30% (a "Basis Boost") as authorized and permitted by Section 42(d)(5)(B) of the Code, and Title 10 of the Texas Administrative Code Section 11.4(c).

Nonprofit Set-Aside

If this box is checked, this Carryover Allocation is being made pursuant to the Department's set-aside of credit authority for "qualified nonprofit organizations" within the meaning of Section 42(h)(5)(C) of the Code. Throughout the Compliance Period applicable to the Development under the Code and the Declaration, such a qualified nonprofit organization shall own an interest in the Development, have "control" of the Development pursuant to Section 11.5(1) of the QAP, and materially participate (within the meaning of Section 469(h) of the Code) in the development and operation of the Development. The qualified nonprofit organization designated to meet such obligation with respect to the Development is PS Venture Property Group, Inc., As of the date hereof, and based solely on representations, covenants, and warranties of the Owner and other information previously submitted to the Department by the Owner, the Department has determined such nonprofit organization not to be "affiliated with or controlled by a forprofit organization" for purposes of Section 42(h)(5)(C)(ii) of the Code. In the event that any such representations, covenants, warranties and/or information is determined to have been false, materially misstated or materially misleading when made, or if subsequent events render such representations, covenants, warranties and/or information false or misleading in any material way, then the Department, at its option, may determine the issue of control with respect to Section 42(h)(5)(C)(ii), and such determination shall be grounds for cancellation of this Carryover Allocation and any and all such other action as the Department may deem appropriate.

Any other transfer of the allocation will be subject to approval by the Department at its discretion and in accordance with 10 TAC §10.406. The Owner hereby agrees and acknowledges that it will request prior written approval from the Executive Director of the Department in writing for any intended transfer of the Development or change in actual control of the Development for which this Carryover Allocation is made prior to such transfer or change in control. Further, any purchaser that intends to acquire the Development with respect to this allocation and to make use of this Carryover Allocation will be required to request

approval from the Department of the intended acquisition of the Development and to supply the Department with any documentation which it may require, in its sole discretion. The approval of any such transfer by the Department does not constitute a representation to the effect that such transfer is permissible under the Code or without adverse consequences hereunder.

The Owner agrees that it will inform and seek the Department's approval for any changes in the number of units, unit mix, unit sizes, design changes or any other material changes to the Development prior to making the changes in accordance with 10 TAC §10.405(a). Unapproved changes may result in the reduction or loss of credits or in the cancellation of this Carryover Allocation. The Owner hereby agrees that the Owner or management company will attend at least five hours of fair housing training on management and leasing issues, and the Architect or Engineer will attend at least five hours of training on fair housing design prior to the deadline for submitting 10% Test documentation.

In issuing this Carryover Allocation, the Department has relied upon the information submitted to it by the Owner. This allocation is conditioned upon satisfying all requirements set forth herein, in the Code and in the Department's Rules, including demonstrating the financial feasibility and long-term viability of the Development. In light of the amount allocated to the Development, Owner may propose changes to Development configuration consistent with the allocation amount, which the Department, in its discretion, may accept, reject or require modifications with respect thereto. If Owners or Affiliates are found to be in violation of any rule regarding the Application or any rule regarding actions performed prior or subsequent to submission of the Application, specifically including actions that would have resulted in the ineligibility of the Owner or Affiliate to participate in the Application process, this Carryover Allocation may be cancelled at the discretion of the Department. The Department makes no representations concerning or guaranteeing the Owner's eligibility to receive the credit stated herein; such determination rests with the Internal Revenue Service based upon the actions and determinations of the Owner in light of all applicable laws, regulations and rulings.

The Owner expressly acknowledges that this Carryover Allocation is subject to downward adjustment in accordance with the Department's rules in connection with the Department's review required by Internal Revenue Code §42(m)(2).

Under penalty of perjury, I certify that individually and on behalf of the Owner, on whose behalf I represent and warrant I am authorized to act, the information and the statements in this Carryover Allocation Agreement are true and accurate.

EXECUTED to be effective as of the last date written below.

DEVELOPMENT OWNER:

Pandora Springs Ltd, a Texas limited partnership

By: Pandora Springs Managers, LLC, a Texas limited liability company, its general partner

By: PS Venture Property Group, Inc. , a Texas limited liability company, its managing member

By:

Sam Morgan, President

Owner's Federal Taxpayer or Employer Identification Number (TIN or EIN): 1 91-1893333

Owner Address: 10583 IH 49 City: Burnet State: TX ZIP: 78611

Email: sam.morgan@abccompanies.com Phone: 512-999-1111 Ext. 109

THE STATE OF TEXAS

§ §

COUNTY OF

BEFORE ME, the undersigned, a Notary Public in and for the State of Texas, on this day personally appeared Name Johnson, known to me to be Member of PS Venture Property Group, LLC, a Texas limited liability company, managing member of Pandora Springs Managers, LLC, a Texas limited liability company, general partner of Pandora Springs, Ltd, a Texas limited partnership, the limited partnership that executed the foregoing instrument, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that the same was the act of said limited partnership, and that he executed the same as the act of such limited partnership for the purposes and consideration therein expressed and in the capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this 27 day of March, 2015

(Seal)

Notary Public, State of Texas



¹ DO NOT use the taxpayer identification number of a General Partner, Affiliate or any organization or Person other than the organization that is the Development Owner.

Acknowledged, agreed, and accepted:

DEPARTMENT:

TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS, a public and official agency of the State of Texas

By:

John Smith, Director of Multifamily Finance

221 E. 11th Street, Austin, Texas 78701

Department Taxpayer Identification Number: 74-2610542

THE STATE OF TEXAS

8

COUNTY OF TRAVIS

BEFORE ME, the undersigned, a Notary Public in and for the State of Texas, on this day personally appeared Margaret L. Holloway, duly authorized representative of the TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS, a public and official agency of the State of Texas, on behalf of such agency.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this

1 day of

. 201

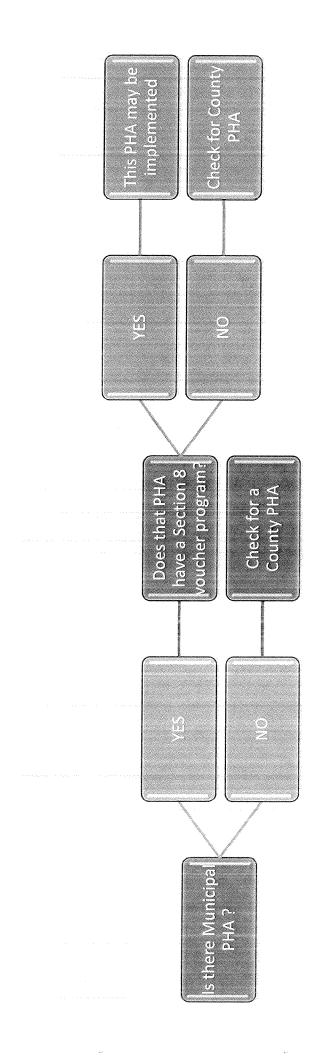
(Seal)

Notary Public, State of Texas



Note: This method cannot be used to establish the utility allowance for the Multifamily Direct Loan ("MFDL") program

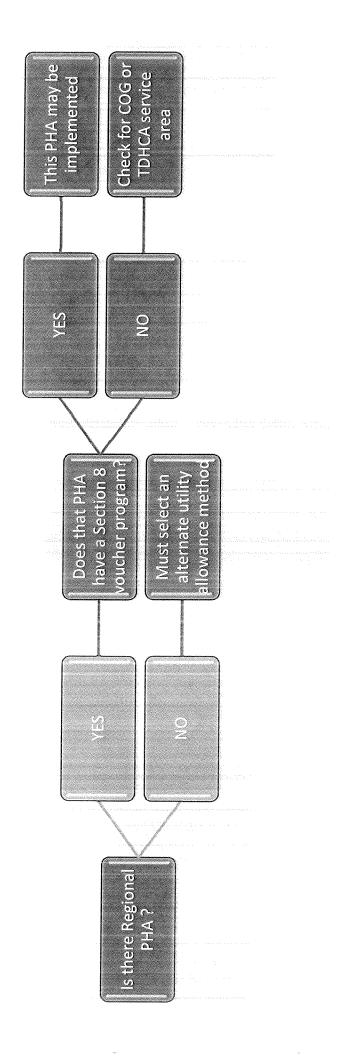
Step 1: To find the applicable Public Housing Authority ("PHA") for your property, you first must determine if there is a Municipal PHA for the city in which your property is located. You can search all Housing Authorities in Texas on the Texas Housing Association website. To determine if a PHA has a Section 8 voucher program, check HUD's PHA Contact Information for Texas. Follow these flow charts to help guide you through the process.



Check for Regional PHA This PHA may be implemented YES 9 Check for a Regional PHA 2 9

Step 2: If you are unable to identify an applicable Municipal PHA, proceed to determining if there is a County PHA:

Step 3: If you are unable to identify an applicable Municipal PHA or County PHA, proceed to determining if there is a Regional PHA:



Note: you must maintain documentation that the PHA is a Regional PHA under Texas Local Government Code, Chapter 392. This is a specific type of Sanization for a Housing Authority and not just that the PHA will send section 8 vouchers to your property.

in which the property is established for the area located must be used The utility allowance created under Texas Local Government Code, Chapter 303 Council of Government ("COG") TDHCA's Housing Choice Voucher Program in Housing Choice Voucher Service Area The property located

Step 4: If you are unable to identify a Regional PHA, you may be eligible to still use this method if...

UTILITY ALLOWANCE EXERCISE

Exercise: Utility Allowance

Utility Allowance Questionnaire

City of Austin HOME Information

City of Austin Housing Authority HCV Utility Allowance Schedules

Unit Status Report

HUD Job Aid for Configuring Buildings and Units

WHAT YOU WILL NEED:

- 1. Utility Allowance Questionnaire
- 2. City of Austin HOME information
- 3. City of Austin Housing Authority HCV Utility Allowance Schedules
- 4. Unit Status Report
- 5. HUD Job Aid for Configuring Buildings and Units

PART 1: WHAT IS THE CORRECT UTILITY ALLOWANCE FOR EACH BUILDING?

ASSUTAR 1. Building 1? PHA ROWHOUSE HOWNHOUSE

2. Building 2? PHA ROWHOUSE / TOWN HOUSE

3. Building 3? CITY OF AUSTIN (HOME) S.F.A.

PHA POWHOUSE/10WWHOUSE

5. Building 5? CITY OF AUSTIN (HOME) L.A.B.
6. Building 6? CITY OF AUSTIN (HOME) LA.B

PHA (HULTI FAMILY WALK-UP)

PART 2: CALCULATE THE UTILITY ALLOWANCE FOR A ONE BEDROOM, 2 BEDROOM, AND THREE BEDROOM UNIT FOR EACH METHOD:

Utility Allowance Method	1 Bedroom	2 Bedroom	3 Bedroom
PHA ROW/TOWN			
CITY OF AUSTIN			

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Utility Allowance Questionnaire

This form must be completed by all owners requesting to switch utility allowance methodologies and when submitting an allowance for annual review. Please contact Cody Campbell with any questions at (512) 475-4603 or cody.campbell@tdhca.state.tx.us. All submissions must be uploaded to the Development's Compliance Monitoring Tracking System ("CMTS") account. When uploading, please be sure to choose "Utility Allowance Documents" in the "Type" dropdown menu. In the description box, please indentify the method (e.g., written local estimate, HUD model) and if it is an initial request or annual review. In the "TDHCA Contact" dropdown menu, please select "Utility Allowance."

1. Name of Development: Pandora Springs and CMTS ID 5167

2. Development address: 1501 Circle S

City: Austin

Zip Code: 78711

3. County in which Development is located: Travis

4. Types of TDHCA Program Funding:

Type of Funding	File Number
HTC	15129

- 5. Type of request:
 - a. List CURRENT utility allowance method and source for utilities that residents pay.

Utility	Source	Effective Date	Methodology
	(e.g. name of utility provider or		
	housing authority)		
Electric	City of Austin Housing Authority	6/1/2016	Public Housing Authority (PHA)

b. List NEW or UPDATED utility allowance method and source for utilities that residents pay.

Utility	Source	Anticipated	Methodology
	(name of utility provider or housing	Effective Date	
(66)	authority)		

- 6. If this request is for the annual review of the current methodology, were the annual review requirements met last year? N/A
 - a. If yes, as of what date?
 - b. If no, please select reason:
- 7. What is the beginning date of the 90 day review period? N/A

- 8. Has the proposed utility allowance been posted in a common area of the Leasing Office for resident review (10TAC§10.614(h))? N/A (PHA request)
 - a. As of what date:
- 9. What is the intended effective date? List date rents next due after end of 90 day notification period
- Does the Development receive assistance from USDA- Rural Development (formerly Farmer's Home Administration (FmHa))?
 No
 - a. If yes, do any of the residents in the Development receive Rental Assistance from the USDA?
- 11. Is the building a HUD-regulated building? No
- 12. Does the Development have HOME funds from TDHCA or any other Participating Jurisdiction ("PJ")? Yes
 - a. If yes, what PJ awarded the HOME funds? City of Austin Community Revitalization Division
 - b. Does each building have at least one (1) HOME unit? No
 - c. If no, which buildings have these HOME units? buildings 3, 5 and 6
- 13. What is the Building Configuration? (if there are multiple building types, indicate below)
 - a. Building Type 1: Garden and High Rise Apartments
 - b. Building Type 2: Fourplex
 - c. Building Type 3: Townhouse
- 14. Utility information:

	Who Pays? (must answer for all unlines)	Is Utility paid to or Through the Owner?	If paid to or through owner, list billing type:	
Electric	Resident Pays	Yes	Actual Consumption	
Gas	Not Applicable	N/A	N/A	
Water/Sewer	Owner Pays	N/A	N/A	
Trash Collection	Owner Pays	N/A	N/A	
The property has:	individua 🔲	l hot water heaters	☐ boiler system	
The stoves in the un	nit are:	gas	⊠ electric	
The units are heated	l by:	gas	⊠ electric	
The units are cooled	l by:	evapor	ative 🛭 electric	
If individual hot wa	ter heaters, they are	e: gas	⊠ electric	

1	COLLEGE	COCCIIICITAGOII	Summeed	W1(11	emi	request.

a.	Current UA sources (ex: last year's approval letter from TDHCA or PHA schedule)
b.	New/Updated UA sources (ex: letter from utility provider, HUD model & back up, PHA schedule, etc)
c.	Posted Notice to Residents (not needed if PHA request)

Wendy Smith	February 13, 2017
Completed By	Date
Compliance Manager	ABC Property Management
Title	Company Name

City of Austin

Community Revitalization Division

February 1, 2017

Sam Morgan
Pandora Springs, LLC
sam.morgan@abccompanies.com

RE: Pandora Springs (Austin, Texas)- Utility Allowance for City of Austin HOME Program

Dear Mr. Morgan,

The City of Austin's Community Revitalization Division receives the HOME Investment Partnership Grant ("HOME") from the U.S. Department of Housing and Urban Development ("HUD"). In accordance with the 24 CFR §92.252, for HOME rental developments, the utility allowance has been established using the HUD Utility Schedule Model ("HUSM").

Please see the attached HUSM that has been calculated for Pandora Springs. This is the approved utility allowance for the HOME rental units under the City of Austin effective <u>March 1, 2017</u>. Please note, there are two (2) schedules attached; one for Apartments (5+ units) and the other for Single Family Attached (Four Plex).

Sincerely,

Lisa Burns

Manager, Community Revitalization Division

William.burns@coa.org

Allowances for Tenant-Furnished Utilities and Other Services

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Locality		Green Discount			Unit Ty	pe				Date (mm/dd/yyyy
Pandora Sprir	ngs	None	None			le Family	Atta	ched	(4Plex)	2/1/2017
Utility or Service					٨	Monthly Dollar	Allov	vances		***************************************
		0 BR		1 BR		2 BR		3 BR	4 BR	5 BR
Space Heating	Natural Gas		\$	-	\$	+	\$	-		
	Bottled Gas		\$	-	\$	-	\$	-		
	Electric Resistance		\$	22.23	\$	25.99	\$	29.22		
	Electric Heat Pump		\$	_	\$	-	\$	-		
	Fuel Oil		\$	-	\$	-	\$	-		
Cooking	Natural Gas		\$	_	\$	-	\$	-		
	Bottled Gas		\$	-	\$	-	\$	-		
	Electric		\$	3.43	\$	4.96	\$	6.50		
	Other		\$	-	\$	-	\$	- 1		
Other Electric			\$	16.35	\$	22.75	\$	29.15		
Air Conditioning			\$	13.54	\$	26.25	\$	40.09		
Water Heating	Natural Gas		\$	•	\$	-	\$	~		
	Bottled Gas		\$	_	\$	-	\$	-	***************************************	
	Electric		\$	9.64	\$	14.23	\$	21.54		
	Fuel Oil		\$	-	\$	-	\$	-		
Water			\$	-	\$	•	\$	-		
Sewer			\$	-	\$	-	\$	-		
Trash Collection			\$	**	\$	-	\$	-		
Range/Microwave			\$	_	\$	-	\$	-		
TOTAL			\$	65.19	\$	94.18	\$	126.50		
TOTAL ALLOWAN	CE (rounded up)		\$	66.00	\$	95.00	\$	127.00		

Allowances for Tenant-Furnished Utilities and Other Services

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Locality		Green Discount		Green Discount						Date (mm/dd/yyyy
Pandora Sprir	ngs	None				er Apartm	ent	Bldgs. (5+ ι	ınits)	2/1/2017
Utility or Service					٨	Monthly Dollar	Allov	ances	***************************************	
		0 BR		1 BR		2 BR	-	3 BR	4 BR	5 BR
Space Heating	Natural Gas		\$	_	\$	-	\$	-		
	Bottled Gas		\$	-	\$	-	\$	-		
	Electric Resistance		\$	17.32	\$	20.51	\$	23.04	***************************************	
	Electric Heat Pump		\$	-	\$	-	\$	av .		
	Fuel Oil	1	\$	_	\$	-	\$	-		
Cooking	Natural Gas		\$	_	\$	*	\$	-		
	Bottled Gas		\$		\$	-	\$	-		
	Electric		\$	3.43	\$	4.96	\$	6.49		
	Other		\$	_	\$	-	\$	-		
Other Electric			\$	12.93	\$	17.99	\$	23.05		
Air Conditioning	P		\$	12.28	\$	20.40	\$	27.77		
Water Heating	Natural Gas		\$	-	\$	-	\$	-		
	Bottled Gas		\$	-	\$	•	\$	-		
	Electric		\$	7.71	\$	9.84	\$	14.56		
	Fuel Oil		\$	-	\$	-	\$	-		
Water			\$	-	\$	-	\$	-		
Sewer			\$	*	\$	-	\$	-		
Trash Collection	1-4 a 6-3 band a se di di Pamera mana mang mang mang mang mang mang man		\$	-	\$		\$	-		
Range/Microwave			\$	-	\$		\$	-		
TOTAL			\$	53.67	\$	73.69	\$	94.90		
TOTAL ALLOWANCE (rounded up)		\$	54.00	\$	74.00	\$	95.00			

(exp. 09/30/2017)

Services Date (06/01/2016) Locality: Housing Authority of the City of Unit Type: Multi-Family Elevator Austin, TX Utility or Service Monthly Dollar Allowances 0 BR 1 BR 2 BR 3 BR 4 BR 5 BR Heating a. Natural Gas \$3.00 \$4.00 \$4.00 \$5.00 \$6.00 \$6,00 Bottle Gas/Propane Electric \$5.00 \$6.00 \$8.00 \$9.00 \$10.00 \$12.00 d. Oil / Other Cooking Natural Gas \$2.00 \$2.00 \$2.00 \$3.00 \$4.00 \$4.00 Bottle Gas/Propane b. Electric \$4.00 \$5.00 \$6.00 \$7.00 \$8.00 \$10.00 Other Electric (Lights, Appliances, & Monthly Fee) \$26,00 \$47.00 \$24.00 \$32.00 \$37.00 \$42.00 Air Conditioning \$10.00 \$15.00 \$21.00 \$8.00 \$27.00 \$32.00 \$4.00 \$5.00 \$7.00 Water Heating Natural Gas \$9.00 \$10.00 \$11.00 Bottle Gas/Propane Electric \$8.00 \$10.00 \$14.00 \$18.00 \$20.00 \$22,00 C. d. Oil / Other Water \$53.00 \$45.00 \$45.00 \$61.00 \$69.00 \$77.00 Sewer \$78.00 \$80.00 \$98.00 \$117.00 \$135.00 \$154.00 Trash Collection \$25.00 \$26.00 \$25.00 \$26.00 \$31.00 \$31.00 Range / Microwave Tenant-supplied \$12.00 \$12.00 \$12.00 \$12.00 \$12.00 \$12.00 Refrigerator Tenant-supplied \$13.00 \$13.00 \$13.00 \$13.00 \$13.00 \$13.00 Other--Monthly Gas Fee \$15.61 specify: \$16.00 \$16.00 \$16.00 \$16.00 \$16.00 \$16.00 Utility or Service **Actual Family Allowances** per month cost To be used by the family to compute allowance. Complete below for the actual unit | Heating rented. Cooking \$ Name of Family Other Electric \$ \$ Air Conditioning Water Heating Address of Unit Water \$ \$ Sewer Trash Collection \$ \$ Range / Microwave Refrigerator \$ Other \$ Number of Bedrooms Other \$ Total \$



Office of Public and Indian Housing

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S	c		v	ı	u	C	3

Ī.	sing Authority of the Cit	y of	Jnit Type:	Multi-Famil	y/Walkup	Date (06/01/2	2016)
Austin, TX		· L					
Utility or Service	9	0 BR	1 BR	Monthly Dolla		I 400 I	C DD
Heating	a. Natural Gas	\$3.00	\$4.00	 	3 BR \$5.00	4 BR \$6.00	5 BR \$6.0
neating		\$3.00	\$4.00	\$4.00	\$5.00	\$6.00	Φ 0.υ
	b. Bottle Gas/Propane	<u> </u>	<u>***</u>	00.00	<u> </u>	040.00	0400
	c. Electric	\$5.00	\$6.00	\$8.00	\$9.00	\$10.00	\$12.0
	d. Oil / Other			40.00		4	
Cooking	a. Natural Gas	\$2.00	\$2.00	\$2.00	\$3.00	\$4.00	\$4.0
	b. Bottle Gas/Propane			ļ			***************************************
	c. Electric	\$4.00	\$5.00	 	\$7.00	\$8.00	\$10.0
Other Electric (L	ights, Appliances, & Monthly Fee)	\$24.00	\$26.00	\$32.00	\$37.00	\$42.00	\$47.0
Air Conditioning		\$8.00	\$10.00	\$15.00	\$21.00	\$27.00	\$32.0
Water Heating	a. Natural Gas	\$4.00	\$5.00	\$7.00	\$9.00	\$10.00	\$11.0
	b. Bottle Gas/Propane						
	c. Electric	\$8.00	\$10.00	\$14.00	\$18.00	\$20.00	\$22.0
	d. Oil / Other						
Water		\$45.00	\$45.00	\$53.00	\$61.00	\$69.00	\$77.0
Sewer		\$78.00	\$80.00	\$98.00	\$117.00	\$135.00	\$154.0
Trash Collection		\$25.00	\$25.00	\$26.00	\$26.00	\$31.00	\$31.0
Range / Microwa	ave Tenant-supplied	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.0
Refrigerator Te	enant-supplied	\$13.00	\$13.00	\$13.00	\$13.00	\$13.00	\$13.0
Other							
specify:	Monthly Gas Fee \$15.61	\$16.00	\$16.00	ļ	\$16.00	\$16.00	\$16.0
Actual Family				Utility or	Service	per mon	th cost
To be used by the rented.	family to compute allowance. Compl	ete below for the	e actual unit			\$	
Name of Family				Cooking Other Electric	·	\$	
realite of a anning				Air Conditionin	·····	\$	PROCESSO CONTRACTOR AND
				Water Heating		\$	VIII managangangangangangangangangangangangang
Address of Unit				Water	7	\$	
				Sewer	anonnalizanos essentiata ao no este es accessos es escueles es	\$	***************************************
				Trash Collecti	on	\$	
				Range / Micro	wave	\$	
				Refrigerator		\$	
				Other		\$	
Number of Bedroo	ms			Other		\$	
				Total		\$	



Allowances for Tenant Furnished Utilities and other

U.S. Department of Housing and Urban OMB Approval No. 2577-0169 Development

Office of Public and Indian Housing

(exp. 09/30/2017)

Services

Locality: Hou Austin, TX	sin	g Authority of the Ci	ty of	Unit Type: Townho	Row Hou	se/	Date (06/01/2016)	
Utility or Servic					Monthly Dolla	r Allowances		
	-		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a.	Natural Gas	\$7.00	\$9.00	\$9.00	\$10.00	\$11.00	\$12.00
	b.	Bottle Gas/Propane						
	C.	Electric	\$8.00	\$9.00	\$11.00	\$13.00	\$14.00	\$16.00
	d.	Oil / Other		Alla Carron Control Con		***************************************		The second secon
Cooking	a.	Natural Gas	\$2.00	\$2.00	\$2.00	\$3.00	\$4.00	\$4.00
	b.	Bottle Gas/Propane						
	C.	Electric	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$10.00
Other Electric (I	ights,	Appliances, & Monthly Fee)	\$24.00	\$26.00	\$32.00	\$37.00	\$42.00	\$47.00
Air Conditioning			\$13.00	\$15.00	\$20.00	\$25.00	\$30.00	\$35.00
Water Heating	a.	Natural Gas	\$4.00	\$5.00	\$7.00	\$9.00	\$10.00	\$11.00
	b.	Bottle Gas/Propane		*1		, 1,		***************************************
		Electric	\$8.00	\$10.00	\$14.00	\$18.00	\$20.00	\$22.00
	d.	Oil / Other	-		,		,	,
Water			\$45.00	\$45.00	\$53.00	\$61.00	\$69.00	\$77.00
Sewer	totaliinideksistööniusiduu		\$78.00	\$80.00	\$98.00	\$117.00	\$135.00	\$154.00
Trash Collection)		\$25.00	\$25.00	\$26.00	\$26.00	\$31.00	\$31.00
Range / Microwave Tenant-supplied		\$12.00	\$12.00		\$12.00	\$12.00	\$12.00	
Refrigerator Tenant-supplied		\$13.00	\$13.00	-	\$13.00	\$13.00	\$13.00	
Other								
specify:	Mon	thly Gas Fee \$15.61	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00
Actual Family Allowances				Utility or	Service	per mon	th cost	
l o be used by the rented.	famil	y to compute allowance. Compl	ete below for ti	he actual unit	Heating		\$	
	-			ivierisminuminism remenomenocum concentrations.	Cooking Other Electric		\$	***************************************
Name of Family					Air Conditioning		\$ \$	
							\$ \$	
Address of Unit	***************************************		······································		Water Heating Water		\$	
					Sewer		\$	***************************************
					Trash Collection		\$	***************************************
					Range / Micro		\$	
					Refrigerator		\$	White the contract of the cont
					Other		\$	***************************************
lumber of Bedroo	ms				Other		\$	Millioteles en conscionamente de la escolar
					Total		\$	

Office of Public and Indian Housing

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·	c	ıv		·	c	3

Locality: Hou Austin, TX	sing Authority of the Ci	ty of	Unit Type: Duplex	Semi-Det	ached/	Date (06/01/2	2016)
Utility or Service		www.com.com.com.com.com.com.com.com.com.com		Monthly Dolla	r Δllowances		
Clinty or Gervice	5	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	\$7.00	\$9.00	\$9.00	\$10.00	\$11.00	\$12.00
	b. Bottle Gas/Propane						
	c. Electric	\$8.00	\$9.00	\$11.00	\$13.00	\$14.00	\$16.00
	d. Oil / Other		AND THE PROPERTY OF THE PROPER				WARNESS CONTRACTOR CON
Cooking	a. Natural Gas	\$2.00	\$2.00	\$2.00	\$3.00	\$4.00	\$4.00
	b. Bottle Gas/Propane		***************************************				
	c. Electric	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$10.00
Other Electric (L	ights, Appliances, & Monthly Fee)	\$24.00	\$26.00	\$32.00	\$37.00	\$42.00	\$47.00
Air Conditioning		\$13.00	\$15.00		\$25.00	\$30.00	\$35.00
Water Heating	a. Natural Gas	\$4.00	\$5.00	 	\$9.00	\$10.00	\$11.00
	b. Bottle Gas/Propane						***************************************
	c. Electric	\$8.00	\$10.00	\$14.00	\$18.00	\$20.00	\$22.00
	d. Oil / Other	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
Water	·	\$45.00	\$45.00	\$53.00	\$61.00	\$69.00	\$77.00
Sewer		\$78.00	\$80.00	\$98.00	\$117.00	\$135.00	\$154.00
Trash Collection	1	\$25.00	\$25.00	\$26.00	\$26.00	\$31.00	\$31.00
Range / Microwave Tenant-supplied		\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
Refrigerator Tenant-supplied		\$13.00	\$13.00	\$13.00	\$13.00	\$13.00	\$13.00
Other					anaziro de industria de Vilo de accombendire l'encompose puncipa		
specify:	Monthly Gas Fee \$15.61	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00
Actual Family				Utility or	Service	per mor	ith cost
To be used by the rented.	family to compute allowance. Comp	lete below for i	the actual unit			\$	
Name of Family				Cooking Other Electric		\$	
ivanie or ranniy				Air Conditioni		\$	
			:	Water Heating	******************************	\$	Ministration of the second of
Address of Unit			(Charlistophic bergindukarken kun brunden berlen ild albahanna daga	Water	<u> </u>	\$	**************************************
				Sewer		\$	www.www.comenter.comenter.com
				Trash Collect	on	\$	
				Range / Micro	wave	\$	V-10-10-10-10-10-10-10-10-10-10-10-10-10-
				Refrigerator		\$	
	og Balanco de Albeidge om melesjohner svejeldegen komme den de som engeljekeligt beledgigt og de groep belegen op de som en de			Other		\$	
Number of Bedroo	oms			Other		\$	
Seal or				Total		\$	



Allowances for Tenant Furnished Utilities and other

U.S. Department of Housing and Urban OMB Approval No. 2577-0169 Development
Office of Public and Indian Housing

(exp. 09/30/2017)

Services

	sing Authority of the Ci	ty of	Unit Type:	_	mily	Date (06/01/2	(016)
Austin, TX			Detache	d House			
Utility or Service	е			Monthly Dolla	r Allowances		
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	\$9.00	\$10.00	\$11.00	\$12.00	\$13.00	\$14.0
	b. Bottle Gas/Propane						
	c. Electric	\$10.00	\$12.00	\$14.00	\$15.00	\$17.00	\$18.0
	d. Oil / Other						
Cooking	a. Natural Gas	\$2.00	\$2.00	\$2.00	\$3.00	\$4.00	\$4.0
	b. Bottle Gas/Propane						
	c. Electric	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$10.0
Other Electric (I	_ights, Appliances, & Monthly Fee)	\$24.00	\$26.00	\$32.00	\$37.00	\$42.00	\$47.0
Air Conditioning		\$12.00	\$14.00	\$22.00	\$30.00	\$39.00	\$49.0
Water Heating	a. Natural Gas	\$4.00	\$5.00	\$7.00	\$9.00	\$10.00	\$11.0
	b. Bottle Gas/Propane						
	c. Electric	\$8.00	\$10.00	\$14.00	\$18.00	\$20.00	\$22.0
	d. Oil / Other						
Water		\$34.00	\$34.00	\$42.00	\$68.00	\$81.00	\$93.0
Sewer		\$57.00	\$59.00	\$74.00	\$89.00	\$104.00	\$119.0
Trash Collection	1	\$25.00	\$25.00	\$26.00	\$26.00	\$31.00	\$31.0
Range / Microwave Tenant-supplied		\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.0
Refrigerator Tenant-supplied		\$13.00	\$13.00	\$13.00	\$13.00	\$13.00	\$13.0
Other			and and one of the forest transmission was and the control of the				***************************************
specify:	Monthly Gas Fee \$15.61	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00	\$16.0
Actual Family				Utility or	Service	per mon	th cost
To be used by the rented.	family to compute allowance. Comp	lete below for t	he actual unit			\$	
				Cooking		\$	
Name of Family				Other Electric		\$	
				Air Conditionir Water Heating		\$	
Address of Unit			***************************************	Water	f	\$	POWENIA DE PRINCIPA DE PRINCIP
				Sewer		\$	***************************************
				Trash Collection	on	\$	**************************************
				Range / Micro		\$	
				Refrigerator	······································	\$	***************************************
				Other		\$	
Number of Bedroo	oms	***************************************		Other		\$	
				Total		\$	



Services

Locality: Hou Austin, TX	sing Authority of the Ci	ity of	Unit Type: Mobile H	Manufactu Iome	ıred/	Date (06/01/2	2016)
Utility or Service	2			Monthly Dollar	Allowances		***************************************
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	\$7.00	\$9.00	\$9.00	\$10.00	\$11.00	\$12.00
	b. Bottle Gas/Propane						
	c. Electric	\$11.00	\$13.00	\$14.00	\$14.00	\$14.00	\$15.00
	d. Oil / Other						
Cooking	a. Natural Gas	\$2.00	\$2.00	\$2.00	\$3.00	\$4.00	\$4.00
	b. Bottle Gas/Propane						
	c. Electric	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$10.00
Other Electric (L	ights, Appliances, & Monthly Fee)	\$24.00	\$26.00	\$32.00	\$37.00	\$42.00	\$47.00
Air Conditioning		\$10.00	\$12.00	\$19.00	\$26.00	\$33.00	\$40.00
Water Heating	a. Natural Gas	\$4.00	\$5.00	\$7.00	\$9.00	\$10.00	\$11.00
	b. Bottle Gas/Propane						
	c. Electric	\$8.00	\$10.00	\$14.00	\$18.00	\$20.00	\$22.00
	d. Oil / Other				***************************************		***************************************
Water		\$34.00	\$34.00	\$42.00	\$68.00	\$81.00	\$93.00
Sewer		\$57.00	\$59.00	\$74.00	\$89.00	\$104.00	\$119.00
Trash Collection)	\$25.00	\$25.00	\$26.00	\$26.00	\$31.00	\$31.00
Range / Microwave Tenant-supplied		\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
Refrigerator Tenant-supplied		\$13.00	\$13.00	\$13.00	\$13.00	\$13.00	\$13.00
Other	тическом менене ососновного сом объекто в поменен в		***************************************				
specify:	Monthly Gas Fee \$15.61	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00	\$16.00
Actual Family				Utility or S	Service	per mor	ith cost
To be used by the rented.	family to compute allowance. Comp	lete below for t	he actual unit	MATERIAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS	***************************************	\$	***************************************
			***************************************	Cooking	***************************************	\$	
Name of Family				Other Electric	monorman was no new work and the second	\$	
				Air Conditionir		\$	
Address of Unit				Water Heating		\$	
Address of Offic				Water		\$	
				Sewer Trash Collection		\$ \$	
				Range / Micro		\$	
				Refrigerator		\$	***************************************
				Other		\$	
Number of Bedroo	ms	inamental de la composição de la composi		Other		\$	
				Total		\$	



/13/17

COMPLIA. REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

>-

NSP BOND HTC Exch HTF HOME AHDP HTC

BIN #: TX1501201

Building #:

TCAP

(LIHTC Only)

ANNUAL INCOME LAST NAME

MOVE OUT DATE MOVE IN DATE UNIT #

05/12/2016

2 04/07/2016

3 06/15/2016

4 12/09/2016

UTILITY ALLOW. TENANT PAID RENT

HH SIZE RE CERT

UNIT QUALIFICATIONS

NEEDS REO. MEETS SPECIAL

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SPECIAL NEEDS REQ.

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HTC: Mkt

Income Rent

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HTC: Mkt

Income HTC: 60 Rent HTC: 60

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Income HTC: Mkt Rent HTC: Mkt

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03/03/2017

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MEETS

UNIT QUALIFICATIONS

HH SIZE

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HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

TENANT PAID RENT

ANNUAL INCOME

LAST NAME

MOVE OUT DATE

DATE

Z

MOVE

LINO

5 03/03/2016

6 06/16/2016

7 02/10/2016

2

Building #:

BIN #: TX1501202

(LIHTC Only)

Z

HTC: 60 HTC: 60

Income Rent

Income HTC: 30 Rent HTC: 30

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04/07/2016

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Income HTC: 60 Rent HTC: 60

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12/09/2016

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TIC DATE

05/12/2016

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BR s

HOUSING ASSIST. PAYMENT

1119

COMPLIANCE REPORT UNIT STATUS REPORT

03/13/17

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP NSP BOND HTC Exch HIF HOME AHDP HTC

BIN #: TX1501203

 $^{\circ}$

Building #:

(LIHTC Only)

LAST NAME

MOVE OUT DATE MOVE IN DATE # LINO

TIC DATE

BR HOUSING ASSIST. PAYMENT UTILITY ALLOW. TENANT PAID RENT ANNUAL INCOME

RE CERT

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05/01/2016

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01/16/2017

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11 01/16/2016

10 05/01/2016

12 02/15/2016

9 02/24/2017

HH SIZE

UNIT QUALIFICATIONS

MEETS SPECIAL NEEDS REQ. Income HTC: Mkt
Rent HTC: Mkt Income HTC: Mkt Rent HTC: Mkt Income HTC: OI Rent HTC: 60

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Income HTC: Mkt Rent HTC: Mkt

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02/15/2017

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777

61550

BIN #: TX1501204 (LIHTC Only)

MOVE DATE

LINO

Building #: 4

ANNUAL INCOME LAST NAME MOVE OUT DATE

HOUSING ASSIST. PAYMENT UTILITY ALLOW.

TENANT PAID RENT

TIC DATE

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COMPLIA. REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP NSP BOND HTC Exch HITE HOME AHDP HTC

BIN #: TX1501205

5 Building #:

(LIHTC Only)

MOVE IN DATE

UNIT #

ANNUAL INCOME LAST NAME

MOVE OUT DATE

RE CERT TIC DATE

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UTILITY ALLOW.

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RE CERT TIC DATE

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UTILITY ALLOW.

TENANT PAID RENT

ANNUAL INCOME

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MOVE OUT DATE

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BIN #: TX1501206

(LIHTC Only)

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MEETS SPECIAL NEEDS REQ.

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COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

BOND HTC Exch NSP HTF AHDP HOME HTC

TCAP

BIN #: TX1501207 (LIHTC Only)

Building #: 7

MOVE IN DATE # LIND

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HH SIZE

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MEETS SPECIAL NEEDS REQ.

rev 11/13/2009

COMPLIA REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP BOND HTC Exch NSP HTF HOME AHDP HTC

Building #: 7

BIN #: TX1501207 (*LIHTC Only*) MOVE IN DATE UNIT#

TENANT PAID RENT ANNUAL INCOME LAST NAME MOVE OUT DATE

UTILITY ALLOW.

HH SIZE RE CERT TIC DATE # BR s HOUSING ASSIST. PAYMENT

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Unit Status Report - Statistics Page Part 1 - Demographics

Ethnicity

Race

Other

Part 2 - Accessibility

Mobility Not Equipped Vision or Hearing Impairment

44

Part 3 - Qualification Program Qualification Units

22.92% 29.17% 45.83% 02.08% Percent 14 22 Program Qualification Market 30 09 TO HTC HTC HTC HTC

Part 4 - Additional Assistance

HUD Housing Choice Voucher (HCV), tenant-based2

4.17%

Part 5 - Special Needs Unit Count

Department of Housing and Urban Development Office of Public and Indian Housing (PIH)



Public and Indian Housing Information Center (PIC-IMS) Job Aid for Configuring Buildings and Units

December 19, 2007

PHA users have raised questions concerning how to configure their buildings in PIC-IMS Development submodule. An improper configuration can make it impossible to enter addresses correctly. In addition, having the wrong configuration can affect Capital Funding.

Rev: 12/19/2007

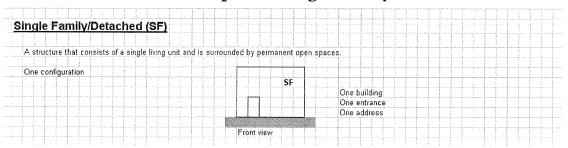
When the questions below refer to an "entrance", it means the primary or public entrance (ignore side and back doors not intended for public use).

The key to choosing which type of building you have in PIC is to answer the following questions and look at the specified example:

- 1. Does the building have more than one unit?
 - a. Yes: Go to question 2.
 - b. No: Go to Example A" (Single Family).
- 2. Does the physical address use an apartment or unit number?
 - a. Yes: Go to question 3.
 - b. No: Go to question 5.
- 3. Does the building have one primary front entrance to the units?
 - a. Yes: Go to question 4.
 - b. No: Go to question 6.
- 4. Does the building use an elevator for tenants?
 - a. Yes: Go to Example "E" (Elevator Structure).
 - b. No: Go to Example "D" (Multi-family/Walkup).
- 5. Does the building have more than two units?
 - a. Yes: Go to Example "C" (Row/Townhouse).
 - b. No: Go to Example "B" (Semi-Detached).
- 6. Does the building have more than two units?
 - a. Yes: Go to Example "G" (Row/Townhouse with apartment numbers).
 - b. No: Go to Example "F" (Semi-Detached with apartment numbers).

Example A - Single Family

Rev: 12/19/2007

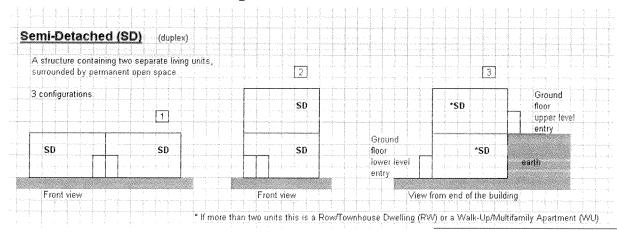


Example A (SF - Single Family Home) (SD - Semi-Detached with "apartment" numbers) Example G (RW - Row or Townhouse with "apartment" numbers)

# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Example of an address
1	1	1	No	202 Fido St

A single family structure will have one building with one entrance in the building details screen and one unit in the unit details screen. Leave the door number blank in the unit details screen (it will not be included in RASS report addresses).

Example B - Semi-Detached

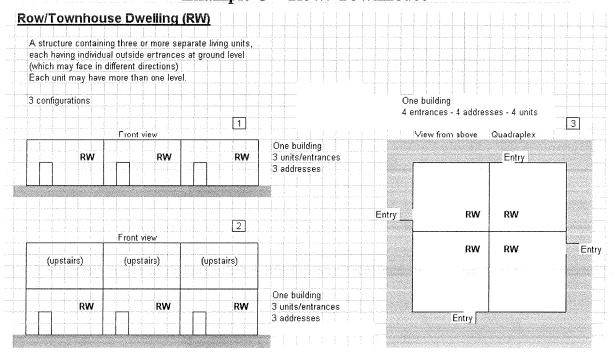


# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Example of 2 addresses
1	2	1	No	202 Fido St 204 Fido St

A semi-detached structure will have one building with two entrances in the building table and <u>one unit in the unit details</u> screen for each entrance. Each entrance will have its own address. Leave the door number blank in the unit details screen (it will not be included in addresses for RASS reports).

Example C - Row/Townhouse

Rev: 12/19/2007

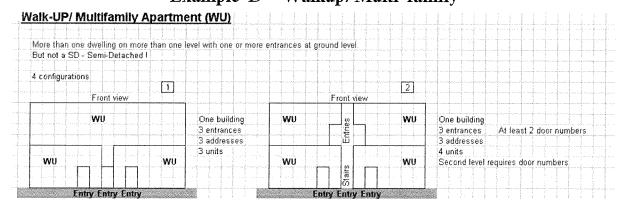


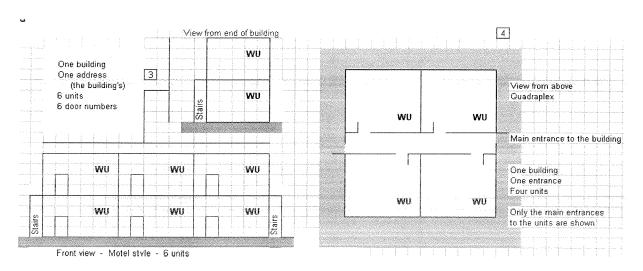
# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Example of 3 addresses
1	More than 2	1	No	202 Fido St 204 Fido St 206 Fido St

A row or townhouse structure will have one building with more than two entrances in the building details screen and <u>one unit in the unit details screen for each entrance</u>. Each entrance will have its own address. Leave the door number blank in the unit details screen (it will not be included in addresses in RASS reports).

Example D – Walkup/Multi-family

Rev: 12/19/2007



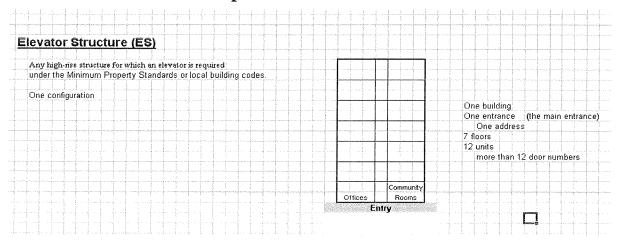


# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Example of unit addrresses in a 6-unit Walkup
1	1	More than 1	Yes	202 Fido St A 202 Fido St B 202 Fido St C 202 Fido St D 202 Fido St E 202 Fido St F

A multifamily or walkup structure will have one building with one or more outside entrances and at least one entrance has <u>more than one unit per entrance</u> in the building table. Each entrance will have the same number of units listed in the unit table for that entrance. The entrance will have the street number, street, city, state and zip code portion of the address. Put the apartment number in the "door number" field in the unit details screen; it will be added to the end of the physical street address from the building table in the RASS reports.

Example E – Elevator Structure

Rev: 12/19/2007

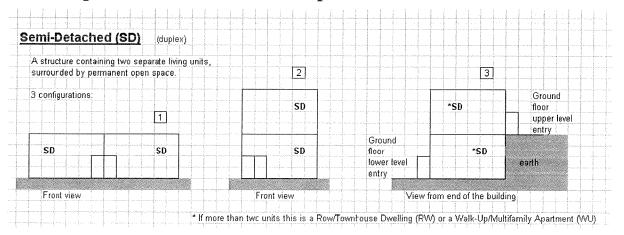


# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Example of unit addresses in a 6-story elevator structure
1	1 ************************************	More than 1	Yes	202 Fido St 1A 202 Fido St 1B 202 Fido St 2A 202 Fido St 2B 202 Fido St 3A 202 Fido St 3B 202 Fido St 4A 202 Fido St 4B 202 Fido St 5A 202 Fido St 5B 202 Fido St 6A 202 Fido St 6A 202 Fido St 6A

An elevator structure (essentially a multifamily or walkup structure with an elevator) will have one building with one outside entrance and more than one unit per entrance in the building table. It will have the same number of units listed in the unit table for that entrance. Put the apartment number in the "door number" field in the unit details screen; it will be added to the end of the physical street address from the building table in RASS reports.

Example F - Semi-detached with Apartment Numbers in the Address

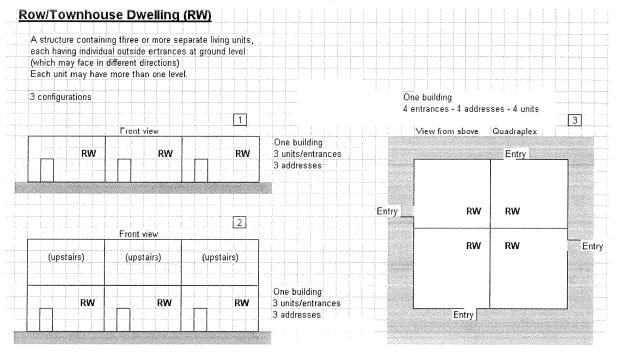
Rev: 12/19/2007



# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Examples of addresses
1	2	1	No	202 Fir St A 202 Fir St B

A semi-detached structure will have one building with two entrances in the building table and one unit in the unit table for each entrance. Leave the door number blank in the unit details screen (it will be ignored in RASS addresses). (If each unit use an apartment number, put it in address line for the entrance in the building details screen.)

Example G - Row/Townhouse with Apartment Numbers in the Address



# of bldgs	# entrances	Units per entrance	Use door no in unit table?	Example of an address
1	2 or more	1	No	202 Fir St #11 202 Fir St #12 202 Fir St #13

A row or townhouse structure will have one building with two or more entrances in the building table and one unit in the unit table <u>for each entrance</u>. Leave the door number blank in the unit details screen (it will be ignored in RASS addresses). (If each unit use an apartment number, put it in address line for the entrance in the building details screen.)

MINIMUM SET ASIDE EXERCISE

Exercise: Minimum Set Aside

Unit Status Report

WHAT YOU WILL NEED:

1. Unit Status Report

Building 1 (Project 1)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	
How many low-income units are there?	

Has the minimum set-aside been met in Project 1?

Building 2 (Project 2)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	
How many low-income units are there?	

Has the minimum set-aside been met in Project 2?

Building 3 (Project 3)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	
How many low-income units are there?	

Has the minimum set-aside been met in Project 3?

Building 4 (Project 4)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	
How many low-income units are there?	

Has the minimum set-aside been met in Project 4?

Building 5 (Project 5)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	**************************************
How many low-income units are there?	:

Has the minimum set-aside been met in Project 5?

Building 6 (Project 6)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	
How many low-income units are there?	

Has the minimum set-aside been met in Project 6?

Building 7 (Project 7)	
How many total units?	
How many units are needed to meet the minimum set-aside (40/60)?	
How many low-income units are there?	

Has the minimum set-aside been met in Project 7?

COMPLIA REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

HTC AHDP HOME HTF BOND HTC Exch NSP TCAP.

UNIT QUALIFICATIONS RE HH CERT SIZE TIC DATE BR S HOUSING ASSIST. PAYMENT UTILITY ALLOW. TENANT PAID RENT ANNUAL INCOME Building #: 1 LAST NAME MOVE OUT DATE UNIT# MOVE IN DATE **BIN** #: TX1501201 (*LIHTC Only*)

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COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

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BIN #: TX1501203

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MEETS SPECIAL NEEDS REQ.

UTILITY ALLOW.

TENANT PAID RENT

COMPLIA, REPORT UNIT STATUS REPORT COMPLIA.

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

Pandora Springs PROPERTY NAME:

TDHCA

NSP BOND HTC Exch HTF HOME AHDP HTC

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BIN #: TX1501205

(LIHTC Only)

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MEETS SPECIAL NEEDS REQ.

UNIT QUALIFICATIONS

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HOUSING ASSIST. PAYMENT

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TENANT PAID RENT

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BIN #: TX1501206

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22 07/22/2016

UTILITY ALLOW.

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TENANT PAID RENT

COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

BOND HTC Exch NSP HTF HOME AHDP HTC

TCAP

BIN #: TX1501207 (LIHTC Only)

Building #: 7

MOVE IN DATE # LIND

MOVE OUT DATE

TENANT PAID RENT LAST NAME

ANNUAL INCOME

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COMPLIA: REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

AHDP HOME HTC

BOND HTC Exch NSP HTF

TCAP

BIN #: TX1501207 (LIHTC Only)

Building #: 7

MOVE IN DATE # LIND

ANNUAL INCOME LAST NAME

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MEETS SPECIAL NEEDS REQ.

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-	4	45	46	47	48

Unit Status Report - Statistics Page Part 1 - Demographics

Ethnicity

Race

Other

Part 2 - Accessibility

Not Equipped

Mobility

Vision or Hearing Impairment

44

Part 3 - Qualification

Percent ر 5 5 Program Qualification

14 \vdash 22 Market 30 09 HTC HTC HTC

22.92% 29.17% 45.83% 02.08%

Part 4 - Additional Assistance

IO

HIC

HUD Housing Choice Voucher (HCV), tenant-based2

Part 5 - Special Needs Unit Count

APPLICABLE FRACTION EXERCISE

Exercise: Applicable Fraction

Unit Status Report

EXERCISE: APPLICABLE FRACTION:

Review the USR and, assuming that the units are designated correctly, calculate the Applicable Fraction for each Building:

1 Bedroom:

683 square feet

2 Bedroom

800 square feet

3 Bedroom

980 square feet

WHAT YOU WILL NEED:

1. Unit Status Report

Building 1	Unit Evaluation	Square Footage Evaluation
Low-income Units		
Total Units		

What is the unit applicable fraction?

What is the square footage applicable fraction?

What is the applicable fraction for building 1?

construction and product of the contract of th	Unit Evaluation	Square Footage Evaluation
Low-income Units		
Total Units		

What is the unit applicable fraction?

What is the square footage applicable fraction?

What is the applicable fraction for building 2?

Building 3	Unit Evaluation	Square Footage Evaluation
Low-income Units		
Total Units		

What is the unit applicable fraction?

What is the square footage applicable fraction?

What is the applicable fraction for building 3?

Building 4	Unit Evaluation	Square Footage Evaluation
Low-income Units		

EXERCISE: APPLICABLE FRACTION:

Review the USR and, assuming that the units are designated correctly, calculate the Applicable Fraction for each Building:

1 Bedroom: 683 square feet 2 Bedroom 800 square feet 3 Bedroom 980 square feet

	Total Units	
1		

What is the unit applicable fraction?

What is the square footage applicable fraction?

What is the applicable fraction for building 4?

Building 5	Unit Evaluation	Square Footage Evaluation
Low-income Units		
Total Units		

What is the unit applicable fraction?

What is the square footage applicable fraction?

What is the applicable fraction for building 5?

Building 6	Unit Evaluation	Square Footage Evaluation
Low-income Units		
Total Units		

What is the unit applicable fraction?

What is the square footage applicable fraction?

What is the applicable fraction for building 6?

Building 7	Unit Evaluation	Square Footage Evaluation
Low-income Units		
Total Units		

What is the unit applicable fraction?

What is the square footage applicable fraction?

EXERCISE: APPLICABLE FRACTION:

Review the USR and, assuming that the units are designated correctly, calculate the Applicable Fraction for each Building:

1 Bedroom: 683 square feet 2 Bedroom 800 square feet 3 Bedroom 980 square feet

What is the applicable fraction for building 7?

N.

COMPLIA REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP NSP BOND HTC Exch HTF HOME AHDP HTC

BIN #: TX1501201

Building #:

MOVE (LÍHTC Only) # LINO

TENANT PAID RENT ANNUAL INCOME LAST NAME

MEETS SPECIAL NEEDS REQ.

UNIT QUALIFICATIONS

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BIN #: TX1501202 (LIHTC Only)

Building #: 2 MOVE OUT DATE MOVE

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UNIT#

ANNUAL INCOME LAST NAME

UTILITY ALLOW. TENANT PAID RENT

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TIC DATE

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UNIT QUALIFICATIONS

MEETS SPECIAL NEEDS REQ.

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THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017 COMPLIANCE REPORT UNIT STATUS REPORT

Pandora Springs PROPERTY NAME:

TDHCA

TCAP NSP BOND HTC Exch HTF HOME AHDP HTC

BIN #: TX1501203

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Building #:

(LIHTC Only)

LINO

ANNUAL INCOME LAST NAME

MOVE OUT DATE IN DATE MOVE

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MEETS SPECIAL NEEDS REQ.

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ANNUAL INCOME

LAST NAME

MOVE OUT DATE

MOVE DATE

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Building #: 4

BIN #: TX1501204

(LIHTC Only)

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UTILITY ALLOW.

COMPLIA REPORT UNIT STATUS REPORT COMPLIA

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

NSP BOND HTC Exch HTF HOME AHDP HTC

BIN #: TX1501205

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Building #:

TCAP

(LIHTC Only)

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ANNUAL INCOME LAST NAME MOVE OUT DATE

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MEETS SPECIAL NEEDS REQ.

UNIT QUALIFICATIONS

HH SIZE

RE CERT

TIC DATE

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HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

TENANT PAID RENT

ANNUAL INCOME

LAST NAME

MOVE OUT DATE

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UNIT#

DATE Z

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Building #:

BIN #: TX1501206

(LIHTC Only)

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UNIT QUALIFICATIONS

HH SIZE

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TENANT PAID RENT

COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

BOND HTC Exch NSP HTF HOME AHDP HTC

TCAP

BIN #: TX1501207 (*LIHTC Only*) MOVE

LINO

Building #: 7 MOVE OUT DATE

LAST NAME

IN DATE

UTILITY ALLOW. TENANT PAID RENT ANNUAL INCOME

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TIC DATE

RE CERT

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UNIT QUALIFICATIONS

MEETS SPECIAL NEEDS REO

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COMPLIA. REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

BOND HTC Exch NSP H AHDP HOME HTC

TCAP

BIN #: TX1501207 (LIHTC Only) MOVE IN DATE # LINO

TENANT PAID RENT ANNUAL INCOME Building #: 7 LAST NAME MOVE OUT DATE

TIC DATE BR S HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

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UNIT QUALIFICATIONS

MEETS SPECIAL NEEDS REQ.

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0	0	74	0	0
1200	1200	776	850	850
0	0	28400	0	0
44 06/16/2016	45 06/01/2016	46 09/14/2016	47 04/10/2016	48 10/10/2016
4	4,	4	,4	4

Unit Status Report - Statistics Page Part 1 - Demographics

Ethnicity

Race

Other

Part 2 - Accessibility

Mobility

Not Equipped

44

Vision or Hearing Impairment

Part 3 - Qualification

22.92% 29.17% 45.83% 02.08% Percent 14 22 Program Qualification Market HO HTC HTC HIC HTC

Part 4 - Additional Assistance

HUD Housing Choice Voucher (HCV), tenant-based2

Part 5 - Special Needs Unit Count

CALCULATING CREDITS EXERCISE

Exercise: Calculating Credits

Qualified Basis = Eligible Basis x Applicable Fraction Annual Credit Amount = Qualified Basis x 9% Total Credit = Annual Credit x 10

Building 1	
Applicable Fraction	100%
Eligible Basis	500,000

Building 2	
Applicable Fraction	50%
Eligible Basis	375,000

Building 3	
Applicable Fraction	25%
Eligible Basis	375,000

Building 4	
Applicable Fraction	73.03%
Eligible Basis	375,000

Building 5	
Applicable Fraction	100%
Eligible Basis	675,000

Building 6	
Applicable Fraction	50%
Eligible Basis	725,000

Building 7	
Applicable Fraction	35%
Eligible Basis	950,000

OCCUPANCY REVIEW EXERCISE

Exercise: Occupancy Review

Utility Allowance Exercise with the correct utility allowance for each building

Unit Status Report

Income and Rent Limit printout

WHAT YOU WILL NEED:

- 1. Utility Allowance Exercise with the correct utility allowance for each building
 - 2. Unit Status Report
- 3. Income and Rent Limit printout

The LURA requires that there are 26 units restricted at the 60% income and rent limits. In addition, 10 of these same units must be restricted at the 30% income and rent limits.

- 1. Are the units designated as low-income occupied by a household with an income \le the 30% or 60% income limit for their household size?
- 2. Is the gross rent (tenant rent + utility allowance) \le the 30% or 60% rent limit for the bedroom size?
- 3. Have the Additional 30% Rent & Occupancy Restrictions been met?

Only units that are designated at 30% or 60% are included in this table:

	Size Income	Designation	Limit	Qualified? Rent	ı	J.A.	(tenant rent	č	Nelli Enim	Restricted?
		(30%/60%)			a transition of the		+ utility allowance)			
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Income	Limit		To Maria de La Carta de La Car			V THE THE TWO													
Unit	Designation (30%/60%)																		
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HH	Size	2		3	_	2					+		3	9	2	3	-	4	<u> </u>
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Unit Designation (30%/60%)				
HH Income	12,575	15,000	24,396	28,400
HH E	F	2		
Unit	38	40	43	46

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WHAT YOU WILL NEED:

- 1. Utility Allowance Questionnaire
- 2. City of Austin HOME information
- 3. City of Austin Housing Authority HCV Utility Allowance Schedules
- 4. Unit Status Report
- 5. HUD Job Aid for Configuring Buildings and Units

PART 1: WHAT IS THE CORRECT UTILITY ALLOWANCE FOR EACH BUILDING?

- 1. Building 1?
- 2. Building 2?
- 3. Building 3?
- 4. Building 4?
- 5. Building 5?
- 6. Building 6?
- 7. Building 7?

PART 2: CALCULATE THE UTILITY ALLOWANCE FOR A ONE BEDROOM, 2 BEDROOM, AND THREE BEDROOM UNIT FOR EACH METHOD:

Utility Allowance Method	1 Bedroom	2 Bedroom	3 Bedroom

COMPLIA REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP NSP BOND HTC Exch HIF HOME AHDP HTC

BIN #: TX1501201

Building #:

(LÍHTC Only)

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ANNUAL INCOME LAST NAME

MOVE OUT DATE MOVE IN DATE

05/12/2016

TENANT PAID RENT

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UNIT QUALIFICATIONS

MEETS SPECIAL NEEDS REQ.

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MEETS SPECIAL NEEDS REQ.

UNIT QUALIFICATIONS

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HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

TENANT PAID RENT

ANNUAL INCOME

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MOVE DATE

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BIN #: TX1501202

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UTILITY ALLOW.

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Income HTC: 60 Rent HTC: 60

COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP NSP BOND HTC Exch HIF HOME AHDP HTC

BIN #: TX1501203

က Building #:

(LIHTC Only)

LAST NAME

MOVE IN DATE # LINO

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UTILITY ALLOW.

TENANT PAID RENT

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UNIT QUALIFICATIONS

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HOUSING ASSIST. PAYMENT

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UTILITY ALLOW.

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COMPLIA. REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP NSP BOND HTC Exch HTF HOME AHDP HTC

BIN #: TX1501205

(LIHTC Only)

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(LIHTC Only)

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26 08/12/2016

Rent

Income HTC: Mkt Rent HTC: Mkt

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1 | 06/15/2016

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rev 11/13/2009

^oZ

 \mathbf{Z} 08/13/2016 10000 MOVE OUT DATE 17 08/13/2016 IN DATE

UNIT QUALIFICATIONS

HTC: 30 HTC: 30

Income Rent

HTC: 60 HTC: 60

Income Rent

02/16/2017

523

54

102

11004

Russell

18 02/16/2016

19 02/16/2016

20 04/28/2016

21 11/18/2016

07/22/2016

22

UTILITY ALLOW.

384

TENANT PAID RENT

COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

Pandora Springs PROPERTY NAME:

TDHCA

NSP BOND HTC Exch HTF HOME AHDP HTC

TCAP

BIN #: TX1501207

Building #:

MOVE (LIHTC Only)

LINO

ANNUAL INCOME LAST NAME

RE CERT TIC DATE

BR

UTILITY ALLOW.

HH SIZE

UNIT QUALIFICATIONS

MEETS SPECIAL

NEEDS REO å 2 N 2° 20 2 Z ^oZ 2 N ž ž ŝ o N å $\overset{\circ}{Z}$ ž å Income HTC: Mkt Rent HTC: Mkt Income HTC: Mkt Rent HTC: Mkt Income HTC: Mkt
Rent HTC: Mkt Income HTC: Mkt Income HTC: Mkt Rent HTC: Mkt Income HTC: Mkt Rent HTC: Mkt HTC: Mkt HTC: Mkt HTC: Mkt HTC: Mkt HTC: Mkt HTC: 30 HTC: 30 HTC: 30 HTC: 30 HTC: 30 HTC: 30 HTC: Mkt HTC: 60 HTC: 60 Income HTC: 60 Rent HTC: 60 Income HTC: 30 Rent HTC: 30 Income Rent Income Rent Income Rent Income Rent Income Rent Income Income Rent Rent 4 N d Z > Z Z \mathbf{z} Z Z Z \succ > Z Z Z \mathbf{z} Z 07/15/2016 05/01/2016 07/19/2016 04/18/2016 04/24/2016 12/11/2016 10/06/2016 04/14/2016 08/21/2016 06/02/2016 08/07/2016 03/27/2017 03/06/2017 02/15/2017 __ ----~ ~ \sim 2 C 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 HOUSING ASSIST. PAYMENT 0 \circ 0 0 $\overline{}$ 0 0 \circ 0 54 74 54 54 74 74 TENANT PAID RENT 384 850 1200 1200 1200 822 850 1200 850 384 850 850 776 451 451 15575 0 0 0 0 22435 27936 12575 15000 24396 DeLeon MOVE OUT DATE 29 07/15/2016 30 03/27/2016 31 05/01/2016 32 03/06/2016 33 02/29/2016 34 02/15/2017 35 07/19/2016 36 04/18/2016 37 04/24/2016 38 12/11/2016 39 10/06/2016 40 04/14/2016 42 06/02/2016 43 08/07/2016 08/21/2016 IN DATE 4 202

COMPLIA. REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP BOND HTC Exch NSP HTF AHDP HOME HTC

BIN #: TX1501207

(LIHTC Only)

Building #: 7 MOVE OUT DATE UNIT # MOVE DATE

44 06/16/2016

45 06/01/2016

46 09/14/2016

TENANT PAID RENT ANNUAL INCOME LAST NAME

TIC DATE s s HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

RE HH CERT SIZE

NEEDS REQ. MEETS SPECIAL UNIT QUALIFICATIONS

0		<	,	2 06/16/2016	7	,			
7 0 7 0	7 7	7	<u> </u>	0107/01/0	Z.	7	Income	H.C. Mkt	ŝ
							Rent	Rent HTC: Mkt	
0 0 2 06/01/2016 N	0 2 06/0	2 06/0)/90	91/2016	Z	2	Income	Income HTC: Mkt	No
							Rent	HTC: Mkt	
74 0 2 09/14/2016 N		2 09/1	1/60	4/2016	Z	_	Income	Income HTC: 60	No
							Rent	HTC: 60	
0 1 04/10/2016	0 1 04/10	1 04/10	04/10	2016	z		Income	Income HTC: Mkt	Ñ
					***********		Rent	HTC: Mkt	
0 1 10/10/2016	0 1 10/10	1 10/10	10/10	/2016	z		Income	Income HTC: Mkt	No
							Rent	HTC: Mkt	

28400

0

48 10/10/2016

47 04/10/2016

Unit Status Report - Statistics Page Part 1 - Demographics

Ethnicity

Race

Other

Part 2 - Accessibility

Mobility

Not Equipped

44

Vision or Hearing Impairment

Program Qualification Part 3 - Qualification

Percent H 30 HTC

22.92% 29.17% 45.83%

> 14 22

> > Market

IO

HIC

09

HTC HIC

02.08%

HUD Housing Choice Voucher (HCV), tenant-based2

Part 4 - Additional Assistance

Part 5 - Special Needs Unit Count



Texas Department of Housing and Community Affairs Rent and Income Limits¹ (As of 6/15/2016)

Pandora Springs

Project:

(1) Choose the county in which your project is located.

(2) If your project is located within the boundaries of one of the designated places listed in the drop down menu then make the appropriate selection. If the location is not listed, then choose the "Not Listed" option

(3) Please select the financing applicable for your project. Units financed with HOME, NSP, or tax exempt bonds and 4% tax credits are not eligible to use the National Non-Metro limits.

(4) Choose the date the first building in the project (as defined on line 8b of the 8609) was placed in service or for Housing Trust Fund, the date of your LURA. For HOME or NSP, select "N/A."

(5) Select the date based on the execution date of your property's Carryover Agreement, Determination Notice, Subaward Agreement Date. For Housing Trust Fund, select the date of your LURA. For HOME or NSP select "N/A." See footnote 3 for more details.

PLEASE C	PLEASE COMPLETE ALL FIELDS.							
(1) County:	Travis	INCON	INCOME LIMITS	20	16 Area Me	2016 Area Median Income:		\$77,800
(2) Place:	Austin	AMFI		Numbe	r of Househo	Number of Household Members		
		%	1	2 3	4	5	9	7
		30	\$ 16,350 \$ 1	16,350 \$ 18,690 \$ 21,030 \$	23,340 \$	23,340 \$ 25,230 \$ 27,090 \$ 28,950	27,090	\$ 28,950
(3) Financing:	9% Housing Tax Credits	40	\$ 21,800 \$ 2	21,800 \$ 24,920 \$ 28,040 \$	31,120 \$	31,120 \$ 33,640 \$ 36,120 \$ 38,600	36,120	\$ 38,600
		50	\$ 27,250 \$ 3		\$ 006'88	42,050 \$	\$ 45,150 \$ 48,250	\$ 48,250
(4) Project PIS Date:	(4) Project PIS Date: 4/21/2015 - 3/27/2016	60	\$ 32,700 \$ 3	\$ 37,380 \$ 42,060 \$ 46,680 \$ 50,460 \$ 54,180 \$	46,680 \$	50,460 \$	54,180	\$ 57,900
		80	3 43,600 \$ 4	43,600 \$ 49,840 \$ 56,080 \$ 62,240 \$	62,240 \$	67,280 \$ 72,240	72,240	5 77.200
		120	\$ -	\$	٠.٠	Ś		**
(5) Carryover / Deter	(5) Carryover / Determination Notice / Subaward							
Agreement Date:		RENT I IMITS	MITS					

\$ 41,080 \$ 51,350 \$ 61,620 \$ 82,160

\$ 30,810

∞

Agreement Date

3/6/2015 - 4/20/2015

KENT LIMITS

AMFI				Number of Bedrooms	Bedrooms		
%	0	1	2	3	4	5	
30		\$438	\$525	\$607	\$677	\$747	
40		\$584	\$701	\$809	\$903	966\$	
20	\$681	\$730	\$876	\$1,011	\$1,128	\$1,245	
09	\$817	\$876	\$1,051	\$1,214	\$1,354	\$1,494	gelie
65							
80	\$1,090	\$1,168	\$1,402	\$1,619	\$1,806	\$1,992	

1. This information is being provided to assist in the determining the rents and incomes applicable given a set of assumptions you select. You are encouraged to independently verify the results or contact the Department if

2. The "Place" field is used to determine whether the property is eligible to use the National Non-Metropolitan Median Income limits. Not all Places or Cities in Texas are shown. If you are located outside of the boundaries of a designated Place then select "Not Listed" even if your mailing address reflects the place name.

3. The 'Carryover / Determination Notice / Subaward Agreement Date' field is used to determine whether the property's gross rent floor is based upon a different set of income limits than those used to qualify tenants. For a 4. The 2016 Housing Tax Credit income limits are effective 3/28/2016. The 2015 NSP income limits are effective 3/2015. The Community Planning Division (CPD) of HUD released the 2016 HOME Program income limits effective 6/6/2016 and rent limits that are effective for all new leases and lease renewals after 6/6/2016.

5. For Housing Tax Credit project(s) that place in service or execute a Carryover Agreement within 45 days after HUD releases the MTSP Income limits where the newly released limits reflect a decrease, IRS Revenue Ruling 94-57 allows the owner to rely on either limit.

MINIMUM SET ASIDE SECOND EXERCISE

Exercise: Minimum Set Aside

Form 8609 for each building and required attachments/statements

Unit Status Report

WHAT YOU WILL NEED:

- 1. Form 8609 for each Building
- 2. Any required attachments/statements
- 3. Unit Status Report

Now that Form 8609 has been issued for each BIN, how many Projects are there?

For each Project, identify the following:

1. What buildings are in each Project?

2. How many total units in the Project?

$$\begin{array}{rcl}
/ & = & 10 \\
2 & = & 38
\end{array}$$

3. What is the minimum set-aside?

5. Has the minimum set-aside been met?

6. What is the 1st Year if the Credit Period for the Project?

8609 orm

(Rev. December 2016)
Department of the Treasury

Low-Income Housing Credit Allocation and Certification

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

All build be a second building	Allocation of Credit		***************************************	
Check i	200			
A Addi	ress of building (do not use P.O. box) (see instructions) ra Springs Apartments Total Buildings 7	B Name and address of housing credit agency	•	
Austin,	TX 78711	221 East 11th Street		
15129 C Nam	e, address, and TIN of building owner receiving allocation	Austin, TX 78711 - 3941 D Employer identification number of agency		
	•	74-261052		
10583 [a Springs Ltd H 49 Texas 78611	E Building identification number (BIN)		
TIN >	04 4000000	TX-15-0120	1	
1a	Date of allocation ▶ 4/1/2015 b Maximum hor	using credit dollar amount allowable .	1b	45,000
2	Maximum applicable credit percentage allowable (see in	structions)	2	9.00%
b	Check here ☐ if the eligible basis used in the compute high-cost area provisions of section 42(d)(5)(B). En		3a	
4 5	Percentage of the aggregate basis financed by tax-exem Date building placed in service	npt bonds. (If zero, enter -0)	3b 4	0.00 %
a d	Check the boxes that describe the allocation for the build Newly constructed and federally subsidized b Ne Sec. 42(e) rehabilitation expenditures federally subsidized Allocation subject to nonprofit set-aside under sec. 4	wly constructed and not federally subsided e Sec. 42(e) rehabilitation expendit		
Signat	ture of Authorized Housing Credit Agency Officia	al – Completed by Housing Credit Ag	ency	Only
	enalties of perjury, I declare that the allocation made is in com ve examined this form and to the best of my knowledge and bel Dolor Small			nternal Revenue Code, and
1	John Smith			
eni-manuscus susummenu	Signature of authorized official	ith Name (please type or print)	>	Date
Parti		nith Name (please type or print) Owners with respect to the First Year of the		Date edit Period
	First-Year Certification—Completed by Building C	owners with respect to the First Year of th		edit Period
7 8a	First-Year Certification—Completed by Building C Eligible basis of building (see instructions)	Owners with respect to the First Year of the second	ie Cre	edit Period 500,000
7 8a b	First-Year Certification—Completed by Building C Eligible basis of building (see instructions)	Owners with respect to the First Year of the second	one Cre	edit Period 500,000
7 8a b ,	First-Year Certification—Completed by Building Caligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Owners with respect to the First Year of the second second section 42 of the second section 42 of the	7 8a	edit Period 500,000 450,000 Yes
7 8a b 9a b 10	First-Year Certification—Completed by Building Celigible basis of building (see instructions)	Owners with respect to the First Year of the fir	7 8a	edit Period 500,000 450,000 Yes
7 8a 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	First-Year Certification—Completed by Building Celigible basis of building (see instructions)	owners with respect to the First Year of the fir	e Cre 7 8a ✓	edit Period 500,000 450,000 Yes
7 8a 6 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	First-Year Certification—Completed by Building Celigible basis of building (see instructions)	where with respect to the First Year of the firs	e Cre 7 8a ✓	edit Period 500,000 450,000 Yes No
7 8a 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	First-Year Certification—Completed by Building Celigible basis of building (see instructions)	where with respect to the First Year of the firs	7 8a	edit Period 500,000 450,000 Yes No 15-40
7 8a 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	First-Year Certification—Completed by Building Celigible basis of building (see instructions)	where with respect to the First Year of the firs	7 8a	edit Period 500,000 450,000 Yes No 15-40
9a 9a 10 6 6 6 6 6 6 6 6 6	First-Year Certification—Completed by Building Celigible basis of building (see instructions). Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)? If box 6a or box 6d is checked, do you elect to reduce eligible basis by disproportionate costs of non-low-in Check the appropriate box for each election. Caution: Once made, the following elections are irrevocated to begin credit period the first year after the building elect to begin credit period the first year after the building elect mot to treat large partnership as taxpayer (section 4 elect minimum set-aside requirement (section 42(g)) (see elect deep rent skewed project (section 142(d)(4)(B)) (see enalties of perjury, I declare that I have examined this form and correct, and complete.	owners with respect to the First Year of the fi	7 8a	edit Period 500,000 450,000 Yes No Yes No Yes No Yes No Yes No Yes No Yes Ano Knowledge and belief, they

BIN#		Addresses		Maximum Credit Allowable		
TX-15-02101	1501 Circle S	Austin, TX 78611	\$	45,000.00		
TX-15-02105	1501 Circle S	Austin, TX 78611	\$	60,750.00		
4		Total Credit for Project	\$	105,750.00		

Form **8609**

(Rev. December 2016)
Department of the Treasury
Internal Revenue Service

Low-Income Housing Credit Allocation and Certification

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

THE PARTY NAMED IN	Allocation of Orgalit			
Par	t I Allocation of Credit			
Check				
Pando 1501 (ldress of building (do not use P.O. box) (see instructions) ora Springs Apartments Circle S 5 of 7 n, TX 78711	B Name and address of housing credit agency TDHCA 221 East 11th Street		
15129		Austin, TX 78711 - 3941		
C Na	me, address, and TIN of building owner receiving allocation	D Employer identification number of agency		
Davada	ava Caninga I td	74-261052		
10583	ora Springs Ltd 3 I H 49 et, Texas 78611	E Building identification number (BIN)		
TIN	04.4000000	TX-15-0120	5	
1a	Date of allocation ► 4/1/2015 b Maximum ho	using credit dollar amount allowable .	1b	60,750
2	Maximum applicable credit percentage allowable (see in	structions)	2	9.00%
3a b	Maximum qualified basis		3a 3b	
4 5	Percentage of the aggregate basis financed by tax-exem Date building placed in service		4	0.00%
6	Check the boxes that describe the allocation for the build	ding (check those that apply):	• 101 - 201 - 201	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
а	☐ Newly constructed and federally subsidized b ☑ Newly constructed and federally subsidized b ☑ Newly constructed b ☑	ewly constructed and not federally subsid	ized o	c Existing building
d	Sec. 42(e) rehabilitation expenditures federally subsidize	ed e Sec. 42(e) rehabilitation expendit	ures n	not federally subsidized
f	Allocation subject to nonprofit set-aside under sec. 4			
	ature of Authorized Housing Credit Agency Officia			
	penalties of perjury, I declare that the allocation made is in compave examined this form and to the best of my knowledge and be			nternal Revenue Code, and
Ł.	John Smith	nith	k.	
)	Signature of authorized official	nith Name (please type or print))	
Pari				Date
E CONTRACTOR OF THE PARTY OF TH			e Cre	Date Date
7		Owners with respect to the First Year of th		edit Period
00	Eligible basis of building (see instructions)	Owners with respect to the First Year of the	7	edit Period 675,000
8a b	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple building as	Owners with respect to the First Year of the second		edit Period 675,000
	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Owners with respect to the First Year of the second	7 8a	edit Period 675,000 675,000 Yes No
	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple building as	Owners with respect to the First Year of the second	7 8a	edit Period 675,000 675,000
b	Eligible basis of building (see instructions)	Owners with respect to the First Year of the fir	7 8a	edit Period 675,000 675,000 Yes No
b 9a	Eligible basis of building (see instructions)	Owners with respect to the First Year of the fir	7 8a	edit Period 675,000 675,000 Yes No
b 9a	Eligible basis of building (see instructions)	Owners with respect to the First Year of the fir	7 8a	edit Period 675,000 675,000 Yes No Yes No
b 9a b	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Owners with respect to the First Year of the fir	7 8a	edit Period 675,000 675,000 Yes No Yes No
b 9a b	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Owners with respect to the First Year of the fir	7 8a	Yes No Yes No Yes No
9a b	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Dwners with respect to the First Year of the fir	7 8a 	edit Period 675,000 7es No Yes No Yes No
9a b	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Dwners with respect to the First Year of the fir	7 8a 	Pedit Period 675,000 675,000 7es
9a b 10 a b	Eligible basis of building (see instructions)	Dwners with respect to the First Year of the fir	7 8a 	Pedit Period 675,000 675,000 7es
9a b 10 a b c d	Eligible basis of building (see instructions) Original qualified basis of the building at close of first yea Are you treating this building as part of a multiple build (see instructions)?	Dwners with respect to the First Year of the fir	7 8a	Pedit Period 675,000 675,000 798
b 9a b 10 a b c d	Eligible basis of building (see instructions)	Dwners with respect to the First Year of the fir	7 8a	Pedit Period 675,000 675,000 798
9a b 10 a b c d	Eligible basis of building (see instructions)	Dwners with respect to the First Year of the fir	7 8a	Pedit Period 675,000 675,000 798
9a b 10 a b c d Under true	Eligible basis of building (see instructions) Original qualified basis of the building at close of first year Are you treating this building as part of a multiple building see instructions)?	Dwners with respect to the First Year of the fir	7 8a	Yes No Yes No Yes No Yes No Yes No No Yes No

BIN#		Addresses		Maximum Credit Allowable		
TX-15-02101	1501 Circle S	Austin, TX 78611	\$	45,000.00		
TX-15-02105	1501 Circle S	Austin, TX 78611	\$	60,750.00		
		Total Credit for Project	\$	105,750.00		

Department of the Treasury Internal Revenue Service

Low-Income Housing Credit Allocation and Certification

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

Pa	Allocation of Credit		***************************************		******
Chec	k if: Addition to Qualified Basis Amended Form				
	ddress of building (do not use P.O. box) (see instructions)	B Name and address of housing credit agency			
	ora Springs Apartments Total Buildings 7 Circle S 2 of 7	TOUGA			
	Circle S 2 of 7 n, TX 78711	TDHCA 221 East 11th Street			
15129	9	Austin, TX 78711 - 3941			
C Na	ame, address, and TIN of building owner receiving allocation	D Employer identification number of agency			
Pand	ora Springs Ltd	74-261052			
	3 I H 49	E Building identification number (BIN)			_
Burn	et, Texas 78611				
TIN	91-1893333	TX-15-0120	2		
1a	Date of allocation ► 4/1/2015 b Maximum hou	ising credit dollar amount allowable .	1b	16,8	<u>75</u>
2	Maximum applicable credit percentage allowable (see ins	structions)	2	9.00	%
За	Maximum qualified basis		3a	187,5	വ
b	Check here ▶ ☐ if the eligible basis used in the comput			167,5	50
	the high-cost area provisions of section 42(d)(5)(B). Enter				
	basis was increased (see instructions)		3b	1 0 0 9	%
4	Percentage of the aggregate basis financed by tax-exemple	ot bonds. (If zero, enter -0)	4	0.00	%
5	Date building placed in service	1/15/2016			
6	Check the boxes that describe the allocation for the build				
а	Newly constructed and federally subsidized b ✓ Newly constructed b ✓ Newly constru				
d	Sec. 42(e) rehabilitation expenditures federally subsidized		ures n	ot federally subsidized	
f	✓ Allocation subject to nonprofit set-aside under sec. 42	?(h)(5)			
Under that I I	penalties of perjury, I declare that the allocation made is in comp nave examined this form and to the best of my knowledge and beli	ef, the information is true, correct, and comple	the Ir	nternal Revenue Code, ar	nd
>	John Smi	th Name (please type or print)			~
Par	Signature of authorized official	Name (please type or print)	<i>y</i>	Date	wener.
				dit Period	
7	Eligible basis of building (see instructions)		7	375,00	
8a h	Original qualified basis of the building at close of first year Are you treating this building as part of a multiple build	of credit period	8a	187,50	<u>)0</u>
b	(see instructions)?				
00	•		_	Yes No	
9a h	If box 6a or box 6d is checked, do you elect to reduce elige. For market-rate units above the average quality standards of low		Ш	Yes	
D	to reduce eligible basis by disproportionate costs of non-low-inc			Vac 🗇 Na	
10	Check the appropriate box for each election.	2.11.2 2.11.0 411401 00011011 72(4)(0)(D); . P	L	Yes No	
	Caution: Once made, the following elections are irrevocable	n/e			
а	Elect to begin credit period the first year after the building		\Box	Yes ☑ No	
b	Elect not to treat large partnership as taxpayer (section 42			Yes	
c	Elect minimum set-aside requirement (section 42(g)) (see i			25-60 (N.Y.C. only)	
ď	Elect deep rent skewed project (section 142(d)(4)(B)) (see i	instructions)		15-40	
Under are true	penalties of perjury, I declare that I have examined this form and a e, correct, and complete.	accompanying attachments, and to the best of			 >y
. <	San Magan	91-1893333	L.		
P	Signature	91-1893333 Taxpayer identification number		Date	
Sa	m Morgan	2016			
<u> </u>	Name (please type or print)	First year of the credit period			
For Pri	vacy Act and Paperwork Reduction Act Notice, see separate in	nstructions. Cat. No. 63981U	MODERN CONTROLLING	Form 8609 (Rev. 12-2016	e)

BIN#	BIN # Addresses		Maximum Credit Allowable		
TX-15-02102	1501 Circle S	Austin, TX 78611	\$	16,875.00	
TX-15-02103	1501 Circle S	Austin, TX 78611	\$	8,437.50	
TX-15-02104	1501 Circle S	Austin, TX 78611	\$	24,647.63	
TX-15-02106	1501 Circle S	Austin, TX 78611	\$	31,770.23	
TX-15-02107	1501 Circle S	Austin, TX 78611	\$	29,925.00	
	I	Total Credit for Project	\$	111,655.35	

-orm 8609

(Hev. December 2016)
Department of the Treasury
Internal Revenue Service

Low-Income Housing Credit Allocation and Certification

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

Pa	Allocation of Credit					
Chec				·····		
	k if: Addition to Qualified Basis Amended Form dress of building (do not use P.O. box) (see instructions)	B Name and address of housing credit agency				
	ora Springs Apartments Total Buildings 7	gg	,			
	Circle S 3 of 7	TDHCA				
Austi 15129	n, TX 78711	221 East 11th Street				
	ame, address, and TIN of building owner receiving allocation	Austin, TX 78711 - 3941 D Employer identification number of agency				
	, , , , , , , , , , , , , , , , , , , ,		,			
	ora Springs Ltd	T4-261052 E Building identification number (BIN)				
	8 I H 49 et, Texas 78611					
TIN	04.4000000	TX-15-0120	12			
1114		17-13-0120		1		—
1a	Date of allocation ► 4/1/2015 b Maximum hou	using credit dollar amount allowable .	1b		8,437	.50
2	Maximum applicable credit percentage allowable (see ins	structions)	2		9.00	1%
За	Maximum qualified basis		За		93,7	750
b	Check here ▶ ☐ if the eligible basis used in the compu	tation of line 3a was increased under				
	the high-cost area provisions of section 42(d)(5)(B). Ent	er the percentage to which the eligible				
	basis was increased (see instructions)		3b		1 0 0	%
4	Percentage of the aggregate basis financed by tax-exem	pt bonds. (If zero, enter -0)	4		0.00	%
5	Date building placed in service					
6	Check the boxes that describe the allocation for the build	ling (check those that apply):				
а	Newly constructed and federally subsidized b ☑ Newly constructed b					
d	Sec. 42(e) rehabilitation expenditures federally subsidize	d e 🗌 Sec. 42(e) rehabilitation expendit	ures n	iot feder	ally subsidized	l
f	Allocation subject to nonprofit set-aside under sec. 42	2(h)(5)				
Sign	ature of Authorized Housing Credit Agency Officia	I-Completed by Housing Credit Ag	encv	Only		
Jnder	penalties of perjury, I declare that the allocation made is in comp	pliance with the requirements of section 42 o	f the Ir	nternal R	evenue Code, a	ınd
.iiat i i	nave examined this form and to the best of my knowledge and beli	ier, the information is true, correct, and compl	ete.			
1		5.)				
>	Signature of authorized official	ith Name (please type or print)			Date	# n n .
Pala	First-Year Certification—Completed by Building O	where with respect to the First Year of the	e Cre	dit Perio		
7		· · · · · · · · · · · · · · · · · · ·	7	T		
, 8a	Original qualified basis of the building at close of first yea		8a	+	375,0	***********
b	Are you treating this building as part of a multiple build		<u>oa</u>		93,7	50
-	(see instructions)?		[7]	Yes	□No	
9a				Yes	□ No	
b	For market-rate units above the average quality standards of lo	= '''' ''' '		169	□ 140	
	to reduce eligible basis by disproportionate costs of non-low-ine		П	Yes	□ No	
10	Check the appropriate box for each election.	231110 at the attack decition (E(a)(e)(e)		165		
, 0	Caution: Once made, the following elections are irrevocal	hle				
а	Elect to begin credit period the first year after the building		П	Yes	☑ No	
b	Elect not to treat large partnership as taxpayer (section 42)			Yes	V NO	
c	Elect minimum set-aside requirement (section 42(g)) (see	9.1 7.			N.Y.C. only)	
ď	Elect deep rent skewed project (section 142(d)(4)(B)) (see			15-40	14.1.0. Offiy)	
Inder	penalties of perjury, I declare that I have examined this form and				ge and belief, the	ev
re tru	e, correct, and complete.	. , , 5	.,		J 111	-)
<u> </u>	Signature	91-1893333	L			
/	Signature	9 I - 18933333 Taxpayer identification number	P		Date	
S a	m Morgan	2016				
P	Name (please type or print)	First year of the credit period				
-	vacy Act and Panerwork Reduction Act Notice see separate i		elioninis aranoona,		609 (Day 12 201	and constant or

BIN#	BIN # Addresses			ximum Credit Allowable
TX-15-02102	1501 Circle S	Austin, TX 78611	\$	16,875.00
TX-15-02103	1501 Circle S	Austin, TX 78611	\$	8,437.50
TX-15-02104	1501 Circle S	Austin, TX 78611	\$	24,647.63
TX-15-02106	1501 Circle S	Austin, TX 78611	\$	31,770.23
TX-15-02107	1501 Circle S	Austin, TX 78611	\$	29,925.00
		Total Credit for Project	69	111,655.35

8609 orm

(Rev. December 2016) Department of the Treasun Internal Revenue Service

Low-Income Housing Credit Allocation and Certification

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

Par	Allocation of Credit		CONTRACTOR DE LA CONTRA	amandamana.		***************************************
Checl	k if: Addition to Qualified Basis Amended Form				······	~~~~
	dress of building (do not use P.O. box) (see instructions)	B Name and address of housing credit agency	······································	***************************************	· · · · · · · · · · · · · · · · · · ·	
	ora Springs Apartments Total Buildings 7	TDUO				
	Circle S 4 of 7 n, TX 78711	TDHCA 221 East 11th Street				
15129)	Austin, TX 78711 - 3941				
C Na	ame, address, and TIN of building owner receiving allocation	D Employer identification number of agency				
Dand	ore Springs Ltd	74-261052				
	ora Springs Ltd 3 I H 49	E Building identification number (BIN)				
	et, Texas 78611					
TIN	91-1893333	TX-15-0120	4			
1a	Date of allocation ► 4/1/2015 b Maximum hou	using credit dollar amount allowable .	1b		24,64	17.63
2	Maximum applicable credit percentage allowable (see in:	structions)	2		9.0	00%
За	Maximum qualified basis		3a	***************************************	273,86	2 50
b	Check here ▶ ☐ if the eligible basis used in the compu					
	the high-cost area provisions of section 42(d)(5)(B). Ent					
	basis was increased (see instructions)		3b	1340	1 0 0	%
4	Percentage of the aggregate basis financed by tax-exem	pt bonds. (If zero, enter -0)	4		0.0	00%
5	Date building placed in service	1/15/2016				
6	Check the boxes that describe the allocation for the build	ding (check those that apply):				
а	□ Newly constructed and federally subsidized b ☑ Newly constructed and federal b ☑ Newly constructed b ☑ Newly constructed and federal b ☑ Newly constructed b ☑ Newly con					
d	Sec. 42(e) rehabilitation expenditures federally subsidize	ed e Sec. 42(e) rehabilitation expendit	ures r	not fede	rally subsidize	ed
f	Allocation subject to nonprofit set-aside under sec. 4	2(h)(5)		·	***************************************	nutrino contrava
	ature of Authorized Housing Credit Agency Official penalties of perjury, I declare that the allocation made is in com		-		Revenue Code,	and
that I I	have examined this form and to the best of my knowledge and bel	lief, the information is true, correct, and compl	ete.			
A	John Sm	nith	4			
7	Signature of authorized official	Name (please type or print)	7		Date	
Pari	First-Year Certification—Completed by Building C	Owners with respect to the First Year of th	ne Cre	edit Peri	od	
7	Eligible basis of building (see instructions)		7		375	,000
8a	Original qualified basis of the building at close of first year		8a		273,86	2.50
b	Are you treating this building as part of a multiple build					
	(see instructions)?		_	Yes	☐ No	
9a	If box 6a or box 6d is checked, do you elect to reduce eli			Yes	☐ No	
b	For market-rate units above the average quality standards of lo				,	
	to reduce eligible basis by disproportionate costs of non-low-in	ncome units under section 42(d)(3)(B)? .	Ш	Yes	☐ No	
10	Check the appropriate box for each election.					
	Caution: Once made, the following elections are irrevoca				F71	
a	Elect to begin credit period the first year after the building	•		Yes	✓ No	
d	Elect not to treat large partnership as taxpayer (section 4				(\$1.3.7.25 t.)	
C	Elect minimum set-aside requirement (section 42(g)) (see Elect deep rent skewed project (section 142(d)(4)(B)) (see		느	15-40	(N.Y.C. only)	
	penalties of perjury, I declare that I have examined this form and e, correct, and complete.		of my		lge and belief,	they
arc titu	e, correct, and complete.					
	Signature	91-1893333 Taxpayer identification number			Date	
, -	Signature P		r		Date	
		2016				

BIN # Addresses			Maximum Credit Allowable		
TX-15-02102	1501 Circle S	Austin, TX 78611	\$	16,875.00	
TX-15-02103	1501 Circle S	Austin, TX 78611	\$	8,437.50	
TX-15-02104	1501 Circle S	Austin, TX 78611	\$	24,647.63	
TX-15-02106	1501 Circle S	Austin, TX 78611	\$	31,770.23	
TX-15-02107	1501 Circle S	Austin, TX 78611	\$	29,925.00	
1.77	1	Total Credit for Project	\$	111,655.35	

Form **8609**

Low-Income Housing Credit Allocation and Certification

Department of the Treasur

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

Pai	t Allocation of Credit		************		
Chec	k if: Addition to Qualified Basis Amended Form				
A Ac	dress of building (do not use P.O. box) (see instructions)	B Name and address of housing credit agency			
	ora Springs Apartments Total Buildings 7	TOUGA			
	Circle S 6 of 7 n, TX 78711	TDHCA 221 East 11th Street			
15129		Austin, TX 78711 - 3941			
C Na	me, address, and TIN of building owner receiving allocation	D Employer identification number of agency			
Dand	ora Carinac I td	74-261052			
	ora Springs Ltd 3 I H 49	E Building identification number (BIN)			
Burne	et, Texas 78611				
TIN	91-1893333	TX-15-0120	6		
1a	Date of allocation ► 4/1/2015 b Maximum ho	using credit dollar amount allowable .	1b		32,625.00
2	Maximum applicable credit percentage allowable (see in	structions)	2		9.00%
За	Maximum qualified basis		За		362,500.00
b	Check here ▶ ☐ if the eligible basis used in the compu				002,000.00
	the high-cost area provisions of section 42(d)(5)(B). En				
	basis was increased (see instructions)		3b	884	1 0 0 %
4	Percentage of the aggregate basis financed by tax-exem	npt bonds. (If zero, enter -0)	4		0.00 %
5	Date building placed in service	> 2/1/2016			
6	Check the boxes that describe the allocation for the build	ding (check those that apply):			
а	Newly constructed and federally subsidized b ✓ Newly constructed and federal subsidized b ✓ Newly constructed b ✓ Newly constru				
d	Sec. 42(e) rehabilitation expenditures federally subsidize	ed 🛮 e 🗌 Sec. 42(e) rehabilitation expendit	ures n	10t feder	ally subsidized
f	Allocation subject to nonprofit set-aside under sec. 4	I2(h)(5)		*******************************	
	ature of Authorized Housing Credit Agency Offician penalties of perjury, I declare that the allocation made is in companion of the companion o				evenue Code, and
that I h	nave examined this form and to the best of my knowledge and be	lief, the information is true, correct, and comple	ete.		
A	John Sm	nith	L		
7	Signature of authorized official	Name (please type or print)	7		Date
Part	First-Year Certification—Completed by Building C	Dwners with respect to the First Year of th	e Cre	dit Peri	od
7	Eligible basis of building (see instructions)		7		725,000
8a	Original qualified basis of the building at close of first year		8a		362,500.00
b	Are you treating this building as part of a multiple building	• • • • • • • • • • • • • • • • • • • •			
	(see instructions)?			Yes	∐ No
	If box 6a or box 6d is checked, do you elect to reduce el		Ш	Yes	☐ No
b	For market-rate units above the average quality standards of lot or educe eligible basis by disproportionate costs of non-low-ir				
40		ncome units under section 42(d)(3)(B)? .	L	Yes	∐ No
10	Check the appropriate box for each election. Caution: Once made, the following elections are irrevocated in the control of th	-1-1-			
_	Elect to begin credit period the first year after the building		\Box	Vaa	☑ No
a h	Elect not to treat large partnership as taxpayer (section 4			Yes Yes	V NO
b	Elect minimum set-aside requirement (section 42(g)) (see				(N.Y.C. only)
ď	Elect deep rent skewed project (section 142(d)(4)(B)) (see			15-40	(N. F.O. Offiy)
Jnder are tru	penalties of perjury, I declare that I have examined this form and e, correct, and complete.		of my		ge and belief, they
	1/1/2 ==================================				
. <	- Wiga	91-1893333	k		
> <	Signature	91-1893333 Taxpayer identification number			Date
Sa	- Magan	91-1893333 Taxpayer identification number 2016 First year of the credit period		*******	Date

RIN#	BIN # Addresses			
TX-15-02102	1501 Circle S	Austin, TX 78611	\$	Allowable 16,875.00
TX-15-02103	1501 Circle S	Austin, TX 78611	\$	8,437.50
TX-15-02104	1501 Circle S	Austin, TX 78611	\$	24,647.63
TX-15-02106	1501 Circle S	Austin, TX 78611	\$	31,770.23
TX-15-02107	1501 Circle S	Austin, TX 78611	\$	29,925.00
	I	Total Credit for Project	\$	111,655.35

8609 Form

(Rev. December 2016)

Department of the Treasur
Internal Revenue Service

Low-Income Housing Credit Allocation and Certification

▶ Information about Form 8609 and its separate instructions is at www.irs.gov/form8609.

OMB No. 1545-0988

**************	Allocation of Credit								
BREWSKE									
Chec		1							
	dress of building (do not use P.O. box) (see instructions) ora Springs Apartments Total Buildings 7	B Name and address of housing credit agency							
	Circle S 7 of 7	TDHCA							
Austi	n, TX 78711	221 East 11th Street							
15129		Austin, TX 78711 - 3941							
C Na	ame, address, and TIN of building owner receiving allocation	D Employer identi	fication number of agency						
Pand	ora Springs Ltd		74-261052			-			
	3 I H 49	E Building identific	cation number (BIN)						
Burne	et, Texas 78611								
TIN	91-1893333		TX-15-01207	,					
1a	Date of allocation ► 4/1/2015 b Maximum hou	using credit dollar	amount allowable .	1b		29,925			
2	Maximum applicable credit percentage allowable (see ins	2		9.00%					
За	Maximum qualified basis			3a		222 500			
b	Check here ► ☐ if the eligible basis used in the compu	Ja		332,500					
	the high-cost area provisions of section 42(d)(5)(B). Ent								
	basis was increased (see instructions)			3b	1	0 0 %			
4	Percentage of the aggregate basis financed by tax-exem			4	•	0.00%			
5	Date building placed in service								
6	Check the boxes that describe the allocation for the building (check those that apply):								
а				zed c	☐ Evictin	a huildina			
d	The state of the s								
f	Allocation subject to nonprofit set-aside under sec. 42		oj renabilitation expenditi	ai co iic	rederally	Subsidized			
that I I	penalties of perjury, I declare that the allocation made is in compave examined this form and to the best of my knowledge and beli	ief, the information i	s true, correct, and comple	the Int	ternal Reve	nue Code, and			
>	Signature of authorized official	ILI	pe or print))	· · · · · · · · · · · · · · · · · · ·				
Pani	First Voar Cartification Completed by Building O	name (please typ	of to the Civet Veey of the	, Cua	Da	te			
	, , ,			1 1	III Period				
7	Eligible basis of building (see instructions)			7		950,000			
8a	Original qualified basis of the building at close of first yea			8a		332,500			
b	Are you treating this building as part of a multiple build			,					
0	(see instructions)?			✓ '		J No			
9a	, ,				Yes L] No			
b	For market-rate units above the average quality standards of lo			,	. poss	-			
40	to reduce eligible basis by disproportionate costs of non-low-in-	come units under s	ection 42(d)(3)(B)? .	□ `	Yes L] No			
10	Check the appropriate box for each election.	1.1							
	Caution: Once made, the following elections are irrevocal		inn (nasti - 20/0/4)) *	. رسا		T. N.			
a	Elect to begin credit period the first year after the building] No			
b	Elect not to treat large partnership as taxpayer (section 4:	Q/ (//							
c d	Elect minimum set-aside requirement (section 42(g)) (see Elect deep rent skewed project (section 142(d)(4)(B)) (see			☐ 25-60 (N.Y.C. only) ☐ 15-40					
Jnder	penalties of perjury, I declare that I have examined this form and correct, and complete.			Construct		nd belief, they			
. <	-an Magan	01 10000							
>			33 tion number		Dat	e			
Sa	m Morgan Name (please type or print)	2016 First year of the cr	adit pariad						
·				**********************	~ ~ ~ ~ ~				
or Pri	vacy Act and Paperwork Reduction Act Notice, see separate i	instructions.	Cat. No. 63981U		Form 8609	(Rev. 12-2016)			

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BIN#	BIN # Addresses		Maximum Credit Allowable		
TX-15-02102	1501 Circle S	Austin, TX 78611	\$	16,875.00	
TX-15-02103	1501 Circle S	Austin, TX 78611	\$	8,437.50	
TX-15-02104	1501 Circle S	Austin, TX 78611	\$	24,647.63	
TX-15-02106	1501 Circle S	Austin, TX 78611	\$	31,770.23	
TX-15-02107	1501 Circle S	Austin, TX 78611	\$	29,925.00	
	\$	111,655.35			

COMPLIA REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

HOME AHDP HTC

BIN #: TX1501201

NSP BOND HTC Exch HTF

TCAP

(LIHTC Only)

LINO

Building #:

MOVE OUT DATE MOVE IN DATE

05/12/2016

ANNUAL INCOME LAST NAME

BR HOUSING ASSIST. PAYMENT

TIC DATE

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UNIT QUALIFICATIONS

NEEDS REQ. MEETS SPECIAL

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Income HTC: 30 Rent HTC: 30

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Income HTC: 30 Rent HTC: 30

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Income HTC: 60 Rent HTC: 60

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Income HTC: 60 Rent HTC: 60

MEETS SPECIAL NEEDS REQ.

UNIT QUALIFICATIONS

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RE CERT

TIC DATE

HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

TENANT PAID RENT

ANNUAL INCOME

LAST NAME

MOVE OUT DATE

MOVE DATE

UNIT#

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Building #: 2

BIN #: TX1501202

(LIHTC Only)

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Income HTC: Mkt Rent HTC: Mkt

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Income HTC: 60 Rent HTC: 60

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HH SIZE

05/12/2016

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TENANT PAID RENT

UTILITY ALLOW.

COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

NSP HOME AHDP HTC

BIN #: TX1501203

MOVE IN DATE

LINO

BOND HTC Exch HTF

TCAP

(LIHTC Only)

LAST NAME

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Building #:

MOVE OUT DATE

UTILITY ALLOW. TENANT PAID RENT ANNUAL INCOME

TIC DATE

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UNIT QUALIFICATIONS

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NEEDS REQ. MEETS SPECIAL

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05/01/2016

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MEETS SPECIAL NEEDS REQ.

UNIT QUALIFICATIONS

HH SIZE

RE CERT

TIC DATE

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HOUSING ASSIST. PAYMENT

UTILITY ALLOW,

TENANT PAID RENT

ANNUAL INCOME

LAST NAME

MOVE OUT DATE

MOVE DATE Z

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Building #: 4

BIN #: TX1501204

(LIHTC Only)

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COMPLIA. REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

Pandora Springs PROPERTY NAME:

TDHCA

NSP BOND HTC Exch HTF HOME AHDP HTC

BIN #: TX1501205

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Building #:

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MOVE (LIHTC Only)

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ANNUAL LAST NAME

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MEETS SPECIAL

UNIT QUALIFICATIONS

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RE CERT

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HOUSING ASSIST. PAYMENT

UTILITY ALLOW.

TENANT PAID RENT

ANNUAL INCOME

LASTNAME

MOVE OUT DATE

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Building #:

BIN #: TX1501206

(LIHTC Only)

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08/13/2016

HOUSING ASSIST. PAYMENT

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TENANT PAID RENT

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UTILITY ALLOW.

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Russell

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20 04/28/2016

21 11/18/2016

22 07/22/2016

COMPLIANCE REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

NSP BOND HTC Exch HTF HOME AHDP HTC

TCAP

BIN #: TX1501207

MOVE (LIHTC Only) UNIT#

MOVE OUT DATE

DATE Z

TENANT PAID RENT ANNUAL INCOME Building #: LAST NAME

HOUSING ASSIST. PAYMENT UTILITY ALLOW.

TIC DATE # BR

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rev 11/13/2009

227

COMPLIA REPORT UNIT STATUS REPORT

THIS REPORT REFLECTS THE PROPERTY'S OCCUPANCY ON: 03/13/2017

PROPERTY NAME: Pandora Springs

TDHCA

TCAP AHDP HOME HTC

BIN #: TX1501207

NSP BOND HTC Exch HTF

(LIHTC Only)

LINO

Building #: 7 LAST NAME MOVE OUT DATE MOVE IN DATE

TIC DATE # B**R**

RE CERT

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UNIT QUALIFICATIONS

MEETS SPECIAL NEEDS REQ.

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Income HTC: Mkt Rent HTC: Mkt

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HTC: Mkt

Rent

HTC: Mkt HTC: Mkt

Income

Z

04/10/2016

0

0

850

0

Rent

HTC: 60 HTC: 60

Income

Z

09/14/2016

0

74

977

28400

Rent

2º

06/16/2016

7

0

0

HOUSING ASSIST. PAYMENT

ANNUAL INCOME

TENANT UTILITY
PAID ALLOW.
RENT

1200

44 06/16/2016

45 06/01/2016

46 09/14/2016

47 04/10/2016

48 10/10/2016

Unit Status Report - Statistics Page Part 1 - Demographics

Ethnicity

Race

Other

Part 2 - Accessibility

Mobility

Not Equipped

Vision or Hearing Impairment

44

ر ع ئة Program Qualification Part 3 - Qualification

29.17% 22.92% 45.83% Percent 14 22

Market

IO

09

HIC HTC HIC HTC

Part 4 - Additional Assistance

02.08%

HUD Housing Choice Voucher (HCV), tenant-based2

Part 5 - Special Needs Unit Count