

LIHTC ANNUAL INCOME CERTIFICATION PORTAL USER GUIDE

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The User Name Box
The User Name Box

Introduction

The Idaho Housing and Finance Association (IHFA) LIHTC ANNUAL INCOME CERTIFICATION PORTAL was created to make it easy and secure for property managers that participate in LIHTC programs to submit their annual tenant income and statistical data to IHFA.

Idaho Housing and Finance Association www.ihfa.org	[Log In] LIHTC ANNUAL INCOME CERTIFICATION PORTAL
Home Support	
WELCOME PROPERTY MANAGER	
Please enter your assigned User Name and Password to manage your annual certification process. Account Information User Name: Password: Log In	
If you have trouble logging in, please <u>contact us</u> . Forgot Your Password? Enter your User Name to receive your password. User Name: Get Password	
©2012, <u>Idaho Housing and Finance Association</u> . All rights reserved. <u>Change Your Password</u>	

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Logging In

Website Location

You can log into the IHFA LIHTC ANNUAL INCOME CERTIFICATION PORTAL at the following website address:

https://lender.ihfa.org/LIHTCComplianceApp/

NOTE: This is a secure website.

The Account Information Login Box

Enter your assigned user name and your current password into the **User Name** and **Password** boxes respectively then click the **Log In** button.

Jser Name:		
propertymanag	er@domain.com	
assword:		

If you entered your account information correctly, you will be taken to the **Owned/Managed Buildings** screen.

Log In

If you mistype your user name or password you will see the following message:

Your login attempt was not successful. Please try again.

Account Information	
User Name:	
propertymanager@domain.com	
Password:	

The **Password** will have to be entered again for your security.

For your security, if you fail to log in after 5 tries your account will be locked. If that happens, please contact us to unlock your account.

NOTE: Your user name and a temporary password will be created by IHFA and emailed to you with login instructions. Once logged in, it is a good idea to change your password.

Log In

Forgot Your Password?

If you forget your password, use the **Forgot Your Password** form to reset it. Simply enter your user name in the **User Name** box then click the **Get Password** link.

Fo	rgot Your	Password?	
Enter your User	Name to	receive your pa	issword.
User Name:]
		Get Pa	assword

If you entered your user name correctly, a new temporary password will be generated and emailed to you. Once logged in, it is a good idea to change your password.

Changing Your Password

At the bottom of every screen you will see a **Change Your Password** link:

©2012, <u>Idaho Housing and Finance Association</u>. All rights reserved. <u>Change Your Password</u>

You can change your password at any time, but you have to be logged in to perform this function.

To change your password, click the **Change Your Password** link. On the **Change Password** form, enter your **Old Password**, **New Password** and **Confirm New Password**, then click the **Change Password** button. If you entered your old password correctly, and your new password meets our minimum password criteria, your password will be changed immediately.

After changing your password, log out of the portal and log back in with your new password.

Idaho Housing and Finance Association www.ihfa.org	Welcome propertymanager@domain.com [Log Out] LIHTC ANNUAL INCOME CERTIFICATION PORTAL
Home Support	
CHANGE PASSWORD	
Use the form below to change your password.	
New passwords are required to be a minimum of 6 characters in length. Account Information Old Password: New Password: Confirm New Password: Confirm New Password: Confirm New Password: Confirm New Password: Change Password	
©2012, <u>Idaho Housing and Finance Association</u> . <u>Change Your Password</u>	All rights reserved.

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The Owned/Managed Buildings Screen

After logging in, you will be taken to the **Owned/Managed Buildings** screen. This screen displays a list of properties and the buildings within those properties that your login is associated with. The list is ordered by **Property Name**, then by **BIN**. If you don't see a property that you own or manage please contact us.

If you manage multiple properties the list will alternate between white and light blue to indicate the grouping of properties.

		daho H nd Fin ssociati ww.ihfa.org	lousing ance	Welcome p	ropertymai	nager@domain.c LIHTC ANNUA CERTIFICATIC	om [<u>log Out</u>] Al INCOME DN PORTAL
Home Sup	oport	BUILDINGS					
Please click one o	the CE	RTIFY TENANTS links to cert	ify the tenants living in the building.				
Manage	PIN	Property Name	Address	County	BIN	Most Immediate Certification Due Date (CLICK HERE FOR COLOR KEY)	Tenant Count
<u>CERTIFY</u> <u>TENANTS</u>	1007	SUNRISE APARTMENTS EAST	123 ANYWHERE ST BOISE, ID 83706	ADA	ID9900993	01/01/2013	1
<u>CERTIFY</u> <u>TENANTS</u>	1009	THE ELEGANT ELEPHANT	9938 HOGWARTZ LANE BOISE, ID 83702	ADA	ID9900777	01/01/2013	1
<u>CERTIFY</u> <u>TENANTS</u>	1010	THE SOLAR APARTMENTS	399 W SOLAR WAY MOUNTAIN HOME, II 83772	ADA	ID9900655	04/01/2012	1
							[Log Out]

To certify tenants in a given building, click the **CERTIFY TENANTS** link next to the **PIN**, you will then be taken to the **BUILDING TENANTS** screen.

The Most Immediate Certification Due Date:

- Will be blue if the most immediate tenant certification due date in the building is more than 120 days from being due.
- Will be yellow if the most immediate tenant certification due date in the building is within 120 days of being due.
- Will be red if the most immediate tenant certification due date in the building is passed due.
- Will be black if all of the units in the building are vacant.

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The Building Tenants Screen

The Building Tenants screen lists all the tenants in a building ordered by **Unit Number**, and then **Unit Certification Due Date**.

	(144)	lc a A	dal nd ssc w.ihf	Fin Fin ociat	ion	ing Ə	Wel	come propertymana	ger@domain.d	AL INCOM
Но	me	Support								
BUI	LDING									
PIN	1 F	Property Nar	ne	A	ddress	County	BIN			
100	7 SUNRIS	E APARTMEN	NTS EAST	123 ANYWHER	E ST BOISE, ID 8370	6 ADA ID	9900993			
lUI	LDING U ie click one Manage	UNIT HIST of the CERI Unit Number	ORY TFY links t Is Vacant	e certify the unit Effective Date of Certification	Unit Unit Certification Due Date (CLICK HERE FOR COLOR KEY)	rtification has b Certification Status	een submitted Head d Househ Last Nat	click VIEW to view the of Head of old Household ne First Name	historical record Household Member Count	Submitted Date
						1000000				
8	CERTIFY	1A		01/01/2012	01/01/2013	Initial Certification	Smith	John	1	

To certify a tenant, click the **CERTIFY** link next to the **Unit Number** in the **Building Unit History** table. You will then be taken to the **ANNUAL INCOME CERTIFICATION/RECERTIFICATION** screen where the actual certification takes place.

The Unit Certification Due Date

- Will be blue if the current tenant certification due date is more than 120 days from being due.
- Will be yellow if the current tenant certification due date is within 120 days of being due.
- Will be red if the current tenant certification due date is passed due.
- Will be black if this is a previous (re)certifications for the Unit, or, the Unit is vacant.

The following rules are followed before the delete button 🙆 is enabled up:

- 1. If there is a submitted date the certification becomes read only.
- 2. All re-certifications that have not been submitted can be deleted.
- 3. Initial certifications can be deleted if all re-certifications are deleted first.

100	Manage	Unit Number	Is Vacant	Effective Date of Certification	Unit Certification Due Date CLICK HERE FOR	Certification Status	Head of Household Last Name	Head of Household First Name	Household Member Count	Submitted Date
8	CERTIFY	14		01/01/2012	COLOR KEY) 01/01/2013	Initial Certification	Smith	John	1	
	VIEW	1A		02/14/2011	02/14/2011	Initial Certification	Jones	Janet	1	12/31/201

If there is a move in, use the **Unit Move In** form to create the new certification.

UNIT MOVE IN								
For a Unit Move In, choose a Unit Number and completely fil	out the move in information then click the Crea	ate Move In button.						
Effective Date of Certification:	Tenant Paid Monthly Rent:	\$						
LIHTC Qualification Date:	Monthly Utility Allowance:	\$						
Unit Number:	Other Monthly Non-optional Charges:	\$						
Number of Bedrooms: 1 -	Total Monthly Rent Assistance:	\$						
Household Meets LIHTC Income Restriction at:	Federal Rent Assistance:	\$						
50% AMGI; 60%	Other Rent Assistance:	\$						
If income restriction for this unit is set-	Source of Federal Rent Assistance:							
aside below elected ceiling, enter % percentage. * *Do not enter the actual calculated percentage for tenant. Current LIHTC Income Limit per Family Size: \$	 HUD Multi-Family Project-Based Rental Assistance (PBRA)¹ HUD Section 8 Moderate Rehabilitation Public Housing Operating Subsidy HOME Rental Assistance 	5. HUD Housing Choice Voucher (HCV), tenant-based 6. HUD Project-Based Voucher (PBV) 7. USDA Section 521 Rental Assistance Program 8. Other Federal Rental Assistance						
	¹ Includes: Section 8 New Construction/Substantial Rehabilitation; Section 8 Loan Management; Section 8 Property Disposition; Section 202 Project Rental Assistance Contracts (PRAC)							
	Maximum LIHTC Rent for this Unit:	\$						
	Unit Meets LIHTC Rent Restriction at:							
	50% AMGI;	60% AMGI;						
	If rent for this unit is set-aside below elected	ceiling, enter percentage. * %						
	*Do not enter the actual calculated percentage	for tenant.						
		Create Move In						

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Effective Date of Certification

The date the certification is effective. This date cannot be a future date.

LIHTC Qualification Date

The date the unit qualifies for LIHTC.

Unit Number

The Unit Number is an auto-complete field. You can begin typing a unit number and it will bring up a list of unit numbers. If the unit number you want is not in the list simply type in the unit number and it will be created.

Number of Bedrooms

The Number of Bedrooms lists the available number of bedrooms in the project. Please choose the correct number of bedrooms for the unit.

Household Meets LIHTC Income Restriction at

Indicate the income restriction that the household meets according to what is required by the setaside(s) for the project. If your agency requires a lower income restriction than the federal limit, enter the percent required in the **Other** box.

Current LIHTC Income Limit per Family Size

Enter the Current Maximum Move-in Income Limit for the household size. The income limit must be the IRS Section 42 income limit associated with the federal tax credit set-aside.

Tenant Paid Monthly Rent

Enter the monthly amount the tenant pays toward rent (not including rent assistance payments such as Section 8).

Monthly Utility Allowance

Enter the monthly utility allowance. If the owner pays all utilities, enter zero. If none, then enter zero.

Other Monthly Non-optional Charges

Enter the monthly amount of non-optional charges, such as mandatory garage rent, storage lockers, charges for services provided by the development, etc.

Total Monthly Rent Assistance

Enter the monthly amount of rent assistance, if any. Otherwise, enter zero.

Federal Rent Assistance

Enter the monthly amount of federal rent assistance, if any. Otherwise, enter zero.

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Other Rent Assistance

Enter the monthly amount of non-federal rent assistance, if any. Otherwise, enter zero.

Source of Federal Rent Assistance

The source of the Federal Rent Assistance portion of the Total Monthly Rent Assistance. Use the following table:

 HUD Multi-Family Project-Based Rental Assistance (PBRA)¹
 HUD Section 8 Moderate Rehabilitation
 Public Housing Operating Subsidy

4. HOME Rental Assistance

5. HUD Housing Choice Voucher (HCV), tenantbased

6. HUD Project-Based Voucher (PBV)

- 7. USDA Section 521 Rental Assistance Program
- 8. Other Federal Rental Assistance

¹ Includes: Section 8 New Construction/Substantial Rehabilitation; Section 8 Loan Management; Section 8 Property Disposition; Section 202 Project Rental Assistance Contracts (PRAC)

Maximum LIHTC Rent for this Unit

Enter the maximum allowable gross rent for the unit. This amount must be the maximum amount allowed by the Current Income Limit per Family Size—specifically, the max rent limit for the federal 50% or 60% set aside.

Unit Meets LIHTC Rent Restriction at

Indicate the appropriate rent restriction that the unit meets according to what is required by the setaside(s) for the project. If your agency requires a rent restriction lower than the federal limit, enter the percent required in the **Other** field.

Create Move In Button

Click the **Create Move In Button** to create the new move in. You will be taken to the **ANNUAL INCOME CERTIFICATION/RECERTIFICATION** screen to add household members, etc.

The ANNUAL INCOME CERTIFICATION/RECERTIFICATION Screen

The ANNUAL INCOME CERTIFICATION/RECERTIFICATION screen is designed to emulate the IHFA ANNUAL INCOME CERTIFICATION/RECERTIFICATION paper form, but enables you to certify or re-certify quickly and easily.

Carefully verify the unit information, and make any necessary changes before submitting for certification.

	Idaho Housing and Finance Association www.ihfa.org							ne mary	/annp	@whitewatercr LIHTC AN CERTIFIC.	eek.com [! INUAL IN ATION PC	Log Out] COME DRTAL
Но	Home Manage Users Support											
HUD LIHTC Tenant Data Collection Form												
Cer	rtificati	on Type:					Effective	Date of C	ertifica	ition:	08/01/2012	!
V	Initia	Certification 🔲 Recen	tification 🔲 Other				LIHTC Qualification Date: 08/01/2012				!	
			F	Part I: 1	Development I	Data	•					
Pr	operty	Name:	SUNRISE APARTMENTS I	EAST			PIN:	HC990	099	BIN:	ID9900993	
A	ddress	:	123 ANYWEHRE ST BOISE,	ID 8370	6		U	nit Numbe	n: _	1 #Bedrooms:	2 -	
			Part	II: Ho	ousehold Comp	osit	ion					
Was	s Unit '	Vacant on December 31, 2012?	Tes (If Yes, no other tenar	nt-specif	fic information req	uired	.)					
	HH Mbr #	Last Name	First Name	МІ	Household Relationship		DOB	F/T Student?	Last 4 Digits of SSN or Alien Reg.	Race	Hispanic or I Latino?	Disabled?
	1	John	Smith		Head	01/	01/1970		0123	No answer	•	

HUD LIHTC Tenant Data Collection Form

HUD LIHTC Tenant Data Collection Form									
Certification Type:				Effective Date of Certification:	08/01/2012				
Initial Certification	Recertification	Other		LIHTC Qualification Date:	08/01/2012				

Certification Type

Enter the type of tenant certification: Initial Certification (move-in), Recertification (annual recertification), or Other; If Other, specify the purpose of the recertification (i.e., a unit transfer, a change in household composition, or other state-required recertification).

Effective Date of Certification

Enter the effective date of the certification.

LIHTC Qualification Date

Enter the LIHTC Qualification Date.

Part I: Development Data

Part I: Development Data								
Property Name:	SUNRISE APARTMENTS EAST	PIN:	HC990099	BIN:	ID9900993			
Address:	123 ANYWEHRE ST BOISE, ID 83706		Unit Number: 1	#Bedrooms:	2 -			

Bedrooms

Verify the number of bedrooms in the unit, change if necessary.

Part II: Household Composition

	Part II: Household Composition										
w	Was Unit Vacant on December 31, 2012? 🔲 Yes (If Yes, no other tenant-specific information required.)										
	HH Mbr #	Last Name	First Name	МІ	Household Relationship	DOB	F/T Student?	Last 4 Digits of SSN or Alien Reg.	Race	Hispanic or Latino?	: Disabled?
	1	John	Smith		Head 🔻	01/01/1970		0123	No answer		
	2				-				•		
	3				-				•		
	4								•		
	5								•		
	6				-				•	· 📄	
	7				-	•			•		
	8				-				•		
	9				-	•			-		
	10				-				-		
	11				-				-		
	12				-	·			•		

Was Unit Vacant on December 31, 2012?

Check this box if the unit is vacant at the time of the certification.

HH Mbr

The household member number. Please place the head of the household on line on HH Mbr # 1. This number is used to identify which household member you are referring to in the income grids below.

Last Name

The household member's last name.

First Name

The household member's first name.

MI

The household member's middle initial (up to 2 characters).

Household Relationship

The household member's relationship to the head of household.

Head – Head of Household Spouse – Spouse Adult Tenant – Adult co-tenant Child – Child Foster Child – Foster child or Foster adult LIHTC ANNUAL INCOME CERTIFICATION PORTAL USER GUIDE – Page **12** of **35** Caretaker – Live-in caretaker Other – Other family member Not Defined – None of the above

DOB

The household member's date of birth.

F/T Student?

Check this box if the household member is a full-time student.

Last 4 Digits of SSN or Alien Reg.

For each household member, enter the last four digits of their social security number or the last four digits of their alien registration number.

If household member does not have a social security number, use the household member's birth month and year (e.g., January, 1956 would be 0156).

Race

The household member's race.

White - White Blk/African Am. - Black/African American American Indian - American Indian/Alaska Native Asian - Asian Hawaiian/Pac.Isl. - Native Hawaiian/Other Pacific Islander No answer - Did not respond

Hispanic or Latino?

Check this box if the household member's ethnicity is identified as Hispanic or Latino.

Disabled?

Check this box if any member of the household is disabled according to Fair Housing Act definition for handicap (disability):

- A physical or mental impairment which substantially limits one or more major life activities; a record of such an impairment; or being regarded as having such an impairment. For a definition of "physical or mental impairment" and other terms used in this definition, please see 24 CFR 100.201, available at http://www.fairhousing.com/index.cfm?method=page.display&pagename=regs fhr 100-201.
- "Handicap" does not include current, illegal use of or addiction to a controlled substance.
- An individual shall not be considered to have a handicap solely because that individual is a transvestite.

LIHTC ANNUAL INCOME CERTIFICATION PORTAL USER GUIDE – Page 13 of 35

Deleting a Line

If you need to delete a household member line, click the 🐼 next to the HH Mbr #. You will be asked to verify the delete. The head of household cannot be deleted.

Part III: Gross Annual Income (Use ANNUAL Amounts)

From the income verification forms obtained from each income source, enter the gross amount anticipated to be received for the twelve months from the effective date of the (re)certification. If individual household member income is provided, list the respective household member number from PART II – HOUSEHOLD COMPOSTION.

	PART III - GROSS ANNUAL INCOME (USE ANNUAL AMOUNTS)											
	HH Mbr #	Employment or Wages (\$)	Soc. Security/Pensions (\$)	Public Assistance (\$)	Other Income (\$)							
8	1	23,000										
	2											
	3											
	4											
	5											
	6											
	7											
	TOTALS	\$23,000	\$0	\$0	\$0							
	\$23,000											

NOTE: See HUD Handbook 4350.3 for complete instructions on verifying and calculating income, including acceptable forms of verification.

HH Mbr

The household member number from PART II – HOUSEHOLD COMPOSTION.

Employment or Wages

Enter the annual amount of wages, salaries, tips, commissions, bonuses and other income from employment; distributed profits and/or net income from a business.

Soc. Security Pensions

Enter the annual amount of Social Security, Supplemental Security Income, pensions, military retirement, etc.

Public Assistance

Enter the annual amount of income received from public assistance (i.e., TANF, general assistance, disability, etc.).

Other Income

Enter the annual amount of alimony, child support, unemployment benefits or any other income regularly received by the household.

Totals

The website automatically calculates totals for you.

Deleting a Line

If you need to delete an income line, click the Solution next to the HH Mbr #. You will be asked to verify the delete. LIHTC ANNUAL INCOME CERTIFICATION PORTAL USER GUIDE – Page **15** of **35**

Part IV: Income from Assets

From the third party verification forms obtained from each asset source, list the gross amount anticipated to be received during the twelve months from the effective date of the certification. If individual household member income from assets is provided, list the respective household member number from PART II – HOUSEHOLD COMPOSTION.

	Part IV: Income from Assets										
	HH Mbr #	Type of Asset	Is Current Asset?	Cash Value of Asset (\$)	Annual Income from Asset (\$)						
8	1 -	Savings	V	1,000							
	•										
	-										
	-										
	•										
	•										
	▼										
	•										
	-										
			TOTALS:	\$1,000	\$0						
		if Total Cash Value of Assets is over \$5000 \$0	Passbook Rate x 2.00%	= Imputed Income:	\$0						
		The TOTAL INCOME FROM ASSETS is the greater of the Annual Income from Asset column and the Imputed Income field		TOTAL INCOME FROM ASSETS:	\$0						
		IOTAL ANNAUL HOUSEHOLD INCOME is IOTAL INCOME + IOTAL INCOME FROM ASSETS		TOTAL ANNAUL HOUSEHOLD INCOME:	\$1,000						
F	ffective D	ate of LIHTC Income Certification: 08/01/2	012 Hou	sehold Size at Certification:	1						

NOTE: See HUD Handbook 4350.3 for complete instructions on verifying and calculating income from assets, including acceptable forms of verification.

HH Mbr

The household member number from PART II – HOUSEHOLD COMPOSTION.

Type of Asset

A free form field to note the type of asset (i.e., checking account, savings account, etc.).

Is Current Asset?

Check the box if the asset is current. The asset is current if the family currently owns or holds the asset. The asset is imputed if the family has disposed of the asset for less than fair market value within two years of the effective date of (re)certification.

Cash Values of Asset

Enter the cash value of the respective asset.

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Annual Income from Asset

Enter the anticipated annual income from the asset (i.e., savings account balance multiplied by the annual interest rate).

Totals

Although the totals are calculated automatically for your convenience, they are calculated as follows:

If the total of the **Cash Value of Asset** column is greater than \$5,000 then Imputed Income is calculated.

Imputed Income is the total of the Cash Value of Asset column * 2%.

The **TOTAL INCOME FROM ASSETS** is the greater of the **Annual Income from Asset** column and the **Imputed Income** field.

TOTAL ANNAUL HOUSEHOLD INCOME is **TOTAL INCOME** (from PART III – GROSS ANNUAL INCOME) + **TOTAL INCOME FROM ASSETS**.

Effective Date of LIHTC Income Certification

The Effective Date of the LIHTC Income Certification.

Household Size at Certification

The household size at the time of certification.

Deleting a Line

If you need to delete an asset income line, click the 😂 next to the HH Mbr #. You will be asked to verify the delete.

Part V: Determination of Income Eligibility

	Part V: Determination of In	ncome Eligibility		
Total Annual Income From All Sources:	\$1,000	RECERTIFICATION ONLY:		
Household Maste LIHTC Income Pastriction at:	50% AMGI;	Current Income Limit x 140%:		
Household Weets Lin I C income Resultion at.	 60% AMGI; 	Household Income exceeds: 140% at recertification:		
If income restriction for this unit is set-aside below elected ceiling, enter percentage. *		Yes No Household Income at LIHTC Qualification Date: \$ 0		
Do not enter the actual calculated percentage for mant.	%	Household Size at LIHTC Qualification Date:1		
Current LIHTC Income Limit per Family Size:	\$ 23,000			

Total Annual Income From All Sources

This is calculated for your convenience.

Household Meets Income Restriction At

Indicate the income restriction that the household meets according to what is required by the setaside(s) for the project. If your agency requires a lower income restriction than the federal limit, enter the percent required in the **Other** box.

Current LIHTC Income Limit per Family Size

Enter the Current LIHTC Income Limit per Family Size. The income limit must be the IRS Section 42 income limit associated with the federal tax credit set-aside.

RECERTIFICATION ONLY

These values are calculated for your convenience.

Current Income Limit x 140%

For recertifications only, multiplies the Current Income Limit per Family Size by 140%.

Household Income exceeds: 140% at recertification

If **TOTAL ANNUAL HOUSEHOLD INCOME FROM ALL SOURCES** exceeds **Current Income Limit x 140%** at Recertification the **Yes** box will be checked – **No** otherwise.

Household Income at LIHTC Qualification Date

Enter the Household Income at LIHTC Qualification Date.

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Household Size at LIHTC Qualification Date

Household Size at LIHTC Qualification Date.

PART VI – RENT

Part VI: Monthly Rent								
Tenant Paid Monthly Rent:	\$	450	Maximum LIHTC Rent for this Unit: \$		650			
Monthly Utility Allowance:	\$	90			50%			
Other Non-Optional Charges:	r Non-Optional Charges: \$ 10 Unit Meets LIHTC Rent Restriction at:		Unit Meets LIHTC Rent Restriction at:		AINOI,			
Gross Monthly Rent for Unit:		\$550		V	AMGI;			
(Tenant Paid Rent plus Utility Allowance and Other N Charges)	lon-Op	tional	If rent for this unit is set-aside below selected ceiling, enter percentage. * *Do not enter the actual calculated percentage for tenant.			%		
Total Monthly Rent Assistance:	\$	550						
Federal Rent Assistance:	\$	450						
Other Rent Assistance:	\$	100						
Source of Federal Rent Assistance:		4						
1. HUD Multi-Family Project-Based Rental Assistance 2. HUD Section 8 Moderate Rehabilitation 3. Public Housing Operating Subsidy 4. HOME Rental Assistance	e (PBR.	A) ¹	5. HUD Housing Choice Voucher (HCV), tenant-based 6. HUD Project-Based Voucher (PBV) 7. USDA Section 521 Rental Assistance Program 8. Other Federal Rental Assistance					
¹ Includes: Section 8 New Construction/Substantial R Contracts (PRAC)	ehabili	tation; Section	8 Loan Management; Section 8 Property Disposition; Section 202 Projec	t Rent	al Assista	nce		

Tenant Paid Monthly Rent

Enter the monthly amount the tenant pays toward rent (not including rent assistance payments such as Section 8).

Monthly Utility Allowance

Enter the monthly utility allowance. If the owner pays all utilities, enter zero. If none, then enter zero.

Other Monthly Non-optional Charges

Enter the monthly amount of non-optional charges, such as mandatory garage rent, storage lockers, charges for services provided by the development, etc.

Total Monthly Rent Assistance

Enter the monthly amount of rent assistance, if any. Otherwise, enter zero.

Federal Rent Assistance

Enter the monthly amount of federal rent assistance, if any. Otherwise, enter zero.

Other Rent Assistance

Enter the monthly amount of non-federal rent assistance, if any. Otherwise, enter zero. LIHTC ANNUAL INCOME CERTIFICATION PORTAL USER GUIDE – Page **19** of **35**

Source of Federal Rent Assistance

The source of the Federal Rent Assistance portion of the Total Monthly Rent Assistance. Use the following table:

1. HUD Multi-Family Project-Based Rental Assistance (PBRA)¹

2. HUD Section 8 Moderate Rehabilitation

- 3. Public Housing Operating Subsidy
- 4. HOME Rental Assistance

5. HUD Housing Choice Voucher (HCV), tenantbased

6. HUD Project-Based Voucher (PBV)

7. USDA Section 521 Rental Assistance Program

8. Other Federal Rental Assistance

¹ Includes: Section 8 New Construction/Substantial Rehabilitation; Section 8 Loan Management; Section 8 Property Disposition; Section 202 Project Rental Assistance Contracts (PRAC)

Maximum LIHTC Rent for this Unit

Enter the maximum allowable gross rent for the unit. This amount must be the maximum amount allowed by the Current Income Limit per Family Size—specifically, the max rent limit for the federal 50% or 60% set aside.

Unit Meets LIHTC Rent Restriction at

Indicate the appropriate rent restriction that the unit meets according to what is required by the setaside(s) for the project. If your agency requires a rent restriction lower than the federal limit, enter the percent required in the **Other** field.

PART VII - STUDENT STATUS

PART VII - STUDENT STATUS					
ALL OCCUPANTS ARE FULL TIME STUDENTS	If checked, select a student explanation				

ALL OCCUPANTS ARE FULL TIME STUDENTS

If all household members are full-time students, check this box.

NOTE: This box is automatically checked if the website detects all household members have their F/T Student? flag checked in PART II - HOUSEHOLD COMPOSITION. It can be overridden if necessary.

NOTE: Full-time is determined by the school the student attends.

If checked, select a student explanation

If all occupants are full-time students, indicate the appropriate exemption as listed in the box to the right. Note that not all exemptions listed are applicable to each state, e.g. Extended-Use Period.

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Part VIII - Program Type

	PART VIII - PROGRAM TYPE										
Mark the program(s) listed below (A. through E.) for which this household's unit will be counted toward the property's occupancy requirements. Under each program marked, indicate the household's income status as established by this certification/recertification.											
A. Tax Credit	A. Tax Credit 🔲 B. HOME 📄 C. Tax Exempt 🗍 D. AHDP		E. Other								
See Part V Above	Income Status	Income Status	Income Status	(name of program)							
		50% AMGI	≤ 50% AMGI	Income Status							
		60% AMGI	≤ 80% AMGI	%							
		80% AMGI	OI **	OI **							
	OI **	OI **									
** Upon recertification, 1	household was determined over-ir	ncome (OI) according to eligibility t	requirements of the program(s) man	ked above.							

Mark the program(s) for which this household's unit will be counted toward the property's occupancy requirements. Under each program marked, indicate the household's income status as established by the certification/recertification. If the property does not participate in the HOME, Tax-Exempt, Affordable Housing Disposition Program (AHDP) or other housing program, leave those sections blank.

Tax Credit

This box is always checked. All IHFA LIHTC programs are tax credits.

HOME

If the property participates in the HOME program and the unit this household will occupy will count towards the HOME program set asides, mark the appropriate box indicting the household's designation.

Tax Exempt

If the property participates in the Tax Exempt Bond program, mark the appropriate box indicating the household's designation.

AHDP

This program is not currently supported by IHFA.

Other

If the property participates in any other affordable housing program, complete the information as appropriate.

SAVE & PRINT SIGNATURE FORM

Saving Your Changes

When you are ready to save your changes, click the **Save** button.



The form will perform some basic error checking on the data you have entered. If there is anything wrong, it will display an error message(s) in red at the top of the page:

Ida an As www.	aho Hou d Finan sociation ^{ihfa.org}	us IC	ing e	We	lcome maryannı	©whitewater LIHTC A CERTIFI€	NNUAL INCOME
Home Manage Users	Support						
H Mbr # 1 - Race cannot be b	olank HUD LI	нтс т	enant Data Coll	ection Fo	rm		
Certification Type:	Recertification 🔲 Other			Effe LIH	ctive Date of Certific: IC Qualification Date	ation: e:	08/01/2012 08/01/2012
		Part I:	Development D	Data			
Property Name:	SUNRISE APARTMENTS 123 ANYWEHRE ST BOIS	<u>S EAST</u> E, ID 8370	16	PIN:	HC990099 Unit Number:	BIN:	ID9900993
Was Unit Vacant on December 31,	Pa 2012? 🔲 Yes (If Yes, no other ten	rt II: He	ousehold Comp	osition uired.)			
HH Mbr #	First Name	MI	Household Relationship	DOB	Last 4 Digits F/T SSN Student? Alien	Race	Hispanic or Disabled? Latino?
1 John	Smith		Head -	01/01/19	70 🗌 123		
2			-				

The errors identify the section the error happened in, the household member number (if applicable) and the actual error. Once fixed, click the **Save** button again to save your changes.

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If everything saved OK, you will see the Certification Saved message in blue.

	Idal and Asso www.ihf	ho Hou Finan ociation a.org	is Ce	ing e		Welcor	ne mar	yannı	@whitewatercr LIHTC AN CERTIFIC	eek.com NNUAL I ATION	[<u>log Out</u>] INCOME PORTAL
Home	e Manage Users S	upport									
Certific	cation Saved		TOT								
		HUDLIH	iic i	enant Data Co	ше	ction Form					
Certifi	ication Type:					Effective	Date of C	ertific	ation:	08/01/2	012
🗹 In	nitial Certification 📃 Rece	rtification Other				LIHTC Q	ualificatio	n Date	e:	08/01/2	012
		Р	Part I:	Development	Da	ıta					
Prop	erty Name:	SUNRISE APARTMENTS F	EAST			PIN	HC990	099	BIN	ID990099	3
Addı	ress:	123 ANYWEHRE ST BOISE,	ID 8370	16		Uı	nit Numbe	er: _	1 #Bedrooms:	2 -	
		Part	П: Но	ousehold Con	ipo	sition					
Was U	Init Vacant on December 31, 2012?	? 🔲 Yes (If Yes, no other tenar	nt-speci	fic information re	qui	red.)					
H M ‡	H ibr Last Name ≇	First Name	MI	Household Relationship		DOB	F/T Student?	Last 4 Digits of SSN or Alien Reg.	Race	Hispar or Latino	nic Disabled?
1	1 John	Smith		Head	-	01/01/1970		0123	No answer	-	
2	2				-					•	
					_ !						

Printing the Signature Form

	SAVE & PRINT SIGNATURE FORM
Save	(Make sure the form is filled out completely & correctly Print Signature Form don't forget to Save any changes before Printing Print Signature Form

When you're ready to print the ANNUAL INCOME CERTIFICATION/RECERTIFICATION for signatures and storage click the **Print Signature Form** button and a printout of the ANNUAL INCOME CERTIFICATION/RECERTIFICATION form will launch in separate window or tab (depending on how your browser is configured) in PDF format. This report requires Adobe Reader to work correctly. Adobe Reader is a free utility available at <u>http://get.adobe.com/reader/</u>.

Before printing the report, verify the information on the report looks correct before getting signatures.

You can print as many copies of the report as you need.

If you need to make corrections, make the corrections on the ANNUAL INCOME CERTIFICATION/RECERTIFICATION form, save your changes, then click the **Print Signature Form** button again.

User Manager

If your User belongs to the OwnerManagerAdmin role (set up by IHFA) you will see an additional menu choice at the top of all screens called **Manage Users**. Clicking the **Manage Users** button will take you to the **Manager Users** screen where you can perform the following tasks:

- Search for existing users
- Add new users and assign them to any project(s) you manage
- Edit existing users (editing user data, reassigning projects they can manage, resetting a password, send user login instructions, unlock a user, disable/enable a user and deleting a user)

B Ida and Ass www.i	ho h d Fin ociat	lousi ance	ng	Welco	me propertymanage LI⊢ CE	r @domain.co ITC ANNUAI RTIFICATION	m [<u>log Out]</u> _ INCOME N PORTAL
Home Manage Users	Support						
MANAGER USERS							
Manage Users for LIHTC ANNUA	Go	Clear Search					
User Name	Email Address	Last Login Date	Approved?	Locked Out?	Role	Manage User	
First Previous 1 Next Last Add New User	Diacesemia.org	2/23/2012 5:10:55 FW	115		owner iviandiger Admini		Cancel
	©2012,	Idaho Housing and Fin Change	iance Associal Your Passwor	<u>tion</u> . All rights r d	eserved.		

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Search for Existing Users

If you want to search for existing users by **User Name** or **Email Address**, you can use the **Search for a user** form.

	VV VV VV.I	ma.org					
Home	Manage Users	Support					
MANAGER	USERS						
Manage LLeis	TOT LIHTC ANNUA	L INCOME CERTIF	ICATION PORTAL				
Search for a us	er property	Go	Clear Search				
lize	r Name	Email Address	I: Login Date	Approved?	Locked Out?	Role	Manage Us
propertymana	ger@domain.com	bruces@ihfa.org	2/29/2012 6:25:16 PM	YES	NO	Owner Manager Admin	Go

The Search for a user Box

Enter your search string. The search string is compared against the **User Name** and **Email Address** fields of all the users in your user list. The search is not case sensitive.

The Go... Button

When you are ready to search, click the **Go...** button and the search will begin.

The Results List

After clicking the **Go**... button, only the users that match your search criteria will be displayed in user list.

The Clear Search Button

Clicking the **Clear Search** button will clear the search results and refresh the user list.

Adding a New User

To add a new user, click the **Add New User** button and you will be taken to the **Add New User to LIHTC ANNUAL INCOME CERTIFICATION PORTAL** screen.



The Add New User to LIHTC ANNUAL INCOME CERTIFICATION PORTAL Screen

The **Add New User to LIHTC ANNUAL INCOME CERTIFICATION PORTAL** screen lets you add users and assign the user to any of the projects you manage to enable you to delegate project management authority.



The User Name Box

The **User Name** field is the name that the user logs into the Portal with. The user name should be the user's email address. This is where password recovery information is sent.

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The Is Approved? Checkbox

If the **Is Approved** checkbox is checked, the user is able to log in. If it is not checked, they will not be able to log in. If you want to create a user ahead of time, but don't want to give them access right away, you can uncheck the box. Otherwise, leave this box checked.

The User Role Drop Down Box

There are two types of user roles – OwnerManagerAdmin and OwnerManager. Both types of roles can manage projects.

- **OwnerManagerAdmin** The OwnerManagerAdmin can manage all projects that are selected in the Project list below the **User Role** drop down box. Additionally, the OwnerManagerAdmin role can create, edit and delete other OwnerManagerAdmins and OwnerManagers.
- **OwnerManager** The OwnerManager (the default role) can manage all projects that are selected in the Project list below the **User Role** drop down box.

The Select the Project(s) this User manages List

The **Select the Project(s) this User manages** list displays all of your projects with a checkbox next to each project. The **PIN** (Project Identifying Number) is displayed for your convenience. Select the project, or projects, you want the new user to manage by clicking the checkbox in the **Selected** column on the project's row.



Select the Project(s) this User manages

Set the User's Password

There are two ways to set a user's password. When you are creating a new user, you have to set their password with one of the two ways.

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Set the User's Password	
Auto Generate Password (If checked a random password will be created for the User, and sent to the User Email Address above along with login instructions)	
OR	
Custom Password **	
Repeat Password	
Send Custom Password Change Email (If checked and a <i>Custom Password</i> is entered it will be sent to the User at the <i>User Email</i> Address above along with login instructions)	V
Add User Cancel	
* Required	
** Password must be at least 6 characters lor	ıg

- Auto Generate Password If you select Auto Generate Password, the system will set the user's password, to a random password that meets the minimum password security rules, when the Add User button is clicked. The new password, along with their user name and login instructions will be emailed to them automatically.
- Custom Password If you fill out the Custom Password and Repeat Password boxes, the system will update the user's password with the password you entered when the Add User button is clicked. If you check the Send Custom Password Change Email checkbox (checked by default), the new password, along with their user name and login instructions will be emailed to them automatically.

Add User Button

When you are ready to save, click the Add User button.

Cancel Button

If you want to cancel and go back to the user list, click the **Cancel** button.

Edit an Existing User

To edit an existing user, click the Go... button in the Manage User column on the user's row:

User Name	Email Address	Last Login Date	Approved?	Locked Out?	Role	Manage User
newuser@domain.com	newuser@domain.com	2/29/2012 7:20:27 PM	YES	NO	OwnerManager	Go
propertymanager@domain.com	bruces@ihfa.org	2/29/2012 7:20:40 PM	YES	NO	Owner Manager Admin	Go

You will be taken to the Manage LIHTC ANNUAL INCOME CERTIFICATION PORTAL User screen.

The Manage LIHTC ANNUAL INCOME CERTIFICATION PORTAL User Screen

From this screen you can change the user's name and consequently their email address, approve or disable them, unlock their user account, change which projects they are allowed to manage, reset their password and delete the user.

Idah and Assoc www.ihfa.	o Housing Finance ciation	Welcome propertymanager@domain.com [<u>Log Out</u>] LIHTC ANNUAL INCOME CERTIFICATION PORTAL
Home Manage Users Supp	port	
MANAGER USERS		
Manage LIHTC ANNUAL INCOME CERT	FICATION PORTAL User newuser@domain.com	
User Information		
User Name (make this the user's email address) *	newuser@domain.com	
User Status		
Last Login Date/Time	2/29/2012 7:20:27 PM	
Is Approved?		
Is Locked Out?		

The User Name Box

The **User Name** field is the name that the user logs into the Portal with. The user name should be the user's email address. This is where password recovery information is sent.

The Last Login Date/Time Label

This is informational only, and shows you the last date and time the user logged in. If they have not logged in yet, it will display the word NEVER.

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The Is Approved? Checkbox

If the **Is Approved** checkbox is checked, the user is able to log in. If it is not checked, they will not be able to log in. If you want to disable a user account indefinitely, but don't want to delete it, uncheck this box.

The Is Locked Out? Checkbox

If the **Is Locked Out** checkbox is checked, the user is not able to log in. If it is not checked, the user will be able to log in. Its primary purpose is to unlock a user that has exceeded the number of unsuccessful login attempts and has been locked out by the system.

The User Role Drop Down Box

There are two types of user roles – OwnerManagerAdmin and OwnerManager. Both types of roles can manage projects.

- **OwnerManagerAdmin** The OwnerManagerAdmin can manage all projects that are selected in the Project list below the **User Role** drop down box. Additionally, the OwnerManagerAdmin role can create, edit and delete other OwnerManagerAdmins and OwnerManagers.
- **OwnerManager** The OwnerManager (the default role) can manage all projects that are selected in the Project list below the **User Role** drop down box.

The Select the Project(s) this User manages List

The **Select the Project(s) this User manages** list displays all of your projects with a checkbox next to each project. The **PIN** (Project Identifying Number) is displayed for your convenience. Select the project, or projects, you want the existing user to manage by clicking the checkbox in the **Selected** column on the project's row. Making changes is optional.



Select the Project(s) this User manages

Reset the User's Password (OPTIONAL)

Resetting a user's password is optional. Do not perform this operation if you don't want to change the user's password, but still want to make other changes to the user account. There are two ways to reset a user's password.

Reset the User's Password (Optional)		
Auto Generate Password (If checked a random password will be created for the User, and sent to the User Email Address above along with login instructions)		
OR		
Custom Password **		
Repeat Password		
Send Custom Password Change Email (If checked and a <i>Custom Password</i> is entered it will be sent to the User at the <i>User Email</i> <i>Address</i> above along with login instructions)	V	
Save Changes Delete User Ca	incel	
* Required		
** Password must be at least 6 characters lo	ıg	

- Auto Generate Password If you select Auto Generate Password, the system will update the user's password, to a random password that meets the minimum password security rules, when the Save Changes button is clicked. The new password, along with their user name and login instructions will be emailed to them automatically.
- Custom Password If you fill out the Custom Password and Repeat Password boxes, the system will update the user's password with the password you entered when the Save Changes button is clicked. If you check the Send Custom Password Change Email checkbox (checked by default), the new password, along with their user name and login instructions will be emailed to them automatically.

The Delete User Button

If you want to delete the user, click the **Delete User** button. You will be asked to confirm the deletion before it occurs. *Use caution, this is a permanent action and cannot be undone*.



The Cancel Button

If you want to cancel and go back to the user list, click the **Cancel** button.

Logging Out

To log out of the IHFA LIHTC ANNUAL INCOME CERTIFICATION PORTAL click the **[Log Out]** link at the top right of the website:

Welcome propertymanager@domain.com [Log Out]

After clicking the link, you will be taken back to the login screen.

PUBLIC BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 4 hours for each response. This includes the time for collecting, reviewing, and reporting the data. The information will be used to measure the number of units of housing financed with the Low-Income Housing Tax Credit (LIHTC) that are produced each year. The information will also be used to analyze the characteristics of these housing units, and will be released to the public. This agency (HUD) may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.