

Karen Miller Chair

Kim Herman Executive Director

December 14, 2017

2017 Annual Tax Credit Report - Post Year 15 or Re-cert Waivers

In accordance with the terms and provisions of the Low-Income Housing Tax Credit Program, the Owner is required to submit an annual compliance report to this office by **January 31, 2018**. The attached checklist outlines the documentation required to satisfy the annual reporting requirements. **Please include this checklist with your report submission**.

Note: Your 2017 Annual Table 1 report should be submitted online via the Web Based Annual Reporting System (WBARS) at <u>www.wbars.com</u>.

Your property has been approved for Post-Year 15 Monitoring Procedures or a Recertification Waiver. The submission of resident certifications is not required at this time. Following a review of the *Owner's Annual Certification* and WBARS Table 1, your Portfolio Analyst will contact you with a selection of resident certifications to be submitted. For your convenience, the Commission's website features the complete Tax Credit Compliance Manual, the latest tax credit compliance reporting forms, reporting requirements, resident certification package forms, current income limits, the tax credit workshops schedule and online registration process. You may also register to receive regular WSHFC Compliance updates via email at: http://www.wshfc.org/managers/broadcastemail.htm.

If you have made any changes to staff, please update the information in WBARS and notify your Portfolio Analyst of the change.

Please mail your report to WSHFC, 1000 2nd Ave., Ste. 2700, Seattle, WA 98104, **attention Asset** Management & Compliance Division.

If Chrystal White is your Portfolio Analyst, mail your report materials to WSHFC, P.O. Box 781, Liberty Lake, WA 99019.

If you require further assistance contact your Portfolio Analyst. To locate your Portfolio Analyst, go to <u>http://www.wshfc.org/managers/Other/ProjectAssignments.pdf</u>.

Sincerely, *Valeri Pate* Valeri Pate, Director Asset Management & Compliance Division

2017 Annual Tax Credit Report Checklist - Post Year 15 or Re-Cert Waiver

Property Name:	Pro	perty	Name:
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The following documentation is attached in support of the annual report:

Owner's Annual Certification (print the *Annual Summary Report/Project Summary* **Report** from WBARS and the additional OAC pages from our website), submit both with Owner's original signature in blue ink.

Annual *Table 1* report submitted via the Combined Funders Annual Reporting System at www.wbars.com.

Copy of the utility allowance schedule(s) used to determine actual rent payments for the entire 2017 reporting period. Please circle the amounts used for all buildings in the Project on the allowance schedule. These amounts **must** match what is entered in WBARS.

Written explanation or completed *Extended Vacancy/Rent-Ready Report*, for all units that were vacant 90 days or more at any time during the reporting year. Explanation must include the date units became vacant, when they became rent ready and the reason for the extended turn-time and/or vacancy. Note: For any unit that took longer than 30 days to be made rent-ready also include a detailed timeline of the work done in the unit.

Move-in package and current certification package for all households whose income exceeded 140% at the first year re-certification. Include an explanation for the increase.

Special-Needs Vacancy Report, with back-up documentation, if the Special-Needs Commitments elected have not been met.

Affirmative Marketing Report (if applicable). To find out if your project is required to complete this report, check our website at:

http://www.wshfc.org/managers/Reports/BondReports/BondProjectsWithAWSHFCAffirmativeMarketingReporRequirementList.pdf

Homeless/Transitional Report (if applicable).

Farm Work Move-in Report (if applicable).

Mail your report to WSHFC, 1000 2nd Ave., Ste. 2700, Seattle, WA 98104, attention Asset Management & Compliance Division.

If Chrystal White is your Portfolio Analyst, mail to WSHFC, P.O. Box 781, Liberty Lake, WA 99019.

Prepared By:	Date:
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Phone Number: Email: