

NON-PROFIT SET ASIDE VERIFICATION

Property Name: _____ Project#: _____

Property Address: _____

Non-Profit Entity Name: _____

Tax ID# of Ownership Entity: _____

Certification Dates: _____
(From MM/DD/YYYY) (To MM/DD/YYYY)

Describe the non-profit’s participation in the daily operations of the development:

Describe the non-profit’s ownership in the development entity (including the non-profit’s ownership percentage in the development) for the certification dates entered above:

Did the non-profit’s ownership rights with respect to the development remain the same throughout the certification dates listed above: Yes No

The project is otherwise in compliance with the Code, including any Treasury Regulations, the applicable State Allocation Plan and all other applicable laws, rules, and regulations. This Certification and any attachments are made UNDER PENALTY OF PERJURY.

(Ownership Entity)

Signature: _____

Print Name: _____

Title: _____

Date: _____