MCC APPLICATION
SUBMITTAL OVERVIEW

Step One Documents **(SHOULD BE SUBMITTED AT LEAST 15 DAYS PRIOR TO CLOSE)**

MCC Submission Cover Sheet - Step 1.

Affidavit of Applicant(s)

- Worksheet 1-Anticipated Annual Family Income
- Worksheet 2-Cost of Residence
- Worksheet 3-Prior Residence

Tax Return Affidavit

- Must include 3 most recent tax returns or transcripts
- For qualified Veterans include most recent tax return and DD214
- For qualified purchasers in Target Areas, including most recent tax return

Home Buyer Education Certificate

Step Two Documents **(MUST BE SUBMITTED WITHIN 15 DAYS AFTER CLOSE)**

MCC Submission Cover Sheet - Step 2

Reaffirmation of Applicant

Affidavit of Seller

- Worksheet 4 – Acquisition Cost

Certificate of Lender Closing Affidavit

- Copy of Loan Closing Statement

Notice of Potential Recapture Tax (provide recapture table for applicable County)

MCC Payment* (Check made to Nevada Housing Division)

IRS Form W-9 (If MCC is combined with HIP Grant)

Extension Request Form (if needed)

Notice of Denial of Eligibilkity (if needed

FEES:

As applicable, the following fee/fees are payable to the Nevada Housing Division and can be made by check or money order.

$995	MCC Program Fee*
$ 25	MCC Resubmission Fee
$ 50	MCC Extension Fee
$ 75	Late Submission Fee

* The MCC Program Fee is waived for Applicants who are veterans or, are on active duty or currently in the U.S. National Guard or surviving spouses.

MCC SUBMISSION COVER SHEET – STEP 1

NEVADA HOUSING DIVISION

Step 1 forms are due within 15 days prior to closing

All field are required unless otherwise noted. Incomplete forms will be denied.

Lender: _____
Loan Officer: _____
Best Contact: _____
Phone: _____
Fax: _____
Email: _____
Branch Manager: _____
Office Address: _____
City: _____ ZIP: _____

Realtor Company: _____
Agent: _____
Realtor Email: _____
Title Company: _____
Escrow Officer: _____
Phone: _____
Escrow #: _____

Applicant: _____
Taxpayer ID#: _____
Email: _____

Applicant 2: _____
Taxpayer 2 ID#: _____
Email: _____

Subject Property Address: _____
City: _____ Zip: _____
Subdivision: _____
Targeted Area: ○ Yes ○ No
Type of Residence: ○ New ○ Existing

County: _____
Builder (if new): _____
Census Tract #: _____
Acquisition Cost: _____ 0.00

Loan Amount: _____
Loan Type: ○ FHA ○ VA ○ Conv ○ USDA ○ Other
List any DPA Program Associated with this Loan: _____
Loan Maturity: _____
Est Closing Date: _____
Lender Loan #: _____
Anticipated Annual Family Income: _____ $ 0.00
Ethnicity of Borrower (Optional): _____

Qualified Veteran: ○ Yes ○ No
1st Time Homebuyer: ○ Yes ○ No
(has not owned a home within the past 3 years)
Loan Interest Rate: _____
Family Size: _____

Step 1 Checklist: The following documents must be submitted in order to receive an MCC commitment. Incomplete forms will be denied.

- ☐ MCC Submission Cover Sheet - Step1
- ☐ Affidavit of Applicant (with Worksheets One through Three attached)
- ☐ Tax Return Affidavit
- ☐ Three years of tax returns or transcripts
  - (Qualifying Veteran – DD214 & most recent federal tax return)
  - (Target Area purchaser - most recent federal tax return)
- ☐ Homebuyer Education Certificate

(For Administrative Use Only)

MCC commitment: ○ Approved ○ Denied MCC Commitment #: _____

Commitment Date: _____

AFFIDAVIT OF APPLICANT

Applicant: _____ Applicant 2: _____
Subject Property Address: _____
City: _____ Zip: _____ County: _____
Targeted Area: ☐ Yes ☐ No Census Tract #: _____
Type of Residence: ☐ New ☐ Existing
Qualified Veteran: ☐ Yes ☐ No Lender: _____
Loan Amount: _____ Loan Officer: _____
Acquisition Cost: _____ 0.00 Telephone #: _____

The undersigned Applicant (whether one or more), the buyer(s) or owner(s) of the Residence listed above (the *"Residence"*), promises, under penalty of perjury and the penalties listed here, that each of the following statements are true, correct and complete:

1. *Income.*

   (a) My anticipated annual family income is $ _____ $ 0.00 [See Worksheet One attached to this certificate.]

   (b) I agree to furnish true copies of the federal income tax returns that were signed and filed with the Internal Revenue Service for the past three years, including the most recent year, for myself and all persons who will live with me in the Residence and/or who will be liable on the loan. *Only tax returns for the year most recently ended need to be provided, if (i) the Residence is located in a target area or (ii) you are a qualifed "Veteran" (as defined in 38 U.S.C. Section 101).*

   (c) I authorize the Lender listed above to review the returns to verify the statements I make here, and I authorize the Nevada Housing Division ("NHD"), the Lender listed above, the Issuer (as defined below) and their agents to review the returns as may be necessary to process my application for a Mortgage Credit Certificate ("MCC") under the Nevada Housing Division Mortgage Credit Certificate Program (the "Program").

2. *Family Size.*

   (a) The total number of my family members who will live with me in the Residence, plus any other persons who are not part of my family but who will live with me in the Residence, is:

3. *Location of Residence.*

   (a) The subject property must be located within the State of Nevada (and, for loans cloased before August 9, 2016, Clark or Washoe Counties).

4. *Acquisition Cost.*

   (a) The Residence is (check one):

   ☐ a new single family residence that has never been lived in

   ☐ a single family residence that has been lived in before.

   (b) The "Cost" of the Residence to me (as calculated on Worksheet Two attached to this affidavit) is $ _____ 0.00

(c) The "Cost" includes:

(i) everything I paid or someone else paid for me, either in cash or in kind, for the Residence;

(ii) if the Residence is not finished, the reasonable cost to finish it, whether or not the cost to finish the Residence is covered by the amount I borrowed to buy the Residence; and

(iii) if the Residence sits on leased ground, the value of the ground lease.

(d) I understand "Cost" does not include:

(i) settlement and financing costs (such as title and transfer fees, title insurance, survey fees, credit reference fees, legal fees, appraisal fees, points paid by me, credit report fees, FHA insurance premiums, hazard or flood insurance premiums, abstract fees, tax service fees, recording or registration fees, escrow fees, file preparation fees and other similar costs);

(ii) the value of any services performed by me or my family members in completing the Residence;

(iii) the cost of the land the Residence sits on, if I owned the land for at least two years before the Residence was built;

(iv) (amounts I paid or someone paid for me to the Seller or for the Seller of the Residence for property that is not a "fixture" (permanently attached to the land or to the Residence); and

(v) amounts I paid or someone paid for me or the Seller of the Residence paid or someone paid for the Seller for painting, minor repairs, floor refinishing or other fix-up expenses.

(e) Worksheet Two attached to this certificate is an accurate calculation of the "Cost" of the Residence.

5. *Principal Residence.*

(a) I intend to live in the Residence within a reasonable time (not to exceed 60 days) after closing of the Mortgage. The Residence will be my "Principal Residence". I understand that "*Principal Residence*" means the home where I live and which is used primarily as a residence (not as a business). Whether the Residence is my Principal Residence depends on my particular circumstances, including my good-faith intention to make the Residence my Principal Residence. I understand a "Principal Residence" does not include a home used that is rented to someone else or a vacation home or a home is used primarily in a trade or business. If 15 percent or more of a home is used in a trade or business, the home is considered used primarily in a trade or business. I agree to notify the Lender and NHD immediately if the Residence stops being my Principal Residence.

(b) If any part of my home is used in my trade or business, I agree I will not claim any deductions on my income tax return for such use.

6. *Prior Ownership of a Residence*. (**check all that apply**)

(a) ○ **I am a Qualified Veteran**

Defined as a person who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable, who has not previously obtained a mortgage credit certificate or a loan financed by single family mortgage revenue bonds utilizing the veteran exception to waive the requirement of being a first-time homebuyer as set forth in Section 416 of the Tax Relief and Health Code Act of 2006.

(b) ○ **The Residence is located in a Targeted Area.**

(c) ○ **I have not owned a "Principal Residence"**

at any time during the last three years. I have not claimed any deductions on my income tax returns during the last three years for real property taxes or interest on a home. I understand that "Principal Residence" means the same thing that it did in paragraph 5 above.

(d) I understand owning a "**Principal Residence**" could include the following types of arrangements:

(i) direct ownership;

(ii) ownership along with someone else;

(iii) an agreement that once a certain number of payments of a set amount were made, I would own the residence; and

(iv) any other arrangements that would give me ownership in the future.

(e) Worksheet three attached to this certificate is a correct list of the places I have lived during the past three (3) years.

7. *New Mortgage.*

[If paragraph 6(b) is checked.] The Mortgage on the Residence will not be used to repay a mortgage I owed on the Residence or I co-signed. I have never had a mortgage on the Residence (except for a temporary construction loan within 24 months from the date of this affidavit if the Residence was recently built).

(a) If the proceeds of the Mortgage will be used to replace a construction loan, describe the loan in the space below. Be specific about the lender, the purpose and the term of the loan.

_____

_____

_____

_____

_____

8. *Prohibited Mortgages.*
No portion of the financing for the Residence may come from the proceeds of qualified mortgage bonds or qualified veterans' mortgage bonds.

9. *Size of Property; Income from Property.*
The lot that the Residence sits on is not larger than the normal size of lots in the area. I do not expect to make any money from the lot the Residence sits on, such as by selling or leasing a portion of the lot.

10. *Other Owners of Residence.*
Once I buy the Residence, no one will own any part of the Residence who has not signed this affidavit or another affidavit like this one.

11. *Verification.*
I understand the Lender, NHD, the Internal Revenue Service, or their authorized representatives will check to make sure my statements in this affidavit are true and complete. I agree to allow the Lender, the Internal Revenue Service, NHD and their authorized representatives access to any information, including my past income tax returns, the checks from my bank or other proof that I paid my rent, utility bills, work records, etc., may be needed to check the information I have provided. I will authorize others, such as my bank or my employer, to provide the information required to confirm the statements I have made.

12. *Program Information.*
I have been furnished a copy of the Mortgage Credit Certificate Brochure and have a basic understanding as to the provisions of the Program.

13. *No Other Certificate.*
I have not previously received a Mortgage Credit Certificate under this or any other Mortgage Credit Program.

14. *Lender.*
I have not been required to use any particular lender to finance the purchase of the Residence in order to qualify for the Program.

15. *Transfer or Assumption.*
I understand that the Mortgage Credit Certificate may not be transferred unless NHD issues a new Mortgage Credit Certificate. If I ever want to transfer my Mortgage Credit Certificate under the transfer provisions of the Program, the person to whom my Mortgage Credit Certificate is transferred must qualify as an Applicant and must meet all of the requirements for a Mortgage Credit Certificate that are in place at the time the new certificate is to be issued.

16. *Interest to Related Persons.*
No portion of the Mortgage has been made by or will be repaid to a person who is related to me.

17. *Possible Interest Recapture.*
I understand, acknowledge, and agree that if I dispose of (for example, by sale) the Residence within nine (9) years from the date the mortgage loan is originated, the Internal Revenue Service may levy a tax on me upon such disposition up to the lesser of (i) six and one-quarter percent (6.25%) of the loan amount or (ii) fifty percent (50%) of the amount of gain that I realize upon the disposition, depending upon my income level, the amount of the loan, and the number of years I hold the Residence.

Because you are receiving a Mortgage Credit Certificate with your mortgage loan, you are receiving the benefit of a credit against your federal income tax. If you sell or otherwise dispose of your home during the next nine years, this benefit may be "recaptured." The recapture is accomplished by an increase in your federal income tax for the year in which you sell your home. The recapture only applies, however, if you sell your home at a gain and if your income increases above specified levels.

You may wish to consult a tax advisor or the local office of the Internal Revenue Service at the time you sell your home to determine the amount, if any, of the recapture tax. Within the next 90 days, you will be given additional information that will be needed to calculate the recapture tax.

18. *Penalty.*

These statements are made under penalty of perjury. I understand that any material misstatement in this or any affidavit or certification made in connection with application for or issuance of a Mortgage Credit Certificate because I was negligent will result in a civil penalty of $1,000, *revocation of any Mortgage Credit Certificate issued in connection with the application* and any criminal penalty that may apply. Any material misstatement due to my fraud will result in a civil penalty of $10,000, *revocation of any Mortgage Credit Certificate issued in connection with the application* and any criminal penalty that may apply. I understand that perjury is a felony. A person who is convicted of perjury can be punished with a fine, imprisonment or both.

19. *Attachments.*

All documents attached to this affidavit and marked as attachments are part of this affidavit and are true and correct and not misleading.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

NAME(S) OF APPLICANT:	SIGNATURE(S) OF APPLICANT:
_____	_____
_____	_____

Executed on _____

Worksheet One
Anticipated Annual Family Income

REQUIRED TO COMPLY WITH FEDERAL INCOME TAX LAWS
RELATING TO THE MCC PROGRAM

1. The names, relationships, ages and taxpayer identification numbers of all persons intending to reside in the Residence and who will be liable on the mortgage loan, including applicant, are as follows:

NAMES	RELATIONSHIP TO APPLICANT	AGES	TAXPAYER ID #

2. The name and address of the employer(s) of each person listed above and his/her monthly gross *income is as follows:

FIRST NAME (FROM ABOVE)	EMPLOYER NAME AND ADDRESS	MONTHLY GROSS INCOME
	Total Monthly Gross Income	0.00
	Anticipated Annual Family Income x 12:	$ 0.00

All current or anticipated wages and salaries, over-time pay, part-time employment compensation, commissions, fees, tips and bonuses, and other compensation for personal services, before payroll deductions;

*"*Monthly gross income*" includes all amounts that I receive or expect to receive, whether or not I receive that amount on a regular basis. See listing for examples of the types of amounts to be included.

Net income from the operation of a business or profession (without deducting expenditures for business expansion or amortization of capital indebtedness or an allowance for depreciation of capital assets);

Any interest, dividends, royalties, and other net income of any kind from any investment or from real or personal property (without deducting expenditures for amortization of capital indebtedness or an allowance for depreciation of capital assets);

All income received from social security, annuities, insurance policies, retirement funds, pensions, Department of Veterans Affairs (VA) compensation, disability, or other benefits, and other similar types of periodic receipts, including a lump-sum payment for the delayed start of periodic payments;

Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay;

The maximum amount of welfare assistance or any other form of public assistance available to the above persons;

Periodic and determinable allowances, such as alimony and child support payments and regular contributions and gifts received from persons not residing in the Residence;

All regular pay, special pay, and allowances of a member of the Armed Forces (whether or not living in the Residence) who is the head of the household or spouse or other person whose dependents are residing in the Residence; and

Any earned income tax credit to the extent it exceeds income tax liability.

3. The Anticipated Annual Family Income for all of the above persons [the total monthly gross income from paragraph 2 above multiplied by twelve] is $_____$ 0.00_____. [Insert this figure in the blank in paragraph 1(a) of the Affidavit of Applicant.]

4. I acknowledge all of the above information is important to the issuance of a Mortgage Credit Certificate. I agree to allow my employer or any other person with knowledge about my income to provide the information to the Nevada Housing Division and its authorized agents and any authorized agent of the Treasury Department or the Internal Revenue Service.

Date: _____

_____
Applicant

_____
Applicant

Worksheet Two-Cost of Residence

1. Amount I paid to the Seller for the Residence either with cash or some other kind of payment (including any amount the Seller is required to pay as a real estate commission or loan discount points): $ 0.00

2. Any other extra amount not listed in paragraph 1 I paid or someone else paid for me to the Seller or for the Seller for the Residence either with cash or some other kind or payment: $ _____

3. If the Residence is not finished, the estimated cost of finishing it, including the cost of any necessary alterations or improvements. Does not include the value of service I or members of my family will perform in finishing the Residence. $ _____

   (Describe any alterations or improvements.)

   _____

   _____

   _____

   _____

4. If the Residence sits on leased land, the value of the lease at the time of purchase of the Residence (using a discount rate equal to the interest rate borne by the Loan). $ _____

5. Total Cost of the Residence (Total of 1, 2, 3 and 4) [INSERT THIS FIGURE IN PARAGRAPH 4 OF THE AFFIDAVIT OF APPLICANT]: $ 0.00

WORKSHEET THREE-PRIOR RESIDENCES

[NOT REQUIRED (I) FOR RESIDENCE LOCATED IN A TARGETED AREA OR (II) IF YOU ARE A QUALIFIED VETERAN)]

During the last three (3) years I have either:

(1) Rented at the following addresses for the following periods of time:
(All fields must be filled out. Please include AREA CODE. Incomplete forms will be rejected.)

Address: _____ Landlord: _____
City: _____ From: _____
Phone: _____ To: _____

Address: _____ Landlord: _____
City: _____ From: _____
Phone: _____ To: _____

Address: _____ Landlord: _____
City: _____ From: _____
Phone: _____ To: _____

(Indicate additional addresses on a separate sheet, if necessary.)

(2) Lived with the following members of my family (without owning a "Principal Residence"*) at the following addresses for the following periods of time:

Names: _____ Relationship: _____
Address: _____ City: _____ State: _____
Phone: _____ From: (mm/yy) _____ To: (mm/yy) _____

Names: _____ Relationship: _____
Address: _____ City: _____ State: _____
Phone: _____ From: (mm/yy) _____ To: (mm/yy) _____

Names: _____ Relationship: _____
Address: _____ City: _____ State: _____
Phone: _____ From: (mm/yy) _____ To: (mm/yy) _____

(Indicate additional addresses on a separate sheet, if necessary)

***I understand "Principal Residence" means a home that is used primarily to live in. Whether the Residence is my Principal Residence depends upon my particular circumstances, including my good faith intention to make it my Principal Residence.**

3. Lived under some other arrangement not described in (1) or (2) above without owning a “Principal Residence” at the following addresses for the following periods of time (describe the arrangements and give the names, addresses, and telephone numbers of persons who can be contacted to verify arrangements):

_____

_____

_____

NEVADA HOUSING DIVISION

TAX RETURN AFFIDAVIT

Applicant: _____ Applicant 2: _____
Loan Amount: _____ Lender: _____
Contact: _____ Telephone: _____
Subject Property Address: _____
City: _____ Zip Code: _____ County: _____

I (the *"Applicant"* or *"Applicants"*), the undersigned, promise, **UNDER PENALTY OF PERJURY**, and the penalties listed here, that each of the following statements about my tax returns are true, correct and complete.

1. *Tax Returns Attached.*
The following information is correct for all persons intending to live with me in the Residence described on the Affidavit of Applicant (CHECK WHICH APPLIES):

☐ The original tax account information letter from the Internal Revenue Service verifying the type of return I filed, my filing status and my adjusted gross income for the year most recently ended is attached. [The original tax account information letter may be used instead of furnishing copies of tax returns for persons who filed their Form 1040A or 1040EZ tax returns].

☐ A true copy of each federal income tax return for the prior 3 years are attached. If (i) the Residence is located in a Targeted Area or (ii) I am a Qualified Veteran (as defined in 38 U.S.C. Section 101), a true copy of the federal income tax return for the year most recently ended is attached.

2. * *Tax Return Not Required.*
I was not required by law to file a federal income tax return for the following year(s) and reason(s) stated below:

Year	Reason
_____	_____
_____	_____
_____	_____

3. *Material Misstatements and Penalties.*
I understand this Affidavit will be relied upon to determine my eligibility for a Mortgage Credit Certificate. I understand any material misstatement in this or any affidavit or certification made in connection with application for or issuance of a Mortgage Credit Certificate because I was negligent will result in a civil penalty of $1,000, revocation of any Mortgage Credit

* Applies only if the Applicant was ***not*** required by law to file federal income tax returns for any of the preceding three years.

Certificate issued in connection with the application and any criminal penalty that may apply. Any material misstatement due to my fraud will result in a civil penalty of $10,000, revocation of any Mortgage Credit Certificate issued in connection with the application and any criminal penalty that may apply. I understand that perjury is a felony. A person who is convicted of perjury can be punished with a fine, imprisonment or both.

4. All documents attached to this Affidavit and marked as attachments are true and correct and not misleading.

I/WE DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT	SIGNATURE OF APPLICANT 2
_____	_____
_____	_____
NAME OF APPLICANT	NAME OF APPLICANT 2
_____	_____
TAXPAYER ID NUMBER	TAXPAYER ID NUMBER 2
Executed on: _____	Executed on: _____

MCC SUBMISSION COVER SHEET – STEP 2 NEVADA HOUSING DIVISION

Step 2 forms are due within 15 days after closing or MCC will be cancelled.

Lender: _____ Loan Officer: _____
Best Contact: _____ Email: _____
Lender Phone: _____
MCC Commit #: _____ MCC Expire Date: _____
Applicant: _____ Applicant 2: _____
Taxpayer ID; _____ Taxpayer ID 2: _____
Subject Property Address: _____
City: _____ Zip: _____ County: _____

Step 2 Checklist: *The following documents must be submitted in order to receive issuance of MCC. Any incomplete forms will result in denial of the MCC.*

FOR ISSUANCE OF MCC:

- ☐ Reaffirmation of Applicant
- ☐ Affidavit of Seller
- ☐ Certificate of Lender/Closing Affidavit
- ☐ Final Closing Disclosure
- ☐ Notice of Potential Recapture
- ☐ MCC Payment (Check or Money Order made to Nevada Housing Division)

As applicable, the following fee/fees must be submitted with the MCC Submission Package which is payable by check or money order payable to Nevada Housing Division.

- ☐ [$995] MCC Program Fee*
- ☐ [$25] MCC Resubmission Fee
- ☐ [$50] MCC Extension Fee
- ☐ [$325] MCC Assumption or Refinancing Fee
- ☐ [$75] Late Submission Fee

* The MCC Program Fee is waived for Applicants that are veterans or are on active military duty or currently in the U.S. National Guard or a surviving spouse.

ALL DOCUMENTS MUST BE SIGNED AND CERTIFIED TRUE AND CORRECT. COPIES ARE ACCEPTABLE.

REAFFIRMATION OF APPLICANT

(To be executed at the time of Closing)

Applicant: _____ Applicant 2: _____

Loan Amount: _____

Subject Property Address: _____

City: _____ Zip: _____ County: _____

Lender: _____ Loan Officer: _____

Best Contact: _____ Lender Phone: _____

I hereby reaffirm that the statements and information contained in the Affidavit of Applicant which I executed in connection with the Nevada Housing Division Mortgage Credit Certificate Program on the _____ day of _____ , 20 ____, including, without limitation, the computation of the Acquisition Cost of the Residence and the computation of Anticipated Annual Family Income, were true, accurate and complete when made and remain true, accurate, complete and unchanged.*

SIGNATURE OF APPLICANT

_____

_____

NAME OF APPLICANT

_____

TAXPAYER ID NUMBER

_____

EXECUTION DATE

SIGNATURE OF APPLICANT 2

_____

_____

NAME OF APPLICANT 2

_____

TAXPAYER ID NUMBER 2

*If the Acquisition Cost of the Residence or the Applicant's Anticipated Annual Family Income have changed, the Lender must have the Applicant re-execute the Affidavit of Applicant`.

AFFIDAVIT OF SELLER

Applicant: _____ Applicant 2: _____
Loan Amount: _____
Subject Property Address: _____
City: _____ Zip: _____ County: _____
Lender: _____ Loan Officer: _____
Contact: _____ Telephone: _____

The undersigned, the proposed Seller (whether one or more) of a Residence located in the Eligible Loan Area described below (the "*Residence*") to the above Applicant for which a Mortgage Credit Certificate is being sought under Nevada Housing Division Mortgage Credit Certificate Program, does hereby depose and say, under penalty of perjury, that each of the following statements are true, correct and complete in all respects:

1. *Location of Residence.*
   The Residence is located within the geographic area of the State of Nevada at:

   Subject Property Address: _____
   City: _____ Zip: _____ County: _____

2. *New Mortgage.*
   At no time prior to the date hereof has there been a mortgage on the Residence(whether in the form of a deed of trust, conditional sales contract, pledge, agreement to hold title in escrow or other form of owner financing) securing a loan to the above Applicant, the proposed purchase of the Residence, other than a construction loan, construction bridge loan or other temporary initial construction financing initially incurred for the sole purpose of acquiring the Residence and initially incurred within 24 months from the date of execution of the Loan and having an original term not exceeding 24 months.

3. *Acquisition Cost.*

   (a) The Residence is (check one):

   - ○ a newly constructed Residence which has never been occupied; or
   - ○ an existing Residence which has been occupied previously; or
   - ○ incomplete or under construction; or
   - ○ located on leased land.

The "Acquisition Cost" to the Applicant (as determined in accordance with the Worksheet attached hereto) is $ _____ . I understand the term "Acquisition Cost" includes: (a) all amounts paid either in cash or in kind, by the Applicant (or by a related party or for the benefit of the Applicant) to me (or to a related party or for my benefit) as consideration for the Residence; (b) if the Residence is incomplete, the reasonable cost of completing it; and (c) if the Residence is being purchased subject to a ground lease, the capitalized value of the ground rent. I understand further that "Acquisition Cost" does not include: (i) settlement and financing costs (such as title and transfer fees, title insurance, survey fees, credit reference fees, legal fees, appraisal fees and points paid by the Applicant (but not points paid by me) and other similar costs) but only to the extent that such amounts do not exceed the usual and reasonable settlement and financing costs for a home mortgage loan in this area; or (ii) the value of any services to be performed by the Applicant or the Applicant's family members (include the Applicant's brothers, sisters, spouse, lineal descendants and lineal ancestors only) to complete the Residence; or (iii) the cost of the land on which the Residence is located if the Applicant owned such land at least two years prior to the commencement of the construction of the Residence.

(b) The Worksheet attached hereto sets forth an accurate calculation of the "Acquisition Cost" of the Residence to the Applicant.

4. *Verification.*

I understand the above Lender, the Internal Revenue Service, the Nevada Housing Division, or their authorized representatives, may conduct investigations in order to verify the truth and completeness of the statements set forth herein. I hereby agree to provide access to such information, including my records pertaining to the Residence, as may be necessary in connection with such verification procedure.

5. *Penalty*

I/WE DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. . I UNDERSTAND THAT PERJURY IS A FELONY OFFENSE PUNISHABLE BY FINE OR IMPRISONMENT OR BOTH

SIGNATURE OF SELLER:

_____

_____

SIGNATURE OF SELLER:

_____

_____

Executed on: _____

WORKSHEET 4-SELLER STATEMENT OF ACQUISITION COST

1. Amount paid for the Residence, in cash or in kind, by Applicant to the Seller (including any amount which Seller is required to pay as a real estate commission or loan discount points): $ 0.00

2. Amount paid for the Residence, in each or in kind, by Applicant or any person related to the Applicant or by any person for the benefit of Applicant, to Seller or any person related to Seller or for Seller's benefit (other than the amount set forth above): $_____

3. If the Residence is incomplete or unfinished the estimated cost of completing it, including the cost of any necessary alterations or improvements. (Specify the nature of such alterations or improvements): $_____

_____

_____

_____

_____

4. If the Residence is located on leased land the capitalized value (using a discount rate equal to the interest rate borne by the Loan) of the ground rent: $_____

5. Total ACQUISITION COST: $ $ 0.00

CERTIFICATE OF LENDER CLOSING AFFIDAVIT

Applicant: _____ Applicant 2: _____
Loan Amount:
Subject Property Address: _____
City: _____ Zip: County: _____
Lender: _____ Loan Officer: _____
Contact: _____ Telephone: _____

I, the authorized officer of the Lender named above, do hereby certify, represent and warrant to the Nevada Housing Division (the "*Issuer*") that:

1. All terms used herein shall have the meanings attributed to them in the Program Manual for the Issuer's Mortgage Credit Certificate Program unless a different meaning is specifically defined herein or is required by the context in which the term appears.

2. I have read the Affidavit of Applicant, the Closing Affidavit, the Tax Return Affidavit and the Affidavit of Seller, if applicable (collectively, the "Affidavits"), which were executed in connection with the Mortgage Credit Certificate Application made by the above Applicant and submitted to the Issuer. Prior to the execution of such documents, I reviewed the contents thereof with the Applicant, and if applicable, the closing agent.

3. I have reviewed the credit analysis worksheet, or similar document, prepared in connection with the Loan. The worksheet accurately reflects the information the Lender has obtained concerning the monthly gross income of the Applicant, and the Lender has complied with the requirements of the Program Manual and the Lender Participation Agreement in verifying the accuracy of such information.

   (a) Based upon Worksheet One attached to the Affidavit of Applicant, to the best of the Lender's knowledge and belief the Applicant's Anticipated Annual Family Income is $ $ 0.00

4. The Nevada Housing Division is the Issuer of the MCC.

5. I have conducted or have caused to be conducted an investigation regarding the truth of the facts set forth in said Affidavits, the nature of which investigation is as follows: [DESCRIBE DETAILS OF INVESTIGATION]

_____

_____

_____

_____

NOTE: Paragraph 6 below shall be deleted in its entirety in the case of an Applicant (i) who is acquiring a Residence in a Targeted Area or (ii) is a Qualified Veteran.

6. The investigation described in paragraph 5 hereof complies with the requirements of the Program Manual and the Lender Participation Agreement, and such investigation included an examination of copies of income tax returns for the past three years provided by the Applicant which were filed with the Internal Revenue Service (or tax account information letters from the Internal Revenue Service covering such years), and the returns or information furnished indicated that during the preceding three years the Applicant did not claim deductions for Real Estate taxes or interest on indebtedness with respect to the real property constituting a Principal Residence of the Applicant. If the Applicant was not required to file a federal income tax return for all of the three years preceding the execution of the Loan, the Lender is to make sure that the Tax Return Affidavit executed by the Applicant states that fact.

7. No facts have come to my attention as a result of said investigation or otherwise which would cause me to disbelieve or doubt the truth of the Affidavits, or any portion of any of such Affidavits.

8. The Loan is secured by a valid lien on a Residence which to the knowledge of the Lender is occupied by or is to be occupied by the Applicant as his or her Principal Residence, is made in accordance with the Program Manual and the Lender Participation Agreement, and is not for the purpose of refinancing any existing loan on any such property (other than a construction period loan, construction bridge loan, or similar temporary initial construction financing initially incurred for the sole purpose of acquiring the Residence and initially incurred within 24 months of execution of the Loan and having an original term not exceeding 24 months).

9. The fees and charges collected by the Lender for the Loan are in compliance with the Program Manual and the Lender Participation Agreement. The amounts collected by the Lender to reimburse the Lender for reasonable and customary charges paid or incurred for hazard or mortgage insurance premiums, survey, title insurances, appraisal fees, abstract and attorneys' fees, recording or registration charges, escrow fees, file preparation fees, application fees, credit reports, and similar charges do not exceed the reasonable and customary amounts charged by the Lender for mortgage loans not made in connection with the Program.

10. To the best knowledge of the Lender, the Applicant has not conveyed the Applicant's right, title or interest to or in the property to any party other than a trust for the benefit of such mortgagor and/or members of such Applicant's immediate family.

11. No portion of the financing of the Residence has come from the proceeds of qualified mortgage bonds or qualified veterans' mortgage bonds.

12. I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT PERJURY IS A FELONY OFFENSE PUNISHABLE BY FINE OR IMPRISONMENT OR BOTH.

13. All capitalized terms used in this Certificate of Lender and not otherwise defined herein have the meanings attributed to them in the Program Manual distributed by the Issuer in connection with the Program.

14. The undersigned, in connection with the Issuer's Mortgage Credit Certificate Program, hereby certifies, that the attached closing statements are true and correct copies of the closing statements prepared and delivered in connection with the following transaction.

SELLER/BUILDER: _____

PURCHASER: _____ _____

LENDER: _____

PROPERTY ADDRESS: _____

_____ _____ _____

CLOSING DATE: _____

LOAN AMOUNT: _____

REFINANCING LOAN WITH EXISTING MCC: ○ NO ○ YES*

LENDER: _____

By: _____

Name: _____

Title: _____

NOTICE OF POTENTIAL RECAPTURE

TO BE COMPLETED BY LENDER AND DELIVERED TO APPLICANT AT THE TIME OF CLOSING OF THE LOAN

INTRODUCTION

1. *General*.
When you sell your home you may have to pay a recapture tax as calculated below. The recapture tax may also apply if you dispose of your home in some other way. Any references in this notice to the "sale" of your home also include other ways of disposing of your home. For instance, you may owe the recapture tax if you give your home to a relative.

2. *Exceptions*.
In the following situations, no recapture tax is due and you do not need to do the calculations:

(a) You dispose of your home later than nine years after you close your mortgage loan;

(b) Your home is disposed of as a result of your death;

(c) You transfer your home either to your spouse or to your former spouse incident to divorce and you have no gain or loss included in your income under Section 1041 of the Internal Revenue Code; or

(d) You dispose of your home at a loss.

3. *Maximum Recapture Tax.*
The maximum recapture tax that you may be required to pay as an addition to your federal income tax is $ _____ [insert the actual dollar amount resulting from the product of 6.25% multiplied by the highest principal amount of the mortgage loan]. This amount is 6.25% of the highest principal amount of your mortgage loan and is your federally subsidized amount with respect to the loan.

4. *Actual Recapture Tax*.
The actual recapture tax, if any, can only be determined when you sell your home, and is the lesser of (1) 50% of your gain on the sale of your home, regardless of whether you have to include that gain in your income for federal income tax purposes, or (2) your recapture amount determined by multiplying the following three numbers:

(a) $ 0.00 [insert the actual dollar amount resulting from the product of 6.25% multiplied by the highest principal amount of the mortgage loan] (the maximum recapture tax, as described in paragraph B above),

(b) The holding period percentage, as listed in Column 1 in the attached Table, and

(c) The income percentage, as described in paragraph D below.

For purposes of convenience, current recapture tax calculations are included behind the attached Table.

5. *Income Percentage*.

You calculate the income percentage as follows:

(a) *Subtract* the applicable *adjusted qualifying income* in the taxable year in which you sell your home, as listed in Column 2 in the attached Table, *from* your *modified adjusted gross income* in the taxable year in which you sell your home. Your modified adjusted gross income means your adjusted gross income shown on your federal income tax return for the taxable year in which you sell your home, with the following two adjustments:

(i) your adjusted gross income must be increased by the amount of any interest that you receive or accrue in the taxable year from tax-exempt bonds that is excluded from your gross income (under Section 103 of the Internal Revenue Code); and

(ii) your adjusted gross income must be decreased by the amount of any gain included in your gross income by reason of the sale of your home.

(b) If the amount calculated in (a) above is zero or less, you owe no recapture tax and do not need to make any more calculations. If it is $5,000 or more, your income percentage is 100%. If it is greater than zero but less than $5,000, it must be divided by $5,000. This fraction, expressed as a percentage, represents your income percentage. For example, if the fraction is $1,000/$5,000, your income percentage is 20%.

6. *Limitations and Special Rules on Recapture Tax*.

(a) If you give away your home (other than to your spouse or ex-spouse incident to divorce), you must determine your actual recapture tax as if you had sold your home for its fair market value.

(b) If your home is destroyed by fire, storm, flood, or other casualty, there generally is no recapture tax if, within two years, you purchase additional property for use as your principal residence on the site of the home financed with your original subsidized mortgage loan.

(c) In general, except as provided in future regulations, if two or more persons own a home and are jointly liable for the subsidized mortgage loan, the actual recapture tax is determined separately for them based on their interests in the home.

(d) If you repay your loan in full during the nine-year recapture period and you sell your home during this period, your holding period percentage may be reduced under the special rule in Section 143(m)(4)(C)(ii) of the Internal Revenue Code.

(e) Other special rules may apply in particular circumstances. You may wish to consult with a tax advisor or the local office of the Internal Revenue Service when you sell or otherwise dispose of your home to determine the amount, if any, of your actual recapture tax. See Section 143(m) of the Internal Revenue Code generally.

RECAPTURE TABLE

DATE THAT YOU SELL YOUR HOME	(COLUMN 1) HOLDING PERIOD PERCENTAGE	(COLUMN 2) ADJUSTED QUALIFYING INCOME NUMBER OF FAMILY MEMBERS LIVING IN YOUR HOME AT THE TIME OF SALE	
		2 OR LESS	3 OR MORE
Before the first anniversary of closing (See note below)	20%	$_____*	$_____*
On or after the first anniversary of closing, but before the second anniversary of closing	40%	$_____*	$_____*
On or after the second anniversary of closing, but before the third anniversary of closing	60%	$_____*	$_____*
On or after the third anniversary of closing, but before the fourth anniversary of closing	80%	$_____*	$_____*
On or after the fourth anniversary of closing, but before the fifth anniversary of closing	100%	$_____*	$_____*
On or after the fifth anniversary of closing, but before the sixth anniversary of closing	80%	$_____*	$_____*
On or after the sixth anniversary of closing, but before the seventh anniversary of closing	60%	$_____*	$_____*
On or after the seventh anniversary of closing, but before the eighth anniversary of closing	40%	$_____*	$_____*
On or after the eighth anniversary of closing, but before the ninth anniversary of closing	20%	$_____*	$_____*

NOTE: Closing means the closing date for your loan.

* *Lender*: The actual notice to the applicant must provide the actual dollar figures for adjusted qualifying incomes for each of the years covered by the table. The entries in the first row are the highest qualifying incomes that, as of the date of the mortgage loan closing, would have met the low income requirement of Section 143(f) of the Code, taking into account whether the home financed with the subsidized mortgage loan is located in a targeted area as described in Section 143(j) of the Code (but determined without regard to Section 143(f)(3)(A) of the Code) or in a high housing cost area as described in Section 143(f)(5) of the Code. The entries in each subsequent row equal the entries in the immediately preceding row, times 1.05. The formula for determining these numbers is set forth in Section 143(m)(5) of the Code. Please refer to the "Worksheet to Compute Recapture Tax" provided by the Program Consultant in order to complete Column 2.

Please acknowledge your receipt of a copy of this notice by signing below.

Applicant Signature	Applicant 2 Signature
Applicant Printed Name	Applicant 2 Printed Name

EXTENSION REQUEST
NEVADA HOUSING DIVISION NEVADA

Applicant: _____ Applicant 2: _____
Loan Amount: _____
Subject Property Address: _____
City: _____ Zip: _____ County: _____
Lender: _____ Loan Officer: _____
Best Contact: _____ Telephone: _____

The above Applicant and Lender are hereby requesting a thirty (30) day extension of the MCC Commitment Letter referenced above. Enclosed is a check or money order payable to the Nevada Housing Division (*"NHD"*) for payment of the **$50 MCC Extension Fee**.

The undersigned Applicant and Lender certify that this is the first Extension Request Form submitted concerning the above-referenced MCC Commitment Letter or, if any prior extensions have been granted, attached hereto is a description of the extenuating circumstances necessitating this request.

Applicant(s) Acknowledgement: MCC Commitment #: _____

_____ _____
Applicant 2 Signature Applicant 2 Signature

_____ _____
Loan Officer Signature Date

THIS EXTENSION REQUEST FORM MUST BE SUBMITTED TO NHD PRIOR TO THE EXPIRATION DATE OF THE MCC COMMITMENT LETTER.

[For Administrative Use Only]

NHD's Issuance of Extension

The above-referenced MCC Commitment Letter is hereby extended to: _____

DATED: _____ NEVADA HOUSING DIVISION

By: _____
Name: _____
Title: _____

Print Save

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any)
Exemption from FATCA reporting code (if any)
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number
☐☐☐ – ☐☐ – ☐☐☐☐

or

Employer identification number
☐☐ – ☐☐☐☐☐☐☐

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here | **Signature of U.S. person ▶** | **Date ▶**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *www.irs.gov/fw9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over $600 required to be reported and direct sales over $5,000[1]	Generally, exempt payees 1 through 5[2]
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

[1] See Form 1099-MISC, Miscellaneous Income, and its instructions.

[2] However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at *www.ssa.gov*. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at *www.irs.gov/businesses* and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: *A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.*

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account[1]
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor[2]
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee[1]
b. So-called trust account that is not a legal or valid trust under state law	The actual owner[1]
5. Sole proprietorship or disregarded entity owned by an individual	The owner[3]
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	**Give name and EIN of:**
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity[4]
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

[1] List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

[2] Circle the minor's name and furnish the minor's SSN.

[3] You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

[4] List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

NOTICE OF DENIAL OF ELIGIBILITY

TO: Nevada Housing Division
1535 Old Hot Springs Rd #50
Carson City, Nevada 89706
Attention: MCC Program

Applicant: _____ Applicant 2: _____
Taxpayer ID#: _____ Taxpayer 2 ID#: _____
Subject Property: _____
City: _____ Zip: _____ County: _____
Has an MCC Commitment Letter been issued: ☐ Yes ☐ No
If *Yes*, what is the MCC Commitment #: _____

In compliance with the Mortgage Credit Certificate Program Manual of Nevada Housing Division ("NHD)" this Notice of Denial of Eligibility for MCC is being provided to NHD. The above named Applicant has been determined to be ineligible for the issuance of an MCC under the Program for the following reasons [check all that apply]:

☐ Loan withdrawn or will not close using an MCC.

☐ Applicant's current ANTICIPATED ANNUAL FAMILY INCOME exceeds the Program income limits.

☐ The ACQUISITION COST of the Residence exceeds the applicable Program acquisition cost limits.

☐ Applicant does not meet the FIRST-TIME HOMEBUYER requirement and Applicant is not a Qualified Veteran and the Residence is not located in a Targeted Area.

☐ Residence is not located within the ELIGIBLE LOAN AREA.

☐ Applicant's mortgage will be funded from a QUALIFIED MORTGAGE BOND or a QUALIFIED VETERANS' MORTGAGE BOND program.

☐ The loan proceeds will be used to REPLACE AN EXISTING MORTGAGE on the Residence.

☐ The SIZE OF THE PROPERTY is greater than the normal and usual size of a lot in the area and in excess of that necessary for the basic livability of the Residence.

☐ Applicant intends to derive INCOME FROM THE REAL ESTATE associated with the Residence.

Other Explanation: _____
_____

DATE: _____ Lender Signature: _____