

APPLICANT BOARD MEMBER & CORPORATE DISCLOSURE

Please be advised that disclosure does not automatically bring denial of participation. However, failure to accurately complete this disclosure or to provide false information on this form can subject the individual signing such form to criminal sanctions under state law and may result in disqualification of the applicant. All questions are to be answered to the best of signatory's knowledge with no requirement to investigate. Forms are to be signed by each board member and Executive Director in their individual capacity AND on behalf of the applicant by the Executive Director or the Board Chair (corporate disclosure). This disclosure is being prepared for:

☐ Individual Board Member/Executive Director

☐ Corporate Entity

In connection with an Initial Application submitted to the Tennessee Housing Development Agency for financial assistance or program funding, I, the undersigned, as a board member or Executive Director of _____, being duly sworn, hereby certify as follows:

1. ☐ I have not been convicted of a felony of any type in Tennessee or any other state within the last ten (10) years; OR

☐ I have been convicted of a felony in Tennessee or in another state within the last ten (10) years and the details are as follows [specify type of felony, state of conviction, penalties imposed]:

2. ☐ I have not been fined, suspended, or debarred as a result of financial or housing activities nor been the subject of a disciplinary investigation involving financial or housing activities by a federal agency (including FHA, VA, HUD, FDIC, USDA/RD (formerly FmHA), IRS, etc.) within the last five (5) years; OR

- ☐ I have been fined, suspended, or debarred as a result of financial or housing activities or have been the subject of a disciplinary investigation involving financial or housing activities by a federal agency (including FHA, VA, HUD, FDIC, USDA/RD (formerly FmHA), IRS, etc.) within the last five (5) years and the details are as follows [specify federal agency; action taken by the agency; activity that resulted in the fine, suspension, or debarment; current status]:

3. ☐ No entity with which I am or have been affiliated in an ownership or decision making capacity, has been fined, suspended, or debarred as a result of financial or housing activities nor been the subject of a disciplinary investigation involving financial or housing activities by a federal agency (including FHA, VA, HUD, FDIC, USDA/RD (formerly FmHA), IRS, etc.) within the last five (5) years; nor been the subject of a disciplinary investigation by a federal agency (includes FHA, VA, HUD, FDIC, USDA/RD, IRS, etc.) involving financial or housing activities, OR

- ☐ An entity with which I am or have been affiliated in an ownership or decision making capacity, has been fined, suspended, or debarred as a result of financial or housing activities or have been the subject of a disciplinary investigation involving financial or housing activities by a federal agency (including FHA, VA, HUD, FDIC, USDA/RD (formerly FmHA), IRS, etc.) within the last five (5) years and the details are as follows [specify entity involved; federal agency; action taken by the agency; activity that resulted in the fine, suspension, or debarment; current status]:

4. ☐ I have not filed nor am I in bankruptcy or reorganization as of the date hereof and have not had a bankruptcy discharged within the past four (4) years; OR

- ☐ I have filed for or am in bankruptcy or reorganization as of the date hereof or have had a bankruptcy discharged within the past four (4) years and the details are as follows [specify date of filing, type of filing, court in which filing was made, circumstances that lead to the filing]:

5. ☐ No entity with which I am or have been affiliated in an ownership or decision making capacity, is in or has filed for bankruptcy or reorganization as of the date hereof or has had a bankruptcy discharged within the past four (4) years; OR

- ☐ An entity with which I am or have been affiliated in an ownership or decision making capacity, is in or has filed for bankruptcy or reorganization as of the date hereof or has had a bankruptcy discharged within the past four (4) years and the details are as follows [specify entity, date of filing, type of filing, court in which filing was made, circumstances that lead to filing]:

6. ☐ No state licenses I am required to have from TN or any other state are or have been suspended in the last ten years; OR

- ☐ State licenses I am required to have from the State of Tennessee or from any other state are or have been suspended at some time during the last ten (10) years and the details are as follows [specify required license, license number, state of licensure, date of suspension(s), reasons for the suspension(s), and current status]:

7. ☐ No state licenses required from the State of Tennessee or from any other state by any entity with which I am or have been affiliated in an ownership or decision making capacity is or has been suspended at any time during the last ten (10) years; OR

- ☐ State licenses required from the State of Tennessee or from any other state by an entity with which I am or have been affiliated in an ownership or decision making capacity is or has been suspended at some time during the last ten (10) years and the details are as follows [specify entity, required license, license number, state of licensure, date of suspension(s), reasons for the suspension(s), and current status]:

I acknowledge that under Tennessee Code Annotated, Section 13-23-133, it is a Class E felony for any person to knowingly make, utter or publish a false statement of substance for the purpose of influencing THDA to allow participation in any of its programs, including the Low-Income Housing Tax Credit Program. I further acknowledge that the statements contained in this form are statements of substance made for the purpose of influencing THDA to award funding under a THDA program, including Low-Income Housing Tax Credits.

Signature

Date

Type or Print Name

Role within Organization

STATE OF _____)

COUNTY OF _____)

Before me, _____, a Notary Public of the state and county mentioned, personally appeared _____, the within named bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that she/he executed the foregoing instrument for the purposes therein contained.

Witness my hand and seal, at office, this _____ day of _____;
year _____.

Notary Public: _____

[SEAL]

My Commission Expires: _____