

ATTACHMENT 23: DISCLOSURE FORM

Required if changes have occurred since Initial Application and/or Carryover Application

A fully executed **Attachment 23: Disclosure Form** must be included for **each individual** in the breakdown of the management of the **Ownership Entity and the Developer Entity, including every individual involved in every business entity in the chain of management of the Ownership Entity and the Developer Entity, including all officers, board members, members, etc.,** unless an opinion in the form of **Attachment 24** Disclosure Exemption is provide for each corporation to which this exception applies.

In connection with an Initial Application submitted to the Tennessee Housing Development Agency ("THDA") requesting an allocation of 20___ Low-Income Housing Tax Credits, I, the undersigned, being duly sworn, hereby certify as follows:

1. ☐ To my knowledge, there is no litigation pending or threatened with regard to any aspect of the proposed project, including the property, any business entity that is or will be associated with the property/project, or any individual involved in any business entity involved in the organization of the Ownership Entity or Developer Entity; **OR**

☐ If there is litigation pending or threatened, I have attached correspondence to this document that answers each of the following in detail:
 - 1a. Is there any litigation pending or threatened with regard to the project?
 - 1b. Is there any litigation pending or threatened with regard to the property?
 - 1c. Is there any litigation pending or threatened with regard to a business entity that is or will be associated with the property/project?
 - 1d. Is there any litigation pending or threatened with regard to the individual signing this disclosure?

2. ☐ 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]:

3. ☐ I have not been fined, suspended, or debarred as a result of financial or housing activities, etc. by a state or federal commission or agency (including FHA, VA, FDIC, USDA/RD (formerly FmHA), IRS, etc.) within the last five (5) years; **OR**

☐ The above is true and the details are as follows [specify state/federal commission or agency, the action taken, and the activity that resulted in the fine, suspension, or debarment]:

4. ☐ 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, etc. by a state or federal commission or agency (including FHA, VA, FDIC, USDA/RD (formerly FmHA), IRS, etc.) within the last five (5) years; **OR**

☐ The above is true and the details are as follows [specify state/federal commission

or agency, the action taken, and the activity that resulted in the fine, suspension, or debarment]:

5. ☐ 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 last 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]:

6. ☐ 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]:

7. ☐ No state licenses I am required to have from the State of Tennessee or from any other state are or have been suspended at any time during the last ten (10) 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)]:

8. ☐ 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)]:

9. ☐ I have never been involved with any Housing Credit Development in Tennessee that entered the Qualified Contract Process; **OR**

☐ The above is true and the details are as follows [specify Development, year, details of involvement]:

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 Credit Program. I further acknowledge that the statements contained in this Attachment 23 are statements of substance made for the purpose of influencing THDA to award Low-Income Housing Credits to the Initial Application of which this Attachment 23 is a part.

[Signature on Next Page]

Signature

Date

Type or Print Name

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 _____, 20____.

Notary Public

[SEAL]

My Commission Expires: _____