ATTACHMENT 26A: CERTIFICATE REGARDING QUALIFICATION FOR PUBLIC HOUSING AUTHORITY SET-ASIDE WHEN PUBLIC HOUSING AUTHORITY IS SOLE GENERAL PARTNER OR SOLE MANAGING MEMBER OF OWNERSHIP ENTITY

Devel	opment Name:	(the "Development")	
Devel	opment Address:		
Ownership Entity:		(the "Development Owner")	
Public Housing Authority:		(the "PHA")	
Under	r penalty of perjury, the	undersigned,, hereby certifies as follows:	
1.	I am the Executive Director of the Public Housing Authority ("PHA") and, as such, I have direct knowledge of the matters contained in this Certificate and am duly authorized to provide the certifications and representations contained herein to the Tennessee Housing Development Agency ("THDA") is connection with the Initial Application (as defined below).		
2.	This Certificate is provided with respect to the status of PHA as a qualified public housing authority defined in the Tennessee Housing Development Agency Low-Income Housing Credit 2021 Quali Allocation Plan (the "2021 QAP") in connection with an Initial Application of even date herewith (the "In Application") submitted to THDA requesting an allocation of 2021 Low-Income Housing Credits ("Hous Credits") for the Development from the Public Housing Authority Set-Aside pursuant to the 2021 C (the "PHA Set-Aside").		
3.	person to knowingly of THDA to allow partic (the "Housing Credit are statements of su Housing Credit Programments	nder Tennessee Code Annotated, Section 13-23-133, it is a Class E felony for any nake, utter or publish a false statement of substance for the purpose of influencing ipation in any of its programs, including the Low-Income Housing Credit Program Program"). I further acknowledge that the statements contained in this Certificate bstance made for the purpose of influencing THDA to allow participation in the am by awarding Low-Income Housing Credits to the Development as proposed in of which this Certificate is a part.	
4.		n the preparation of the Initial Application and intend to submit the Initial Application, ate, to THDA for the purpose of participating in the Housing Credit Program.	
5.	I acknowledge and agree that the truthfulness and accuracy of the statements contained in this Certifica will be solely relied upon by THDA in determining whether the Development, as proposed in the Initial Application, is eligible for an award of Housing Credits from the PHA Set-Aside.		
6.	All disclosures and s	atements contained in the Initial Application are true and correct.	
7.	PHA is duly created a Section 13-20-101 et	and validly existing under the Housing Authorities Law, Tennessee Code Annotated seq. (the "Act").	
8.	The Development p jurisdiction.	roposed in the Initial Application is within the geographic area of the PHA's	
9.	Check the box that applies:		
	☐ PHA [owns all of Owner.	the general partnership interests/is the sole managing member] of Development	
		the reservation of Housing Credits, [own all of the general partnership interests/be g member] of the Development Owner; however, Development Owner has not yet	
10.	PHA is not controlled	by any for-profit entity.	

PHA is not affiliated with any for-profit entity, except Development Owner.

11.

12.	No staff members, officers or members of the board of directors of or indirectly, in the Development as or through a for-profit entity, or			
13.	A is authorized to and will materially participate (within the meaning of Section 469(h) of the Code) in development and operation of the Development throughout the compliance period.			
14.	PHA will participate in the development and operation of the Development on a regular, substantial and continuous basis through the following activities (list all activities PHA will undertake in connection with the development and operation of the Development):			
15.	Check the box that applies and provide the required information:			
	☐ The existing partnership agreement of Development Owner a for the Development, true, correct, and complete copies of we provide for other [general partners/managing members] of De	hich are attached as Exhibit A , do not		
	☐ The proposed partnership agreement of Development Ovagreement for the Development, true, correct, and complex billing the control of the proposed partners/managinal control of the proposed partners/managinal control of the proposed partners/managinal control of the proposed partnership agreement of Development Ovagas agreement of Development of Dev	ete forms of which are attached as		
	THIS CERTIFICATE MUST BE EXECUTED BY THE SIGNATORY [Example John L. Doe].	IN AN <u>INDIVIDUAL</u> CAPACITY		
	Signature of Executive Director	 Date		
	Type or Print Name			