## TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

## **Asset Certification of Net Family Assets**

For households whose combined net assets do not exceed the Imputation Threshold as defined by HUD at:

https://www.huduser.gov/portal/datasets/inflationary-adjustments-notifications.html

(Complete only one form per household; include assets of minors.)

Head of Household Name:					Unit No.:				
Developr	nent Name and Addre	ss:							
Complete	e all that apply for 1 tl								
<ol> <li>My</li> <li>Source</li> </ol>	r/our assets include (e	nter n/a in (A) (A) Cash Value	if you do not ow (B) Int. Rate	n the respective (A*B) Annual Income	asset):  Source	(A) Cash Value	(B) Int. Rate	(A*B) Annual Income	
Savings	Account(s)	\$	%_	\$	- Checking Account(s)	\$	<u>%</u>	\$	
Certificates of Deposit		\$	%_	\$		\$		\$	
Stocks		\$	<u></u>	\$	Bonds	\$	%	\$	
Peer to Peer (Cash App, Venmo, Paypal, etc.)		\$	%	\$	Trust Funds	\$	%	\$	
Equity in Real Estate		\$	%_	\$	Land Contracts	\$	%_	\$	
Lump Sum Receipts		\$	%_	\$	Capital Investments	\$	%_	\$	
Bitcoin/ Cryptocurrency		\$	%_	\$	GoFundMe/Crowdsourcing	\$	%_	\$	
Life Insurance (Excluding Term)		\$	%	\$	Pre-paid Debit Cards	\$	%_	\$	
Cash on Hand		\$	%	\$	<u>.</u>				
Personal Property Held as an Investment		\$	<u></u> %	\$	Explanation				
Other (list):		\$	%	\$	Explanation				
PLEA	ASE NOTE: Certain fun	ds (e.g., Trust)	may or may not	be (fully) access	ible to you. Include only those	amounts whic	h <u>are</u> accessib	le to you.	
(Che	eck either box 2 or box	3 below, not	both)						
2.	(FMV). Those amount	vo (2) years, I/we have sold or given away assets (including cash, real estate, etc.) for less than fair market value unts equal a total of: \$(enter the difference between FMV and the amount you received). or given away assets (including cash, real estate, etc.) for less than fair market value during the past two (2) years.							
4. <b>-</b>		iny assets at this time (do not check this box if you have entered any numbers in section 1, above).							
	•			•	,	,	•		
The net f			•		e Imputation Threshold, and th ove). This amount is included in			•	
ignature of Applicant/Tenant			Date		Signature of Applicant/Tenant		Date		
ignature of Applicant/Tenant			Date		Signature of Applicant/Tenant		Date	Date	

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