# **Instructions for TRACS 203A form HUD-50059 (xx/xxxx**)

**(Move-Ins, Initials, Annuals, Interims, and Other Non-Interim Certifications)**

**Owner’s Certification of Compliance with HUD’s Tenant Eligibility and Rent Procedures**

**The following are some general notes regarding these instructions:**

1. Unless noted otherwise by a reference to HUD Handbook 4350.3 REV-1, this document has been updated to reflect HUD’s policy guidance in Housing Notice 2023-10 (HOTMA Sections 102 and 104 Implementation Notice).
2. When completing this form, if a conflict arises between these instructions and the instructions provided in the Definitions and Edits section of the TRACS 203A MAT User Guide, the TRACS 203A MAT User Guide takes precedence.
3. When automatically printing or manually filling out this form, Owner/Agents’ or TRACS compliant software may add additional descriptors when the instructions require a Code to be chosen. As long as the required Code is filled in for TRACS reporting purposes, the additional descriptors are acceptable.

Take for example Item 2, Subsidy Type. If the property is Section 8, the required Subsidy Type Code in Item 2 should be filled in with a **1**. Also shown are instances in which an added descriptor may be printed with the required Code.

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| 2. Subsidy Type **1** | 2. Subsidy Type **1** (Section 8) | 2. Subsidy Type **1** Sec. 8 |

These variations are examples of what is acceptable on the completed HUD-50059. Even though there are added descriptors on the completed form, the TRACS data field created by TRACS compliant software would be filled in with a **1** because TRACS allows for only one character in the Subsidy Type data field.

Another example, Item 16, Certification Type: If the property is processing an Annual Recertification, the required Code is **AR**.

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| 16. Certification Type **AR** | 16. Certification Type **AR** – Annual |

The acceptable descriptor, Annual, is added to the required Code of **AR**. Similar to the example with Subsidy Type, the TRACS data field created by the TRACS compliant software would be filled in with **AR** because TRACS allows for only two characters in the Certification Type data field.

1. Two new contract types have been added to Section 8 (Subsidy Type 1): RAD and SPRAC. When processing RAD or SPRAC certifications, enter Subsidy Type “**1**” in Item 2 of this form. Refer to Appendix K in the 202D MAT (Monthly Activity Transmission) User Guide for more information.
2. Owners must keep the signed [HUD-50059](file://fssrv001/eps/4350/50059.pdf)(s) and copies of the [HUD-50059 A](file://fssrv001/eps/4350/50059-A.pdf)(s) for tenants from the time of Move-In to Move-Out and for a minimum of three years thereafter.
3. This form (HUD-50059) is referred to as a MAT10 record for TRACS reporting purposes.
4. For TRACS purposes, a Space = Blank.
5. To process a Move-Out (TRACS MAT40 record), Termination (TRACS MAT65 record), Gross Rent (TRACS MAT70 record), or Unit Transfer (TRACS MAT70 record), complete the form **HUD-50059 A** instead of this form.

**Helpful Web Pages**

The webpages linked below can be accessed by placing your cursor on the webpage address, then pressing and holding the **Ctrl** key and left-clicking once (**Ctrl +** Click).

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| **TRACS Webpage** | <http://portal.hud.gov/hudportal/HUD?src=/program_offices/housing/mfh/trx/trxsum> |
| **TRACS Documents** | <http://portal.hud.gov/hudportal/HUD?src=/program_offices/housing/mfh/trx/trxdocs> |
| **TRACS Discussion Forum** A forum for Industry members to ask questions and offer resolutions related to HUD Occupancy regulations/requirements and TRACS submission challenges. | <http://ptp.hud.gov/forumswww/main.cfm?cfapp=34> |
| **HUDCLIPS** TRACS 203A versions of the forms HUD-50059 and HUD-50059 A, along with the instructions for these forms. | <http://www.hud.gov/offices/adm/hudclips/forms/hud5.cfm> |
| **HUD Handbook 4350.3** *Occupancy Requirements of Subsidized Multifamily Housing Programs* | <http://portal.hud.gov/hudportal/HUD?src=/program_offices/administration/hudclips/handbooks/hsgh/4350.3> |
| **Office of Multifamily Housing (MFH) HOTMA Webpage** | <https://www.hud.gov/program_offices/housing/mfh/hotma>. |
| **Notice H 2023–10** *Implementation Guidance: Sections 102 and 104 of the Housing Opportunity Through Modernization Act of 2016 (HOTMA)* | <https://www.hud.gov/sites/dfiles/OCHCO/documents/2023-10hsgn.pdf>. |
| **Annual Inflationary Adjustments and Passbook Rate Webpage** | <https://www.huduser.gov/portal/datasets/inflationary-adjustments-notifications.html> |

**Section B. Summary Information**

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| **Item 1** Project Name | Enter the project name that appears on the regulatory agreement or subsidy contract. This will be the current project name in HUD’s Contracts database.  Note: TRACS will use this project name for all Items under this TENHR. |
| **Item 2** Subsidy Type | Enter the code for the subsidy the tenant will receive during the period covered by this (re)certification. Only one code can be entered. If the tenant benefits from more than one type of subsidy, use the code for the project-based subsidy the tenant will be receiving.  Example: If a tenant in a Section 236 property will receive Section 8 assistance, enter “1”.  Example: If a tenant in a Section 236 property receives Section 8 assistance through a Housing Choice Voucher (HCV), no HUD-50059 is to be completed. The PHA issuing the HCV is responsible for reporting the tenant’s information to HUD.  Valid codes are as follows:  1 – Section 8  4 – Section 236  5 – BMIR  6 – 811 PRA Demo  7 – Section 202 PRAC  8 – Section 811 PRAC  9 – Section 202/162 PAC  0 – Market Rent (acceptable only with MAT15 Address Records) |
| **Item 3** Secondary SubsidyType | Enter “S” if this tenant is receiving Section 8 assistance and is living in a Section 236 property. Enter “B” if this tenant is receiving Section 8 assistance and is living in a BMIR property. Leave blank if the tenant does not live in a Section 236 or BMIR property or if the certification subsidy type is Section 236 or BMIR. |
| **Item 4** Property ID | Assigned by **iREMS** (**i**ntegrated **R**eal **E**state **M**anagement **S**ystem). Leave this Item blank until activated by TRACS.  Note: Once the Property ID is assigned, it must be included on all future (re)certifications. |
| **Item 5** Project Number | Enter the 8-digit FHA, Elderly Housing, or State Agency noninsured project number. This Item is mandatory for Section 236, BMIR, PAC, and PRAC subsidy types. It is also required for those Section 8 contracts for which an FHA project number applies.  Sample entries are as follows:  FHA Insured Projects – 12144026  Elderly Housing Projects – 121EH001  Other noninsured Projects – 121001NI  Note: Do not use “0000FMHA” as a project number for an FMHA/RHS property. There should not be a project number for these properties.  Note: If MAT15s (Address Records) are submitted with a Subsidy Type “0”, a Project Number is required. |
| **Item 6** Contract Number | This number is mandatory for Section 8, 202/162 PAC, 202 PRAC, 811 PRA Demo, SPRAC, and 811 PRAC subsidy types. This number will be used for all TRACS transactions created under this TENHR. Enter the 11-digit Contract Number. Do not enter dashes in this Item. (e.g., AK123456789) |
| **Item 7** Project iMAX ID | The project’s telecommunications identifier, also known as the **iMAX** ID. The first five positions of this number must be “TRACM”, and HUD assigns the last five positions. For example, TRACM98765.  **Note:** iMAX stands for **i**ntegrated **M**ultifamily **A**ccesse**X**change |
| **Item 8** Plan of Action Code | This Item is specifically for Title II or Title VI Preservation properties. If the property is under the Plan of Action Title II, enter a “2” in this Item. If the property is under the Plan of Action Title VI, enter a “6” in this Item. Otherwise, leave blank. |
| **Item 9** HUD-Owned Project? | If the project is HUD-owned, enter a “Y” to enable (re)certifications to besubmitted to TRACS. |
| **Item 10** Previous Housing Code | **Complete only for Move-ins.** Select the code that best describes the physical condition of the housing from which the family is moving.  1 = Substandard  2 = Without or Soon to Be Without Housing (Note: legacy code to be used only for TRACS 202C MIs or corrections to MIs originally transmitted under TRACS 202C).  3 = Standard  4 = Conventional Public Housing (Owned by a Public Housing Agency)  5 = Lacking a Fixed Nighttime Residence  6 = Fleeing/Attempting to Flee Violence  Note: Codes 5 and 6 are more fully defined as:  5: Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter or a place not meant for human habitation and who is exiting an institution where they temporarily resided.  6: Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.  Note: “Substandard” means physically substandard and does not include overcrowding. |
| **Item 11** Displacement Status Code | **Complete only for Move-Ins.** Enter one of the codes listed below. Select the code that best describes the reason the family was displaced. If the family was not displaced, enter Code “4”.  1 = Government Action  2 = Natural Disaster  3 = Private Action  4 = Not Displaced |
| **Item 12** Effective Date | Enter the date this (re)certification is to be effective. For a move-in (MI), use the date the tenant moved into the project. For an Initial Certification (IC), use the date the tenant began to receive the type of assistance (subsidy) entered in Item 2. For an Annual Recertification (AR), an Interim Recertification (IR), or an Other Non-Interim Certification (OC), refer to Chapter 7, Sections 1 & 2, of HUD Handbook 4350.3 REV-1 and Housing Notice 2023-10 for assistance in determining this date. Enter effective date as MMDDYYYY.  Note: Effective date should never be confused with the Reported on/Voucher date. The Effective date is the date the (re)certification is to be effective, and the Reported on/Voucher date is the date that the action was first reported to HUD and included on a HAP voucher. |
| **Item 13** Anticipated Voucher Date | Enter the voucher period (month, day, year) for which the (re)certification will first appear. When the (re)certification is for Subsidy Type “4” (Section 236) or Type “5” (BMIR), enter the date that is the first of the month corresponding to the (re)certification effective date.  Note: When entering the date MMDDYYYY, the “DD” will always be “01” |
| **Item 14** Next Recertification Date | Refer to the 4350.3 REV-1: Paragraph 7-5 and Housing Notice 2023-10 regarding the next recertification date for Annual Recertifications, Move-Ins, and Initial Certifications types, Interim Recertifications, and Other Non-Interim Certifications. Gross Rent Changes, and/or Unit Transfers do not affect this date.  (4350.3 REV-1: Paragraph 7-5; Housing Notice 2023-10)  Note: The next Annual Recertification date should not be more than one year after the effective date of the (re)certification being submitted. However, there are instances in which it can be less than one year. |
| **Item 15** Project Move-In Date | Enter the date the tenant moved into the project. Enter as MMDDYYYY.  (4350.3 REV-1: Paragraphs 3-5.D and 3-10.B) |
| **Item 16** Certification Type | Enter only one code in this Item that best describes the main reason for preparing this form. If a previous (re)certification is being corrected, use the same code that was on the original (re)certification. If a partial certification is being created, such as a Unit Transfer or Gross Rent change, complete a **HUD-50059 A** instead of this form.  The following are valid codes for this Item:  Move-In (Code **MI**). Use this code only when a new tenant moves into the project.  Initial Certification (Code **IC**). Use this code:  1. When an in-place Market Rent, a Section 236 or a BMIR tenant begins receiving subsidized rent.  2. To give Section 8, 811/202 PRAC, 202/162 PAC, or 811 PRA Demo assistance to an in-place tenant who is now paying a rent not based upon the tenant’s income (e.g. paying 236 Basic Rent or BMIR rent, when they would be eligible for a lesser rent under the deeper subsidy program.)  3. To transfer a tenant to another unit within the same “project” but onto a different contract the owner must first process a termination (MAT 65 Code CE- Subsidy contract expired or combined with a renewal contract). This is then followed by an Initial Certification. Because this tenant is still in the same project, they are not subject to admission and eligibility requirements.  Note for #3: If the IC changes the next recertification date in the reporting software, change it back to the former recertification anniversary date.  Annual Recertification (Code **AR**). Use this code for regularly scheduled annual recertifications. Please see 4350.3 REV-1: Chapter 7, Section 1.  Interim Recertification (Code **IR**). Use for changes in family circumstances (e.g., income, deductions, and household composition) that meet the threshold of an Interim Recertification. The effective date must be different from the Annual Recertification effective date. Please see Housing Notice 2023-10.  Other Non-Interim Transaction (Code **OC**). Use for changes in family circumstances that do not trigger an Interim Recertification. Please see Housing Notice 2023-10. (4350.3 REV-1: Chapter 7, Section 1; Housing Notice 2023-10.)  **NOTE**: If a Gross Rent Change or Unit Transfer has the same effective date as a full (re)certification for the tenant, include the new GRC and/or UT information as part of the full (re)certification.  Note: This Item is also known as the Transaction type. |
| **Item 17** Action Processed | The valid code for this Item is:  1 = for a Correction to a prior 50059  Otherwise, leave blank |
| **Item 18** Correction Type | The valid codes for this Item are:  Blank = No Correction  1 = Administrative Resubmission  2 = Corrects Owner/Agent certification errors  3 = Corrects Tenant Misreporting  Note: If the Action Processed code (Item 17) is “1”, the Correction Type code must be filled in. Otherwise, leave blank. |
| **Item 19** EIV Indicator | If an EIV finding is the reason this (re)certification is being completed, enter “Y”. If not, leave blank. |
| **Item 20** Previous Subsidy Type | Fill this Item in for Initial Certifications only. If the subsidy type has changed from the previous (re)certification or the tenant has changed from receiving assistance to Market Rent or from Market Rent to receiving assistance, enter the code, choosing from the codes listed in Item 2, associated with the previous subsidy type.  Note: Leave blank if the tenant has no previous history in this project. This Item was formerly called “Subsidy Change Indicator”. |
| **Item 21** RAD Conversion Tenant | If the Subsidy Type is Section 8 PBRA RAD (Component 1 or Component 2) AND if the tenant was in place at the time of conversion to PBRA RAD (Conversion IC Effective Date = RAD Contract Effective Date) then enter “Y”. This is true even if the resident was relocated for rehab before the RAD HAP Contract Effective Date.  If the Subsidy Type is Section 8 PBRA RAD AND if the tenant was not in place at the time of conversion to PBRA RAD, enter “N”.  If Subsidy Type is not Section 8 PBRA RAD, enter “N”.  Once the flag is set to “Y” or “N”, the value remains the same on subsequent full certifications until the resident moves out. |
| **Item 22** RAD Phase-In Schedule | Public Housing (PH) to PBRA RAD, enter 0.  If RAD Component 1 PH to PBRA RAD and if the resident qualifies for the Rent Phase-in, enter the number of years in the phase-in schedule: Either 3 or 5.  If RAD Component 1 PH to PBRA RAD and if the resident does not qualify for Rent Phase-in, enter 0.  Otherwise, leave blank. |
| **Item 23** RAD Phase-In Year | If not RAD Component 1 PH to PBRA RAD, enter 0.  If RAD Component 1 PH to PBRA RAD, and if the resident qualifies for Phase-in, enter the phase-in year applicable for the calculation: 1, 2 or 3 for a Three-Year Phase-In or 1, 2, 3, 4 or 5 for a Five-Year Phase-In.  If RAD Component 1 PH to PBRA RAD and if the resident does not qualify for Rent Phase-in or if Phase-in has ended, enter 0. |
| **Item 24** RAD Prior TTP | If not a RAD Component 1 PH to PBRA RAD, enter 0.  If RAD Component 1 PH to PBRA RAD and resident does not qualify for Rent Phase-in, enter 0.  If RAD Component 1 PH to PBRA RAD and resident does qualify for Rent Phase-in, enter the TTP at RAD Conversion for the Conversion IC. For all subsequent MAT10s, while Rent Phase-in applies, enter the TTP from the immediately prior certification (MAT10 or MAT 70).  When creating subsequent MAT10 certifications (after the Conversion IC):   * Subtract Prior TTP from the new TTP Before Override to determine the difference; and * Then multiply the result by the appropriate percentage; * Then add that amount to the Prior TTP to determine new TTP. |
| **Item 25** TTP at RAD Conversion  Note: this is not Tenant Rent. Tenant Rent = TTP less any Utility Allowance. | If not a RAD Component 1 PH to PBRA RAD, enter 0.  If RAD Component 1 PH to PBRA RAD and the resident does not qualify for Rent Phase-in, enter either 0 or the TTP indicated on the 50058 in effect at the time of conversion to RAD.  If Component 1 PH to PBRA RAD and resident does qualify for Rent Phase-in, enter the TTP tenant is/was paying at the time of conversion to RAD. |
| **Item 26** Unit Number | Enter the unit number in which the household is residing on the effective date of this HUD-50059. Note: If each unit number is used only once within a project, enter unit numbers (e.g., 201, 402). If a unit number is used more than once within a project, use a unique method to identify each unit. Assign a letter or on additional number before the unit number (e.g., A101, B101).  Note: It is recommended that unit numbers not be changed after they have been established. This can create difficulties in TRACS. |
| **Item 27** Unit Group | Enter a value only if the unit is a group home residential space. Otherwise, leave the Item blank.  In group homes, individual bedrooms within a physical unit are rented independently as units (residential spaces) in their own right. When this is the case, each bedroom is given a TRACS unit group number. When this is the case, each bedroom is given a TRACS unit group number.  For example, individual bedrooms within a four-bedroom group home could be identified in the following ways:   * Unit 101-1; * Unit 101-2; * Unit 101-3; and * Unit 101-4.   OR   * Unit 101-01; * Unit 101-02; * Unit 101-03; and * Unit 101-04.   This Item will accept two characters. The Unit Group Number could be 01, as long as 01 is not being used as a Unit Group Number or Unit Number for any other apartment group. |
| **Item 28** No. of Bedrooms | Enter the number of bedrooms for the unit number listed in Item 26. For the guidelines on occupancy standards, see 4350.3 REV-1: Paragraph 3-23. |
| **Item 29** Building ID | REAC-assigned Building Number. Leave this Item blank. |
| **Item 30** Unit Transfer Code | Enter “Y” if this Unit Transfer occurs within the same contract and project numbers **AND** requires a full (re)certification (MAT10 TRACS record). **Otherwise**, complete a HUD-50059 A (partial certification) for the Unit Transfer (MAT70 TRACS record).  Note that an IR/UT may be effective other than the first of the month.  Note: If the unit number in a (re)certification is not the same as it was in the last (re)certification, and the Unit Transfer code does not have a “Y” for this Item, the (re)certification will fatal at TRACS. |
| **Item 31** Previous Unit No. | This Item is required if Item 30, Unit Transfer Code, is filled in with a “Y”. Enter the unit from which the tenant transferred. |
| **Item 32** Security Deposit | See 4350.3 REV-1: Figure 6-7 to determine the Security Deposit amount required at Move-in. Even though owners can accept the security deposit in installments, the amount entered should be the security deposit amount shown on the lease.  **Note**: **HUD policy has ruled that, when a MI or IC certification is corrected, any security deposit required is to be recalculated. When this happens, the change should be noted on the lease and the O/A and tenant should initial the change.**  (4350.3 REV-1: Chapter 6 Section 2, Figure 6-7) |
| **Item 33** 236 Basic/BMIR Rent | Use only for Section 8 (re)certifications in a Section 236 or BMIR property (whenever the Secondary Subsidy Type (Item 3) is filled with the code “S” or “B”). Enter the Section 236 Basic Rent or the BMIR Rent as applicable. If not applicable, leave blank.  **Note: For Section 236, Basic Rent may not be greater than Market Rent.**  (Approved HUD-92458 (Rent Schedule)) |
| **Item 34** Market Rent | This Item is required to be filled in if Section 236 or BMIR is the primary or secondary subsidy. Enter the Market Rent that HUD or the Contract Administrator has approved for this unit type. If not applicable, leave blank.  **Note: For Section 236, Market Rent may not be less than Basic Rent**.  (Approved HUD-92458 (Rent Schedule)) |
| **Item 35** Contract Rent | Enter the Contract Rent that HUD or the Contract Administrator has approved for this unit type. If all of the utilities are included in the rent, enter the Contract Rent. It the tenant pays utilities separately, enter the  Gross Rent minus the HUD-approved Utility Allowance to arrive at the Contract Rent.  **Note: This amount cannot be zero.**  (Approved HUD-92458 (Rent Schedule) |
| **Item 36** Utility Allowance | If all of the utilities are included in the rent, enter zero. If not, enter the amount that HUD or the Contract Administrator has approved for this unit type.  (Approved HUD-92458 (Rent Schedule)) |
| **Item 37** Gross Rent | Enter the amount that HUD or the Contract Administrator has approved for this unit type.  (Approved HUD-92458 (Rent Schedule)) |
| **Item 38** Fixed Income Family | If a family qualifies as a fixed income household (90% or more of total household income is from a fixed income source) as defined in the FAST Act and HUD regulations, enter “Y”. If the household does not qualify as a fixed income household, enter “N”. |

**Section C. Household Information**

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| **Item 39** Member Number | Enter a member number for each household member. The Head of Household (HoH) must have the number “01”. Each person in the household must have their own member number because it will be used to associate income and assets to specific family members.  Note: Item 43, Relationship Code, must be H for the Head of Household. No other family records for the household may contain this code or “01” for the family member number. |
| **Item 40, 41 & 42,** Names of Household Members | Enter the names (Last, First, Middle Initial) of each member who will be residing in this unit.  The list of members should be in the following order: Head of Household, Spouse or Co-Head, Dependents, Other adult family members, Foster children under age 18, Foster adults, Live-in Attendants and Others living in the unit who are not members of the tenant family.  Note: If a household member has a Middle Initial, fill in Item 42. |
| **Item 43** Relationship Code | List persons living in the unit in the following order and state each person's relationship to the Head of Household by using one of the codes listed below. See Chapter 3 of the 4350.3 REV-1 concerning the eligibility of families to assisted housing. Only the following codes may be entered.  H – Head (There can be only one Head of Household). If there is a spouse or co-head, list the same person as the head on each (re)certification, if that person resides in the household. List the other person as spouse or co-head on each (re)certification.  S – Spouse (There can either be a spouse or a co-head, but not both.) There can be only one spouse.  K – Co-head (There can either be a spouse or a co-head but not both.) There can be only one co-head. See Paragraph 5-6.A of the 4350.3 REV-1 for guidance on how to count emancipated minors.)  For the Section 202/8, Section 202/162 PAC, Section 202 PRAC, Section 811 PRAC, SPRAC, and 811 PRA Demo programs, to qualify for admission/assistance, persons must be age 62 or, if disabled, at least 18 years old. Therefore, a head, spouse or co-head under the age of 18 would not occur in these programs.  D – Dependent. See Paragraph 5-10.A of the 4350.3 REV-1. Count any member of the family currently living in the unit who is not the Head, Spouse, or Co-Head and:   * Age 17 or younger * 18 or older and disabled or a full-time student * Child temporarily absent due to placement in a foster home * Child who is subject to joint custody agreement (See explanation of Joint Custody Codes in Item 47 of these instructions) * Student (regardless of age) away at school but lives with family during school breaks * Child being adopted (or custody being sought) and living in unit   O – Other adult member of the family who is not the head, spouse or co-head. See Paragraph 5-6 of the 4350.3 REV-1. This member's status cannot be used to justify the family's eligibility for the elderly/disabled family deduction or the medical/disability expenses deduction.  F – Foster child under the age of 18 or the child of a Foster child or Foster adult. See Paragraph 5-6.A of the 4350.3 REV-1. Persons in this category do not have rights under the lease, are not considered members of the family and their income is not counted in determining the family's annual income. Foster children do not qualify for the dependent allowance **and** neither their health and medical care nor their disability assistance expenses are deductible. Eligible child care expenses for Foster children who are under the age of 13 may be deducted from annual income. Foster children and Foster adults **do not count** for income limit purposes.  L – Live-In Aide/Attendant. See 4350.3 REV-1: Fig. 5-2 and Paragraph 3-6.E for guidance on live-in aides/attendants. Persons in this category do not have rights under the lease, are not considered members of the family, and their income is not counted in determining the family's annual income. Live-In Aides/Attendants **do not count** for income limit purposes.  N – None of the Above. Others Living in the Unit Who are not Members of the Tenant Family. Persons in this category do not have rights under the lease, are not considered members of the family, and their income is not counted in determining the family's annual income.  See the spreadsheet **202DRelationshipRules.xlsx** for clarification. The spreadsheet is located on the TRACS web page. Click on Documents, then click on TRACS 202D Final Industry Specification Documents. |
| **Item 44** Sex | Enter the sex reported by each household member:   * M = Male * F = Female * N = Owner/agent did not ask for the information or the tenant did not voluntarily report |
| **Item 45** Race/Ethnicity | Based on the Race/Ethnicity Data form completed by each household member, please enter the appropriate letter(s) and number(s) listed below. For example:   * If the household member is Asian, White, Chinese, and Scottish, as stated on the form HUD-27061-H, enter **AW0136**. * If the household member is Black or African American and Haitian, as stated on the form HUD-27061-H, enter **B09**.   Note: If the Race/Ethnicity Data form is not completed for a household member, enter “**X**”in this Item for that member.  TRACS will accommodate up to 20 characters.  X = Declined to report  I = American Indian or Alaska Native  A = Asian  B = Black or African American  H = Native Hawaiian or Pacific Islander  L= Hispanic or Latino  M= Middle Eastern or North African  W = White  O = Other   * 01 = Chinese * 02 = Asian Indian * 03 = Filipino * 04 = Vietnamese * 05 = Korean * 06 = Japanese * 07 = African American * 08 = Jamaican * 09 = Haitian * 10 = Nigerian * 11 = Ethiopian * 12 = Somali * 13 = Mexican * 14 = Puerto Rican * 15 = Guatemalan * 16 = Cuban * 17 = Dominican * 18 = Salvadoran * 19 = Lebanese * 20 = Iranian * 21 = Egyptian * 22 = Syrian * 23 = Iraqi * 24 = Israeli * 25 = Native Hawaiian * 26 = Samoan * 27 = Chamorro * 28 = Tongan * 29 = Fijian * 30 = Marshallese * 31 = English * 32 = German * 33 = Irish * 34 = Italian * 35 = Polish * 36 = Scottish * 37= Navajo Nation * 38= Blackfeet tribe of the Blackfeet Indian Reservation of Montana * 39 = Native Village of Barrow Inupiat Traditional Government * 40= Nome Eskimo Community * 41= Aztec * 42 = Maya * 43 = Other |
| **Item 46** Birth Date | Enter the Birth Date for each member of the household.  Note: This Item must be entered in a MMDDYYYY format. |
| **Item 47** Special Status Code | Identify any household member who may qualify for one of the following Special Status Codes. For each member, enter all the codes that apply (e.g., an “E” Elderly tenant may also be “H” Disabled).  E = Elderly Head, Co-Head, or Spouse (At least 62 years of age as of the effective date of this (re)certification).  F = Family Self Sufficiency (FSS) program participant (such individuals have executed an Individual Training and Services Plan (ITSP). ITSPs are attached to, and incorporated as part of, the Contract of Participation (CoP). This code must be included in the HOH Member Record if the code is included in any other family member record. This code must not be set for a Foster adult, Live-in Aide/Attendant, or None of the Above.  S = Full-time Student 18 or older who is not the Head, Co-Head or Spouse as of the effective date of this (re)certification. Must have a “D” (Dependent) indicated in Item 43 (Relationship Code),  H = Family member who is Disabled.  M = Family Member who is a US military veteran.  P = Person being housed temporarily pursuant to the guidance in the HUD Handbook 4350.1, Chapter 38.  **Joint Custody Codes:**  JK =Dependent (D) whose custody is jointly shared by more than one family and who receives a dependent allowance along with a child care allowance where applicable.  C = Dependent (D) whose custody is jointly shared by more than one family but who does not receive a dependent allowance and who lives in the unit less than 50% of the time. Such a person’s child care expenses count toward the child care allowance.  CK = Dependent (D) whose custody is jointly shared by more than one family and lives in the unit 50% or more of the time. Count for unit size and income limit purposes.  A dependent without either the J or C codes is assumed to be a full-time resident of the unit.  Note: Ages are based on the effective date (Item 12) of this (re)certification  (4350.3 REV-1: Paragraph 5-6.A.3.c, Figure 3-6) |
| **Item 48** Student Status | Enter “Y” if student (either full or part-time) at an Institution of Higher Education is eligible for assistance under the rules as shown in the 4350.3 REV-1: Paragraphs 3-13 & 3-33. Otherwise, leave blank. |
| **Item 49** ID Code (SSN) | Enter the 9-digit Social Security Number for each of the household members. Do not use dashes when entering these numbers. This is the family member’s SSN/TRACS ID; it is not the SSN Benefits Claim Number or Individual Tax Identification Number (ITIN).  (4350.3 REV-1: Paragraphs 3-9 and 3-31)  **Note:** If a household member does not have a SSN or TRACS ID (T-id) number, enter 999999999, and TRACS will assign a TRACS ID number. |
| **Item 50** SSN Exception | Choose the appropriate code if an individual without a valid SSN qualifies for an SSN exception. Leave blank if no SSN Exception applies.  C = Individual who does not contend eligible immigration status  E = Individual age 62 or older as of January 31, 2010, whose initial determination of eligibility in either a Multifamily or PIH Housing program was begun prior to January 31, 2010 (a break in assistance does not void the exemption)  M = New household member under the age of 6 where disclosure of SSN is delayed for 90-180 days  **Note:** When the member does not have a SSN, enter 999999999 in Item 50 of this form. |
| **Item 51** Citizenship Code | Enter one of the following codes for each household member.  See 4350.3 REV-1: Paragraph 3-12. Leave blank for BMIR, SPRAC, 202/811 PRAC or 202/162 PAC. The valid codes for this Item are:  EC = Individual is a U.S. citizen or U.S. national  EN = Individual is a noncitizen with eligible immigration status  Note: Eligible noncitizens have been verified by USCIS as an eligible noncitizen, e.g., through verification of an alien registration number or other identifying documents input into the SAVE system, through secondary verification, or the appeals process. Or the family member (adult or child) has an eligibility/certification letter for benefits and services issued by HHS Office on Trafficking in Persons (OTIP). Eligible noncitizens include:   * Lawful permanent residents (8 U.S.C. 1101(a)(15) and (20); 42 U.S.C. 1436a(1), (2), & (6)); Section 431 of PRWORA (8 U.S.C. 1641(b)(1). * Persons lawfully admitted for temporary residence under section 1255a of title 8, sometimes also called conditional permanent residents (8 U.S.C. 1101(a)(15) and (20); 42 U.S.C. 1436a(1), (2), & (6)); Section 431 of PRWORA (8 U.S.C. 1641(b)(1). This includes Special Immigrant Conditional Permanent Residents admitted pursuant to the Afghan Allies and Protection Act of 2009 (as amended) (Afghan Allies and Protection Act of 2009, 8 U.S.C.S. § 1101(b)(8) (Section 602. Protection for Afghan allies)) * VAWA self-petitioner applicants with pending or approved applications for immigration protections for certain spouses, former spouses, intended spouses, children, and stepchildren (when they or their children were subjected to battering or extreme cruelty); and certain parents and stepparents subjected to battering or extreme cruelty (8 U.S.C. 1641(c); 8 U.S.C. § 1101(a)(51), 62 Fed. Reg. 61344, 61367 (Nov. 17, 1997)); HUD Memorandum, “Eligibility of Battered Noncitizen Self-Petitioners for Financial Assistance Under Section 214 of the Housing and Community Development Act of 1980” (Dec. 15, 2016)); * Victims of human trafficking (sex or labor) (Trafficking Victims Protection Act of 2000 (as amended), 22 U.S.C. § 7105(b)(1)(A)) who are: T visa holders (8 U.S.C. 1641(c)(4)) – this includes people who have been granted derivative T-2 through T-6 nonimmigrant status by U.S Customs and Immigration Enforcement (USCIS)); T visa applicants with bona fide (prima facie) determinations and Office of Trafficking in Persons (U.S. Department of Health and Human Services certifications (8 U.S.C. 1641(c)(4); 22 U.S.C. 7105(b)(1)(A) & (C)(ii)); or noncitizen minors who have received a Child Eligibility Letter from the Office of Trafficking in Persons (U.S. Department of Health and Human Services) (22 U.S.C. 7105(b)(1)(A) & (C)(i)); * Refugees (42 U.S.C. 1436a(a)(3); Section 431 of PRWORA (8 U.S.C. 1641(b)(3)); * Asylees (42 U.S.C. 1436a(a)(3); Section 431 of PRWORA (8 U.S.C. 1641(b)(2)); * Humanitarian parolees (42 U.S.C. 1436a(a)(4)); * Immigrants granted withholding of removal (42 U.S.C. 1436a(a)(5)); * Citizens of the Freely Associated States (the Marshall Islands, the Federated States of Micronesia, and Palau) lawfully residing in the United States, its territories and possessions (42 U.S.C. 1436a(a)(7)); * Special Immigrant (SI) parolees admitted as part of Operation Allies Welcome (OAW) or Operation Allies Refuge (OAR) (Afghan Allies and Protection Act of 2009, 8 U.S.C. § 1101(b)(8) (Section 602. Protection for Afghan allies.)); * Non-Special Immigrant parolees (often referred to as “humanitarian parole” or “OAR parole”) who are Afghan nationals: paroled into the United States between July 31, 2021, and September 30, 2022; OR paroled into the U.S. after September 30, 2022, and is the spouse or child of an individual paroled into the U.S. between July 31, 2021 and September 30, 2022; or is the parent or legal guardian of an unaccompanied child who was paroled into the United States between July 31, 2021; and parole has not been terminated by the Secretary of Homeland Security (Afghanistan Supplemental Appropriations Act, 2022, Pub. L. No. 117-43 § 2502, 135 Stat. 377 (8 U.S.C. § 1101 note). <https://www.congress.gov/117/plaws/publ43/PLAW117publ43.pdf>); * Ukrainian citizens and nationals, as well as certain non-Ukrainians who last habitually resided in Ukraine, who were paroled into the United States between Feb. 24, 2022 and Sept. 30, 2023 (Additional Ukraine Supplemental Appropriations Act, 2022 P.L. 117-128, Title IV, Section 401).   IC = Ineligible noncitizen child of a family head or spouse  IN = Member is an Ineligible Non-Citizen  IP = Ineligible Parent of a family head or spouse  ND = No documentation submitted. For use when the family is receiving prorated assistance at admission. Member is treated as an ineligible noncitizen for proration purposes.  PV = Individual’s eligibility status is pending verification—documents have been submitted by the family. For use when the family is receiving prorated assistance at admission. Member is treated as an eligible noncitizen for proration purposes.  Note: Applicants who are VAWA self-petitioners or have T visas with bona fide determinations have satisfactory immigration status and are eligible to receive assistance while their applications are pending verification.   * VAWA Self-Petitioner: Under the Violence Against Women Act, certain abused spouses, children, or parents or parents of abused children can file their own petitions to obtain lawful permanent resident status confidentially and without the cooperation of an abusive spouse, parent, or son or daughter, if the abuser is a U.S. citizen or lawful permanent resident. Victims of elder abuse, battered spouse waiver applicants, VAWA Cuban adjustment applicants, VAWA HRIFA (Haitian), VAWA NACARA (Nicaraguans, Cubans, Salvadorans, Guatemalans, Former Soviet Union nationals) are included in the category of VAWA self-petitioners. Children of the self-petitioner can also obtain legal immigration status by being included in their parent’s self petition. Undocumented immigrant children included in their parent’s self-petition are called “derivatives” because they derive a benefit from their parent’s application for legal immigration status. * T visa: This visa is available to individuals who are victims of severe forms of trafficking in persons and who are willing to assist in the investigation and prosecution of their traffickers. Severe forms of trafficking include sex trafficking and transporting, harboring, or obtaining a person for labor by force, fraud, or coercion. A T-visa applicant under 21 years of age can apply for T-visas for their spouse, children, parents, and unmarried siblings under 18. T-visa applicants 21 years of age or older can apply for T-visas for their spouse and children. The T visa lasts for four years. After three years, T-visa recipients can apply for lawful permanent residency. If the Attorney General certifies that the investigation has concluded, T-visa recipients can apply for lawful permanent residency sooner than three years. When T-visa applicants receive a bona fide determination or a T visa, they are eligible for Section 214 housing benefits. Adult T-visa applicants and holders will also receive adult certification letters for the Office of Trafficking in persons (OTIP) – see definition of “Office of Trafficking in Persons (OTIP) child and adult eligibility/certification letters.” * Continued Presence: a temporary form of protection provided to certain victims of a severe form of trafficking. Continued presence is technically not an immigration status, but rather refers to the government’s use of a variety of mechanisms, such as deferred action and parole, to protect a victim from removal in the short-term. Victims cannot directly request Continued Presence, but rather it must be requested by federal law enforcement officials on behalf of the victim. Continued Presence allows the victim to receive work authorization as well as certification through HHS for access to public benefits and social services. Adult trafficking victims with continued presence will receive adult certification letters from the Office of Trafficking in Persons (OTIP) – see definition of “Office of Trafficking in Persons (OTIP) child and adult eligibility/certification letters.” * Office of Trafficking in Persons (OTIP) child and adult eligibility/certification letters: Foreign national adults in the United States who have been subjected to a severe form of trafficking in persons are eligible for certain benefits and services under the Trafficking Victims Protection Act. Certification letters let individuals who have experienced trafficking and meet certain eligibility rules apply for the same benefits and services as refugees. Foreign national minors in the United States, including unaccompanied children, who have experienced a severe form of trafficking in persons (forced labor or commercial sex), are eligible for benefits and services under the Trafficking Victims Protection Act (TVPA) of 2000, as amended through the issuance of an Eligibility or Interim Assistance Letter from the HHS Office on Trafficking in Persons (OTIP). These benefits and services include access to trafficking-specific case management services, medical services, food assistance, cash assistance, health insurance, and other needs to the same extent as a refugee.   XX = Individuals who are not counted as members of the family (Live-in aides/attendants, Foster child/adult, or None of the above). Item 43 shows a relationship code of “F”, “L”, or “N” for these individuals. Note that if such a person does not have an SSN, an SSN exception code must be entered.  (4350.3 REV-1: Paragraph Exhibit 3-5, 3-12, Appendix 2) |
| **Item 52** Alien Registration Number | If the family member has been assigned an Alien Registration Number by DHS, enter this number. This number begins with “A”.  Note: This is an alphanumeric number (e.g., A123456789). Do not use dashes when entering this number. |
| **Item 53** Age | Enter the age for each member as of the effective date of this (re)certification. This Item is not submitted to TRACS, so therefore, does not have a MAT field number. This Item is retained on the form because age can be a factor in determining eligibility and allowances.  (4350.3 REV-1: Paragraph 3-28.C) |
| **Item 54** Work Codes | This Item only needs to be filled in if childcare or attendant care/auxiliary apparatus is required to enable an adult family member to work. The following codes are valid for this Item:  C = Enter for each family member who is able to work because child care is available.  H = Enter for each family member who is able to work because attendant care or an auxiliary apparatus is available.  CH = if both apply  (4350.3 REV-1: Paragraphs 5-10.B & C) |
| **Item 55** Family has Mobility Disability? | If a family member (see Item 58) has a mobility disability, enter a “Y” in this Item. Otherwise, leave blank.  (4350.3 REV-1: Exhibit 2-2) |
| **Item 56** Family has Hearing Disability? | If a family member (see Item 58) has a hearing disability, enter a “Y” in this Item. Otherwise, leave blank.  (4350.3 REV-1: Exhibit 2-2) |
| **Item 57** Family has Visual Disability? | If a family member (see Item 58) has a visual disability, enter a “Y” in this Item. Otherwise, leave blank.  (4350.3 REV-1: Exhibit 2-2) |
| **Item 58** Number of Family Members | The number of family members should add up to the number of individuals listed in Item 39 with the Relationship Code (Item 43) of H, S, K, D, or O. Do not include any members with the Relationship Code of F, L, or N. |
| **Item 59** Number of Non-Family Members | Enter the number of household members with the relationship code of F, L, or N (Item 43). |
| **Item 60** Number of Dependents | Count the number of family members that have a Relationship Code of “D” (Item 43).  (4350.3 REV-1: Paragraph 5-10.A)  Note: Do not include dependents under the age of 18 who have a Special Status Code (Item 47) of C. |
| **Item 61** Number of Eligible Members | This Item is related to citizenship status. Enter the number of family members who are eligible to receive housing assistance. This Item assists in determining whether or not the Assistance Payment needs to be pro-rated on this (re)certification. **If there are both eligible and** **non-eligible family members within the tenant household, the Assistance Payment will need to be pro-rated.**  Note: See HUD Handbook 4350.3 REV-1: 3-12.B and Exhibits 3-12, 3-13 and 3-14 for more guidance regarding pro-ration of assistance. |
| **Item 62** Expected Family Addition-Adoption | Enter the number of family members who are expected to be adopted by the tenant family.  (4350.3 REV-1: Paragraph 3-6.E and 3-23.E) |
| **Item 63** Expected Family Addition-Pregnancy | Enter the number of expected family additions by childbirth.  (4350.3 REV-1: Paragraph 3-6.E and 3-23.E) |
| **Item 64** Expected Family Addition-Foster Child/Adult | Enter the number of expected Foster children and adults as family additions.  (4350.3 REV-1: 3-23.E) |

**If this full (re)certification (MAT 10) is not changing the Head of Household ID, the (re)certification Effective Date, OR one or more of the additional identifiers (Last Name, First Name, Middle Initial, and Birth Date) for a previously submitted full (re)certification (MAT10), leave Items 65 through 70 blank. Also leave these Items blank if the previous ID was 999999999 and a TRACS Temporary ID is now being used.**

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| **Item 65** Previous Head Last Name | This Item should be filled in only if one or more of the Head of Household identifiers have changed (Head of Household ID, (re)certification effective date, last name, first name, middle initial, and/or birth date) since the tenant’s previous full (re)certification was submitted. This should be the Last Name exactly as submitted on the household’s previous full (re)certification. |
| **Item 66** Previous Head First Name | This Item should be filled in only if one or more of the Head of Household identifiers have changed (Head of Household ID, (re)certification effective date, last name, first name, middle initial, and/or birth date) since the tenant’s previous full (re)certification was submitted. This should be the First Name exactly as submitted on the household’s previous full (re)certification. |
| **Item 67** Previous Head Middle Initial | This Item should be filled in only if one or more of the Head of Household identifiers have changed (Head of Household ID, (re)certification effective date, last name, first name, middle initial, and/or birth date) since the tenant’s previous full (re)certification was submitted. Though an optional Item, if submitted, this should be the Middle Initial exactly as submitted on the household’s previous full (re)certification. |
| **Item 68** Active Full Cert. Effective Date | This Item should be filled in only if one or more of the Head of Household identifiers have changed (Head of Household ID, (re)certification effective date, last name, first name, middle initial, and/or birth date) since the tenant’s previous full (re)certification was submitted. This should be the Transaction Effective Date submitted on the household’s most recent full (re)certification (MAT 10) which has been successfully stored in TRACS.  **Important Note:** Do NOT attempt to correct incorrect Head of Household information on any earlier (re)certifications even if the data has been incorrect for many years. TRACS is not designed to deal with such changes. |
| **Item 69** Previous Head ID | This Item should be filled in only if one or more of the Head of Household identifiers have changed (Head of Household ID, (re)certification effective date, last name, first name, middle initial, and/or birth date) since the tenant’s previous full (re)certification was submitted. This should be the Head ID submitted on the household’s previous full (re)certification.  Note: The Previous Head ID is the SSN or TRACS ID of the Head of Household reported on the previous full (re)certification. |
| **Item 70** Previous Head Birth Date | This Item should be filled in only if one or more of the Head of Household identifiers have changed (Head of Household ID, (re)certification effective date, last name, first name, middle initial, and/or birth date) since the tenant’s previous full (re)certification was submitted. This should be the birth date exactly as submitted on the household’s previous full (re)certification. This date must be in a MMDDYYYY format. |

**Section D. Income Information**

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| **Item 71** Member Number | This Item should only be filled in for family members who report income and should match the number assigned to each family member in Item 39, starting with the Head of Household “01”. A separate line should be completed for each income source for each family member. This means the Head, “01”, may be listed twice with two different income sources. This Item cannot be “00”. |
| **Item 72** Income Type Code | Corresponding with the member number in Item 71, fill in each source of income separately for each family member of the household receiving income. Each income source should have its own income code. Please use the following codes:   * AD = Adoption Assistance Payments * B = Business (including distributed profits and net income from business) * CS = Child Support * F = Federal Wages * G = General Assistance/Welfare * I = Indian Trust * M = Military Pay * N = Other Non-Wage source * PE = Pensions (this includes veteran pensions, military retirement, and income from all other pensions and annuities) * SH = Safe Harbor (May be a mix of incomes from multiple sources; always list this Income Type under the Head of Household) * SI = Supplemental Security Income, SSI, (this covers both personal benefit and State Supplements administered by the SS Administration) * SS = Social Security (both personal and dual entitlements) * T = TANF * U = Unemployment * W = Non-Federal Wage (includes salaries, tips, commissions, bonuses, and other income from employment) |
| **Item 73** Verification Type | For each income type entered in Item 72, enter the method of verification. Each income source should have its own verification type code. Please use the following codes:   * UIV = Upfront Income Verification * EIV = Enterprise Income Verification * TP = Third Party Verification * SC = Self Certification * OT = Other * TANFSH = Safe Harbor documentation from TANF * MASH = Safe Harbor documentation from Medicaid Assistance * SNAPSH = Safe Harbor documentation from SNAP * EITCSH = Safe Harbor documentation from Earned Income Tax Credit * LITCSH = Safe Harbor documentation from Low Income Housing Tax Credit * SSNPSH = Safe Harbor documentation from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) * SSISH = Safe Harbor documentation from Supplemental Security Income * OTSH = Safe Harbor documentation from other programs administered by the Secretary, Other means tested forms of Federal public assistance for which HUD has established an MOU or other Federal benefit determinations made by other means-tested Federal programs that the Secretary determines to have comparable reliability and announces through a Federal Register notice. |
| **Item 74** Amount | Corresponding with the member number in Item 71, and the Income Type Code, Item 72, enter the amount received from each source of income separately for each family member of the household receiving income. If the Income Type Code in Item 72 is “SH”, there should be only one source of income listed for the entire family.  Note: If a family member has no income, do not submit an Income Record for that individual. |
| **Item 75** SSN Benefits Claim No. | Enter the Social Security Benefits Claim number under which a member of the household receives Social Security income benefits (Item 72) **only if** the Social Security Benefits Claim number is different from that member’s own Social Security number. Otherwise, leave blank.  **NOTE:** Enter the alpha/numeric suffix attached to the end of the Social Security claim number. Do not enter dashes. For example: 123456789HB1. The claim number will typically be 9 digits followed by a letter and 0-2 additional letters and/or numbers. If the member has income under more than one Claim Number, enter one income per Claim Number. |
| **Item 76** Total Employment Income | Include the total amounts of Employment income from Item 72 that have the following codes.  B = Business  F = Federal Wages  M = Military Pay  W = Non-Federal Wage |
| **Item 77** Total Pension Income | Include the total amounts of Pensions (including Social Security and SSI) from Item 72 that have the following codes.  PE = Pensions  SI = Supplemental Security Income  SS = Social Security |
| **Item 78** Total Public Assistance Income | Include the total amounts of Public Assistance from Item 72 that have the following code.  G = General Assistance/Welfare  T = TANF |
| **Item 79** Total Other Income | Include the total amounts of Other Income from Item 72 that have the following codes.  AD = Adoption Assistance Payments  CS = Child Support  I = Indian Trust  N = Other Non-Wage source  SH = Safe Harbor  U = Unemployment |
| **Item 80** Total Non-Asset Income | Add all income amounts from Items 76 through 79. |

**Section E. Asset Information**

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| **Item 81** Member Number | This Item should only be filled in for family members who have assets and should match the number assigned to each family member in Item 39 starting with the Head of Household “01”. A separate line should be completed for each asset for each family member. This means the Head, “01”, may be listed twice with two different assets. This Item cannot be “00”. |
| **Item 82** Description | Enter all assets that are now owned, and those that have been disposed of for less than fair market value for the two years preceding this (re)certification’s effective date. If the asset type is non-necessary personal property equal to or less than the threshold above which the total value on non-necessary personal property is included in net family assets, then enter “**NNPP under threshold**” into the field.  Note: List each asset separately. |
| **Item 83** Verification Type | For each asset entered in Item 82, enter the method of verification. Each asset type should have its own verification type code.  TP = Third Party Verification  SC = Self Certification  OT = Other |
| **Item 84** Included in Net Family Assets? | For each asset entered in Item 82, enter “Y” if the asset is included in net family assets or enter “N” if the asset is excluded from net family assets. |
| **Item 85** Status | There are only two codes allowed for this Item. Enter the appropriate code.  C = Current (if the family still owns this asset)  D = Divested (if the family has disposed of this asset within the last two years from the effective date (Item 12) of this re-certification for more than $1,000 less than the FMV (fair market value)  (4350.3 REV-1: Exhibit 5-2, Paragraph 5-7.G.8) |
| **Item 86** Cash Value | The cash value of an asset is the market value of the asset minus any expenses that could occur by selling the asset or converting the asset into cash.  Note: TRACS will not accept a negative value. |
| **Item 87** Asset Income | Enter either the actual or imputed income for the individual asset.  Note: TRACS will not accept a negative value.  (MAT 10 Section 5 Field 7) |
| **Item 88** Actual/Imputed Income | Enter “I” if the income from the asset is imputed income. Enter “A” if the income from the asset is actual income. |
| **Item 89** Date Divested | If the status of an asset in Item 85 is “D”, enter the date the asset was disposed of for less than fair market value, if applicable. Enter the date as MMDDYYYY. Otherwise, leave blank. |

**NOTE: For Items 90-100, please refer to Housing Notice 2023-10.**

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| **Item 90** Own Real Property? | If the family owns real property, enter “Y”.  If the family does not own real property, enter “N”. |
| **Item 91** Real Property Exemption? | If the family owns real property but the real property qualifies for an exemption, enter, “Y”.  If the family owns real property but the real property does not qualify for an exemption, enter, “N”.  Leave the field blank if not applicable to the family. |
| **Item 92** Total Non-Enforcement of Asset Limit? | If an owner has adopted a Total Non-Enforcement policy of the Asset Limit at their property, enter, “Y”.  If an owner has adopted a Total Non-Enforcement policy of the Asset Limit at their property, enter, “N”. |
| **Item 93** Limited Enforcement of Asset Limit? | If an owner has adopted a Limited Enforcement policy of the Asset Limit at their property, enter, “Y”.  If an owner has not elected to adopt a Limited Enforcement policy of the Asset Limit at their property that would allow for a resident to maintain eligibility at the property, enter, “N”. |
| **Item 94** Asset Limit Exception? | If an owner has adopted an Asset Limit Exception(s) policy at their property, enter, “Y”.  If an owner has not adopted an Asset Limit Exception(s) policy at their property, enter, “N”. |
| **Item 95** Meets Asset Limit Exception? | If an owner has adopted Exception policies to the Asset Limit and the family owns disqualifying net family assets but qualifies for an exception under the written policy of an owner, then enter “Y”.  If an owner has adopted Exception policies to the Asset Limit and the family owns disqualifying net family assets and **does not qualify** for an exception under the written policy of an owner, then enter “N”.  Leave the field blank if not applicable to the family. |
| **Item 96** Total Cash Value of Net Family Assets | Total the cash value of each asset (Item 86) that is included in net family assets (there is a “Y” in Item 84 for that asset). |
| **Item 97** Actual Income From Net Family Assets | Total the actual yearly income amount for all assets with a corresponding code of “A” in Item 88. |
| **Item 98** HUD Passbook Rate | Enter the HUD Passbook rate in effect at the effective date of this certification. To determine the passbook rate effective at the time of this certification, see HUD’s Annual Inflationary Adjustments & Passbook Rate webpage: <https://www.huduser.gov/portal/datasets/inflationary-adjustments-notifications.html>. |
| **Item 99** Imputed Income From Net Family Assets | Total the imputed income from all assets with a corresponding code of “I” in Item 88.  Note: The rule for imputing income from assets does not apply to the BMIR program. |
| **Item 100** Total Asset Income | Enter the total of Items 97 and 99. |

**Section F. Allowances & Rent Calculations**

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| **Item 101** Total Annual Income | The sum of Item 80 plus Item 100. |

**Note: For Items 102 through 104, the amounts entered are determined by family size. Read the text between Field 39 and Field 40 in the MAT 10 Section 2: Basic Record in Chapter 5 of the MAT User Guide and refer to the webpage,** <http://www.huduser.org/portal/datasets/il.html>**, to find the applicable Income Limits.**

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| **Item 102** Low Income Limit | For all subsidy types, except BMIR, the Low Income Limit is 80% of the area median income, as determined by HUD.  **BMIR Tenants**: Enter the amount of the HUD-issued BMIR Income limit, which is 95% of the median income for the area. If Item 101 (Total Annual Income) is greater than Item 102 (Low Income Limit) and this is a:   1. Move-In - the applicant may not be admitted to a BMIR unit (even if the applicant is willing to pay Market Rent) 2. Recertification - the tenant must pay the BMIR Market Rent   **All Other Tenants**: Enter the amount of the HUD-issued Low Income limit. If Item 101 (Total Annual Income) is greater than Item 102 (Low Income Limit), it must be determined whether this applicant can be admitted based on the HUD regulations.  (4350.3 REV-1: Figure 3-3)  Note: Refer to the 4350.3 REV-1: Paragraphs 3-7 and 3-8 for guidance with regard to exceptions and the admission of over-income applicants. |
| **Item 103** Very Low Income Limit | The Very Low Income limit is based on 50% of the area median income, as determined by HUD.  (4350.3 REV-1: Figure 3-3) |
| **Item 104** Extremely Low Income Limit | The extremely low-income limits are first calculated as 30/50ths (60 percent) of the Section 8 very low-income limits. They are then compared to the appropriate poverty guideline and if the poverty guideline is higher, that value is chosen. If the poverty guideline is above the very low-income limit at that family size, the extremely low-income limit is set at the very low-income limit because the definition of extremely low-income limits caps them at the very low-income levels.  (4350.3 REV-1: Figure 3-3 and Paragraph 4-5) |
| **Item 105** Current Income Status | This Item should only be filled in for Section 8 tenants. If this is not a Section 8 tenant, leave blank. Compare the Total Annual Income (Item 101) to the Income Limits entered in Items 102, 103, and 104.  If Item 101 is less than or equal to Item 104, enter “3”, Extremely Low Income.  If Item 101 is greater than Item 104, but less than or equal to Item 103, enter ‘2”, Very Low Income.  If Item 101 is greater than Item 103, enter “1”, Low Income.  Note: If code “1” was entered for a MI or an IC, and Item 106 is code “2” (Post 1981), this tenant can only receive Section 8 if the HUD Field Office has reviewed and approved an exception to the income eligibility requirements. |
| **Item 106** Eligibility Universe Code | This Item should only be filled in for Section 8 tenants. If this is not a Section 8 tenant, leave blank. If the HAP Contract for this unit was effective before 10/1/81, enter the code of “1”. If the HAP Contract was effective on or after 10/1/81 (Post 1981), enter the code of “2” for this Item.  (4350.3 REV-1: Paragraph 3-7.A and 3-7.B) |
| **Item 107** Sec. 8 Assist.1984 Indicator | If the Eligibility Universe Code, Item 106, is “2” (Post 1981), and the current Income Status code, Item 105, is “1” (Low Income), enter “Y” if the tenant began receiving Section 8 assistance on or after July 1, 1984.  Otherwise, leave blank. |
| **Item 108** Income Exception Code | Enter one of the following Income Exception Codes, **if** Item 105 is “1”, and Item 105 is “2”. Otherwise, leave blank.  Indicate the HUD exception for which this family is (MI or IC) or was (AR, IR, or OC) eligible. These include:  CV = The Tenant:   1. Was converted from RAP or Rent Supplement; or 2. Received (or will now) begin to receive Section 8 because of a sale of a HUD-owned project.   EDT = HUD approved exception for an in-place tenant who would otherwise be displaced as described in the 4350.3 REV-1: Paragraph 3-7.D.  EIT = Do not use for new move-ins. Continue to use this code for tenants who previously received a HUD approved income exception.  EAT or AA = Do not use this code for new move-ins. Continue to use this code for tenants who previously received an exception based upon these codes.  EP = Tenant was admitted under one of the HUD-approved project-based exceptions as described in the 4350.3 REV-1: Paragraph 3-7.D.  (4350.3 REV-1: Paragraph 3-7.D) |
| **Item 109** Police/Security Tenant? | If the owner has received permission from HUD to admit over-income police or security personnel, enter “Y”. Otherwise, leave blank. Income limits do not apply for this tenant, and the Total Tenant Payment must be at least what the tenant would pay if subsidized.  (4350.3 REV-1: Paragraph 3-8.D and 5-27)  Note: The owner is not entitled to vacancy claim payments for the period following occupancy by a police officer or security personnel. |
| **Item 110** Survivor of Qualifier? | If the current Head of Household does not meet the eligibility requirements to qualify for the unit but does qualify as the survivor of the person who originally met the special requirements and qualified for the unit, enter “Y”.  Otherwise, leave blank.  (4350.3 REV-1: Paragraph 3-16) |
| **Item 111** Household Citizenship Eligibility | Enter one of the following codes for tenants with a Project MI date on or after 6/19/95:  N = Subsidy Type is **not** subject to the Non-Citizen Rule  E = All members of the family are eligible under the Non-Citizen Rule. The family receives full assistance. No members have a PV status.  C = Continued Assistance. The mixed family, resident on/before June 19, 1995 qualifies for continuation of full assistance under Non-Citizen Rule.  P = Prorated Assistance. The family qualifies for and receives Prorated Assistance under the Non-Citizen Rule because only some of the family members are eligible for assistance.  Note: A member with an eligibility code of PV will be counted as eligible. A member with a code of ND will be counted as ineligible.  F = Full Assistance while the verification of eligibility is pending. A family is in this status if all members are eligible for assistance or have submitted documentation but the verification process is not yet complete (Citizenship Eligibility Code = PV) when the family moves in. At least one member must be eligible. If any member is ineligible or has an ND eligibility code, use the Prorated Assistance Code (P), not Full Assistance.  T = Temporary Deferral of Termination. The family, currently receiving full assistance, is found to be ineligible for assistance under the Non-Citizen Rule, or the family qualifies for Prorated Assistance and elects Temporary Deferral of Termination status instead. Tenants with this code receive full assistance. This code should only be used for tenant households meeting the exception to the 18 month deferral period. Also, refer to the 4350.3 REV-1: Paragraph 3-12.Q.3  **Note:** If the family receiving assistance on June 19, 1995 includes a refugee under Section 207 of the Immigration and Nationality Act, or an individual seeking asylum under Section 208 of that Act, a deferral can be given to the family and there is no time limitation on the deferral period. The 18 month deferral limitation does not apply.  (4350.3 REV-1: Paragraph 3-12 and Glossary) |

**For Items 112 through 127, leave blank if this is a BMIR (re)certification.**

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| --- | --- |
| **Item 112** Deduction for Dependents | Multiply the Number of Dependents listed in Item 60 by the appropriate dependent deduction in effect at the effective date of this certification. To determine the dependent deduction amount effective at the time of this certification, see the Annual Inflationary Adjustments & Passbook Rate webpage: <https://www.huduser.gov/portal/datasets/inflationary-adjustments-notifications.html>.  Note: Dependents are children under the age of 18 (excluding Foster children), and other family members over the age of 18, who are full-time students or disabled. **However**, a dependent with a Special Status Code of C entered in Item 47 is not counted as a dependent. |
| **Item 113** Child Care Expense (work) | Enter the amount of childcare expense incurred that enables a family member to work. Only expenses incurred for the care of children, including Foster children, who are under the age of 13, can be included. However, the allowable expense cannot exceed the amount earned as the result of the child care provided.  If a full-time student, who is not the Head, Co-Head, or Spouse, is claiming child care to work, the associated child care allowance is restricted to the lesser of the actual amount or the dependent deduction in effect at the time of this recertification. To determine the dependent deduction amount effective at the time of this certification, see the Annual Inflationary Adjustments & Passbook Rate webpage: <https://www.huduser.gov/portal/datasets/inflationary-adjustments-notifications.html>. |
| **Item 114** Child Care Expense (school) | This Item relates to expenses incurred when an adult family member is attending school or looking for work. Only expenses incurred for the care of children, including Foster children, under the age of 13, can be included. |
| **Item 115** Child Care Expense Hardship | Enter the amount of child care expense allowed based on an approved Hardship Exemption even when no family member is working, seeking work, or attending school. Ending the expense deduction would result in a financial hardship as defined in the owner’s written policy.  To be eligible for the child care expenses hardship, the family must have previously been taking advantage of the child care expenses deduction. |
| **Item 116** % of Income (Medical/Disability Expense Deduction) | Enter either .03, .05, .075, or .10 (3%, 5%, 7.5%, or 10%, respectively) depending on whether the family qualifies for phased-in relief and where they are in the phase-in schedule.  If the family is ineligible for a medical/disability expense deduction, leave blank. |
| **Item 117** % of Income Amount (Medical/Disability Expense Deduction) | Multiply the Total Annual Income listed in Item 101 by the value entered in Item 116. |
| **Item 118** DisabilityExpense | Enter the amount of attendant care and auxiliary apparatus expenses that enables a family member 18 years of age or older (see Item 58), including the family member who is a person with disabilities, to be employed. If there are no disability expenses, enter zero in this Item, and continue to Item 119.  Note: If an amount has been entered in this Item, an “H” must be entered into Item 47 for at least one family member. |
| **Item 119** Disability Expense Deduction | The disability expense deduction is the eligible amount that **exceeds** the appropriate % of the family’s annual income.  If Item 118 (Disability Expense) is less than Item 117 (% of Income Amount), enter zero.  If Item 118 is greater than Item 117, enter the **LESSER** of (Item 118 – Item 117)  **OR**  The employment income earned by the person with disabilities and/or employment income earned by other family members 18 years of age or older, because the attendant care or auxiliary apparatus is provided.  **Important**: When the same provider takes care of a person with disabilities over the age of 12 and other children, age 12 and under, in the same family, the owner/agent must prorate the total cost and allocate a specific cost to attendant care. The sum of both child care expenses (Item 113) and disability expenses (Item 118) cannot exceed the employment income of the family member enabled to work. |
| **Item 120** Health and Medical Care Expense | Health and Medical expenses are permitted for elderly and disabled families. A family is determined to be elderly or disabled if the Head(H), Spouse(S) or Co-Head(K) is at least 62 years or older on the effective date of (re)certification or is a person with disabilities.  If medical expenses are determined to be an allowable deduction, include the **unreimbursed** health and medical care expenses for all family members (see Item 58). If not, enter zero. |
| **Item 121** Health and Medical Care Expense Deduction | Enter zero in this Item if the amount in Item 120 is zero.  If Item 118 (Disability Expense) is zero, subtract Item 117 (% of Income Amount) from Item 120 (Health & Medical Care Expense) and enter the amount in this Item.  If an elderly/disabled family has both **unreimbursed** medical expenses and eligible disability expenses, a special calculation is required to ensure that the family’s % of income amount is applied only one time. Choose the applicable situation below to determine the amount entered.  If Item 118 is greater than or equal to Item 117, enter the amount from Item 120 in this Item.  **OR**  If Item 118 is less than Item 117, use the following calculation to determine the amount to be entered in this Item:  (Item 120 + Item 118) – Item 117  Note: If the result is negative, enter zero in this Item. |
| **Item 122** 5% of Income (Medical/Disability General Hardship) | This Item is applicable to families who are eligible for the general hardship for the health and medical expenses and/or attendant care and auxiliary apparatus expenses deduction in accordance with the owner’s written policies. If a family is ineligible to receive the general hardship, leave blank.  Multiply the Total Annual Income in Item 101 by .05 (5.0%). |
| **Item 123** General Hardship Deduction – Disability Expense | When a family is eligible for the general hardship, the Disability Expenses deduction is the eligible amount that exceeds 5% of the family’s annual income.  If Item 118 (Disability Expense) is greater than Item 122 (5% of Income), enter the **LESSER** of (Item 118-122)  **OR**  The employment income earned by the person with disabilities or employment income earned by other family members 18 years of age or older, because attendant care or an auxiliary apparatus is provided.  Note: If the family is ineligible for the general hardship, enter 0. |
| **Item 124** General Hardship Deduction – Health & Medical Care Expense | When a family is eligible for the general hardship, the Health and Medicare Care Expenses deduction is the eligible amount that exceeds 5% of the family’s annual income.  If Item 123 (General Hardship – Disability) is zero, subtract Item 122 (5% of Income) from Item 120 (Health & Medical Care Expenses) and enter the amount in this Item.  However, if an elderly/disabled family has both unreimbursed health and medical care expenses and eligible disability expenses, a special calculation is required to ensure that the family’s 5% of income amount is applied only one time. Choose the applicable situation below to determine the amount entered.  If Item 118 is greater than or equal to Item 122, enter the amount from Item 120 in this Item.  **OR**  If Item 118 is less than Item 122, use the following calculation to determine the amount to be entered in this Item:  (Item 120 + Item 118) – Item 122  Note: If a family is ineligible to receive the general hardship, enter 0. If the result is negative, enter zero in this Item. |
| **Item 125** Elderly/Disabled Family Deduction | If the Head, Co-Head, or Spouse has a Special Status code listed in Item 42 of “E” for Elderly (meaning 62 or older), or “H” for Disabled, the family is entitled to the elderly/disabled family deduction. To determine the elderly/disabled family deduction amount effective at the time of this certification, see the Annual Inflationary Adjustments & Passbook Rate webpage: <https://www.huduser.gov/portal/datasets/inflationary-adjustments-notifications.html>. |
| **Item 126** Total Deductions | Add the following Items and enter the amount.  Items 112 + 113 + 114 + 115 + 119 + 121 + 123 + 124 + 125 = Item 126, Total Deductions |
| **Item 127** Adjusted Annual Income | Subtract Item 126 from Item 101. If Item 126 is greater than or equal to Item 101, enter zero. |
| **Item 128** Total Tenant Payment | The Total Tenant Payment (TTP) is the amount a tenant is expected to contribute for rent and utilities. The TTP for Section 8, PAC, PRAC, 811 PRA Demo, and SPRAC properties is based on the family’s income. For Section 236 and BMIR tenants, enter zero or leave blank.  **For Section 8, PRAC, PAC, 811 PRA Demo, and SPRAC, the Total Tenant Payment (TTP) is the greater of:**   30% monthly adjusted income;   10% monthly gross income;   Welfare rent (welfare recipients in as-paid localities only); or   $25 minimum rent (Section 8 only).  (4350.3 REV-1: Paragraph 5-25, Figure 5-6, Exhibit 5-8)  Note: For Section 8 tenants, if the Household Citizenship Eligibility, Item 111, is “P”, the Assistance Payment (AP), Total Tenant Payment (TTP), Tenant Rent (TR) and Utility Reimbursement (UR), if applicable, will be pro-rated amounts. **Pro-ration procedures are listed after the instructions for Item 138.** |
| **Item 129** TTP Before Override | If this is a rent override situation (Item 134, Rent Override set to “Y”) and the rent calculation involves TTP, enter the TTP that would normally be calculated without the override. Otherwise, leave blank. |
| **Item 130** Tenant Rent | For Section 8, Section 202/162 PAC, Section 202/811 PRAC, SPRAC, and 811 PRA Demo tenants: Tenant Rent (TR) is the portion of the TTP the tenant pays each month to the owner for rent. When utilities are paid by the owner, the Tenant Rent (TR) will equal the Total Tenant Payment (TTP), Item 128. If all, or part, of the utilities are paid by the tenant, the TR and TTP will not be the same amount. The TR will equal the TTP (Item 128) minus the Utility Allowance (Item 36). If the Utility Allowance (UA) is more than the TTP, enter zero in this Item and complete Item 131 (Utility Reimbursement).  For Section 236 and BMIR tenants, see 4350.3 REV-1: Paragraph 5-29.  (4350.3 REV-1: Paragraph 5-26 and 5-29)  Note: For Section 8 tenants, if the Household Citizenship Eligibility, Item 96, is “P”, the Assistance Payment (AP), Total Tenant Payment (TTP), Tenant Rent (TR) and Utility Reimbursement (UR), if applicable, will be pro-rated amounts. See Pro-ration procedures. |
| **Item 131** Utility Reimbursement | If the Utility Allowance (Item 36 exceeds the Total Tenant Payment (Item 128), subtract the TTP from the Utility Allowance and enter the difference. For Section 236, BMIR and Market tenants, enter zero or leave blank.  (4350.3 REV-1: Paragraph 5-26.C)  Note: For Section 8 tenants, if the Household Assistance Status Code, Item 111, is “P”, the Assistance Payment (AP), Total Tenant Payment (TTP), Tenant Rent (TR) and Utility Reimbursement (UR), if applicable, will be pro-rated amounts. See Pro-ration procedures. |
| **Item 132** Assistance Payment | Enter the amount the owner bills HUD on behalf of the tenant living in a Section 8, 202/811 PRAC, 811 PRA Demo, SPRAC or 202/162 PAC property. To determine this amount, subtract the TTP (Item 128) from the Gross Rent (Item 37). GR - TTP = AP. If the TTP is greater or equal to the GR, enter zero in this Item, except for a PRAC tenant. For PRAC tenants, enter the AP amount, even if the amount is a negative number (e.g.: -75 or (75)). For all other tenants, enter zero or leave blank.  (4350.3 REV-1: Paragraph 5-26.B)  Note: Section 8 tenants, if the Household Citizenship Eligibility, Item 111, is “P”, the Assistance Payment (AP), Total Tenant Payment (TTP), Tenant Rent (TR) and Utility Reimbursement (UR), if applicable, will be prorated amounts. See Pro-ration procedures. |
| **Item 133** Welfare Rent | In states or localities that have “As-Paid” Public Benefit programs, the welfare rent is the maximum amount the welfare department can pay for shelter and utilities for a family of that size. This may be different from the amount that the family is actually receiving. If not applicable, enter zero.  (4350.3 REV-1: Paragraph 5-6.K and 5-26.E) |
| **Item 134** Rent Override | Enter “Y” if the normal rent calculations have been overridden for this (re)certification. Otherwise, leave blank.  See also the rent calculation spreadsheet (**202D CalculatingTenantRent.xlsx)** for how overrides impact calculations. The spreadsheet is located on the TRACS web page. Click on Documents, then click on TRACS 202D Final Industry Specification Documents. |
| **Item 135** Rent Hardship Exemption | **Applies to Section 8 Only**. This is an exemption from the $25 Minimum Rent (TTP) requirement for a tenant that is unable to pay the Section 8 Minimum Rent due to a long-term or short-term financial hardship. The following are valid codes for this Item:  1 = The family has lost Federal, State, or Local government assistance, or is waiting for an eligibility determination.  2 = The family would be evicted if the Minimum Rent requirement was imposed.  3 = The family income has decreased due to a change in circumstances, including but not limited to loss of employment.  4 = A death in the family has occurred.  5 = Other applicable situations as determined by HUD, have occurred.  (4350.3 REV-1: Paragraph 5-26.D)  Note: If the hardship is determined to be long term, the owner/agent must **recertify** the tenant every 90 days while the hardship lasts to verify that circumstances have not changed. |
| **Item 136** Waiver Type Code | This Item relates to eligibility waivers granted by HUD Headquarters or the HUD Field Office. Leave blank if not applicable. Otherwise, this Item should be completed using the following waiver code types:   * AGE = Age waiver for an elderly property * INC = Income (for subsidy types other than Section 8) * NEAR = Near Elderly * DSBL = Waiver for non-disabled person to move in to a property for the disabled (e.g., 811 PRAC) * OTH = Other waiver not covered by the above codes   If more than one waiver applies, pick the first code that applies.  Note: Proper documentation received from the local HUD Field Office or HUD Headquarters should be kept in the tenant file. |
| **Item 137** Eligibility Check Not Required? | **Applies only to Move-in or Initial Certifications**.  If this certification is not a MI or IC or Eligibility is being checked, leave blank. Otherwise, enter “Y”, meaning Eligibility is not required to be checked on this certification.  Examples of situations where the use of this designation is appropriate:   1. If a tenant is transferred to a unit in a comparable project as a reasonable accommodation (4350.3 REV-1: Paragraph 2-32.C.1.a), eligibility is not checked on Move-in certification. 2. For a contract combination, the tenant is first terminated from the old contract (Termination Code = CC) and an Initial Certification is done for the new contract. Eligibility is not checked on the Initial Certification. 3. Under the 4350.3 REV-1: Paragraph 7-12.B.3, a tenant who fails to respond to a notice to provide information about changes in composition or income must be terminated (Termination Code = RI). When the tenant submits the information, their rent must be reduced (IC) on the first of the following month. Eligibility is not checked on this Initial Certification. 4. For 100% Section 8 properties. If the project is 100% subsidized, in the case where an in-place tenant’s assistance was terminated due to an increase in income and whose income decreases to where they are again eligible for assistance, the tenant should be recertified and receive the assistance. The tenant’s income eligibility was determined at Move-in and does not have to be determined again. 5. PDD—Presidentially Declared Disaster 6. Other 7. The first certification submitted (Conversion IC) for a resident in place when a PBRA RAD Contract is effective.   **These are not Eligibility Waivers, as indicated for Item 136.** |
| **Item 138** Extenuating Circumstances Code | Leave blank if the tenant has signed this (re)certification. If the tenant has not signed this (re)certification, this Item must be filled in with one of these codes.  1 = Medical  2 = Late annual (re)certification due to accommodation or extenuating circumstances  3 = Late annual (re)certification due to owner/agent delay.  4 = Late annual (re)certification due to third party delay (For example a Guardian)  5 = Military Deployment  6 = Eviction In Progress  7 = Court order  8 = No Signature Required (Retroactive GR done after a MO or a GR correction to a previously transmitted 50059 where the only change is the GR modification of the contract rent and where none of the TTP, Tenant Rent, or Utility Allowance changes).  9 = No signature required for 60 days (based on anticipated voucher reported on date). An example would be a retroactive GR causing a correction to a previously transmitted 50059 and where any of the TTP, Tenant Rent or Utility Allowance changes. A signature is required but the cert may be transmitted immediately, and the signature collected within 60 days.  10 = Other  When the tenant is able to sign, submit a corrected (re)certification with the tenant’s signature and leave this Item blank.  Note: With respect to Code 8—this is to be used whenever a full cert for a moved-out tenant is corrected by a GR—even in cases where a code 9 would normally be used. This is because a tenant signature will never be obtained.  Note: A code of “Y” is allowed when correcting a (re)certification originally created under TRACS 202C or earlier with a “Y” in this Item. |

**Pro-ration procedures for tenants whose Household Citizenship Eligibility is “P”, Prorated Assistance (Item 111 of the form HUD-50059)**

**Refer to the spreadsheet, 202DNonCitizenRuleProration, located in the TRACS 202D Final Industry Specification Documents as indicated on the TRACS webpage. Also refer to Exhibits 3-12 through 3-14 of the 4350.3 REV-1 for guidance.**

BR = 236 Basic/BMIR Rent (Item 33)

MR = Market Rent (Item 34)

CR = Contract Rent (Item 35)

UA = Utility Allowance (Item 36)

GR = Gross Rent (Item 37)

TTP = Total Tenant Payment (Item 128)

TR = Tenant Rent (Item 130)

UR = Utility Reimbursement (Item 131)

AP = Assistance Payment (Item 132)

**Section 8 (Exhibit 3-12 of 4350.3 REV-1)**

1. Calculate TTP and resulting AP without pro-rations
2. \_\_\_\_\_\_\_ Enter GR (Item 37 of the HUD-50059)
3. \_\_\_\_\_\_\_ From the income amounts (Total Annual Income and Adjusted Annual Income) calculated on the family’s most recent full (re)certification (MI, AR, IR, IC, OC), use the appropriate rent formula, based on subsidy type, in Exhibit 5-8 to determine the TTP, without pro-ration.
4. \_\_\_\_\_\_\_ Subtract TTP from GR and enter the amount. This is the AP the family would receive if no pro-ration was involved.
5. Calculate **prorated AP**
6. \_\_\_\_\_\_\_ Number of eligible Family members who are citizens or non-citizens with eligible immigration status
7. \_\_\_\_\_\_\_ Enter the fraction that represents the number of eligible family members and the number of family members in the tenant household. (e.g., 5 family members and only 3 family members eligible for assistance, then the fraction is 3/5)
8. \_\_\_\_\_\_\_ Multiply Line 3 by the fraction in Line 5 and enter the amount in Item 132 of the HUD-50059. This is the Prorated AP for the family.
9. Calculate **prorated TTP**
10. \_\_\_\_\_\_\_ Enter GR (Item 37 of the HUD-50059)
11. \_\_\_\_\_\_\_ Subtract Line 6 from Line 7 and enter the amount in Item 108 of the HUD-50059. This is the Prorated TTP for the family.
12. Calculated **prorated TR** and any **UR** (if applicable)
13. \_\_\_\_\_\_\_ Enter UA (Item 36 of the HUD-50059)
14. \_\_\_\_\_\_\_ Subtract Line 9 from Line 8 and enter the amount in Item 130 (Tenant Rent) of the HUD-50059. This is the Prorated TR for the family.

If Line 10 is zero and in Item 130 of the HUD-50059, complete Line 11.

1. \_\_\_\_\_\_\_ If Line 9 is greater than Line 8, enter the difference in Item 131 (Utility Reimbursement) of the HUD-50059. Otherwise, leave blank.

**Section 236 Without Additional Assistance (Exhibit 3-13 of 4350.3 REV-1)**

1. Calculate difference between MR and TR without pro-rations
2. \_\_\_\_\_\_\_ Enter MR (Item 34 of the HUD-50059)
3. \_\_\_\_\_\_\_ From the income amounts (Total Annual Income and Adjusted Annual Income) calculated on the family’s most recent full (re)certification (MI, AR, IR, IC, OC), use the appropriate rent formula, based on subsidy type, in Exhibit 5-8 to determine the TR, without pro-ration.
4. \_\_\_\_\_\_\_ Subtract Line 2 from Line 1 and enter the amount.
5. Calculate prorated difference between MR and TR
6. \_\_\_\_\_\_\_ Enter number of people in the family who are Ineligible Persons (i.e., not a citizen or not an eligible non-citizen)
7. \_\_\_\_\_\_\_ Enter the fraction that represents the number of Ineligible Persons and the number of family members in the tenant household. (e.g., 5 family members of which 2 are Ineligible Persons, then the fraction is 2/5).
8. \_\_\_\_\_\_\_ Multiply Line 3 by the fraction in Line 5. This amount is the prorated difference between MR and TR
9. Calculate the prorated TR
10. \_\_\_\_\_\_\_ Add Line 2 and Line 6 and enter the amount in Item 130 of the HUD-50059. This is the Prorated TR for the family.

**Section 236 With Section 8 Assistance (Exhibit 3-14)**

1. Calculate difference between MR and BR for unit without pro-rations
2. \_\_\_\_\_\_\_ Enter MR (Item 34 of the HUD-50059)
3. \_\_\_\_\_\_\_ Enter BR (Item 33 of the HUD-50059)
4. \_\_\_\_\_\_\_ Subtract Line 2 from Line 1 and enter difference
5. Calculate prorated difference between MR and BR
6. \_\_\_\_\_\_\_ Enter number of people in the family who are Ineligible Persons (i.e., not a citizen or not an eligible non-citizen)
7. \_\_\_\_\_\_\_ Enter the fraction that represents the number of Ineligible Persons and the number of family members in the tenant household, (e.g., 5 family members of which 2 are Ineligible Persons, then the fraction is 2/5).
8. \_\_\_\_\_\_\_ Multiply Line 3 by the fraction in Line 5. This amount is the prorated difference between MR and BR
9. Calculate the assistance adjustment for assistance the tenant would otherwise receive.
10. \_\_\_\_\_\_\_ Enter GR (Item 37 of the HUD-50059)
11. \_\_\_\_\_\_\_ From the income amounts (Total Annual Income and Adjusted Annual Income) calculated on the family’s most recent full (re)certification (MI, AR, IR, IC, OC), use the appropriate rent formula, based on subsidy type, in Exhibit 5-8 to determine the TTP, without pro-ration.
12. \_\_\_\_\_\_\_ Subtract Line 8 from Line 7. This amount is the AP the family would receive without being subject to pro-ration requirements.
13. \_\_\_\_\_\_\_ Multiply Line 9 by Line 5. This amount is the Assistance Adjustment for the family.
14. Calculate the **prorated TTP**
15. \_\_\_\_\_\_\_ Add Line 6 + Line 8 + Line 10. Enter the amount in Item 128 of the HUD-50059. This is the Prorated TTP for the family.
16. Calculate the **prorated AP**
17. \_\_\_\_\_\_\_ Enter GR (Item 37 of the HUD-50059)
18. \_\_\_\_\_\_\_ Subtract Line 11 from Line 12 and enter the amount in Item 132 of the HUD-50059. This is the Prorated AP for the family.
19. Calculate the **prorated TR** and any **UR** (if applicable)
20. \_\_\_\_\_\_\_ Enter the UA (Item 36 of the HUD-50059)
21. \_\_\_\_\_\_\_ Subtract Line 14 from Line 11 and enter the amount in Item 130 of the HUD-50059. This amount is the Prorated TR for the family.

If Line 15 is zero and in Item 130 of the HUD-50059, complete Line 16.

1. \_\_\_\_\_\_\_ If Line 14 is greater than Line 11, enter the difference in Item 131 (Utility Reimbursement) of the HUD-50059. Otherwise, leave blank.