

Property Name: \_\_\_\_\_

OHFA Tracking #: \_\_\_\_\_

The undersigned hereby removes \_\_\_\_\_ unit(s), designated low-income (from the qualified basis) to be used as common space in the above named property. This form should be submitted to OHFA for approval via [OHFAprojectchanges@ohiohome.org](mailto:OHFAprojectchanges@ohiohome.org).

*Unit(s) shall be designated as an employee unit or for use as common space as defined in section 42 of the Internal Revenue Code: "Section 1.103-8(b)(4) of the Income Tax Regulations, facilities that are functionally related and subordinate to residential rental units are considered residential rental property. Section 1.103-8(b)(4)(iii) provides that facilities that are functionally related and subordinate to residential rental units include facilities for use by the tenants, such as swimming pools and similar recreational facilities, parking areas, and other facilities reasonably required for the project. The examples given by section 1.103-8(b)(4)(iii) of facilities reasonably required for a project specifically includes units for resident managers, maintenance personnel or model units. Accordingly, the unit occupied by a resident manager is residential property for purposes of section 42 of the Code."*

Please provide the following for each unit occupied by a **full-time** Resident Manager, Maintenance, Security Officer, or Service Coordinator Personnel, or used as a Model unit (as outlined in Revenue Ruling 92-61). If the Owner is charging rent for a Manager, Maintenance, Security or Service Coordinator Personnel unit(s), indicate the amount charged for rent. (Use additional page if necessary)

Building Identification Number	Unit Number	Position	Move-in Date	Rent (if applicable)

*\*Charging rent for employee units may reduce the tax credits that may be claimed. Please consult your attorney or accountant for guidance.*

Owner must identify any Manager, Maintenance, Security, Service Coordinator, Model or other common use space to OHFA as part of annual reporting. Additionally, in the event of a change in status concerning a manager or use of other common space OHFA is requiring resubmission of this form.

**The undersigned certifies that the Owner of \_\_\_\_\_ will file or has filed a return that is consistent with Revenue Ruling 92-61 concerning treatment of Resident Manager's unit.**

\_\_\_\_\_  
Owner/General Partner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Type or Print)

\_\_\_\_\_  
Title

<b>For OHFA Review and Approval</b>	
_____ Signature	_____ Date
_____ Name (Type or Print)	_____ Title

*Under penalties of perjury, I certify that the information provided herein is true and accurate to the best of my knowledge. The undersigned further understands that providing false representation herein constitutes fraud.*