



**ATTACHMENT 22
Management Company Experience**

Management Company Name: _____

	Project Name & Address	TCAC (or other) Project Identification Number, If Applicable	TCAC Identify Special Needs Projects, If Applicable	Month, Day, & Year the Project was Placed-In-Service	Month, Day & Year Management Company Participation Began	Month, Day & Year Management Company Participation Ended, If Applicable*	Full Number of Years of Management Company Participation, After Project Placed-In-Service**	Number of Low Income Units***	Number of Affordable Special Needs Units
1.			<input type="checkbox"/>						
2.			<input type="checkbox"/>						
3.			<input type="checkbox"/>						
4.			<input type="checkbox"/>						
5.			<input type="checkbox"/>						
6.			<input type="checkbox"/>						
7.			<input type="checkbox"/>						
8.			<input type="checkbox"/>						

2020 TCAC WORKSHEET TO DETERMINE MANAGEMENT COMPANY EXPERIENCE MUST BE COMPLETED AND SIGNED, PLEASE CONTINUE ON NEXT PAGE.

	Project Name & Address	TCAC (or other) Project Identification Number, If Applicable	TCAC Identify Special Needs Projects, If Applicable	Month, Day, & Year the Project was Placed-In-Service	Month, Day & Year Management Company Participation Began	Month, Day & Year Management Company Participation Ended, If Applicable*	Full Number of Years of Management Company Participation, After Project Placed-In-Service**	Number of Low Income Units***	Number of Affordable Special Needs Units
9.			<input type="checkbox"/>						
10.			<input type="checkbox"/>						
11.			<input type="checkbox"/>						

Check this box if you are applying through the Nonprofit or Special Needs set-asides AND requesting points specifically for special needs housing type projects. For each above-listed project, at least 45% of the affordable units must serve special needs tenants. Points will only be awarded to special needs housing type projects.

Management Companies managing less than 2 active California Low-Income Housing Tax Credit projects for more than three years, and management companies for projects requesting points under the special needs categories and managing no active California Low-Income Housing Tax Credit projects for more than 3 years, shall contract with a bona-fide management company currently managing 2 California Low Income Housing Tax Credit projects for more than three years and which itself earns a minimum combined total of 2 points at the time of application. Please provide a separate Attachment 22 form for the bona-fide management company that currently operates tax credit projects in California and which itself earns a minimum combined total of 2 points at the time of application. Please refer to Tab 22 of the 2020 Application Checklist in the Excel application for additional requirements.

* Projects previously managed, the ending date of the property management role must be no more than 10 years from the application deadline.

** Management Company experience with a project shall not pre-date the project's placed-in-service date. In addition, do NOT round up the amount of time or experience. For example, 2 years 11 months of G.P. experience is only 2 full years of experience, not 3 years.

*** Project must have more than 10 affordable units and be subject to a recorded regulatory agreement.

PRINT MANAGEMENT COMPANY NAME

MANAGEMENT PRINCIPAL SIGNATURE

PRINT MANAGEMENT PRINCIPAL NAME

DATE