

**Low-Income Housing Credit
Allocation Certification**

OMB No. 1545-0988

Attachment
Sequence No. **36**

Do not file separately. The building owner must attach Form 8586,
Form 8609, and Schedule A (Form 8609) to its Federal income tax return.

Part I Allocation of Credit—Completed by Housing Credit Agency Only

<input type="checkbox"/> Addition to Qualified Basis <input type="checkbox"/> Amended Form	
A Address of building (do not use P. O. box)(see instructions) Westfork Apartments Highway #5 & 8th Street NW Jasper, AL 35501 (Bldg. 1 of 5)	B Name and address of housing credit agency Alabama Housing Finance Authority P.O. Box 230909 Montgomery, AL 36123-0909
C Name, address, and TIN of building owner receiving allocation Westfork Apartments, Ltd. 1110 Bradshaw Drive Florence, Alabama 35501 TIN ▶63-1123424.....	D Employer identification number of agency 52-1294171 E Building identification number (BIN) AL-95-00028
1a Date of allocation ▶ 10/04/95 b Maximum housing credit dollar amount allowable	1b \$32,210.00
2 Maximum applicable credit percentage allowable	2 8.60 %
3a Maximum qualified basis	3a \$374,534.00
b Check here <input type="checkbox"/> If the eligible basis used in the computation of line 3a was increased under the high-cost area provisions of section 42(d)(5)(C). Enter the percentage to which the eligible basis was increased (see instructions).	3b 1 — %
4 Percentage of the aggregate basis financed by tax-exempt bonds. (If zero, enter -0-.)	4 00 %
5 Date building placed in service ▶ 06/06/96	
6 Check the box that describes the allocation for the building (check one only): a <input type="checkbox"/> Newly constructed and federally subsidized b <input checked="" type="checkbox"/> Newly constructed and not federally subsidized c <input type="checkbox"/> Existing building d <input type="checkbox"/> Sec. 42(e) rehabilitation expenditures federally subsidized e <input type="checkbox"/> Sec. 42(e) rehabilitation expenditures not federally subsidized	

Under penalties of perjury, I declare that the allocation made is in compliance with the requirements of section 42 of the Internal Revenue Code, and that I have examined Part I of this form and to the best of my knowledge and belief, the information is true, correct, and complete.

Signature of authorized official:  Haywood M. Sport Date: 09/17/96

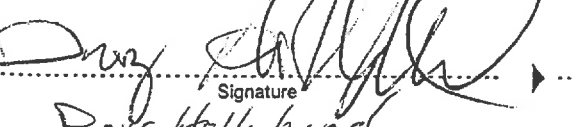
Part II First-Year Certification—Completed by Building Owner for First Year of Credit Period Only

7a Date building placed in service ▶ 06/06/96 b Eligible basis of building (see instructions)	7b 374534
8a Original qualified basis of the building at close of first year of credit period	8a 374534
b Is the building part of a multiple building project?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9a If box 6a or box 6d is checked, do you elect to reduce eligible basis under section 42(i)(2)(B)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b Do you elect to reduce eligible basis by disproportionate costs of non-low-income units (section 42(d)(3))?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10 Check the appropriate box for each election:	
a Elect to begin credit period the first year after the building is placed in service (section 42(f)(1))	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b Elect not to treat large partnership as taxpayer (section 42(j)(5))	<input type="checkbox"/> Yes
c Elect minimum set-aside requirement (section 42(g)) (see instructions) <input type="checkbox"/> 20-50 <input checked="" type="checkbox"/> 40-60	<input type="checkbox"/> 25-60 (N.Y.C. only)
d Elect deep-rent-skewed project (section 142(d)(4)(B)) (see instructions)	<input type="checkbox"/> 15-40

Note: A separate Schedule A (Form 8609), Annual Statement, for each building must be attached to the corresponding Form 8609 for each year of the 15-year compliance period after 1987.

Caution: Read the instructions under Signature (page 4) before signing this part.

Under penalties of perjury, I declare that: (1) the above building continues to qualify as a part of a qualified low-income housing project and meets the requirements of Internal Revenue Code section 42; (2) the qualified basis of the building has ☐ has not ☐ decreased for this tax year; and (3) I am not claiming any relief from the passive loss rules under section 502 of the Tax Reform Act of 1986 for this property. I have examined this form and attachments, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature:  Taxpayer identification number: 424-62-2754 Date: 9/20/96

**Low-Income Housing Credit
Allocation Certification**

► Do not file separately. The building owner must attach Form 8586,
Form 8609, and Schedule A (Form 8609) to its Federal income tax return.

OMB No. 1545-0988

Attachment
Sequence No. **36****Part I Allocation of Credit—Completed by Housing Credit Agency Only**☐ Addition to Qualified Basis ☐ Amended Form**A** Address of building (do not use P. O. box)(see instructions)

Westfork Apartments
Highway #5 & 8th Street NW
Jasper, AL 35501 (Bldg. 2 of 5)

C Name, address, and TIN of building owner receiving allocation

Westfork Apartments, Ltd.
1110 Bradshaw Drive
Florence, Alabama 35501

TIN ► 63-1123424

B Name and address of housing credit agency

Alabama Housing Finance Authority
P.O. Box 230909
Montgomery, AL 36123-0909

D Employer identification number of agency

52-1294171

E Building identification number (BIN)

AL-95-00029

1a Date of allocation ► 10/04/95	b Maximum housing credit dollar amount allowable	1b	\$32,210.00
2 Maximum applicable credit percentage allowable		2	8.60 %
3a Maximum qualified basis		3a	\$374,534.00
b Check here <input type="checkbox"/> if the eligible basis used in the computation of line 3a was increased under the high-cost area provisions of section 42(d)(5)(C). Enter the percentage to which the eligible basis was increased (see instructions).		3b	1 %
4 Percentage of the aggregate basis financed by tax-exempt bonds. (If zero, enter -0-.)		4	00 %
5 Date building placed in service ► 06/06/96			
6 Check the box that describes the allocation for the building (check one only):			
a <input type="checkbox"/> Newly constructed and federally subsidized b <input checked="" type="checkbox"/> Newly constructed and not federally subsidized c <input type="checkbox"/> Existing building			
d <input type="checkbox"/> Sec. 42(e) rehabilitation expenditures federally subsidized e <input type="checkbox"/> Sec. 42(e) rehabilitation expenditures not federally subsidized			

Under penalties of perjury, I declare that the allocation made is in compliance with the requirements of section 42 of the Internal Revenue Code, and that I have examined Part I of this form and to the best of my knowledge and belief, the information is true, correct, and complete.

Signature of authorized official

Haywood M. Sport

Name (please type or print)

09/17/96
Date**Part II First-Year Certification—Completed by Building Owner for First Year of Credit Period Only**

7a Date building placed in service ► 06/06/96	b Eligible basis of building (see instructions)	7b	374,534
8a Original qualified basis of the building at close of first year of credit period		8a	374,534
b Is the building part of a multiple building project?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
9a If box 6a or box 6d is checked, do you elect to reduce eligible basis under section 42(i)(2)(B)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
b Do you elect to reduce eligible basis by disproportionate costs of non-low-income units (section 42(d)(3))?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
10 Check the appropriate box for each election:			
a Elect to begin credit period the first year after the building is placed in service (section 42(f)(1)) <input type="checkbox"/> Yes <input type="checkbox"/> No			
b Elect not to treat large partnership as taxpayer (section 42(j)(5)) <input type="checkbox"/> Yes			
c Elect minimum set-aside requirement (section 42(g)) (see instructions) <input type="checkbox"/> 20-50 <input checked="" type="checkbox"/> 40-60 <input type="checkbox"/> 25-60 (N.Y.C. only)			
d Elect deep-rent-skewed project (section 42(d)(4)(B)) (see instructions) <input type="checkbox"/> 15-40			

Note: A separate Schedule A (Form 8609), Annual Statement, for each building must be attached to the corresponding Form 8609 for each year of the 15-year compliance period after 1987.

Caution: Read the instructions under Signature (page 4) before signing this part.

Under penalties of perjury, I declare that: (1) the above building continues to qualify as a part of a qualified low-income housing project and meets the requirements of Internal Revenue Code section 42; (2) the qualified basis of the building has ☐ has not ☐ decreased for this tax year; and (3) I am not claiming any relief from the passive loss rules under section 502 of the Tax Reform Act of 1986 for this property. I have examined this form and attachments, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature

Taxpayer identification number

Date

Name (please type or print)

**Low-Income Housing Credit
Allocation Certification**

OMB No. 1545-0988

Attachment
Sequence No. **36**

Do not file separately. The building owner must attach Form 8586,
Form 8609, and Schedule A (Form 8609) to its Federal income tax return.

Part I Allocation of Credit—Completed by Housing Credit Agency Only.

☐ Addition to Qualified Basis ☐ Amended Form

A Address of building (do not use P. O. box)(see instructions)

Westfork Apartments
Highway #5 & 8th Street NW
Jasper, AL 35501 (Bldg. 3 of 5)

B Name and address of housing credit agency

Alabama Housing Finance Authority
P.O. Box 230909
Montgomery, AL 36123-0909

C Name, address, and TIN of building owner receiving allocation

Westfork Apartments, Ltd.
1110 Bradshaw Drive
Florence, Alabama 35501

D Employer identification number of agency

52-1294171

E Building identification number (BIN)

AL-95-00030

TIN ▶ 63-1123424

1a	Date of allocation ▶ 10/04/95	b	Maximum housing credit dollar amount allowable	1b	\$32,210.00			
2	Maximum applicable credit percentage allowable			2	8.60 %			
3a	Maximum qualified basis			3a	\$374,534.00			
b	Check here <input type="checkbox"/> if the eligible basis used in the computation of line 3a was increased under the high-cost area provisions of section 42(d)(5)(C). Enter the percentage to which the eligible basis was increased (see instructions).							
4	Percentage of the aggregate basis financed by tax-exempt bonds. (If zero, enter -0-.)				3b	1 %		
5	Date building placed in service ▶ 06/06/96				4	00 %		
6	Check the box that describes the allocation for the building (check one only):							
a	<input type="checkbox"/> Newly constructed and federally subsidized				b	<input checked="" type="checkbox"/> Newly constructed and not federally subsidized	c	<input type="checkbox"/> Existing building
d	<input type="checkbox"/> Sec. 42(e) rehabilitation expenditures federally subsidized				e	<input type="checkbox"/> Sec. 42(e) rehabilitation expenditures not federally subsidized		

Under penalties of perjury, I declare that the allocation made is in compliance with the requirements of section 42 of the Internal Revenue Code, and that I have examined Part I of this form and to the best of my knowledge and belief, the information is true, correct, and complete.

Signature of authorized official

Haywood M. Sport

Name (please type or print)

09/17/96

Date

Part II First-Year Certification—Completed by Building Owner for First Year of Credit Period Only

7a	Date building placed in service ▶ 1/1/95	b	Eligible basis of building (see instructions)	7b	374,534
8a	Original qualified basis of the building at close of first year of credit period			8a	374,534
b	Is the building part of a multiple building project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
9a	If box 6a or box 6d is checked, do you elect to reduce eligible basis under section 42(i)(2)(B)? <input type="checkbox"/> Yes <input type="checkbox"/> No				
b	Do you elect to reduce eligible basis by disproportionate costs of non-low-income units (section 42(d)(3))? <input type="checkbox"/> Yes <input type="checkbox"/> No				
10	Check the appropriate box for each election:				
a	Elect to begin credit period the first year after the building is placed in service (section 42(f)(1))				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	Elect not to treat large partnership as taxpayer (section 42(i)(5))				<input type="checkbox"/> Yes
c	Elect minimum set-aside requirement (section 42(g)) (see instructions) <input type="checkbox"/> 20-50 <input checked="" type="checkbox"/> 40-60				<input type="checkbox"/> 25-60 (N.Y.C. only)
d	Elect deep-rent-skewed project (section 42(d)(4)(B)) (see instructions)				<input type="checkbox"/> 15-40

Note: A separate Schedule A (Form 8609), Annual Statement, for each building must be attached to the corresponding Form 8609 for each year of the 15-year compliance period after 1987.

Caution: Read the instructions under Signature (page 4) before signing this part.

Under penalties of perjury, I declare that: (1) the above building continues to qualify as a part of a qualified low-income housing project and meets the requirements of Internal Revenue Code section 42; (2) the qualified basis of the building has ☐ has not ☐ decreased for this tax year; and (3) I am not claiming any relief from the passive loss rules under section 502 of the Tax Reform Act of 1986 for this property. I have examined this form and attachments, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature

Taxpayer identification number

Date

Name (please type or print)

**Low-Income Housing Credit
Allocation Certification**

OMB No. 1545-0988

Attachment
Sequence No. **36**

Do not file separately. The building owner must attach Form 8586,
Form 8609, and Schedule A (Form 8609) to its Federal income tax return.

Part I Allocation of Credit—Completed by Housing Credit Agency Only

☐ Addition to Qualified Basis ☐ Amended Form

A Address of building (do not use P. O. box)(see instructions)

Westfork Apartments
Highway #5 & 8th Street NW
Jasper, AL 35501 (Bldg. 4 of 5)

B Name and address of housing credit agency

Alabama Housing Finance Authority
P.O. Box 230909
Montgomery, AL 36123-0909

C Name, address, and TIN of building owner receiving allocation

Westfork Apartments, Ltd.
1110 Bradshaw Drive
Florence, Alabama 35501

D Employer identification number of agency

52-1294171

E Building identification number (BIN)

AL-95-00031

TIN ▶ 63-1123424

1a	Date of allocation ▶ 10/04/95	b	Maximum housing credit dollar amount allowable	1b	\$32,210.00
2	Maximum applicable credit percentage allowable			2	8.60 %
3a	Maximum qualified basis			3a	\$374,534.00
b	Check here <input type="checkbox"/> if the eligible basis used in the computation of line 3a was increased under the high-cost area provisions of section 42(d)(5)(C). Enter the percentage to which the eligible basis was increased (see instructions).			3b	1 %
4	Percentage of the aggregate basis financed by tax-exempt bonds. (If zero, enter -0-.)			4	.00 %
5	Date building placed in service ▶ 06/06/96				
6	Check the box that describes the allocation for the building (check one only):				
a	<input type="checkbox"/> Newly constructed and federally subsidized	b	<input checked="" type="checkbox"/> Newly constructed and not federally subsidized	c	<input type="checkbox"/> Existing building
d	<input type="checkbox"/> Sec. 42(e) rehabilitation expenditures federally subsidized	e	<input type="checkbox"/> Sec. 42(e) rehabilitation expenditures not federally subsidized		

Under penalties of perjury, I declare that the allocation made is in compliance with the requirements of section 42 of the Internal Revenue Code, and that I have examined Part I of this form and to the best of my knowledge and belief, the information is true, correct, and complete.

Signature of authorized official

Haywood M. Sport

Name (please type or print)

09/17/96

Date

Part II First-Year Certification—Completed by Building Owner for First Year of Credit Period Only

7a	Date building placed in service ▶ 06/06/96	b	Eligible basis of building (see instructions)	7b	374,534
8a	Original qualified basis of the building at close of first year of credit period			8a	374,534
b	Is the building part of a multiple building project?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
9a	If box 6a or box 6d is checked, do you elect to reduce eligible basis under section 42(i)(2)(B)?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
b	Do you elect to reduce eligible basis by disproportionate costs of non-low-income units (section 42(d)(3))?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
10	Check the appropriate box for each election:				
a	Elect to begin credit period the first year after the building is placed in service (section 42(f)(1))		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Elect not to treat large partnership as taxpayer (section 42(j)(5))		<input type="checkbox"/> Yes		
c	Elect minimum set-aside requirement (section 42(g)) (see instructions) <input type="checkbox"/> 20-50 <input checked="" type="checkbox"/> 40-60		<input type="checkbox"/> 25-60 (N.Y.C. only)		
d	Elect deep-rent-skewed project (section 142(d)(4)(B)) (see instructions)		<input type="checkbox"/> 15-40		

Note: A separate Schedule A (Form 8609), Annual Statement, for each building must be attached to the corresponding Form 8609 for each year of the 15-year compliance period after 1987.

Caution: Read the instructions under Signature (page 4) before signing this part.

Under penalties of perjury, I declare that: (1) the above building continues to qualify as a part of a qualified low-income housing project and meets the requirements of Internal Revenue Code section 42; (2) the qualified basis of the building has ☐ has not ☐ decreased for this tax year; and (3) I am not claiming any relief from the passive loss rules under section 502 of the Tax Reform Act of 1986 for this property. I have examined this form and attachments, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature

Taxpayer identification number

Date

Name (please type or print)

**Low-Income Housing Credit
Allocation Certification**

► Do not file separately. The building owner must attach Form 8586,
Form 8609, and Schedule A (Form 8609) to its Federal income tax return.

OMB No. 1545-0988

Attachment
Sequence No. **36**

Part I Allocation of Credit—Completed by Housing Credit Agency Only

☐ Addition to Qualified Basis ☐ Amended Form

A Address of building (do not use P. O. box)(see instructions)

Westfork Apartments
Highway #5 & 8th Street NW
Jasper, AL 35501 (Bldg. 5 of 5)

B Name and address of housing credit agency

Alabama Housing Finance Authority
P.O. Box 230909
Montgomery, AL 36123-0909

C Name, address, and TIN of building owner receiving allocation

Westfork Apartments, Ltd.
1110 Bradshaw Drive
Florence, Alabama 35501

D Employer identification number of agency

52-1294171

E Building identification number (BIN)

AL-95-00032

1a Date of allocation ► 10/04/95

b Maximum housing credit dollar amount allowable

1b \$32,210.00

2 Maximum applicable credit percentage allowable

2 8.60 %

3a Maximum qualified basis

3a \$374,534.00

b Check here ☐ if the eligible basis used in the computation of line 3a was increased under the high-cost area provisions of section 42(d)(5)(C). Enter the percentage to which the eligible basis was increased (see instructions).

3b 1 %

4 Percentage of the aggregate basis financed by tax-exempt bonds. (If zero, enter -0-.)

4 00 %

5 Date building placed in service

► 06/06/96

6 Check the box that describes the allocation for the building (check one only):

- a ☐ Newly constructed and federally subsidized b ☒ Newly constructed and not federally subsidized c ☐ Existing building
d ☐ Sec. 42(e) rehabilitation expenditures federally subsidized e ☐ Sec. 42(e) rehabilitation expenditures not federally subsidized

Under penalties of perjury, I declare that the allocation made is in compliance with the requirements of section 42 of the Internal Revenue Code, and that I have examined Part I of this form and to the best of my knowledge and belief, the information is true, correct, and complete.

Signature of authorized official

Haywood M. Sport

Name (please type or print)

09/17/96

Date

Part II First-Year Certification—Completed by Building Owner for First Year of Credit Period Only

7a Date building placed in service ► 06/06/96

7b 374534

8a Original qualified basis of the building at close of first year of credit period

8a 374534

b Is the building part of a multiple building project?

☐ Yes ☒ No

9a If box 6a or box 6d is checked, do you elect to reduce eligible basis under section 42(f)(2)(B)?

☐ Yes ☐ No

b Do you elect to reduce eligible basis by disproportionate costs of non-low-income units (section 42(d)(3))?

☐ Yes ☐ No

10 Check the appropriate box for each election:

a Elect to begin credit period the first year after the building is placed in service (section 42(f)(1))

☐ Yes ☒ No

b Elect not to treat large partnership as taxpayer (section 42(j)(5))

☐ Yes

c Elect minimum set-aside requirement (section 42(g)) (see instructions) ☐ 20-50 ☐ 40-60

☐ 25-60 (N.Y.C. only)

d Elect deep-rent-skewed project (section 142(d)(4)(B)) (see instructions)

☐ 15-40

Note: A separate **Schedule A (Form 8609)**, Annual Statement, for each building must be attached to the corresponding Form 8609 for each year of the 15-year compliance period after 1987.

Caution: Read the instructions under **Signature (page 4)** before signing this part.

Under penalties of perjury, I declare that: (1) the above building continues to qualify as a part of a qualified low-income housing project and meets the requirements of Internal Revenue Code section 42; (2) the qualified basis of the building has ☐ has not ☐ decreased for this tax year; and (3) I am not claiming any relief from the passive loss rules under section 502 of the Tax Reform Act of 1986 for this property. I have examined this form and attachments, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature

Taxpayer identification number

Date