

Certificate of Relationships and Nonprofit Motives

(See Note at bottom of page)

U.S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner

OMB Approval No. 2502-0057
(exp. 05/31/2012)

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. The Department of Housing & Urban Development (HUD) is authorized to collect all the information on this form by the U.S. Housing Act of 1937, as amended, and by the Housing & Community Development Act of 1987, 42 U.S.C 3543 which authorizes HUD to collect Social Security Numbers (SSN). The information you provide will be reviewed to ensure that the motives of the nonprofit sponsor and the mortgagor have not changed since the application stage and that no relationships exists which violate the intent of outstanding regulations. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as required and permitted by law. You must provide all of the information requested in this application, including your SSN or EIN. Failure to provide the information may result in your disapproval of participation in this HUD program and/or delay action on your proposal.

TO: U.S. Department of Housing and Urban Development c/o	Project Number <hr/> Project Name
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In accordance with the terms of the commitment issued by you to insure a mortgage or make a loan on the above named project, and in order to induce you to endorse the note for insurance, the undersigned hereby certifies all of the information below:

Name of mortgagor corporation or association	Date charter received	Authorizing State	Authorizing statute
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The officers and directors are (Name and Title)	Social Security Number/ Employer Identification Number	Address
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We have reviewed the information supplied to you on form HUD-3433, dated _____, and the exhibits accompanying that form and certify that there have been no changes in that information except for those set forth in the exhibit attached hereto and made a part thereof.

To the best of our knowledge and belief, both the foregoing information and the information contained in the exhibit attached to this certificate is true, complete and correct. It is agreed that if there are any changes in the information contained in this certificate prior to completion of the project, such changes will be certified within 10 working days from the date the change occurred.

Name, title, signature & date for mortgagor corporation or association	Name, title, signature & date for sponsor
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Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Note: Applicable to all Insured Multifamily Programs Authorized under the National Housing Act Involving Nonprofit Sponsors and/or Mortgagors

form **HUD-3434** (3/92)
ref. Handbook 4470.1