

## **If You Have Questions**

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2. Call us at **1-800-772-1213**, weekdays from 8:00 am to 7:00 pm. If you are deaf or hard of hearing, call TTY **1-800-325-0778**. Please mention this letter when you call.
3. You may also call your local office at **1-866-220-7896**.

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***Social Security Administration***



# ASSET SELF-CERTIFICATION

For households whose combined net assets do not exceed the applicable Imputed Income Limitation.  
(Complete only one form per household; including assets of children.)

**Imputed Income Limitation FY 2025: \$51,600**

For the following asset types, include the current Cash Value of **each** asset held by any family member and the actual income that the asset earns. \*Cash value is **current market value minus cost to convert** an asset to cash, such as broker's fees, settlement costs, outstanding loans, penalties for early withdrawal, etc.\*

<b>Household Name:</b>		Bailey		<b>Unit#:</b> 8-102	
<b>PART I. ASSETS DISPOSED OF FOR LESS THAN FAIR MARKET VALUE (FMV)</b>					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Within the past two (2) years, I/we have sold or given away assets for more than \$1,000 below their fair market value (FMV).			
Asset #1:	N/A	Date of Disposal:	N/A	FMV - amt received:	N/A
Asset #2:	N/A	Date of Disposal:	N/A	FMV - amt received:	N/A
<b>PART II: FEDERAL TAX RETURN OR REFUNDABLE FEDERAL TAX CREDIT</b>					
Have you received a federal tax return or refundable federal tax credit in the last 12 months?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Amount of return/credit:</b>				\$0.00	
<b>PART III: NON-NECESSARY PERSONAL PROPERTY (NNPP)</b>					
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		I/we do have non-necessary personal property			
<b>Type of Asset</b>	<b>(A) Cash Value*</b>	<b>(B) Annual Income</b>	<b>Type of Asset</b>	<b>(A) Cash Value*</b>	<b>(B) Annual Income</b>
Cash on Hand	\$ N/A	N/AP	Cryptocurrency	\$ N/A	\$ N/A
Pre-paid Debit Card (including Govt. Benefits)	\$ N/A	N/AP	Money Market/ CD	\$ N/A	\$ N/A
Checking/Savings	\$ 21.18	\$ 0.00	Annuities	\$ N/A	\$ N/A
Checking/Savings	\$ N/A	\$ N/A	Brokerage Account	\$ N/A	\$ N/A
Savings	\$ 11.47	\$ 0.00	Stocks/Bonds	\$ N/A	\$ N/A
Internet based assets (Cash App, Venmo, PayPal, Crowdfunding, etc.)	\$ N/A	\$ N/A	Other: <u>N/A</u>	\$ N/A	\$ N/A
Whole Life Insurance	\$ N/A	\$ N/A	Other: <u>N/A</u>	\$ N/A	\$ N/A
<b>Non-Account Based</b>					
Possessions not general held in an account such as vehicles used for recreation (e.g., RVs, ATVs, and Boats), antique cars, collectibles (e.g. stamps, jewelry, coins, and artwork.), and equipment/machinery that is not used to generate income for a business					
<b>Description</b>			<b>(A) Cash Value *</b>		
N/A			\$ N/A		
N/A			\$ N/A		
N/A			\$ N/A		
N/A			\$ N/A		
<b>PART IV. REAL PROPERTY</b>					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		I/we do have real property			
<b>Description of Property</b>	<b>(C) Cash Value*</b>		<b>(D) Income</b>		
N/A	\$ N/A		\$ N/A		
N/A	\$ N/A		\$ N/A		

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of a lease agreement.

06/22/2025

Signature of Applicant/Tenant

Date

Signature of Applicant/Tenant

Date

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## ASSET SELF-CERTIFICATION WORKSHEET

(Completed by Management Agent)

This worksheet accompanies the Asset Self-Certification. Complete **either** Part I or Part II depending on the nature of the types of assets disclosed by the family on the Asset Self-Certification. When the total net family assets are less than or equal to the [applicable Imputed Income Limitation](#), then only the actual income as disclosed on the Asset Self-Certification is included on the Tenant Income Certification (TIC).

HOUSEHOLD NAME: _____		UNIT # _____
<b>PART I: COMPLETE THIS SECTION IF THE FAMILY <i>ONLY</i> HAS NNPP AND NO REAL PROPERTY</b>		
<b>Determination of Total Net Family Assets</b>		
(1)	Enter the total of all NNPP by adding the values in (A)	\$
(2)	Enter the value of any NNPP disposed of for less than FMV	\$
(3)	ADD lines (1) and (2)	\$
(4)	Enter the amount of a federal tax return or refundable federal tax credit in the last 12 months	\$
(5)	SUBTRACT line (4) from line (3)	\$
(6)	Is the value in line (5) less than or equal to \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>YES</b> , then proceed to <b>Determination of Income from Assets</b>		
If <b>NO</b> , <b>STOP</b> the Asset Self Certification cannot be used, and each asset must be separately verified		
<b>Determination of Income from Assets: This information must be reflected on Part IV of the ADOH TIC</b>		
(7)	Enter the total by adding the values in (B)	\$

<b>PART II: COMPLETE THIS SECTION IF THE FAMILY HAS <i>BOTH</i> NNPP AND REAL PROPERTY</b>		
<b>Determination of Total Net Family Assets</b>		
(1)	Enter the total of all NNPP by adding the values in (A)	\$
(2)	Enter the value of any NNPP disposed of for less than FMV	\$
(3)	ADD lines (1) and (2)	\$
(4)	Is this value less than or equal to \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>YES</b> , then proceed to line (5)		
If <b>NO</b> , <b>STOP</b> the Asset Self Certification cannot be used, and each asset must be separately verified		
(5)	Enter the total of all Real Property by adding the values in (C)	\$
(6)	Enter the value of any Real Property disposed of for less than FMV	\$
(7)	ADD lines (5) thru (6)	\$
(8)	Enter the amount of a federal tax return or refundable federal tax credit in the last 12 months	\$
(9)	SUBTRACT line (8) from line (7)	\$
(10)	Is the value in line (9) less than or equal to \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
If <b>YES</b> , then proceed to <b>Determination of Income from Assets</b>		
If <b>NO</b> , <b>STOP</b> the Asset Self Certification cannot be used, and each asset must be separately verified		
<b>Determination of Income from Assets: This information must be reflected on Part IV of the ADOH TIC</b>		
(11)	Enter the total by adding the values in (B)	\$
(12)	Enter the total by adding the values in (D)	\$
(13)	ADD lines (11) and (12)	\$

[Imputed Income Limitation](#)

FY 2025: \$51,600

Effective as of 04/01/2025 (Required Form) - Asset Self-Certification Worksheet

Revised 01/30/2025