|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CALIFORNIA STATE TREASURER’S OFFICE** | | | | | | | |  | PROPOSED | |
| POSITION DUTY STATEMENT | | | | | | |  | | | |
|  | | | | | | |  | X | CURRENT | |
|  | | | | | | |  | | | |
| **DIVISION OR BCA** | | | | | | | **POSITION NUMBER (Agency-Unit-Class-Serial)** | | | **Position ID** |
| California Tax Credit Allocation Committee | | | | | | | 342-001-5157-XXX | | |  |
| **UNIT** | | | | | | | **CLASSIFICATION TITLE** | | | |
| Compliance Section | | | | | | | Staff Services Analyst | | | |
| **TIME BASE / TENURE** | | **CBID** | **WWG** | **COI** | | **MCR** | **WORKING TITLE** | | | |
| P/FT | | R01 | 2 | Yes  No | | 1 | Program Analyst | | | |
| **LOCATION** | | | | | | | **INCUMBENT** | **EFFECTIVE DATE** | | |
| Sacramento | | | | | | |  |  | | |
| **STATE TREASURER’S OFFICE MISSION** | | | | | | | | | | |
| The State Treasurer’s Office (STO) provides banking services for state government with goals to minimize banking costs and maximize yield on investments. The Treasurer is responsible for the custody of all monies and securities belonging to or held in trust by the state; investment of temporarily idle state and local government monies; administration of the sale of state bonds, their redemption and interest payments; and payment of warrants drawn by the State Controller and other state agencies. | | | | | | | | | | |
| **COMMITMENT TO DIVERSITY, EQUITY, AND INCLUSION** | | | | | | | | | | |
| The California State Treasurer’s Office (STO) is committed to building and fostering a diverse workplace. We believe cultural diversity, backgrounds, experiences, perspectives, and unique identities should be honored, valued, and supported. We believe all staff should be empowered. The STO is proud to foster inclusion and representation at all levels of the Department. | | | | | | | | | | |
| **DIVISION OR BCA OVERVIEW** | | | | | | | | | | |
| **BRIEFLY DESCRIBE THE DIVISION/UNIT FUNCTIONS** | | | | | | | | | | |
| The California Tax Credit Allocation Committee was established first by gubernatorial proclamation in February 1987, and later by enactment of law in 1987. The Committee administers the federal Low-Income Housing Tax Credit (LIHTC) program authorized by Congress in 1986 to encourage the production of affordable rental housing. The Committee also oversees the State Tax Credit program which works in tandem with the federal program. | | | | | | | | | | |
| **GENERAL STATEMENT** | | | | | | | | | | |
| **BRIEFLY (1 OR 2 sentences) DESCRIBE THE POSITION’S ORGANIZATIONAL SETTING AND MAJOR FUNCTIONS** | | | | | | | | | | |
| Under the general direction of the Staff Services Manager II and Program Manager I, this continuous traveling position performs detailed physical inspections and reviews of compliance issues affecting all multifamily rental housing projects throughout California that are funded with the Low-Income Housing Tax Credit (Internal Revenue Code Section 42) and other related analytical duties. | | | | | | | | | | |
| **% of time performing duties** | **Indicate the duties and responsibilities assigned to the position and the percentage of time spent on each. Group related tasks under the same percentage with the highest percentage first.** | | | | | | | | | |
| 50% | Analyzing, assess, and audit files for compliance with the Low-Income Housing Tax Credit program as determined by the Internal Revenue Code Section 42 and state law. Must possess strong mathematical skills to calculate complex income and asset calculations and verify rents for low-income housing tax credit residents, then compare those charges to applicable LIHTC Rent and Income limits. Conduct physical inspections of units to determine habitability per National Standards for Physical Inspection of Real Estate (NSPIRE), including but not limited to entering units, climbing up/down flights of stairs, and walking large areas of the property. Research and record changes in LIHTC program requirements from year to year to apply the correct regulations to projects in both the federal compliance period and the state extended use period. Determine corrective action as necessary and report findings to the IRS. Communicate with project owners and managers by phone, written correspondence, or conference on issues of noncompliance and the steps needed to correct. Track progress of owner attempts to rectify noncompliance. | | | | | | | | | |
| 20% | Receive and monitor the submission of required documentation from property owners whose projects are determined to be out-of-compliance with Internal Revenue Code Section 42 requirements. Update database, file, and advise supervising manager on the status of the assigned portfolio. Prepare status reports, spreadsheets, and written correspondence. Prepare and submit Form 8823 to the IRS if necessary. Notify manager if deadlines for submission of required documentation have lapsed. | | | | | | | | | |
| 10% | Respond to various interested parties (managers, owners, other government agencies, appraisers, developers, nonprofit organizations etc.) by phone, written correspondence or conference, the policies of the Committee and the regulations of Section 42 as they relate to federal and state program requirements. | | | | | | | | | |
| 10% | Conduct various research projects independently or as directed; develop and maintain reports as needed and perform other duties necessary to the overall support of the California Tax Credit Allocation Committee (CTCAC). | | | | | | | | | |
| 5% | Read, review and research legislation (both current and prior years) to maintain a thorough working knowledge of all aspects of the LIHTC program and how it affects the compliance aspect of the monitoring process. Attend required classes and meetings to maintain current working knowledge. | | | | | | | | | |
| **SPECIAL REQUIREMENTS** | | | | | | | | | | |
| **(i.e. valid CA driver’s license, overnight travel, etc.)** | | | | | | | | | | |
| **To be reviewed and signed by the supervisor and employee:**  **EMPLOYEE’S STATEMENT:**   * *I HAVE DISCUSSED THE DUTIES AND RESPONSIBILITIES OF THE POSITION WITH MY SUPERVISOR AND RECEIVED A COPY OF THIS DUTY STATEMENT.* | | | | | | | | | | |
| **EMPLOYEE’S NAME (Print)** | | | | | **EMPLOYEE’S SIGNATURE** | | | **DATE** | | |
|  | | | | |  | | |  | | |
| **SUPERVISOR’S STATEMENT:**   * *I CERTIFY THIS DUTY STATEMENT REFLECTS CURRENT AND AN ACCURATE DESCRIPTION OF THE ESSENTIAL FUNCTIONS OF THIS POSITION* * *I HAVE DISCUSSED THE DUTIES AND RESPONSIBILITIES OF THE POSITION WITH THE EMPLOYEE AND PROVIDED THE EMPLOYEE A COPY OF THIS DUTY STATEMENT.* | | | | | | | | | | |
| **SUPERVISOR’S NAME (Print)** | | | | | **SUPERVISOR’S SIGNATURE** | | | **DATE** | | |
|  | | | | |  | | |  | | |