

PREPARED BY: Doug Gibbs  
 DATE PREPARED: March 13, 2017  
 PHONE: 402-471-0051

**LB 613**

Revision: 00

**FISCAL NOTE**  
**LEGISLATIVE FISCAL ANALYST ESTIMATE**

<b>ESTIMATE OF FISCAL IMPACT – STATE AGENCIES</b> (See narrative for political subdivision estimates)				
	<b>FY 2017-18</b>		<b>FY 2018-19</b>	
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE
GENERAL FUNDS				
CASH FUNDS				
FEDERAL FUNDS				
OTHER FUNDS				
TOTAL FUNDS				

**Any Fiscal Notes received from state agencies and political subdivisions are attached following the Legislative Fiscal Analyst Estimate.**

LB 613 amends the Nebraska Housing Agency Act, Nebraska Revised Statutes Section 71-1590 to change requirements regarding exemption from taxes and special assessments.

The bill removes a requirement that a controlled affiliate of the housing agency be “wholly owned” by the agency. The bill changes the exemption standard for property owned jointly by the agency or its affiliate with a nongovernmental person or entity from the extent of the ownership interest to only the extent the property is used to provide housing for eligible persons.

The bill also provides for a reporting requirement regarding the exemption to the county assessor.

The Department of Revenue estimates no fiscal impact to the General Fund and no cost to implement the provisions of LB 613.

We agree with the Department of Revenue’s estimate of fiscal impact and cost.

<b>ADMINSTRATAIVE SERVICE STATE BUDGET DIVISION: REVIEW OF AGENCY &amp; POLT. SUB. RESPONSE</b>		
LB: 613	AM:	AGENCY/POLT. SUB: City of Omaha
REVIEWED BY: Gary Bush	DATE: 1/26/17	PHONE: <a href="tel:4024714161">(402) 471-4161</a>
COMMENTS: No basis to disagree the estimate of impact provided by the City. However, it is reasonable to assume that a city does know, or can reasonable determine, what new properties would come under the exemptions provide by the bill and thus make a determination of the impact to the city.		

**State Agency Estimate**

State Agency Name: Department of Revenue  
 Approved by: Tony Fulton  
 Date Prepared: 3/13/2017  
 Date Due LFA: 3/14/2017  
 Phone: 471-5896

	FY 2017-2018		FY 2018-2019		FY 2019-2020	
	Expenditures	Revenue	Expenditures	Revenue	Expenditures	Revenue
General Funds		\$ 0		\$ 0		\$ 0
Cash Funds						
Federal Funds						
Other Funds						
Total Funds		\$ 0		\$ 0		\$ 0

LB 613 requires housing agencies or controlled affiliates of housing agencies to notify the county assessor of their exemption from taxation on or before December 31 of the year preceding the year for which an exemption is sought.

It is estimated that this bill will have no impact on General Fund revenues.

It is estimated that there will be no cost to the Department to implement this bill.

**Major Objects of Expenditure**

Class Code	Classification Title	17-18	18-19	19-20	17-18	18-19	19-20
		FTE	FTE	FTE	Expenditures	Expenditures	Expenditures
	Benefits.....						
	Operating Costs.....						
	Travel.....						
	Capital Outlay.....						
	Aid.....						
	Capital Improvements.....						
	<b>Total.....</b>						

Please complete ALL (5) blanks in the first three lines.

**2017**

**LB<sup>(1)</sup> 613**

**FISCAL NOTE**

State Agency OR Political Subdivision Name: <sup>(2)</sup> City of Omaha

Prepared by: <sup>(3)</sup> Tyler Leimer Date Prepared: <sup>(4)</sup> 1/24/2017 Phone: <sup>(5)</sup> (402) 444-4514

**ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION**

	<u>FY 2017-18</u>		<u>FY 2018-19</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
GENERAL FUNDS	_____	_____	_____	_____
CASH FUNDS	_____	_____	_____	_____
FEDERAL FUNDS	_____	_____	_____	_____
OTHER FUNDS	_____	_____	_____	_____
<b>TOTAL FUNDS</b>	=====	=====	=====	=====

Explanation of Estimate: The financial impact of LB 613 cannot be determined at this time.

**BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE**

**Personal Services:**

<u>POSITION TITLE</u>	<u>NUMBER OF POSITIONS</u>		<u>2017-18</u>	<u>2018-19</u>
	<u>17-18</u>	<u>18-19</u>	<u>EXPENDITURES</u>	<u>EXPENDITURES</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Benefits.....	_____	_____	_____	_____
Operating.....	_____	_____	_____	_____
Travel.....	_____	_____	_____	_____
Capital outlay.....	_____	_____	_____	_____
Aid.....	_____	_____	_____	_____
Capital improvements.....	_____	_____	_____	_____
<b>TOTAL.....</b>	_____	_____	_____	_____