

ALL APPLICABLE FIELDS MUST BE COMPLETED!

EXHIBIT H

Include ALL tenant activity, by unit, since the last report.

**MISSOURI HOUSING DEVELOPMENT COMMISSION
LIHTC/HOME ANNUAL OCCUPANCY REPORT (Only for Projects NOT reporting on-line)**

Report Covering Period _____ to _____

Project Number _____

Owner Name _____

Project Name _____

Owner Address _____

Project Address _____

County _____

Mgmt. Agent _____

Total Number of Units _____

Phone Number _____

Mgmt. Tax ID # _____

If Student **AND** Qualified
enter Explanation Code below
1 - Married filing joint return
2 - Single parent/dependent child
3 - Title IV recipient
4 - Qualified Job Training Program
↓

IRS Building ID Number	Unit No	Unit Sq Ft	# Bdrms	Move In Date	Move Out Date	Head of Household Social Security Number	Head of Household Full Name	Date of Last Cert	Initial Cert Y or N	Race/Ethnicity*	Age Head of Hshld DOB	Gross Annual Income at Recert	Gross Annual Income at Move-in	Monthly Tenant Paid Rent	Amount of Rental Subsidy	Util Allow	Rent Assist Type PBA TBA**	Unit Type L or M***	# in Hshld at Recert	Non-qual Stdnt Y/N	Qual Stdnt Expln Code	50% HM Unit Y/N	60% Mrkt Unit Y/N

*11 = White; 12 = Black/African American; 13 = Asian; 14 = American Indian/Alaska Native; 15 = Native Hawaiian/Other Pacific Islander
 16 = American Indian/Alaska Native & White; 17 = Asian & White; 18 = Black/African American & White; 19 = American Indian/Alaska Native & Black;
 20 = Other Multi Racial; 21 = Asian & Native Hawaiian/Pacific Islander; 22 = Hispanic

(PBA =Project Based Assist; TBA =Tenant Based Assist) *(L =Low-Income; M =Market)