EXHIBIT U – LIHTC ANNUAL RESIDENT CERTIFICATION

roperty Name:		Property Number:		
Applicant/Resident:		Unit Number:		
ffective Date:				
		ourpose of this form, self-certification of ial and ethnicity data of each house		
THI	IS SECTION TO BE COMPLE	ETED BY APPLICANT/RESIDENT		
Recovery Act of 2008, all low i student status annually.	income tax credit households n	ram rules by the H.R. 3221 Housing nust certify annual income, household		
Please complete and mark th	he following that applies:			
SECTION 1				
I/we hereby certify that	t there has been no change	in the number of household mem	bers.	
I/we hereby certify their months.	re will be a change in the n	umber of household members in t	he next 12	
I/we hereby certify that	required to be collected for	ave completed the race ethnicity or reporting requirements by the So	•	
SECTION 2				
	nat there has been no cha	ange in the student status of a	ny household	
		student status of a household nibit M) Certification of Student El		
SECTION 3				
The total HOUSEHOLD	Annual Income from all in	ncome and assets is: \$		
I/we here	eby certify that there has been no	change in employment and/or asset in	formation.	
	eby certify that there has been household income reflects the cl	a change in employment and/or asset	information and	
NOTE: Any changes in streported to the owner/mar	udent status and/or house nagement agent immediate	hold composition not certified a ly and must be approved prior t documented in the property hous	o the change.	
misrepresentation herein will be con		process to determine eligibility for residency se Agreement and subject me to immediate date shown below.		
If you or someone you know served 751-3779 to learn about available r		ourage you to visit http://veteranbenefits.mo	gov or call (573)	
APPLICANT / RESIDENT	/// DATE	APPLICANT / RESIDENT	// DATE	
I Elevativi / INCOIDENT	, ,	itt / tampibliti	,	
APPLICANT / RESIDENT	// DATE	APPLICANT / RESIDENT	/// 	