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 _____

Project Name _____

Project Address _____

_____

County _____

Total Number of Units _____

Owner Name _____

Owner Address _____

_____

Mgmt. Agent _____

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 Recrt	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)