

Exhibit D2
Mortgage Revenue Bond Program
Mortgagor Income Eligibility Worksheet

The information requested below must be provided with respect to all individuals who are expected to live in the residence being financed. The Internal Revenue Code of 1986, as amended (the "Code"), established geographically-based income limits for recipients of Louisiana Housing Corporation Mortgage Loans. The information requested below must be provided in order to enable the Corporation to determine your eligibility under these limits for a Mortgage Loan. This information will be used solely to determine your eligibility under the income limits and will not be used for Mortgage Loan underwriting purposes. You must complete this form in addition to the Residential Loan Application because the Code requires that certain sources of income be included when determining income eligibility which you are not required to include when reporting your income for mortgage loan underwriting purposes.

PART I - General Information

Lender _____

LHC Loan Number _____ Loan Officer _____

Borrower _____

PART II – Gross Income for Individuals Who Will Live in the Residence Financed

On each line below, include the name, age, relationship and total of all such monthly income if any for **all members of the household**:

	<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Monthly Income</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
			Total Monthly Income	_____

1. MONTHLY INCOME FROM EMPLOYER

Primary Wage Earner

Base Pay: _____
Overtime: _____
Bonus: _____
Subtotal: _____

Secondary Wage Earner

Base Pay: _____
Overtime: _____
Bonus: _____
Subtotal: _____

2. OTHER INCOME

Part-time Income: _____
Child Support: _____
Alimony: _____
Unemployment: _____
Social Security: _____
Tips: _____
Net Rental Income: _____

Interest/Dividend: _____
Royalties: _____
Pension: _____
Estate/Trust Income: _____
VA Compensation: _____
Public Assistance: _____
Other: _____
Subtotal: _____

3. SELF EMPLOYMENT INCOME

Schedule C, F, or E from 1040: _____
Add back Depreciation: _____
Sub-Total: _____

I/we declare under penalty of law that the foregoing representations are true and correct.

(EXECUTION AT TIME OF APPLICATION)

Date: _____
Borrower
(Please Type Name): _____

Date: _____
Borrower
(Please Type Name): _____

Date: _____
Borrower
(Please Type Name): _____

LHC SINGLE FAMILY REQUIRED DOCUMENT AS OF 09/25/2024

(EXECUTION AT CLOSING)

THUS DONE AND SIGNED on the _____ day of _____, 20____ before me, the undersigned Notary Public, in the Parish of _____, Louisiana and in the presence of the undersigned competent witnesses who have hereunto signed their names together with said appearers and me, Notary, after due reading of the whole.

Date: _____
Borrower
(Please Type Name): _____

Date: _____
Borrower
(Please Type Name): _____

Date: _____
Borrower
(Please Type Name): _____

Notary Public
In and for the parish and state aforesaid

Please Type Name

Please Type Bar Roll Number