LIHC ATTACHMENT 16A: TYPE OF DEVELOPER ENTITY— LIMITED PARTNERSHIP OR GENERAL PARTNERSHIP OR REGISTERED LIMITED LIABILITY PARTNERSHIP

(Submit pages of the applicable Attachment 16 and the Developer Organizational Chart for which information has been provided. Blank pages should not uploaded in THOMAS.)

NAM	E OF I	DEVELOPER ENTIT	Y:					
1. A.	Nu	Number of general partners of Developer Entity:						
1. B.	Is e	yes (complete 1.C. no (complete 1.C.	-					
1. C.	2. Provide all of the following information for <u>each general partner</u> of the Developer Entity (attach additional potential potential potential provide complete information).							
	•	Name of General Par	tner:					
		Telephone: (Ownership: individual partnership (complete 2.A. below) corporation (complete 2.B. below) limited liability company (complete 2.C. below)	%				
(ii) Name of General Partner:Address:		tner:						
		Telephone: (Ownership: individual partnership (complete 2.A. below) corporation (complete 2.B. below) limited liability company (complete 2.C. below)	%				
	(iii)	Name of General Par Address:	tner:					
		Telephone: (Type of entity:	Ownership: individual partnership (complete 2.A. below) corporation (complete 2.B. below) limited liability company (complete 2.C. below)	%				
		State of Formation:						

(i)	Name of General Par	rtner:			
	Address:				
	Telephone: ()		Ownership:	
	Type of entity:	☐ individual	☐ partnership (co	omplete 3.A.(i) below)	
		☐ corporation (a	complete 3A.(ii) below)		
			ty company (complete 3	3.A.(iii) below)	
	State of Formation:				
(ii)	i) Name of General Partner:				
	Address:				
	Telephone: ()		Ownership:	%
	Type of entity:	☐ individual	☐ partnership (co	omplete 3.A.(i) below)	
		☐ corporation (a	complete 3A.(ii) below)		
		☐ limited liabili	ty company (complete 3	3.A.(iii) below)	
	State of Formation:		_		
(iii)	Name of General Par	rtner:			
	Address:				
	Telephone: ()		Ownership:	%
	Type of entity:	☐ individual	☐ partnership (co	omplete 3.A.(i) below)	
		□ corporation (a	complete 3A.(ii) below)		
		☐ limited liabili	ty company (complete 3	3.A.(iii) below)	
	State of Formation:				

2. B. If any general partner identified in 1.C. above is itself a corporation, provide all of the following information for each of the following: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each such corporation identified as a general partner in 1.C. (complete 3.B.(i) if any officer, director and/or stockholder is a partnership; complete 3.B.(ii) if any office, director and/or stockholder listed below is a corporation and/or complete 3.B.(iii) if any officer, director and/or stockholder listed below is a limited liability company). (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
Title:	Address:	Name:
Address:		
Address:	Telephone No.:	Type of Entity:
T. 1 1 NI		State of Formation:
Telephone No.:		Address:
Name:	Name:	
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

☐ Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

2. C. If any general partner identified in 1.C. above is itself a limited liability company, provide all of the following information for each of the following: (i) all governors/directors, (ii) all members and (iii) all managers/officers of each limited liability company identified as a general partner in 1.C. (complete 3.C.(i) if any member and/or manager is a partnership; complete 3.C.(ii) if any member and/or manager listed below is a corporation and/or complete 3.C.(iii) if any member and/or manager listed below is a limited liability company). (attach additional pages if needed to provide complete information.)

MEMBERS	MANAGERS/OFFICERS
(Indicate the Managing	(Indicate the Chief Manager(s),
Member(s), if any)	<u>if any)</u>
Name:	Name:
Type of Entity:	Type of Entity:
State of Formation:	State of Formation:
Address:	Address:
Telephone No.:	Telephone No.:
	_
Name:	Name:
Type of Entity:	Type of Entity:
State of Formation:	State of Formation:
Address:	Address:
Talanhana Na	Telephone No.:
_ Telephone No	— — — — — — — — — — — — — — — — — — —
Name:	Name:
Type of Entity:	Type of Entity:
State of Formation:	State of Formation:
Address:	Address:
Telephone No.:	Telephone No.:
ed above is: Member Managed	Manager Managed 🚨 Board
	(Indicate the Managing Member(s), if any) Name: Type of Entity: State of Formation: Address: Telephone No.: Name: Type of Entity: State of Formation: Address: Telephone No.: Name: Type of Entity: State of Formation: Address: Telephone No.:

3. A. (i)	foll part base	by general partner identified in 2.A. above is itself a partnership (lowing information for each general partner of any general partner identified below is not an individual or a corporation you musted on type of entity, until only individuals and no entities are identified information.)	ner identified as a partnership in 2.A. If any general st provide additional information, in the relevant form
	a.	Name of General Partner:	-
		Address:	
		Telephone: ()	Ownership:
		Type of entity: \square individual \square partnership \square corporation	☐ limited liability company
		State of Formation:	_
	b.	Name of General Partner:	
		Address:	
		Telephone: ()	Ownership:%
		Type of entity: ☐ individual ☐ partnership ☐ corporation	☐ limited liability company
		State of Formation:	_
	c.	Name of General Partner:	
		Address:	
		Telephone: ()	Ownership:%
		Type of entity: ☐ individual ☐ partnership ☐ corporation	☐ limited liability company
		State of Formation:	_

3. A. (ii) If any general partner identified in 2.A. above is itself a corporation, provide all of the following information for <u>each of the following:</u> (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each general partner identified as a corporation in 2.A. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
Title:	Address:	Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:

• Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. A. (iii) If any general partner identified in 2.A. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of each general partner identified as a limited liability company in 2.A. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

GOVERNORS/DIRECTORS	MEMBERS Indicate the Managing Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
lame:	Telephone No.:	Telephone No.:
Address:		
	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
ndigate if the LLC listed shows in D. N	Telephone No.: Member Managed Manager Managed	

nformation, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.) 1. Name of General Partner:				
Address: Telephone: () Type of entity: □ individual □ partnership □ corporation State of Formation:	Ownership:% □ limited liability company			
b. Name of General Partner:	Ownership:% □ limited liability company			
Address: Telephone: () Type of entity: □ individual □ partnership □ corporation State of Formation:	Ownership:%			

3. B. (ii) If any officer, director and/or stockholder identified in 2.B. above is itself a corporation, provide all of the following information for **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each officer, director and/or stockholder identified as a corporation in 2.B. If any stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
	Address:	
Title:		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
	Name:	
Name:	Address:	Telephone No.:
Title:		
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		-

• Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. B. (iii) If any officer, director and/or stockholder identified in 2.B. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) all governors/directors, (ii) all members and (iii) all managers/officers of each officer, director and/or stockholder identified as a limited liability company in 2.B. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

MEMBERS

MANAGERS/OFFICERS

	Indicate the Managing Member(s), if any	Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name: Address:	Telephone No.:	Telephone No.:
Address.	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the	LLC listed above is: Member Managed	Manager Managed Board

GOVERNORS/DIRECTORS

3. C. (i)	If any member and/or manager identified in 2.C. above is itself a partnership (limited, general, or limited liability), provide all of the following information for <u>each general partner</u> of any member and/or manager identified as a partnership in 2.C. If any general partner identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)			
	a.	Name of General Partner:		
		Address:		
		Telephone: ()	Ownership:%	
		Type of entity: ☐ individual ☐ partnership ☐ corporation ☐	☐ limited liability company	
		State of Formation:		
	b.	Name of General Partner:		
		Address:		
		Telephone: ()	Ownership:%	
		Type of entity: ☐ individual ☐ partnership ☐ corporation ☐	☐ limited liability company	
		State of Formation:		
	c.	Name of General Partner:		
	-	Address:		
			Ownership:%	
		Type of entity: ☐ individual ☐ partnership ☐ con	rporation limited liability company	
		State of Formation:		

3. C. (ii) If any member and/or manager identified in 2.C. above is itself a corporation, provide all of the following information for each of the following: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in any member and/or manager identified as a corporation in 2.C. If any stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
	Address:	
Title:		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
	Address:	Telephone No.:
Title:		
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:

 \Box Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. C. (iii) If any member and/or manager identified in 2.C. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of any member and/or manager identified as a limited liability company in 2.C. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

MEMBERS

MANAGERS/OFFICERS

	Indicate the Managing Member(s), if any	Indicate the Chief Manager(s), if any
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address: Telephone No.:	Name:	Name:
	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
Name:		
Address:	Telephone No.:	Telephone No.:
	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC list	ted above is: Member Managed Managed	ger Managed 🚨 Board

GOVERNORS/DIRECTORS