

7. Income

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

7. Income

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

7. Income

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

7. Income

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions  (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

6. Assets

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

6. Assets

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.



## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

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# HCV RENT CALCULATION



Nan McKay  
AND ASSOCIATES, INC.

1810 Gillespie Way, Suite 202

El Cajon, CA 92020

800.783.3100

[www.nanmckay.com](http://www.nanmckay.com)

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## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.



## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.

**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
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				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	8d. Amount	
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.

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# PH RENT CALCULATION



Nan McKay  
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**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.



## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	8d. Amount	
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.



**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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# CASE STUDIES



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AND ASSOCIATES, INC.

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**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.



**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.

**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.



## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.

**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.

## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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## 12. Housing Choice Vouchers: Tenant Based Vouchers

12a. Number of bedrooms on Voucher		12a.
12b. Is family now moving to this unit? (Y or N)		12b.
12d. Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 12g)		12d.
12e. Cost billed per month (put 0 if absorbed)	\$	12e.
12f. PHA code billed		12f.
12g. Housing type	<input type="checkbox"/> Group Home (prorate gross rent) <input type="checkbox"/> Own manufactured home, lease space <input type="checkbox"/> SRO: 1 room occupied by 1 person	
12h. Owner name		12h.
12i. Owner TIN/SSN		12i.
12j. Payment standard for the family	\$	12j.
12k. Rent to owner	\$	12k.
12l. Is the family receiving a higher payment standard as a reasonable accommodation? (Y or N)	\$	12l.
12m. Utility allowance, if any	\$	12m.
12n. Security deposit paid by the PHA on behalf of the family, if any	\$	12n.
12o. Mobility-related services		12o(1).
(1) Did the family receive mobility-related services? (Y or N)		12o(2).
(2) Date family began receiving mobility-related services		
12p. Gross rent of unit: 12k + 12m (or Space Rent)	\$	12p.
12q. Lower of 12j or 12p	\$	12q.
12r. TTP: copy from 9j	\$	12r.
12s. Total HAP: 12q minus 12r	\$	12s.

### Rent Calculation (if prorated rent, skip to 12ab)

12t. Total family share: 12p minus 12s	\$	12t.
12u. HAP to owner: lower of 12k or 12s	\$	12u.
12v. Tenant rent to owner: 12k minus 12u	\$	12v.
12w. Utility reimbursement to family: 12s minus 12u, but do not exceed 12m	\$	12w.

### Prorated Rent Calculation

12ab. Normal total HAP: copy from 12s, but do not exceed 12p	\$	12ab.
12ac. Total number eligible		12ac.
12ad. Total number in family		12ad.
12ae. Proration percentage: 12ac ÷ 12ad		12ae.
12af. Prorated total HAP: 12ab X 12ae	\$	12af.
12ag. Mixed family total family contribution: 12p minus 12af	\$	12ag.
12ah. Utility allowance: copy from 12m	\$	12ah.
12ai. Mixed family tenant rent to owner: 12ag minus 12ah	If positive or 0, put tenant rent If negative, credit tenant	12ai.
12aj. Prorated HAP to owner: 12k minus 12ai. If 12ai is negative, put 12k	\$	12aj.

### Additional Payments (not HAP)

12ap. Additional financial support for tenant-based voucher family	\$	12ap.
12aq. Financial incentive for property owner	\$	12aq.

**6. Assets**

6a. Family Member Name	No.	6b. Type of asset	6c. Is this asset included in net family assets?	6d. Cash value of asset	6e. Actual Income	6f. Imputed Income
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
6g, 6h, 6i. Total net family assets, total actual income, total imputed income				\$ 6g.	\$ 6h.	\$ 6i.
6j. Passbook rate (written as decimal)						6j.
6k. Final asset income: 6h + 6i (see instruction booklet)						6k.

**7. Income**

7a. Family Member Name	No.	7b. Income Code	7c. Calculation (PHA use)	7d. Dollars per year	7e. Income exclusions	7f. Income after exclusions (7d minus 7e)
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
7g. Column total						\$ 7g.
7h. Reserved						
7i. Total annual income: 6k + 7g						7i.
<b>Over-Income Status (Public Housing Only)</b>						
7j. What is the applicable over-income limit for families of this size?						\$ 7j.
7k. Is the family's annual income greater than the over-income limit? <input type="checkbox"/> Y <input type="checkbox"/> N						7k.
7l. If the family is over-income, note the start date of the 24 consecutive month grace period						7l.



## 8. Deductions and Allowances

8a. Total annual income: copy from 7i			\$	8a.
<b>Permissive Deductions</b>				
8b. Family Member Name	No.	8c. Type of permissive deduction	\$	8d. Amount
			\$	
			\$	
			\$	
			\$	
			\$	
8e. Total permissive deductions (sum of column 8d)			\$	8e.
<b>If head/spouse/co-head is under 62 and no family member is disabled, skip to 8l</b>				
8f. Medical/disability threshold: 8a X 0.10			\$	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	8h.
		If negative and head/spouse/co-head is under 62 and not disabled, put 0	\$	8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g	\$	8h.
8i. Earnings in 7d made possible by disability assistance expense			\$	8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	8k.
8l. Family is eligible for medical or child care expense hardship or both?				8l.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)	\$	8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m	\$	8n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8q X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.

**9. Total Tenant Payment (TTP)**

9a. Total monthly income: $8a \div 12$	\$	9a.
9c. TTP if based on annual income: $9a \times 0.10$	\$	9c.
9d. Adjusted monthly income: $8y \div 12$	\$	9d.
9e. Percentage of adjusted monthly income	\$	9e.
9f. TTP if based on adjusted annual income: $(9d \times 9e) \div 100$	\$	9f.
9g. Welfare rent per month (if none, put 0)	\$	9g.
9h. Minimum rent (if waived, put 0)	\$	9h.
9i. Enhanced Voucher minimum rent	\$	9i.
9j. TTP, highest of lines 9c, 9f, 9g, 9h, or 9i	\$	9j.
9k. Most recent TTP	\$	9k.
9m. Qualify for minimum rent hardship exemption? (Y or N)	\$	9m.

## 10. Public Housing

10a. TTP: copy from 9j	\$	10a.
10b. Unit's flat rent	\$	10b.

### Income Based Rent Calculation (if prorated rent, skip to 10h)

10d. Income Based Rent (Lower of 10a or 10b if authorized to use ceiling rents; or if not, put 10a)	\$	10d.
10e. Utility allowance, if any	\$	10e.
10f. Tenant rent: 10d minus 10e	If positive or 0, put tenant rent	\$ 10f.
	If negative, credit tenant	\$ 10f.

### Income Based Prorated Rent Calculation (if not prorated, skip to 10u)

10h. PHA-established flat rent	\$	10h.
10i. Family maximum subsidy: 10h minus 10a	\$	10i.
10j. Total number eligible	\$	10j.
10k. Total number in family	\$	10k.
10n. Eligible subsidy (10i ÷ 10k) X 10j	\$	10n.
10p. Mixed family TTP: 10h minus 10n	\$	10p.
10r. Utility allowance, if any	\$	10r.
10s. Mixed family tenant rent: 10p minus 10r	If positive or 0, put tenant rent	\$ 10s.
	If negative, credit tenant	\$ 10s.

### Type of Rent

10u. Type of rent selected:	<input type="checkbox"/> Income-based	<input type="checkbox"/> Flat
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