## Schedule A – Management Relevant Experience

Complete the information below for each project your company currently manages. Make copies of this form as needed. Make full disclosure.

Management Firm:	Contact Person:			Telephone:		
1. Project Name	2. Project location (city,	3. Project	Total No.	4. Date Project	5. Month & year	
	state)	Type (LIHTC,	Units and	Placed in Service	management began	
		HOME, other)	No. Low		and ended	
			Income			
			Units			