## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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]	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.
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1. Name and Add Rogozinski	ress of Reporting Pe Kenneth	rson <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Greystone Housing Impact Investors LP</u> [ GHI ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 14301 FNB PA	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2024	x	Director Officer (give title below) Chief Executi	10% Owner Other (specify below) ve Officer		
SUITE 211			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) OMAHA	NE	68154	_	X	Form filed by One Rep Form filed by More tha	orting Person n One Reporting Person		
(City)	(State)	(Zip)	erivative Securities Acquired, Disposed of, or Beneficia		ned			

6. Ownership Form: Direct (D) 1. Title of Security (Instr. 3) 2. Transaction Date 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 7. Nature of 2A. Deemed 5. Amount of Execution Date, Transaction Securities Indirect (Month/Dav/Year) Beneficially Owned if anv Code (Instr. or Indirect (I) Beneficial (Month/Day/Year) 8) Following Reported (Instr. 4) Ownership (Instr. 4) Transaction(s) (A) or (D) (Instr. 3 and 4) Code v Amount Price **Beneficial Unit Certificates** 05/10/2024 Р \$15.67 53,164(1) By IRA 1,000 Α I **Beneficial Unit Certificates** 05/13/2024 Р 400 A \$15.56 53,564 I By IRA **Beneficial Unit Certificates** 103,888(1) D

> Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

1. On March 13, 2024, the GHI Board of Managers declared a supplemental distribution payable in the form of additional Beneficial Unit Certificates ("BUCs"), payable to all holders of record of BUCs on March 28, 2024, to be paid at a ratio of 0.00417 BUCs for each BUC outstanding. As a result, the reporting person received 247 BUCs via Direct ownership and 216 BUCs via Indirect ownership, as of April 30, 2024.

> /s/ Kenneth C. Rogozinski 05/14/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.