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 Address of Reporting Person* Coury Jesse A.			2. Issuer Name and 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) 02/25/2025	x	Director Officer (give title below) Chief Financi	10% Owner Other (specify below) al Officer		
SUITE 211			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	idual 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)	rivative Securities Acquired, Disposed of, or Beneficia					

4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. Ownership 7. Nature of 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 5. Amount of Date Execution Date, Transaction Securities Form: Direct (D) Indirect (Month/Dav/Year) if anv Code (Instr. Beneficially Owned or Indirect (I) Beneficial (Month/Day/Year) 8) Following Reported (Instr. 4) Ownership Transaction(s) (Instr. 4) (A) or (Instr. 3 and 4) Code v Amount Price (D)

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

A⁽¹⁾

20,376(1)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		5. Num Derivat Securit Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and A Securities Un Derivative Se (Instr. 3 and d	nderlying ecurity	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:

Beneficial Unit Certificates

1. Restricted units granted pursuant to the Amended and Restated Greystone Housing Impact Investors LP 2015 Equity Incentive Plan. One-third of the aggregate number of restricted units vest on each November 30, 2025, 2026, and 2027.

2. 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 157 BUCs via Direct ownership as of April 30, 2024.

/s/ Jesse A. Coury

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95,040(2)

D

** Signature of Reporting Person

02/27/2025 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).

02/25/2025

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.