TAXABLE YEAR

## 2017 Low-Income Housing Credit

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		fornia tax return. n your California tax returr	1		☐ SSN or ITII	N CA Corporation no.	FEIN	
. 101	(5) 40 0110W11 01	. , sa. Camorna tax roturi				c corporation no	1*	
Buil	Building identification number (BIN). If more than one building, attach a list of all BINs for this credit.					cretary of State (SOS) file nu	ımber	
	rt I Available (	Cradit						
			r building decreased since you i	received form CTCAC 3521A f	rom the California Tax	x Credit Allocation Comm	ittee?	
	☐Yes ☐No	o If "Yes," complete I	Part III before continuing. See (	General Information C.			1	
	Current year credit. See instructions							
3	1S.							
	If you are a	Current year low-income housing credits from –	(a) Name of entity passing through the credit –	(b) Identification numbers – California corporation, FEIN, etc.	(c) BIN	(d) Total amount of affilia corporation or pass-the credit(s)		
	Corporation	FTB 3521, line 10 of the affiliated corporation					00	
	S corporation shareholder	Schedule K-1 (100S), line 13a				4	00	
	Beneficiary	Schedule K-1 (541), line 13d			_ , ^		00	
	Partner or LLC member	Schedule K-1 (565, 568), line 15b					00	
	lotal pass-thro	ough low-income hous	ing credit. Add the amounts in	column (d)	3		00	
4	Current year lo	ow-income housing cre	edit. Add line 2 and line 3		4		00	
5			sing credit on line 4 that is from m passive activities, enter -0		5		00	
6	Subtract line 5 from line 4					00		
7	7 Enter the allowable low-income housing credit from passive activities. See instructions						00	
8	B Low-income housing credit carryover from prior year					00		
9	Add line 6 thro	ough line 8			9		00	
10		- V	come housing credit allocated	<u> </u>				
	Corporation na	ime		California corporation	on number Am	ount of credit allocated		
	Total amount o	of low-income housing	credit allocated. If you are not	a corporation, enter -0	10		00	
11		·	redit. Subtract line 10 from line	•			00	

## Part II Carryover Computation

19 Applicable percentage. See General Information B. . .

20 Multiply line 18 by line 19. See Specific Line Instructions for

12	a Credit claimed. Enter the amount of the credit claimed on the		-			ı
	See instructions. ( <b>Do not</b> include any assigned credit claimed on form FTB 3544					00
12	2 b Total credit assigned. Enter the total amount from FTB 3544, column (g).  If you are not a corporation, enter -0 See instructions					
13	Carryover to future years. Add line 12a and line 12b, subtract the result from line 11					
Pa	art III Basis Recomputations. Complete this part only if the bas	sis in a	a project or building has d	ecreased. Use additional sl	neets if necessary.	
			(a) Building 1	(b) Building 2	(c) Total	
14	Date building was placed in service (month/year)	14				
15	BIN	15		O' C		
16	Eligible basis of building. See General Information C	16				
17	Low-income portion (lesser of unit percentage or floor-space percentage). See instructions	17				

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