TAXABLE YEAR CALIFORNIA FORM

2023 Low-Income Housing Credit

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		fornia tax return. n your California tax return			SSN	or ITIN CA Corporation no. FEIN			
Buil	ding identification	number (BIN). If more than	n one building, attach a list of all B	INs for this credit.	California	a Secretary of State (SOS) file number			
Pa	rt I Available	Credit							
	☐ Yes ☐ No	o If "Yes," complete P	building decreased since you art III before continuing. See	General Information C.		a Tax Credit Allocation Committee?			
3	Enter any affilia	y affiliated corporation or pass-through low-income housing credits from other entities below. See instructions.							
	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 affiliated corporation or pass-through credit(s)			
	Corporation	FTB 3521, line 10 of the affiliated corporation				00			
	S corporation shareholder	Schedule K-1 (100S), line 13a				00			
	Beneficiary	Schedule K-1 (541), line 13d				00			
	Partner or LLC member	Schedule K-1 (565 or 568), line 15b				00			
	Current year lo	w-income housing cred	ng credit. Add the amounts in dit. Add line 2 and line 3 ing credit on line 4 that is from a passive activities, enter -0	n passive activities.	4 _	00			
6	Subtract line 5	from line 4			6 _	00			
7	Enter the allow	able low-income housi	ng credit from passive activition	es. See instructions	7 _	00			
8	Low-income h	ousing credit carryover	from prior year		8 _	00			
9	Add line 6 through line 8								
10 Corporations only: Amount of low-income housing credit allocated to affiliated corporations. See instructions.									
	Corporation na	me		California corporatio	n number	Amount of credit allocated			
	Total amount o	of low-income housing o	credit allocated. If you are not	a corporation, enter -0	10 _	00			
11	Total available	low-income housing cr	edit. Subtract line 10 from line	e 9	11 _	00			

Part II Carryover Computation

12	a Credit claimed. Enter the amount of the credit claimed on th See instructions. (Do not include any assigned credit claimed on form FTB 354)	12a	00				
12	2 b Total credit assigned. Enter the total amount from FTB 3544, Part A, column (g). If you are not a corporation, enter -0 See instructions						
13	Credit carryover available for future years. Add line 12a and line	12b, sı	ubtract the result from li	ne 11 13	000		
Pa	rt III Basis Recomputations. Complete this part only if the b	asis in a	a project or building has	decreased. Use additional s	heets if necessary.		
			(a) Building 1	(b) Building 2	(c) Total		
14	Date building was placed in service (month/year)	14					
15	BIN	15					
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					
18	Qualified basis of low-income building. Multiply line 16 by line 17	18					
19	Applicable percentage. See General Information B	19					
20	Multiply line 18 by line 19. See Specific Line Instructions for Part I, line 2	20					