TAXABLE YEAR CALIFORNIA FORM

2024 Low-Income Housing Credit

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		ornia tax return. ı your California tax return			☐ SSN o	r ITIN CA Corporation no. FEIN			
Building identification number (BIN). If more than one building, attach a list of all BINs for this credit.						California Secretary of State (SOS) file number			
 Pa	rt I Available (Credit							
2	Has the eligible basis of any project or building decreased since you received form CTCAC 3521A from the California Tax Credit Allocation Committee? Yes No If "Yes," complete Part III before continuing. See General Information C. Current year credit. See instructions								
Ū	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			
	Total pass-through low-income housing credit. Add the amounts in column (d)								
4	Current year low-income housing credit. Add line 2 and line 3								
5	Enter the amount of low-income housing credit on line 4 that is from passive activities. If none of the amount on line 4 is from passive activities, enter -0								
6	Subtract line 5	from line 4			6 _	00			
7	Enter the allowable low-income housing credit from passive activities. See instructions								
8	Low-income ho	ousing credit carryover	from prior year		8	00			
9	Add line 6 thro	dd line 6 through line 8							
10	Corporations o	only: Amount of low-in	come housing credit allocated	to affiliated corporations. See	e instructions.				
	Corporation name			California corporatio	California corporation number Amount of credit allocated				
	Total amount o	f low-income housing	credit allocated. If you are not	a corporation, enter -0	10	00			
11	Total available	low-income housing cr	redit. Subtract line 10 from line	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)		2a0					
12	12 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	3 Credit carryover available for future years. Add line 12a and line 12b, subtract the result from line 1113							
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						