

New York State Department of Taxation and Finance

# **Low-Income Housing Credit Allocation Certification**

**DTF-625** 

Do not file separately. Attach this form and Form DTF-625-ATT to your New York State corporation tax return or personal income tax return if required (see instructions).

Part	I — Allocation of credit — Completed by New Yo	rk State Division	of Housing and Co	mmunity Renew	al			
	Check if: Addition to qualified bas	is Ar	nended form	This prope	rty is recei	ving a federa	LIHC	
Add	ress of building (do not use PO box) (see instructions)		Name and address of	building owner receiv	ing allocation			
New	York State building identification number (BIN)		TIN of building owner	receiving allocation				
			TIN					
1a	Date of allocation <b>1b</b> Maxi	imum housing cr	edit dollar amount	allowable	1b.			
2	Date of allocation <b>1b</b> Maximum housing credit dollar amount allowable  Maximum applicable credit percentage allowable						%	
	Maximum qualified basis							
3b	Check here if the eligible basis used in the c	•						
	high-cost area provisions of Internal Revenue Coc to which the eligible basis was increased (see insti				3b.	1	%	
4	Percentage of the aggregate basis financed by tax							
5	Date building placed in service							
6								
	a Newly constructed and federally subsidized	d <b>b</b> Newly	constructed and r	not federally sub	sidized	<b>c</b> Existin	g building	
	d IRC section 42(e) rehabilitation expenditure	es federally subs	idized <b>e</b> 🗌 IRC	section 42(e) rehabil	itation expen	ditures <b>not</b> federa	lly subsidized	
Unde	r penalties of perjury, I declare that the allocation made is	in compliance with	the requirements of	Article 2-A of the N	ew York Sta	te Public Housi	ing I aw and	
	on 42 of the IRC, and that I have examined Part I of this for		•				•	
Signa	ature of authorized official	Name (please type o	r print)		Date			
Part	${f II}$ — ${f First ext{-year certification}}$ — ${f Completed}$ by buil	ding owner for fir	st year of credit pe	eriod only				
7a	Date building placed in service	<b>7b</b> Eligible b	asis of building (se	e instructions)	7b.			
8a	Original qualified basis of the building at close of first year of credit period							
8b	Are you treating this building as part of a multiple building project for purposes of IRC section 42  (see instructions)?							
	(see instructions)?					Yes	No	
9a	f box 6a or box 6d is checked, do you elect to reduce eligible basis under IRC section 42(i)(2)(B)?.					Yes	No	
9b	o you elect to reduce the eligible basis by disproportionate costs of non-low income units							
	(IRC section 42(d)(3))?					Yes	No	
10	Check the appropriate box for each election:							
а	Elect to begin credit period the first year after the	building is placed	d in service (IRC se	ection 42(f)(1))		Yes	No	
b	Elect <b>not</b> to treat large partnership as taxpayer (IRC section 42(j)(5))							
•	Elect minimum set-aside requirement (IRC section 42(g)) (see instructions) 20-50 40-60 25-60 (NYC only)					1 - 2		
С	Elect minimum set-aside requirement (IRC section	n 42(g)) <i>(see instr</i>	uctions) 20	-50 40-6	60	25-60 (NYC	only)	
d							oniy) 🔛	
d e		sing Law, section	n 21(5)(b))			40-90		

Caution: Read the instructions below under Signature	re <b>before</b> signing this part.						
Under penalties of perjury, I declare that the building identified in Part I of this form continues to qualify as part of a qualified low-income housing project and meets the requirements of Article 2-A of the New York State Public Housing Law and section 42 of the IRC, and that the qualified basis of the building has ▶ ☐ has not ▶ ☐ decreased for this tax year. I have examined this form and attachments, and to the best of my knowledge and belief, they are true, correct, and complete.							
Signature	Taxpayer identification number	Date					
Name (please type or print)							

#### Signature

Because Form DTF-625 requires an original signature each year and the form is not issued annually by the New York State Department of Housing and Community Renewal (DHCR), complete the following steps **after** you receive the form from DHCR:

- 1. Complete Part II of the form (do **not** sign the original).
- 2. After completing Part II, make a copy of the form.
- Complete all items in the signature section of the copy that you file with your tax return. Keep the original copy you receive from DHCR so that copies can be made from the unsigned original copy and used for filing with your future years' tax returns.
- Complete Form DTF-625-ATT for each building and attach it to the signed copy of Form DTF-625 you attach to your income tax return.
- 5. If the maximum applicable credit percentage allocated to the building in Part I, line 2, reflects an election made under IRC section 42(b)(2)(A)(ii), you must attach a copy of the election statement and, if the binding agreement specifying the housing credit dollar amount is contained in a separate document, a copy of the binding agreement to Form DTF-625 for the first tax year in which you claim the credit.
- If the housing credit dollar amount allocated in Part I, line 1b, reflects an allocation made under IRC section 42(h)(1)(E) or 42(h)(1)(F), you must attach a copy of the allocation document to Form DTF-625 for the first tax year you claim the credit.

Note: If you received more than one allocation (for example, an allocation the year the building was placed in service and a second allocation based on an addition to qualified basis), attach signed copies of both Forms DTF-625 to your return.

## Need help?



**Telephone assistance** is available from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday.

For business tax information, call the
New York State Business Tax
Information Center:

1 800 972-1233

For general information:

1 800 225-5829

To order forms and publications:

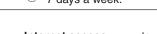
1 800 462-8100

From areas outside the U.S. and outside Canada:

(518) 485-6800



Fax-on-demand forms: Forms are available 24 hours a day, 7 days a week.



1 800 748-3676



Internet access: www.tax.state.ny.us



### Hotline for the hearing and speech impaired:

1 800 634-2110 from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), check with independent living centers or community action programs to find out where machines are available for public use.



**Persons with disabilities:** In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 1 800 225-5829.



If you need to write, address your letter to: NYS TAX DEPARTMENT TAXPAYER CONTACT CENTER W A HARRIMAN CAMPUS ALBANY NY 12227

## **Privacy notification**

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Director of Records Management and Data Entry, NYS Tax Department, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the United States and outside Canada, call (518) 485-6800.