## Low-Income Housing Credit Annual Statement

File this form with the building owner's New York State income tax or franchise tax return.
(See the instructions, Form DTF-625-ATT-I, for assistance completing this form.)

| Building owner's name as shown on return | Identification number |
| :--- | :--- |

## Part 1 - Compliance information

A New York State building identification number (BIN) from Form DTF-625
B Mark an $\boldsymbol{X}$ in one box if this Form DTF-625-ATT is for (see instructions):
$\square$ newly constructed or existing building $\square$ IRC section 42(e) rehabilitation expenditures
C Do you have in your records the original Form DTF-625 (or a copy of the original) signed and issued by the housing credit agency for the building in $\mathbf{A}$ ? (see instructions) $\qquad$
 If No, stop; do not complete Part 2 (see instructions).
D Did the building in A qualify as a part of a qualified low-income housing project and meet the requirements of New York State Public Housing Law Article 2-A and IRC section 42 as of the end of the tax year for which this form is being filed?

Yes


No
 If No, stop; do not complete Part 2 (see instructions).
E Was there a decrease in the qualified basis of the building in $\mathbf{A}$ for the tax year for which you are filing this form?
If Yes, see the instructions. If No, and the entire credit has been claimed in prior tax years, stop; do not complete Part 2.

## Part 2 - Computation of credit


(continued on back)

| 14 | Enter the amount from line 13 on the front page | 14 | . 00 |
| :---: | :---: | :---: | :---: |
| 15 | Disallowed credit due to federal grants (see instructions). | 15 | . 00 |
| 16 | Credit allowed for building for tax year. Subtract line 15 from line 14, but do not enter more than the amount shown on Form DTF-625, Part 1, line 1b $\qquad$ | 16 | . 00 |
| 17 | Taxpayer's proportionate share of credit for the year (see instructions) | 17 | . 00 |
| 18 | Adjustments for deferred first-year credit (see instructions) | 18 | . 00 |
| 19 | Taxpayer's credit. Add lines 17 and 18. Enter here and on Form DTF-624, Part 1, line 3 <br> (see instructions for Form DTF-624) | 19 | . 00 |

