

Department of Taxation and Finance

Low-Income Housing Credit **Allocation and Certification** Tax Law – Article 1, Section 18

This property is receiving a federal LIHC

Part 1 – Allocation of credit – Completed by New York State Division of Housing and Community Renewal (DHCR) (see instructions) Mark an X in the box if: Addition to qualified basis Amended form Address of building (do not use PO Box) Name and address of building owner receiving allocation New York State building identification number (BIN) Taxpayer identification number of building owner receiving allocation

(See instructions, Form DTF-625-I, for assistance in completing this form.)

1a Date of allocation (mm-dd-yyy)	<i>it</i> ) <b>1b</b> Maximum housing credit dollar amount allowable	1b	.00
2 Maximum applicable credit	percentage allowable	2	%
3a Maximum qualified basis		3a	.00
3b Mark an X in the box if	the eligible basis used in the computation of line 3a was increased		
under the high-cost area pr	ovisions of Internal Revenue Code (IRC) section 42(d)(5)(B). Enter		
the percentage to which the	eligible basis was increased	3b	%
4 Percentage of the aggregat	e basis financed by tax-exempt bonds <i>(if zero, enter 0)</i>	4	%
	· · · · · · · · · · · · · · · · · · ·		

5 Date building placed in service (mm-dd-yyyy)

6 Mark an X in the boxes that describe the allocation for the building (mark all that apply):

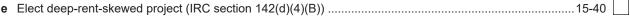
- Newly constructed and federally subsidized а
- Newly constructed and not federally subsidized b
- IRC section 42(e) rehabilitation expenditures not federally subsidized
- ☐ Allocation subject to nonprofit set-aside under IRC section 42(h)(5) f

- Existing building С
- d IRC section 42(e) rehabilitation expenditures federally subsidized

Under penalties of perjury, I certify that the allocation made is in compliance with the requirements of Article 2-A of the New York State Public Housing Law (PHL) and section 42 of the IRC, and that I have examined Part 1 of this form and to the best of my knowledge and belief, the information is true, correct, and complete. Signature of authorized official Name (type or print) Date

Part 2 – First-year certification – Completed by building owner with respect to the first year of the credit period (see instructions)							
7a Date building placed i	n service (mm-dd-yyyy)	<b>7b</b> Eligible basis of building	7b		.00		
8a Original qualified basi	s of the building at close of first	vear of credit period	8a		.00		

8b	Are you treating this building as part of a multiple building project for purposes of IRC section 42?	No 🗌
	If box 6a or box 6d is marked, do you elect to reduce eligible basis under IRC section 42(i)(2)(B)?	No
	For market-rate units above the average quality standards of low-income units in the building, do you elect to reduce the eligible basis by disproportionate costs of non-low-income units (IRC section 42(d)(3)(B))? Yes Mark the appropriate box for each election:	No
	Caution: Once made, the following elections are irrevocable. a Elect to begin credit period the first year after the building is placed in service (IRC section 42(f)(1))	No
	<b>b</b> Elect <b>not</b> to treat large partnership as taxpayer (IRC section 42(j)(5))	
	c Elect minimum set-aside requirement (IRC section 42(g))   20-50 test 40-60 test   Average income 25-60 (NYC	; only)
	d Elect minimum set-aside requirement (PHL, section 21(5)(b))40-90	







Under penalties of perjury, I certify that the building described on this form qualifies as part of a qualified low-income housing project and meets the requirements of New York State PHL Article 2-A and IRC section 42. I have examined this form and all documents submitted with it, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature of building owner or authorized individual	Taxpayer identification number	Date
Name (type or print)		

## Where to file

Send your properly completed Form(s) DTF-625 to the following address:

INCOME TAX AUDIT ADMINISTRATOR 1 IFDAB W A HARRIMAN CAMPUS ALBANY NY 12227-4299

If not using U.S. Mail, see Publication 55, Designated Private Delivery Services.

Additionally, you must file Form DTF-625-ATT, *Low Income Housing Credit Annual Statement*, with your return for each year of the 15-year compliance period. Use Form DTF-624, *Claim for Low-Income Housing Credit*, to claim the credit. See the instructions for these forms for filing information.



