



Certificate LIHC Low-Income Housing Credit Allotment

2014
Massachusetts
Department of
Revenue

For calendar year 2014 or taxable year beginning

and ending

Name of recipient	Social Security or Federal Identification number		
Street address	City/Town	State	Zip
Name of project	Building identification number		
Street address	City/Town	State	Zip
Name of project owner	Federal Identification number		
Street address	City/Town	State	Zip

Taxpayer's Credit Share

This statement is issued by the owner of a project that is eligible to claim the Massachusetts Low-Income Housing Credit (LIHC) to each recipient to whom the owner has allocated a portion of the LIHC in accordance with the organizational documents governing the owner. The recipient should enter the amount of the credit being received from the project on the LIHC line of the appropriate tax return. Retain this statement with your records.

Allotment Information

1 Amount of allotted credit **1**

2 Date of filing of Election of Early Tax Credit (if applicable) _____