YEAR CALIFORNIA FORM

 **California Low-Income Housing Tax Credit**

 **2 0** **Credit Issued by Building 3 5 2 1 A**

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**Note:** Retain this certificate and make a copy available to the Franchise Tax Board upon request.

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| Building Identification Number (BIN): | Project’s Street Address and Building Count: | Project’s City, State, and Zip code: | Project or Building Qualified Basis: | Amount of Credit Awarded: |  | Date Placed In Service: |
| Year 1 | Year 2 | Year 3 | Year 4 | Total: |
| CA-  -      |      , Bldg.     of     |      , CA       | $      | $      | $      | $      | $      | $      |       |
| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
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| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
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| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
| CA- -    |      , Bldg.     of  |      , CA       | $      | $      | $      | $      | $      | $      |       |
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