## STATE OF DELAWARE

## FORM 2001AC 0809 APPLICATION AND COMPUTATION SCHEDULE FOR CLAIMING DELAWARE NEIGHBORHOOD ASSISTANCE TAX CREDITS

**DIVISION OF REVENUE** 820 North French St. P.O. Box 8763 Wilm. DE 19899-8763

FORM 2001AC MUST BE COMPLETED AND SUBMITTED ON OR BEFORE THE LAST DAY OF THE MONTH AFTER THE END OF THE STATE'S FISCAL YEAR END DURING WHICH THE NEIGHBORHOOD ASSISTANCE PROPOSAL WAS APPROVED.

PART 1 - NAME AND ADDRESS  1.				TAX PERIOD	TAX PERIOD ENDING DATE	
		or				
F	Federal Employer Identification N	Number Social S	Security Number			
3.	Name of Applicant: Address: Delaware Address (if different from abo	State: State:	Zip Code: Zip Code:	•		
5.	Contact Person	Telephone Numb	er Fax Number	E-ma	E-mail Address	
РΑ	RT B - DELAWARE NEIGH	BORHOOD ASSIST	ANCE TAX CREDIT COMPUT	ATION		
edu	Amount of investment in offering ucation, crime prevention and contact copy of the approved application.	mmunity services to nei				
2.	Multiply Line 1 by 50%			\$	.50	
3.	Delaware Neighborhood Assistance Tax Credit before limitation			\$		
4.	Maximum amount of credit			\$	50,000	
5.	Delaware Neighborhood Ass	istance Tax Credit. En	ter the smaller of Line 3 or Line 4	. \$		

STOP: Enter the amount from Line 5 on Form 700, Business Tax Credit, Section A, Line 2 or on Form PIT-CRS, Personal Income Tax Credit Schedule, Section A, Line 2.

THE TOTAL AMOUNT OF CREDITS APPROVED BY THE HOUSING DIRECTOR WITH RESPECT TO ALL APPLICANTS FOR THE DELAWARE NEIGHBORHOOD TAX CREDITS SHALL NOT EXCEED \$1,000,000 IN ANY FISCAL YEAR. CREDITS WILL BE AWARDED IN CHRONOLOGICAL ORDER BASED UPON THE DATE AND TIME EACH CONTRIBUTION IS APPROVED BY THE DELAWARE STATE HOUSING AUTHORITY. IF A CREDIT AWARD RESULTS IN EXCEEDING THE \$1,000,000 LIMITATION FOR THE FISCAL YEAR IN WHICH IT IS AWARDED, THE AMOUNT BY WHICH SUCH CREDIT AWARD EXCEEDS \$1,000,000 SHALL CARRY OVER TO THE SUCCEEDING FISCAL YEAR AND SHALL RECEIVE PRIORITY FOR THAT YEAR.

**DELAWARE STATE HOUSING AUTHORITY** 

TITLE

DATE



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