

Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site (www.irs.gov).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

Issuer's Quarterly Information Return for Mortgage Credit Certificates (MCCs)

▶ **For Privacy Act and Paperwork Reduction Act Notice, see back of form.**

Calendar quarter ending: March June September December Year ▶

Part I Reporting Authority

Issuer's name		Employer identification number
Issuer's address (number and street or P.O. box no. if mail is not delivered to street address)	Room/suite	Election date
City, town, or post office, state, and ZIP code		Nonissued bond amount
Is this the final return to be filed for this MCC program? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Computation of the Total Amount of Mortgage Credit Certificates

(a) Certified Indebtedness Amount of Mortgage Credit Certificates	(b) Certificate Credit Rate	(c) Amount of Mortgage Credit Certificates Issued (column (a) × column (b))
1		
2		
3		
4		
5		
6		
7 Total amount of MCCs issued during the current calendar quarter (add lines 1 through 6)		
8 Total amount of MCCs issued for all prior quarters for the MCC program related to the nonissued bond amount in Part I		
9 Aggregate amount of MCCs issued for this MCC program (add lines 7 and 8)		
10 Does line 9 exceed 25% of the nonissued bond amount in Part I? (If "Yes," see instructions.)		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part III Revocation of Qualified Mortgage Credit Certificates

Name	Address	Social Security Number

Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than representative of issuer) is based on all information of which preparer has any knowledge.		
	▶ _____ Signature of authorized representative of issuer	▶ _____ Date	▶ _____ Title
Paid Preparer's Use Only	Preparer's signature ▶ _____	Date ▶ _____	Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN _____
	Firm's name (or yours if self-employed) and address ▶ _____	EIN ▶ _____	ZIP code ▶ _____