Texas Certified Investor Annual Notification of Credit Transfer

A Certified Investor in a Texas Certified Capital Company (CAPCO) must complete and attach a Transfer Affidavit (Form 25-121) for each insurer to whom credits are transferred.

Notification for Tax Year						• 5	See instructions on back.
Name of Certified Investor					Тах	kpayer Number	
Address					1		
City			St	ate		ZIP Code	
Name of Contact Person							
Phone Number (Area code and number) F/	AX Number (Area code and nu	umber)	Email a	ldress			
CAPCO THAT RECEIVED INVESTME	NT	AMOUNT OF ORIGINAL INVESTMENT			то	-	O BE TRANSFERRED
	\$	\$			\$		
Insurer Receiving Credit Transfer			Taxpayer Nu	mber		AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name		Contact P	hone (Area co	de and number)	\$		\$
Insurer Receiving Credit Transfer			Taxpayer Nu	mber		AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name			Contact Phone (Area code and number)		\$		\$
Insurer Receiving Credit Transfer			Taxpayer Number			AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name		Contact P	hone (Area co	de and number)	\$		\$
Insurer Receiving Credit Transfer			Taxpayer Number			AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name			Contact Phone (Area code and number)		\$		\$
Insurer Receiving Credit Transfer			Taxpayer Number			AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name		Contact P	Contact Phone (Area code and number)		\$		\$
Insurer Receiving Credit Transfer			Taxpayer Number			AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name		Contact Phone (Area code and number)		\$		\$	
Insurer Receiving Credit Transfer			Taxpayer Number			AMOUNT OF CREDIT TRANSFERRED	PROPORTIONATE ANNUAL SHARE OF CREDIT AVAILABLE TO EACH INSURER
Transferee Contact Name Co		Contact P	Contact Phone (Area code and number)		\$		\$
You have certain rights under Chapters 5 request and correct information we have or or phone number listed on this form.				TOTALS	\$		\$
I declare that the information in this document and all attachments are true and correct to the best of my knowledge and belief.							
here							
Preparer's Name (Please print)							
Daytime Phone (Area code and number)					Date		

INSTRUCTIONS

This form must be filed annually by all certified investors who elect to transfer CAPCO tax credits during the year. A certified investor transferring credits from investments in more than one CAPCO must file a separate NOTIFICATION form for credit transfers from each CAPCO.

A Transfer Affidavit for EACH insurer receiving a credit transfer must accompany this form. Certfied investors must report transferred credits to the Comptroller only once per tax year for each CAPCO.

Once filed, this notification cannot be revoked for any purpose.

This form is due no later than January 10 following the tax year that credits are transferred. Forms received after this date will be considered as the filing for the next tax year.

Only certified investors may transfer CAPCO tax credits.

Retroactive transfers are not allowed.

All transfers must comply with the requirements of and are subject to the limitations in Rule 34 TAC §3.830.

Insurers receiving a transfer of CAPCO credits are limited to using their proportionate share of the CAPCO credits that the original certified investor would have been entitled to use during a tax year. (See example, below.)

EXAMPLE of Maximum Annual Credit Allowed Determination

Company A (certified investor) has \$4 million in tax credits and is therefore entitled to use a maximum of \$1 million in tax credits per year over 4 years. Company A is only able to use \$500,000 in the first year of the credits, but is allowed to roll the unused \$500,000 forward to future years.

For the second tax year, Company A has a balance of \$3.5 million in tax credits and is allowed to use a maximum of \$1 million in tax credits that year, except that it transfers \$1 million in credits to Company B and \$1 million in credits to Company C. In the subsequent tax years, the total allowable credits are \$1 million between the three companies. Assuming that beginning in Year 2, the three companies use the maximum annual credit allowed, the credits would be applied as follows:

	<u>COMPANY</u>	CREDIT BALANCE	CREDIT ALLOWED
Year 2	А	\$1,500,000	\$ 333,334 (\$500,000 carried forward to future years)
	В	\$1,000,000	333,333
	С	\$1,000,000	333,333
			\$1,000,000
Year 3	А	\$1,166,666	\$ 333,334
	В	\$ 666,667	333,333
	С	\$ 666,667	333,333
			\$1,000,000
Year 4	А	\$833,332	\$ 333,332
	В	333,334	333,334
	С	333,334	333,334
			\$1,000,000
Year 5	А	\$500,000	\$ 500,000 (unused balance from year 1)
	В	0	0
	С	0	0
			\$ 500,000

Questions regarding submission of the Annual Notification of	Questions regarding submission of the Annual Notification of
Credit Transfer or the Transfer Affidavit for the 2008 and/or	Credit Transfer or the Transfer Affidavit for any programs issued
2011 programs should be directed to:	after 12/15/2022 should be directed to:
Texas Comptroller of Public Accounts	CAPCO PROGRAM ADMINISTRATOR
Phone: 512-463-4276 Fax: 512-463-4978	Phone: 512-463-4124 FAX: 512-463-4368
Email: Insurance.Tax@cpa.texas.gov	Email: corrine.hall@ttstc.texas.gov

Return form to:

Mail: STATE COMPTROLLER Attn: Revenue Accounting Division 111 E. 17th Street - Austin, TX 78774-0100 800-531-5441, ext. 3-4126 Via Email: Insurance.Tax@cpa.texas.gov