(Rev. October 2012)

Lender's Information Return for Mortgage Credit Certificates (MCCs)

For calendar year ending 2023

▶ Information about Form 8329 and its instructions is at www.irs.gov/form8329.

OMB No. 1545-0922

Department of the Internal Revenue S		formati	For calendar year en on about Form 8329 and it		 www.irs.gov/for	rm8329.	
	Reporting Authority						
Lender's name						Employer identification number	
Lender's address (number, street, or P.O. box no., if mail is not delivered to street address)							Room/suite
City, town, or po	ost office, state, and ZIP cod	de					
	Issuing Authority						
Issuer's name						Employer identification number	
Indiana Housing & Community Development Authority Issuer's address (number, street, or P.O. box no., if mail is not delivered to street address) Room/suite						35-1485172 Election date	
30 S. Meridian	n St	93		900	6/14/2021		
City, town, or po	ost office, state, and ZIP co	de		Nonis		Nonissued bond am	ount
Indianapolis,	IN 46204	łanan	Cradit Cartificatos (If	more than five re	ocinionte soc	inetructions \	150,000,000
Part III Recipients of Mortgage			Credit Certificates (If more than five recipients, see				
(a) Name(s)			Address Do not use a P.O. box number.			(c) Social Security Number(s)	
1							
2							
3							
4							
Part IV	Computation of the entered on each lin	e with	al Amount of Mortgag information entered or (e)	ge Credit Certific n each correspon	cates (Note: ading line in P	Part III.)	(g)
Date of Issue of MCC		Cer	tified Indebtedness Amount of Each MCC Issued	Certificate Credit Rate		Amount of MCC Issued (column (e) x column (f))	
1							
2							
3			1				
4							
5							
6 Total am	ount of MCCs issued	. (See i	nstructions.)		🕨		
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than representative of lender) is based on all information of which preparer has any knowledge.						
	Signature of authorized representative of lender Date Director of Hon Title					neownership	
Paid Preparer	Print/Type preparer's name Preparer's signature Date					Check if if self-employed	
Preparer Use Only	Firm's name					Firm's EIN ▶	
300 U.i.y	Firm's address ▶					Phone no.	