

RPT

NEW YORK CITY DEPARTMENT OF FINANCE

REAL PROPERTY TRANSFER TAX RETURN

(Pursuant to Title 11, Chapter 21, NYC Administrative Code)

TYPE OR PRINT LEGIBLY

If the transfer involves more than one grantor or grantee or a partnership, the names, addresses and Social Security Numbers or Employer Identification Numbers of all grantors or grantees and general partners must be provided on Schedule 3, page 3.



| | GRANTOR ▼ | | | | | | | |
|----------------------------------|--|--------------------------------|-------------------------|--|--|--|--|--|
| | Name | | | | | | | |
| • | Grantor is a(n): individual partnership (must complete Schedule 3) (check one) corporation other | | Telephone | Number | | | DO NOT WRI | TE IN THIS SPACE |
| • | Permanent mailing address <u>after</u> transfer (number and street) | | | | | | FOR OFF | TE IN THIS SPACE ICE USE ONLY |
| • | City and State | | Zip Code | | | | | |
| • | | ECURITY NUME | BER | | | | | |
| | OR OR | | | | | • | RETURN NUMBER | A |
| | GRANTEE V | | | | | | | |
| | Name | | | | | | | |
| • | Grantee is a(n): individual partnership (must complete Schedule 3) (check one) corporation other | | Telephone | Number | | | | |
| • | Permanent mailing address <u>after</u> transfer (number and street) | | | | | • | DEED SERIAL NUM | IBER ▲ |
| | | | | | | | | |
| • | City and State | | Zip Code | | | | | |
| • | EMPLOYER IDENTIFICATION NUMBER SOCIAL SI | ECURITY NUME | BER | | | | | |
| | OR OR | ' - | | | T | | | |
| | | | | - | | _ | | |
| | | | | | | • | NYS REAL ESTATE | E TRANSFER TAX PAID ▲ |
| | PROPERTY LOCATION V | | , | | | | NYS REAL ESTATE | TRANSFER TAX PAID A |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL Address (number and street) Apt. | Y. ATTACH Borough | A RIDER | | SPACE IS REQU | IRED # of | Square | ■ Assessed Value |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL | | A RIDER | IF ADDITIONAL | I | IRED | | |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL Address (number and street) Apt. | | A RIDER | IF ADDITIONAL | I | IRED # of | Square | ■ Assessed Value |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL Address (number and street) Apt. | | A RIDER | IF ADDITIONAL | I | IRED # of | Square | ■ Assessed Value |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL Address (number and street) Apt. | | | IF ADDITIONAL Block | Lot | # of Floors | Square Feet | ■ Assessed Value |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL Apt. No. No. | Borough | • 1 | IF ADDITIONAL Block | I | # of Floors | Square Feet | Assessed Value of Property |
| | PROPERTY LOCATION V LIST EACH LOT SEPARATEL Address (number and street) Apt. No. DATE OF TRANSFER TO GRANTEE: CONDITION OF TRANSFER V See Ins | Borough | ons | IF ADDITIONAL Block | Lot OF INTEREST | # of Floors | Square Feet | Assessed Value of Property |
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| Form NYC-RPT | | | | Page |
|---|---|------------------------|--------------------------|--------------|
| ● TYPE OF PROPERTY (✓) | TYPE OF INTEREST (| √) | | |
| a. | b. | d to record a doc Fee | | c. |
| SCHEDULE 1 - DETAILS OF CONSI | DEPATION Y | | | |
| COMPLETE THIS SCHEDULE FOR ALL TRANSFERS AFTER CO | | AGES 5 THROUG | GH 11. ENTER "ZERO" ON L | INE 11 IF |
| THE TRANSFER REPORTED WAS WITHOUT CONSIDERATION. | | _ | | |
| 1. Cash | | ● 1. | | |
| 2. Purchase money mortgage | | ● 2. | | |
| 3. Unpaid principal of pre-existing mortgage(s) | | ● 3. | | |
| Accrued interest on pre-existing mortgage(s) | | | | |
| Accrued real estate taxes | | | | |
| | | | | |
| 6. Amounts of other liens on property | | | | |
| 7. Value of shares of stock or of partnership interest | | | | |
| 8. Value of real or personal property received in exch | nange | ● 8. | | |
| Amount of Real Property Transfer Tax and/or othe are paid by the grantee | er taxes or expenses of the grantor which | ● 9. | | |
| 0. Other (describe): | | ● 10. | | |
| TOTAL CONSIDERATION (add lines 1 through 10 of Schedule 2) (see instructions) | 0 - must equal amount entered on line 1 | | | |
| | relating to transfers of cooperative | | | |
| settlements and transfers of prop | perty to a business entity in return f | or an intere | est in the entity. | |
| SCHEDULE 2 - COMPUTATION OF | TAX V | | | |
| | | | Payment Enclosed — | |
| A. Payment Pay amount shown on line | 14 - See Instructions | | | |
| Total Consideration (from line 11, above) | | ● 1. | | |
| 2. Excludable liens (see instructions) | | | | |
| B. Consideration (Line 1 less line 2) | | | | |
| . Tax Rate (see instructions) | | | | % |
| Fax Nate (see instructions)Percentage change in beneficial ownership (see in | | | | % |
| Tayable consideration (multiply line 2 by line 5) | 1011 40110110/ | • 5. | | |

| A. | Payment | Pay amount shown on line 14 - See Instructions | | Fayment Enclosed | |
|-----|-------------------------|---|-----|------------------|----|
| 1 | Total Consideration | (from line 11, above) | 1. | | |
| 2. | Excludable liens (se | e instructions) | 2. | | |
| 3. | Consideration (Line | 1 less line 2) | 3. | | |
| 4. | Tax Rate (see instru | ctions) | 4. | | % |
| 5. | | in beneficial ownership (see instructions) | 5. | | % |
| 6. | Taxable consideration | on (multiply line 3 by line 5) | 6. | | |
| 7. | Tax (multiply line 6 | by line 4) | 7. | | |
| 8. | Credit (see instruction | ons) | 8. | | |
| 9. | Tax due (line 7 less | line 8) (if the result is negative, enter zero) | 9. | | |
| 10. | Interest (see instruc | tions) | 10. | | |
| 11. | Penalty (see instruc | tions) | 11. | | |
| 12. | Total tax due (add li | nes 9, 10 and 11) | 12. | | |
| 13. | Filing Fee | | 13. | 25 | 00 |
| 14. | Total Remittance D | Pue (line 12 plus line 13) | 14. | | |

| NOTE If additional space is needed, attach copies of this schedule or an addendum listing all of the information required GRANTOR(S)/PARTNER(S) | | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| GRANTOR(S)/PARTNER(S) | NOTE If additional space is needed, attach copies of this schedule or an addendum listing all of the information required below. | | | | | | | |
| OKANTON(O)/I AKTNEN(O) | GRANTOR(S)/PARTNER(S) | | | | | | | |
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| NAME SOCIAL SECURITY N | NOMBER | | | | | | | |
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| PERMANENT MAILING ADDRESS AFTER TRANSFER OR | | | | | | | | |
| CITY AND STATE ZIP CODE EMPLOYER IDENTIFICATION | ON NUMBER | | | | | | | |
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| NAME SOCIAL SECURITY N | NUMBER | | | | | | | |
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| OR | | | | | | | | |
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| GRANTEE(S)/PARTNER(S) | | | | | | | | |
| NAME SOCIAL SECURITY N | | | | | | | | |
| | NUMBER | | | | | | | |
| | NUMBER | | | | | | | |
| PERMANENT MAILING ADDRESS AFTER TRANSFER | NUMBER | | | | | | | |
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Form NYC-RPT

GRANTOR'S ATTORNEY Name of Attorney Telephone Number) Address (number and street) City and State Zip Code EMPLOYER SOCIAL OR IDENTIFICATION SECURITY NUMBER NUMBER Name of Attorney Telephone Number) Address (number and street) City and State Zip Code EMPLOYER SOCIAL OR IDENTIFICATION SECURITY NUMBER NUMBER CERTIFICATION I swear or affirm that this return, including any accompanying schedules, affidavits and attachments, has been examined by me and is, to the best of my knowledge, a true and complete return made in good faith, pursuant to Title 11, Chapter 21 of the Administrative Code and the regulations issued thereunder. GRANTOR GRANTEE Sworn to and subscribed to Sworn to and subscribed to EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER before me on this _____ day before me on this _____ day Name of Grantor Name of Grantee Signature of Notary Signature of Grantor Signature of Notary Signature of Grantee GRANTEE: To ensure that your property and water/sewer tax bills are sent to the proper address you must complete the Registration forms included in this packet. Owner's Registration Cards can also be obtained by calling the Department of Finance at (718) 935-9500.

| | SCHEDULE A - IRANSFER BY REFEREE OR RECEIVER V |
|------------------|---|
| N O T E | The consideration for a transfer by a referee or receiver under foreclosure or execution is the amount bid for the property or economic interest therein and the costs paid by the purchaser, plus the amount of any pre-existing mortgages, liens or other encumbrances remaining on the property after the transfer, whether or not the underlying indebtedness is assumed. |
| 1. | Was this transfer the result of a court ordered sale pursuant to foreclosure or execution? (✓) |
| 2a. | Status of grantee: (🗸) Nominee of plaintiff Plaintiff in foreclosure action Assignee of plaintiff Transferee of successful bidder Other (describe): |
| 2b. | Priority of mortgage foreclosed upon: ■ ☐ first ☐ second ☐ third or other |
| 2c. | Amount of foreclosure judgment2c. \$ |
| 2d. | Price bid by grantee (enter here and on Schedule 1. See instructions)2d. |
| 2e. | Costs paid by grantee (enter here and on line 10, Schedule 1)2e. |
| 2f. | Amount of remaining mortgages, liens or other encumbrances (enter here and on Schedule 1. See instructions)2f. |
| 3. | If the answer to line 1 above is "No", state the reason for this transfer: |
| A. | Name and address of cooperative housing corporation: |
| | Zip Code: |
| B. | 1) Is this an initial transfer of shares from either a cooperative housing corporation or a sponsor? (🗸) |
| | 2) If "yes," enter the date the NYC Real Property Transfer Tax was paid on the transfer of land and/or building to the cooperative housing corporation |
| | If this initial transfer is more than 2 years from the above date, enter the date the first of these initial transfers was made |
| C. | Is this a transfer of an individual unit in a housing company organized and operating pursuant to the provisions of articles two, four, five, or eleven of the Private Housing Finance Law? (✓) |
| | If "YES," you are not subject to the Real Property Transfer Tax. However, you must file a return. |
| N | If you answered "YES," to question B above, you may be entitled to a credit. Complete lines 1 through 4 below. If you answered "No," to question B above, you are not entitled to a credit. |
| CR | EDIT CALCULATION |
| 1. | Enter the amount of NYC Real Property Transfer Tax paid on conveyance of underlying real property to cooperative housing corporation |
| 2. | Enter the number of shares transferred in this transaction |
| 3. | Enter the total number of outstanding shares of the cooperative housing corporation including any shares held by the corporation |
| 4. | Amount of credit (divide line 2 by line 3 and multiply the result by line 1. Enter here and on line 8, Schedule 2)4. |



| | SCHEDOLE | | | FORECLOSURE | <u> </u> | | | |
|------------------|--|-----------------------|---|--|--|---------|------------------|-----------|
| N O T E | the mortgage debt is taxable. The consideration is the amount of the outstanding mortgage debt and unpaid accrued interest, plus the amount of any other mortgages, liens or encumbrances remaining on the property or economic interest or the underlying real property after the transfer, | | | | | | | |
| 1. | Status of grante Mortgagee Other (desc | | Nominee of mortga | _ | ssignee of mortgagee | | | |
| 2. | Priority of morto | gage in default: | first | second | third or other | | | |
| 3. | | , 0 | mortgagee at time ere and on line 3 of | | 3a. | | | |
| | b. Accrued in | terest (enter here a | and on line 4 of Sch | edule 1) | 3b. | | | |
| 4. | | | | naining on the real properedule 1. See instruction | erty or economic | | | |
| | | | | | | | | |
| | SCHEDIII E I | D - TDANSEED DIE | SUANT TO DADTIAL | OR COMPLETE LIQUIDA | ATION OF CORPORATION, | DADTNED | SUID OD OTHER EN | TITV V |
| SE | | S AND SCHEDULE M. | SOANT TO PARTIAL | OK COMPLETE ENGOIDS | THOM OF CORPORATION, | PARTILL | SHIP OR OTHER EN | |
| N | | | | | | | | |
| O T E | | | | | nths of liquidation of the detaction et and liabilities at the tin | | | d to be a |
| | COMPUTAT | TION OF TAX B | SASE | | | | | |
| 1. | Fair market valu | ue of real property o | or economic interest | therein at the time of li | quidation1. | | | |
| 2. | Amount of mort | gages or other liens | or encumbrances | on real property or ecor | nomic interest therein2. | | | |
| 3. | 3. Tax base: Compare line 1 and line 2, enter the greater of the two here and on line11, Schedule 13. | | | | | | | |
| IF, | IF, PURSUANT TO THE INSTRUCTIONS, YOU ARE FILING MORE THAN ONE SCHEDULE D, IDENTIFY THE PROPERTY THAT THIS SCHEDULE D REFERS TO. | | | | | | | |
| | BOROUGH | вьоск | LOT | | ADDRESS | | FAIR MARKET | VALUE |
| | | | | | | | | _ |
| $\overline{}$ | | 1 | I | L | | | 1 | |

| | SCHEDOLE E - TRANSFER BY OR TO AN AGENT, DOMINIT, STRAWINA | TOR COMBON |
|----------|---|---|
| N O T E | A transfer from an agent, dummy, strawman or conduit to a principal or from a principal to an ager exempt from the Real Property Transfer Tax. Complete questions 1 through 8 below to establish the cl | |
| 1. | Name and address of party from whom the property or economic interest was acquired by grantor: | |
| 2. | Date of acquisition: | |
| 3. | Is this conveyance either a transfer from an agent to a principal or from a principal to an agent? (🗸) If "YES," attach a copy of agency agreement or affidavit of explanation. | YES |
| 4. | Amount of Real Property Transfer Tax paid upon acquisition by grantor | |
| 5. | Is this transfer part of a transfer to and from a corporation for the sole purpose of acquiring mortgage final | ancing? (✓) □ YES □ NO |
| 6. | Is this transfer to a dummy, strawman, or conduit from a principal or vice versa? (✓) | YES NO |
| 7. | If this is a transfer to an agent, dummy, strawman, or conduit, is the grantee actively engaged in a busine | ess? (🗸) 🗌 yes 🔲 no |
| 8. | If the answers to questions 3, 5, 6 and 7 above are all "No," describe the relationship of the grantor and transfer: | he grantee and the purpose of the |
| | | |
| | SCHEDULE F - TRANSFER TO BUSINESS ENTITY IN RETURN FOR AN INTEREST IN 1 | THE BUSINESS ENTITY V |
| SE | EE SCHEDULE M AND INSTRUCTIONS. | THE BOOMESO ENTITY |
| NOT E | A transfer of property or an economic interest therein to a corporation in exchange for shat taxable, even where there is no simultaneous exchange of shares of stock for the real proper if the transfer is part of a plan to form a corporation for the purpose of holding the property transfer to a partnership as a contribution of partnership assets may be similarly taxable. | erty or economic interest therein, |
| 1. | Relationship of grantee to grantor(s) immediately after the transfer: (🗸) | |
| | ☐ Corporation wholly owned by grantor(s) ☐ Partnership consisting wholly of | grantor(s) |
| | ☐ Corporation owned by grantor(s) and other(s) ☐ Partnership consisting of granton | or(s) and other(s) |
| | Other (describe): | |
| 2. | If this transfer has more than one grantor, state the percentage of interest transferred by each grantor. (I limited partnership, state the percentage of interest transferred by each individual partner or limited partnership. | f the grantor is a partnership or ner.) |
| | Name | Percentage of interest |
| | | <u>%</u> % |
| | | % |
| ^ | Date of formation of grantee business | |
| 3. 4. | Fair market value of the real property or economic interest therein at time of transfer | |
| ъ. 5. | Basis used for depreciation of the real property on federal tax return by the grantor before | |
| ٠. | this transfer | |
| 6. | Basis to be used for depreciation of the real property on federal tax return by the grantee after this transfer | |
| 7. | Amount of mortgages, liens or encumbrances on the real property transferred7. | |
| 8. | Other consideration received from the business entity (attach schedule) | |
| 9. | Value of shares of stock or partnership interest received in exchange for the real property or interest therein (line 4 less the sum of lines 7 and 8) (enter here and on line 7, Schedule 1) | |

SCHEDULE G - TRANSFER BY OR TO A TAX EXEMPT ORGANIZATION ▼

| NONDPOSIT OPGANIZATIONS | | | " | |
|-------------------------|---------------|---------------------|-------------------|---------------------|
| NONDROCKT ORGANIZATIONS | DI EXCE DECED | TO THE INSTRUCTIONS | C "EVEMPTIONS EDO | M THE TRANSCER TAV" |

| N O T E | A transfer by or to an eligible tax exempt organization is exempt from the Real Property Transfer Tax. To be eligible, an organization operated exclusively for religious, charitable or educational purposes and must provide proof of the organization's tax exempt status. If clai exempt status, please answer questions 1 and 2. Additionally, the organization must provide copies of any letters granting an IRS or N State sales tax exemption or New York City exemption and ATTACH AN AFFIDAVIT stating whether such an exemption remains in effect. | ming tax |
|------------------|--|----------|
| 1. | Is the grantor or grantee an organization exempt from taxation pursuant to IRS Code Section 501(c)(3)? (🗸) | □ NO |
| 2. | Has the grantor or grantee received an exemption from sales tax from the NYS Department of Taxation and Finance? (🗸) Lyses If "YES", attach a copy of the letter from the NYS Department of Taxation and Finance granting the exemption. | ∟ NO |
| | | |
| | SCHEDULE H - TRANSFER OF CONTROLLING ECONOMIC INTEREST ▼ | |
| A. | Name, address and Employer Identification Number (EIN) of entity with respect to which a controlling economic interest has been transferred: | |
| | Name : | |
| | Address: Zip Code: | |
| | EIN - | |
| N O T E | the beyond ottach a should listing the name address and Employer Identification Number of the action | |
| В. | Total percentage of economic interest transferred in this transaction | % |
| C. | Total percentage of economic interest transferred by this grantor(s) or others in related transfers or pursuant to plan (including this transaction) | % |
| D. | Total percentage of economic interest transferred by this grantor(s) or others within the preceding three years (including this transaction) | % |
| E. | Total percentage of economic interest acquired by this grantee(s) or others in related transfers or pursuant to plan (including this transaction) E. | % |
| F. | Total percentage of economic interest acquired by this grantee(s) or others within the preceding three years (including this transaction) | % |
| N O | If any of the above percentages is 50% or more, complete lines 1 and 2 below and Schedules 1 and 2. Attach a rider explaining apportionment of consideration. | |
| СО | MPUTATION OF CONSIDERATION | |
| 1. | Total consideration for this transfer1. | |
| 2 | Amount apportioned to item of NYC real property or interest therein (see instructions) | |

SCHEDULE M - MERE CHANGE OF FORM TRANSFERS ▼

For transfers occurring on or after June 9, 1994, a transfer that represents a mere change in identity or form of ownership or organization is not taxable to the extent the beneficial ownership of the real property or economic interest therein remains the same. (See instructions) ATTACH COPIES OF ALL RELEVANT DOCUMENTS.

- For each person or entity who, prior to the transaction being reported on this Schedule M, owned a beneficial interest in the property or economic interest therein transferred, report above the percentage of beneficial interest in that real property or economic interest therein owned by that owner before and after the transfer, and describe the relationship of each beneficial owner to the grantor and grantee. Attach additional pages, if necessary.
- If, for any owner, the amount reported in column D is less than the amount reported in column E, enter zero in column F.

| Α | B (attach ride | or if necessary) | D PERCENTAG | E F INTEREST | F CHANGE |
|---|---------------------------------|-----------------------------|----------------|-----------------|-------------|
| 1. NAME OF BENEFICIAL OWNER | RELATIONSHIP TO GRANTOR | RELATION SHIP TO GRANTEE | BEFORE | AFTER | D minus E |
| | | | % | % | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 2. TOTAL CHANGE (total of column F) Ent | l er here and on Schedule 2, | line 5. | | | |

SCHEDULE R - REAL ESTATE INVESTMENT TRUST TRANSFERS

Real Estate Investment Trust Transfers ("REIT Transfers") are taxed at one-half of the otherwise applicable rate. (NYC Administrative Code Section 11-2102(e)) Attach a copy of the prospectus to Form NYC-RPT and write "REIT Transfer" on the top of the first page of Form NYC-RPT. If you are filing Form NYC-RPT reporting a REIT Transfer that qualifies as a mere change in identity or form of ownership or organization, you must also complete Schedule M.

General Information

REIT TRANSFER

A REIT Transfer is any deed or other instrument or transaction conveying or transferring real property or an economic interest in real property to a Real Estate Investment Trust as defined in Section 856 of the Internal Revenue Code (a 'REIT"), or to a partnership or corporation in which a REIT owns a controlling interest immediately following the transaction and any issuance or transfer of an interest in a REIT or in such a partnership or corporation in connection with such a transaction, provided either:

- the transaction occurs on or after June 9, 1994 in connection with the initial formation of the REIT and conditions 1(a), 2 and 3 below are met, or
- the transaction occurs on or after July 13, 1996 and before September 1, 2002 (or after August 30, 2002 if the transfer is made pursuant to a binding written contract entered into before September 1, 2002, with a REIT or a partnership or corporation in which the REIT owns a controlling interest, and the date of execution of that contract is confirmed by independent evidence satisfactory to the Department), and conditions 1 (b) and 2 below are met.

For a definition of "controlling interest", see General Information for Form NYC-RPT, "Imposition of Tax."

CONDITIONS

a. The value of the ownership interests in the REIT or in the partnership or corporation controlled by the REIT received by the grantor as consideration for the transaction must be equal to 40 percent or more of the excess of the value of the total consideration received over the amount of mortgages and other liens and encumbrances on the property or on the grantor's economic interest in the property, other than mortgages and other liens and encumbrances created in contemplation of the formation of the REIT.

b. This condition is the same as Condition 1(a), except that the value of the ownership interests received as consideration must be equal to at least 50 percent rather than 40 percent of the excess of the total consideration received over mortgages and other liens and encumbrances on the property or economic interest transferred excluding mortgages and other liens or encumbrances created in contemplation of the transaction reported on this Schedule R.

Use the worksheet on the following page of this Schedule to make this determination.

- The interests in the REIT or in the partnership or corporation controlled by the REIT may not be transferred by the grantor or owners of the grantor within two years following the date of the transaction other than transfers within the two-year period resulting from the death of an individual grantor or owner of a grantor.
- At least 75 percent of the cash proceeds of the initial public offering of REIT shares must be used for the following:
 - payments on loans secured by an interest in the real property or an economic interest therein owned directly or indirectly by the REIT, or payments into reserves therefor;
 - capital improvements to real property owned directly or indirectly by the REIT, or payments into reserves therefor;
 - c. brokerage fees and commissions, professional fees and payments to or on behalf of a tenant as an inducement to enter into a lease or sublease of real property owned directly or indirectly by the REIT, or payments into reserves therefor; or
 - d. payments to acquire real property or an economic interest therein other than an acquisition that would qualify as a REIT Transfer without regard to this condition 3.

If condition 2 or 3, where applicable, ceases to be met after this Schedule R is filed, an amended Form NYC-RPT must be filed and any additional tax due must be paid.

Instructions for Completing Worksheet

1.3125% instead of 2.625%

.5% instead of 1%; .7125% instead of 1.425%;

LINE 1

Where the value of the underlying property transferred or interest therein is used in determining the consideration for a REIT Transfer, you may, but are not required to, report as the value of the real property or interest therein (Form NYC-RPT, Schedule 1, line 7), the estimated market value as determined by the Department of Finance as reflected on the most recent Notice of Assessment issued by the Department. (See Statements of Audit Procedure 93-2-GCT/RPTT, 3/1/93 and 95-1-GCT/RPTT, 7/28/95) Add to the amount reported on line 1 the amount of any mortgages and other liens and encumbrances created in contemplation of the formation of the REIT in the case of condition 1(a) or in contemplation of the transaction reported on this Schedule R in the case of condition 1(b).

LINE 2

If the grantor received REIT shares as consideration for the transfer, enter on line 2a the number of REIT shares received. If

the grantor received interests in a partnership or corporation controlled by the REIT that may be converted into REIT shares, enter on line 2b the maximum number of REIT shares into which such interests may be converted and attach an explanation of the terms of the conversion. If the grantor received interests that may be converted into REIT shares but you believe that the offering price for the REIT shares into which such interests may be converted is not a proper measurement of the value of the interests received, do not complete line 2b. Instead, attach an explanation of the terms of the conversion and enter on line 2f the fair market value of the interests received. If the grantor received interests in a partnership or corporation controlled by the REIT that cannot be converted into REIT shares at any time, enter on line 2f the fair market value of the interests received. If you enter an amount on line 2f, attach an explanation of the method used for determining the value of the interests received.

SEE INSTRUCTIONS TO DETERMINE WHICH TAX RATE APPLIES

| I swear or affirm under penalties of perjury that the grantor has no present intention to transfer or convey the REIT shares or interests in a partnership or corporation controlled by the REIT received by the grantor as consideration in the transaction reported on this Schedule R within two years of the date of the transfer, other than a distribution of such shares or interests to the partners or shareholders of the grantor, and that, to the best of my knowledge, condition 3 above regarding the use of the cash proceeds of the REIT offering will be satisfied, if applicable. I further swear or affirm that I will file an amended Form NYC-RPT and pay any additional tax due if any such transfer or conveyance occurs within such two-year period or if condition 3 above, if applicable, ceases to be met. | | | | | | | |
|---|--|---|--|--|--|--|--|
| GRANTEE GRANTEE | | | | | | | |
| 7 | | C | | | | | |

— CERTIFICATION –

| GRA | NTOR | GRANTEE | | |
|---|----------------------|--|----------------------|--|
| S worn to and subscribed to before me on this day of, | Name of Grantor | Sworn to and subscribed to before me on this day of, | Name of Grantee | |
| Signature of Notary | Signature of Grantor | Signature of Notary | Signature of Grantee | |
| Notary's stamp or seal | | (Notary's stamp or seal | | |

| Contact the Bureau of Water and Energy Conservation at (718) 595-7000. | Have you recently paid off your mortgage? (✓) |
|---|---|
| NOTE: Water and Sewer Charge registration requires a different form. | City State ZIP Code |
| Assistance at (718) 935-9500. SI usted necestra recibir asistencia e Español para llenar esto formulario, llame al (718) 935-9500 y solicite u Representante que hable Español. | 100 |
| If you need assistance in completing this form, please call Taxpay | 9. Name of Real Estate Tax Bill Recipient |
| 11. Signature of owner or corporate officer (required by statute) 12. Date | SOCIAL SECURITY NUMBER OR EMPLOYER IDENTIFICATION NUMBER |
| | Bank/Lender |
| whichever is applicable. SOCIAL ARCURITY NUMBER BMPLOYER IDENTWICATION NUMBER | n Real Estate Tax bills should be mailed (Check ✓ one) |
| Owner | IF YOUR MORTGAGE PAYMENTS INCLUDE YOUR REAL ESTATE TAXES, FILL IN THE NAME AND ADDRESS OF YOUR BANK/LENDER IN THE SPACE PROVIDED IN 9 BELOW. IF NOT, FILL IN THE NAME AND ADDRESS TO WHICH YOU ARE CHOOSING TO HAVE REAL ESTATE TAX BILLS SENT. |
| Relationship of addressee to property (Check ~ one) | BILLING INFORMATION - REAL ESTATE TAX BILLS |
| City State Zip Code | 7. Indicate owner's daytime telephone number: () |
| Address | |
| Name of Recipient | |
| TYPE OF SPECIAL ASSESSMENT BILL: | 6. Owner's Tax Identification Number - |
| | 5. If the property has more than one owner, check this box and see instructions - |
| Whichever is applicable. BOCIAL SECURITY NUMBER BOCIAL SECURITY NUMBER BOCIAL SECURITY NUMBER | City States ZID Gode |
| provide either Social Security Number | any number |
| Owner | Vily |
| Belationship of addresses to property (Check Come) | City State Zin Code |
| City State Zip Code | 3. Owner's Residence or Company's Business Address |
| 7000 | 2b. Business Owner |
| Name of Recipient | |
| 10. TYPE OF SPECIAL ASSESSMENT BILL: | 2A OR 2B ONLY ▼ |
| INDICATE TO WHOM SPECIAL ASSESSMENT BILLS SHOULD BE MAILED. (SEE INSTRUCTIONS FOR LINE 10) | 1 Borough the property is in: Block: Lot: |
| BILLING INFORMATION - SPECIAL ASSESSMENT BILLS | Type or print in ink. Additional instructions appear on the reverse side of this form. |
| YOU ARE REGISTERING MORE THAN ONE PROPERTY. | ONLY ONE (1) PROPERTY (BLOCK AND LOT) MAY BE REGISTERED WITH THIS CARD. MAKE PHOTOCOPIES IF YOU ARE REGISTERING MORE THAN ONE PROPERTY. |
| 5 ELM PLACE, 3RD FLOOR BROOKLYN, NY 11201 | DEPARTMENT OF FINANCE CENTRAL REGISTRATION 25 ELM PLACE, 3RD FLOOR BROOKLYN, NY 11201 |
| REGISTRATION FORM | FINANCE PROPERTY OWNER'S REG |
| | |

THE CITY OF NEW YORK



DEPARTMENT OF ENVIRONMENTAL PROTECTION

The City of New York Department of Environmental Protection Bureau of Customer and Conservation Services 59-17 Junction Boulevard Corona, NY 11368-5107

Customer Registration Form for Water and Sewer Billing

| Property Owner Information | | | | | |
|--|---|--|---|--|--|
| (1) Property is located in the borough of: | | | | | |
| Block: Lot: Lot: | | | | | |
| Meter # (if available): | | | | | |
| (2) Service Address: | | (3) Mailing Address (if differen | nt from Service Address) | | |
| Street | | | | | |
| City | • | | | | |
| State, Zip, | • | | | | |
| (4) Owner's Name: Business: _ | | | OR | | |
| Individual:_ | (Last Name) | (First Name) (MI) | | | |
| (5) Own or a Talankana Niverkan | • | (| | | |
| (5) Owner's Telephone Number: Residence: () | | Business: () | _ | | |
| Residence. | | Dustriess. (| | | |
| Customer Billing Information (Please provide the following information a (6) Account Number (if available): | | | c.) | | |
| (7) Name: Business: | | | | | |
| Individual: | (Last Name) | (First Name) | | | |
| | ,, | , , | | | |
| (8) Mailing Address: | | | | | |
| | | e Zip | | | |
| • | | _ | | | |
| (9) Relationship of Customer to | this premise (Check or | ie) Agent: Owner: | Tenant: | | |
| Owner's Approval: (The property owner must approve someone "Delinquency" actions which may ultimate the control of the control | e as a customer at this property mately result in the property b | 7. The failure by a Customer to pay the wa | ater/sewer bills will initiate tien sale.) | | |
| (10) Owner's EIN OR SSN: | | | : | | |
| (11) | | <u></u> | | | |
| (Print name and title if applicable) | | | | | |
| (12) | | 1 | , | | |
| (Signature) | | (Date) |) | | |