

New York State Department of Taxation and Finance

IDA Appointment of Project Operator or Agent For Sales Tax Purposes

The industrial development agency or authority (IDA) must submit this form within 30 days of the appointment of a project operator or agent,

For IDA use or

Name of IDA			_	IDAproject ru	mber (use OSC)	numbering s	ystem for projects after 1	
New York City Industrial Development Agend	су		<u>-</u>		<u>`</u>	P-1		
Street address One Liberty Plaza						Telephone number (212) 619-5000		
City New York						State NY	ZIP code 10006	
Name of IDA project operator or agent GMDC OP LLC		(in the box if appointed by the ID.	A: X	Employer	dentification of	or social s	ecurity number	
Street address 1155-1205 Manhattan Avenue			Telephone number (718) 383-3935				mary operator or age Yes N	
City Brooklyn						State NY	ZIP code 11222	
Name of project Purpose of project (see instruction 2017 GMDC OP LLC Industrial & Manufacturin					nstructions) cturing			
Street address of project site 94-15 100th Street								
City Ozone Park						State NY	ZIP code 11416	
Description of goods and services intended to be exempted Ma from New York State and local sales and use taxes	iterials, goods,	personal prop	erty and fi	xtures, sup	plies, mad	hinery,		
and equipment, services at the Project site, as described	d in more detail	in Agency Lea	ase Agree	ment betw	een			
NYCIDA and Project Operator.								
Date project operator or agent appointed (mm/dd/yy) 11/16/17 Dataget	te project operato ent status ends (n	r or nm/dd/yy) 07/0	1/20				ox if this is an project:	
Estimated value of goods and services that will be exempt from and local sales and use tax:		Estimated value provided:	of New Yo	rk State and	l local sales	and use	tax exemption	
\$7,910,278.60	ļ	\$891,299.00			<u> </u>			
Certification: I certify that the above statements are true, comwith the knowledge that willfully providing false or fraudulent in Law, punishable by a substantial fine and possible jail sentence information entered on this document.	formation with this	document may	constitute	a felony or	other crime	under N	ew York State	
Print name of officer or employee signing on behalf of the IDA Krishna Omolade		Print title Executive [Director					
Signature thistory I save			0	ate 8/22/2019	1	elephone 212) (number 319-5000	
	In a house	4.						

Instructions

Filing requirements

An IDA must file this form within 30 days of the date the IDA appoints any project operator or other person as agent of the IDA, for purposes of extending any sales and compensating use tax exemptions.

The IDA must file a separate form for each person it appoints as agent, whether directly or indirectly, and regardless of whether the person is the primary project operator or agent. If the IDA authorizes a project operator or agent to appoint other persons as agent of the IDA, the operator or agent making such an appointment must advise the IDA that it has done so, so that the IDA can file a form within 30 days of the date of the new agent's appointment. The IDA should not file this form for a person hired to work on an IDA project if that person is not appointed as agent of the IDA. The IDA need not file this form if the IDA does not extend any sales or use tax exemption benefits for the project.

If an IDA modifies a project, such as by extending it beyond its original completion date, or by increasing or decreasing the amount of sales and use tax exemption benefits authorized for the project, the IDA must, within 30 days of the change, file a new form with the new information.

If an IDA amends, revokes, or cancels the appointment of an agent, or if an agent's appointment becomes invalid for any reason, the IDA must, within 30 days, send a letter to the address below for filing this form, indicating that the appointment has been amended, revoked, or cancelled, or is no longer valid, and the effective date of the change. It should attach to the letter a copy of the form it originally filed. The IDA need not send a letter for a form that is not valid merely because the "Completion date of project" has passed.

Purpose of project

For Purpose of project, enter one of the following:

- Agriculture, forestry, fishing
- Transportation, communication,

electric, gas, sanitary services

- - Construction Wholesale trade
- Finance, insurance, real estate Retail trade
 - Manufacturing Other (specify)

Mailing instructions

Mail completed form to:

NYS TAX DEPARTMENT **IDA UNIT** WA HARRIMAN CAMPUS **ALBANY NY 12227**

Privacy notification

The Commissioner of Taxation and Finance may collect and maintain personal information pursu to the New York State Tax Law, including but not limited to, sectlons 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social secunumbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Manager of Document Management, NYS Tax Department, W A Harriman Campus, Albany NY 12227, telephone (518) 457-5181.

Need help?



Internet access: www.tax.ny.gov

(for information, forms, and publications)



Sales Tax Information Center:

(518) 485-2889

To order forms and publications:

(518) 457-5431



Text Telephone (TTY) Hotline (for persons with hearing and

speech disabilities using a TTY): (518) 485-5082