ST-60



IDA Appointment of Project Operator or Agent

For Sales Tax Purposes

The industrial development agency or authority (IDA) must submit this form v whether appointed directly by the IDA or indirectly by the operator or another		itment of a projec	ct operator or as		r IDA use only
Name of IDA New York City Industrial Development Agency		IIDA project nun	nber (use OSC n	numbering system	for projects after 1998)
Street address 110 William Street		Telephone Number (212) 619-5000			
City New York				State NY	ZiP code 10038
Name of IDA project operator or agent	Mark an X in the box if directly appointed by the	IDA: X	Employer iden	1 "	security number
Street address		Telephone Nu	mber	Primary oper	ator or agent?
City				State NY	ZIP code
Name of project Transcontinental Ultra Flex, Inc.		Purpose of pro	oject (see instru	ictions)	
Street address of project site 975 Essex Street					
city Brooklyn	nde av en fri lik in de meder from en om Alamon en næren sæ antis ussamen i fri has einn se	e well klimach (de bereite well der en mit verere er met her bekann dit verbere		State NY	ZIP code 11208
Description of goods and services intended to be exempted from New York State and local sales and use taxes Renovation, equipping a	nd furnishing of a m	anufacturing	facility.		
ate project operator 12/16/16 Date project operator or agent appointed (mm/dd/yy) agent status ends (mm/dd/yy)		12/16/18	12/16/18 Mark an X in the box if this is an extension to an original project:		1 6
Estimated value of goods and services that will be exempt from New York State and local sales and use tax: Estimated value of the provided:			ind local sales a	and use tax exem	ption
\$ 16,427,341	\$ 1,295,664	1.00			
Certification: I certify that the above statements are true, complete, and conwith the knowledge that willfully providing false or fraudulent information with Law, punishable by a substantial fine and possible jail sentence. I also under information entered on this document.	this document may constitu	ute a felony or ot	her crime unde	r New York State	
Print name of officer or employee signing on behalf of the IDA	Print		Di	and the second s	ndd acharau d na ar an Manasia (a baille hallenn machal (daidh hall dhishail) d
Anne Shutkin Signature	Dep	outy Executiv Date 1	2/16/16	Telephone numb (212) 619-50	
ln:	structions				

Filing Requirements

An IDA must file this form within 30 days of the date the IDA appoints any project operator or appoints a 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 whetherthe 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 aurhorized 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 appointmen 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 thet 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:

- Services
- Agriculture, forestry, fishing
- Finance, insurance, real estate Transportation, communication,
 - electric, gas, sanitary services
- Construction
 Wholesale trade
- Retail trade
- Manufacturing
- Other (specify)

Mailing Instructions

Mail completed form to:

NYS TAX DEPARTMENT IDA UNIT W A HARRIMAN CAMPUS ALBANY NY 12227

Privacy notification

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social security numbers 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 purpose.

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