

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, whether appointed directly by the IDA or

For IDA use only

indirectly	by the ope	erator or anot	ther age	nt.	<i>,</i>	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
IDA information							
Name of IDA			Ti	DA project numb	ber (use OSC	numbering system for projects after 1998)	
New York City Industrial Development Agen	CV			00119016A	•	,	
Street address	ОУ			Telephone numb	per		
1 Liberty Plaza			I	212) 619-			
City	State ZIP code			Email address (optional)			
New York	NY	10006		Email address (optional)			
Project operator or agent informat			<u> </u>				
Name of IDA project operator or agent	.1011	I Manula	. au Viu tha	box if directly	LEmple	yer identification or Social Security number	
			•		yer identification of Social Security number		
Genesis Flooring Systems LLC		арро	inted by the			Duine and an anatan an arranto	
Street address				'		Primary operator or agent?	
252 W. 37th Street, 500W				(732) 961-2230		Yes No X	
City	State	ZIP code		Email address (optional)			
New York	NY	10018	k	k.clark@genesisflooring.com			
Project information							
Name of project							
2019 45-18 Court Square Owner, L.L.C. Pro	oject						
Street address of project site	<u></u>						
45-18 Court Square							
City	State	ZIP code	П	Email address (optional)			
Long Island City	NY	11101		ejaram@ks-p			
for use as a commercial facility.							
Description of goods and services intended to be exemp	ted from New Y	ork State and loca	al sales and	use taxes			
Flooring at 45-18 Court Square, Long Island	City, NY						
Date project operator or agent appointed (mmddyy) 042720	Date project agent status	operator or ends (mmddyy)	121	005	Mark an X in an original pr	the box if this is an extension to oject:	
Estimated value of goods and services that will be exempt from New York State and local sales and use tax	c: \$			ue of New York ption provided:	State and loo	calsales and \$6,661,354	
Certification: I certify that the above statem make these statements with the knowledge felony or other crime under New York State	that willfully	providing fals	e or frau	dulent inform	nation with	this document may constitute a	
Tax Department is authorized to investigate	the validity	of any informa	ation ente	red on this d	document.	mence, i also understand triat the	
Print name of officer or employee signing on behalf of the IDA Print title							
Noah Schumer		D:	eputy Ex	ecutive Direc	ctor		
Signature A				Date 03-03-	2025	Telephone number (212) 619-5000	

03-03-2025