



# NYS BOARD OF REAL PROPERTY SERVICES

# APPLICATION FOR REAL PROPERTY TAX EXEMPTION FOR NONPROFIT ORGANIZATIONS - MANDATORY CLASS (File on or before February 1) I-ORGANIZATION PURPOSE

(See general information and instructions on back of form)

1a. Name of Organization	d. Name of contact person			
	e. Day telephone no. of contact person			
b. Mailing address	Evening telephone no.			
c. Employer ID no.	f. E-mail address (optional)			
2a. Purpose(s) of organization:				
Religious  Educational    Charitable  Moral or mental impression    Hospital	ovement of men, women, or children			
. If the organization has more than one purpose, state the primary purpose:				
c. State briefly specific activities related to each purpose checked above:				
(Attach additional she	eets if necessary)			
FOR ASSI	ESSOR'S USE			
Assessing unit	County			
City/Town				
School District				

- Is the organization currently exempt from Federal income tax? O yes O no
   If no, skip to question 4. If yes, answer a. through d.
  - a. Under which section, subsection and paragraph of the Internal Revenue Code?
  - b. Did the Internal Revenue Service recognize the exemption on the basis of an application form or a written request or statement?
     O ves
     O no

If yes: (1) Was the exemption recognized by a Group exemption letter Separate exemption letter

- (2) If exemption was recognized by a group exemption letter, give name and address of organization receiving group exemption.
- (3) If the exemption was recognized by an advanced ruling, when does the ruling expire?

(month/day/year)

## ATTACH COPY OF DETERMINATION OR RULING LETTER

If no: (4) Please explain how the organization is exempt from Federal income tax (attach additional sheets if needed).

c. Is the organization required to file annual returns with the Internal Revenue Service? **O** yes **O** no If yes, attach form number(s).

# ATTACH COPY OF EACH RETURN FILED FOR THE ORGANIZATION'S LAST FISCAL YEAR

d. For the last fiscal year, did the organization file Internal Revenue Form 990-T (Exempt Organization Business Income Tax Return)?

# IF YES ATTACH COPY OF FORM 990-T AND SKIP TO QUESTION 5

- 4. Has the organization applied for recognition of exemption from Federal income tax? **O** yes **O** no
  - a. Under which section, subsection and paragraph of the Internal Revenue Code?
  - b. Date of application

# ATTACH COPY OF APPLICATION, REQUEST OR STATEMENT AND ATTACHMENTS IF NO, COMPLETE AND ATTACH SCHEDULE A (RP-420-a/b-Org) (obtain Sch. A from assessor)

5. Is the organization incorporated? **O** yes **O** no

If yes, answer a through c. If no, answer d through f.

а. с.	Date incorporated b. State/County in which incorporated         Under which law? Law: Article or section:			
not inc	CH COPY OF CURRENT ARTICLES OF INCORPORATION (Note: If a dissolution provision is cluded in the articles, also attach a statement describing how assets would be distributed should the zation dissolve.)			
d.	Form of organizatione. Date formed			
f.	Has the organization applied for incorporation? $O$ yes $O$ no If no, skip to question 6. If yes:			
(1) State/County in which application has been filed				
(2) Under which Law? Law: Article or section:				
	(3) Date application filed:			
A	TTACH COPY OF APPLICATION AND CONSENTS REQUIRED WITH APPLICATION			
pr sh	TTACH COPY OF CURRENT ARTICLES OF ORGANIZATION (Note: If a dissolution ovision is not included in the articles, also attach a statement describing how assets would be distributed hould the organization dissolve.)         the organization under the supervision of any public regulatory body? <b>O</b> yes <b>O</b> no			
	yes, answer a through c.			
a.	a. Which one(s)? Give name and address			
b.	<ul> <li>b. Does the organization have an operating certificate. permit, charter, or similar authorization issued by a public regulatory body? <b>O</b> yes <b>O</b> no</li> </ul>			
	IF YES, ATTACH COPY OF AUTHORIZATION			
c.	Does the organization solicit contributions from the public? <b>O</b> yes <b>O</b> no			
	If yes and the organization is registered with the Attorney General's Charities Bureau, give the organization's registration number			
	VERIFICATION			
State	of New York			
	ss:			
Count	ty of, being duly sworn, says thathe is the of			
sheets				
Signa	ture of owner or authorized representative Commissioner of deeds or notary public			

#### GENERAL INFORMATION AND FILING REQUIREMENTS

#### 1. Tax exemption for nonprofit organizations under section 420-a of the Real Property Tax Law

Real property owned by a corporation or association organized or conducted exclusively for religious, charitable, hospital, educational, or moral or mental improvement of men, women or children, or for two or more such purposes, and used exclusively for carrying out thereupon one or more such purposes, is exempt from taxation.

#### 2. Application

For the property to be granted tax exempt status on the tentative assessment roll, the assessor must be satisfied that the statutory standards are met. This can be most readily accomplished through submission of the State Board's forms.

A two-part application should be filed in each assessing unit in which exemption is sought: Form RP-420-a-Org (I-Organization purpose) and form RP-420-a/b-Use (II-Property use). One copy of Form RP-420-a-Org should be filed in each assessing unit. One copy of Form RP-420-a/b-Use should be filed in each assessing unit for each separately assessed parcel for which exemption is sought. Each year following the year in which exemption is granted on the basis of this application, renewal forms RP-420-a/b-Rnw-I and RP-420-a/b-Rnw-II should be filed.

If you need more space for any item in the application, attach additional sheets and indicate the question(s) to which you are responding. Please give your name and employer identification number on all attachments. The assessor may request information in addition to the information contained in the application.

The law does not require that State Board forms be used. In the alternative, the owner may present proof of exempt status to the assessor in whatever format is mutually acceptable.

#### 3. Place of filing application

Application for exemption from city, town or village taxes should be filed with the city, town or village assessor. Application for exemption from county or school district taxes should be filed with the city or town assessor who prepares the assessment roll used in the levying of county or school taxes. **File at the Rochester Bureau of Assessment, Room 101A, City Hall, 30 Church St., Rochester, New York 14614-1299** 

# 4. Time of filing application

The application should be filed in the assessor's office on or before the appropriate taxable status date. In towns preparing their assessment roll in accordance with the schedule provided in the Real Property Tax Law, the taxable status date is March 1.

## In the City of Rochester file on or before February 1.

#### SPACE BELOW FOR ASSESSOR'S USE

Applicant organization

Employer identification number

Date application filed

# See form RP-420-a/b-Use for parcel number(s)

Documentary evidence presented:

Assessing unit

Assessor's signature

Date



# NYS BOARD OF REAL PROPERTY SERVICES APPLICATION FOR REAL PROPERTY TAX EXEMPTION FOR NONPROFIT ORGANIZATIONS (File on II PROPERTY USE

(File on or before February 1)

1 a. Name of organization	2. Employer ID no			
	3a. Name of contact person			
b. Mailing address	b. Day telephone no. of contact person			
	Evening telephone no.			
c. Address of property	c. E-mail address (optional)			
d. Property identification (see tax bill or assess	ment roll) Tax map number or section/block/lot			
<ul> <li>4 a. Has any part of this property been conveyed</li> <li>b. Is the property or any part thereof under cor</li> <li>c. Is the property or any part thereof for sale?</li> <li>d. If answer to 4 a, b, or c is yes, give full deta</li> </ul>	ntract for sale? <b>O</b> yes <b>O</b> no <b>O</b> <u>ye</u> s <b>O</b> no			
5. Name of grantee as set forth in deed by which	property was acquired if different from answer to question 1.			
6. If the property was acquired within the last the	ree (3) years, indicate: Date of acquisition:			
Deed recording information Book of Deeds:	Page:			
director, employee, member, etc.)? <b>O</b> yes	has or had any interest in the owning organization (e.g., officer, <b>O</b> no nces of sale (including purchase price and terms of sale):			
8. Is the property mortgaged? <b>O</b> yes <b>O</b>	no			
a. If yes, does the holder of the mortgage pro- organization?   <b>O</b> yes <b>O</b> no	esently (or did it formerly) have any interest in the owning			
<ul> <li>b. If answer to 8a is yes, explain the relationship and details of mortgage(s), original principal amount, principal currently outstanding, interest rate, original term of mortgage, term remaining:</li> </ul>				
(attach ad	Iditional sheets if necessary)			
FOI	R ASSESSOR'S USE			
Assessing unit	County			
City/Town	Village			
School District				

RP-	420-	a/b-Use (9/08) 2
9.	Doe	s any person or organization have a reversionary interest in this property? <b>O</b> yes <b>O</b> no
	a. If	f yes, indicate name and address of such person and state terms of right of reverter:
	-	
10.	Desc	cribe, in detail, use or uses of the property:
		THE ORGANIZATION SEEKING EXEMPTION HAS INDICATED ONE OF ITS CORPORATE RPOSES IS HOSPITAL IN QUESTION 2a. ON FORM RP-420-a-Org, ANSWER QUESTION 11. IF NOT SKIP TO 12.
11.	Are	the premises or any portion thereof leased or otherwise occupied as professional offices? <b>O</b> yes <b>O</b> no
	If ye	es, answer a through c.
		<ul> <li>a. The professional offices are leased or otherwise occupied by: (1) members of the staff, e.g. doctors</li> <li>(2) professionals not on the staff of the hospital (3) a combination of 1 are</li> </ul>
	b.	If leased to members of the staff, are the offices used:(1)solely for hospital related matters(2)for the private practice of the staff members(3)a combination of 1 and 2
	c.	If not used solely for direct-hospital related purposes, what percentage of time and space are the offices used for direct hospital-related purposes, and what percentage of time and space are they used for private practice of the staff?
12.	Is th	e property or any portion thereof regularly occupied by persons or organizations other than applicant?
		Yes No
	If y	res, answer a through d.
	a.	Name of occupant(s)
	b.	Use by occupant(s) (also indicate specific portion of property so occupied):
	c.	Term(s) of occupancy (e.g. one-year lease, month-to-month tenancy):
	d.	Amount of rental paid by occupant(s)
13.	Is th	e property or any portion thereof occasionally used by persons or organizations other than the applicant?
		Yes No
	-	res, state use and indicate specific portion of property used, frequency of use and fee charged or attributions received for use:
14.	Are	there any buildings or other improvements on the property? <b>O</b> yes <b>O</b> no
	If ye	es, skip questions a through e. If no, answer a-e and skip questions 15-16.
	a.	Use or uses of property if not described in question 10.
	b.	Are building or other improvements contemplated on this unimproved land? <b>O</b> yes <b>O</b> no
		If yes, give full details including proposed use(s):

c.	Do the minutes of	the organization	tion contain a resolution(s) authorizing contemplated building or other	
	improvements?	Yes	No	
	If yes, attach a copy of resolution(s).			

d. State detailed financial resources for contemplating buildings or other improvements (including building fund).

When will construction begin? e. 15. Describe, briefly, the building(s) or other improvements: Approximate acreage of land not underlying buildings or other improvements: a. Use or uses of land referred to in 15a. if not described in question 10. b. Are buildings or other improvements contemplated on this unimproved land? c. **O** yes **O** no If yes, give full details including proposed use(s): Do the minutes of the organization contain a resolution authorizing contemplated buildings or other d. improvements? Yes No If yes, attach copy of resolution(s) State financial resources for contemplated buildings or other improvements (including building fund). e. When will construction begin? f. 16. Are there any unoccupied buildings or other improvements on this property? **O** yes O no Date(s) they became unoccupied a.

b. Describe contemplated use(s) of the buildings or other improvements:

State of New York

County of

#### VERIFICATION

on

ss:

\_\_\_\_\_, being duly sworn, says that \_\_he is the\_\_\_\_\_

of the applicant organization, that the statements contained in this application (including the attached sheets consisting of \_\_\_\_\_ pages) are true and correct and complete, and that \_\_he makes this application for real property tax exemption as provided by law.

Subscribed and sworn to before me

this\_\_\_\_\_day of\_\_\_\_\_ 20\_\_\_\_

Commissioner of deeds or notary public

### **GENERAL INFORMATION AND FILING REQUIREMENTS**

#### 1. Tax exemption for nonprofit organizations under section 420-a or 420-b of the Real Property Tax Law

Real property owned by a corporation or association organized or conducted exclusively for religious, charitable, hospital, educational, moral or mental improvement of men, women or children, or for two or more such purposes, and used exclusively for carrying out thereupon one or more such purposes, is exempt from taxation pursuant to section 420-a.

Unless a municipally has chosen to make it taxable, real property owned by a corporation or association organized exclusively for bible, tract, benevolent, missionary, infirmary, public playground, scientific, literary, bar association, medical society, library, patriotic or historical purposes, for the development of good sportsmanship for persons under the age of eighteen years through the conduct of supervised athletic games, for the enforcement of laws relating to children or animals, or for two or more such purposes, and used exclusively for carrying out one or more such purposes, is exempt from taxation pursuant to section 420-b.

# 2. APPLICATION

A two-part application must be filed in each assessing unit in which exemption is sought: Form RP-420-b-Org (I-Organization purpose) and form RP-420-a/b-Use (II-Property use). One copy of Form RP-420-b-Org must be filed in each assessing unit. One copy of Form RP-420-a/b-Use must be filed in each assessing unit for each separately assessed parcel for which exemption is sought. Each year following the year in which exemption is granted on the basis of this application, renewal forms RP-420-a/b-Rnw-I and RP-420a/b-Rnw-II must be filed.

If you need more space for any item in the application, attach additional sheets and indicate the question(s) to which you are responding. Please give your name and employer identification number on all attachments. The assessor may request information in addition to the information contained in the application.

For purposes of section 420-a, the same forms may be used (except RP-420-a-Org replaces RP-420-b-Org). In the alternative, the owner may submit proof of exempt status to the assessor in whatever form is mutually acceptable.

#### 3. Place of filing application

Application for exemption from city, town, or village taxes must be filed with the city, town, or village assessor. Application for exemption from county or school district taxes must be filed with the city or town assessor who prepares the assessment roll used in levying county or school taxes.

File at the Rochester Bureau of Assessment, Room 101A, City Hall, 30 Church St., Rochester, New York 14614-1299

#### 4. Time of filing application

For purposes of section 420-b, the application must be filed in the assessor's office on or before the appropriate taxable status date. For purposes of section 420-a, the application should be filed on or before such date. In towns preparing their assessment roll in accordance with the schedule provided by the Real Property Tax Law, the taxable status date is March 1.

# In the City of Rochester file on or before February 1.

SP	ACE BELOW FOR ASSESSOR	'S USE
	Parcel identification no.(s)	
Applicant organization	Employer ID no.	Date application filed
Application Approved	Disapproved	
Assessed Valuation \$	Taxable \$	Exempt
Documentary evidence presented:		
Assessing unit	Assessor's signature	Date