



# EXEMPTION FROM REAL ESTATE TAXATION FOR PROPERTY OWNED BY NONPROFIT ORGANIZATIONS INSTRUCTIONS

*(Pursuant to Article 4, Sections 420(a), 420(b), 446 and 462 of the New York State Real Property Tax Law, which provides for real estate tax exemption for certain properties owned and used by nonprofit organizations that qualify under the provisions of these sections.)*

## GENERAL INFORMATION

### CHECKLIST BEFORE SUBMITTING YOUR APPLICATION

**AVOID A DELAY IN THE PROCESSING OF YOUR APPLICATION. CHECK (✓) TO MAKE SURE THAT YOU DO THE FOLLOWING THINGS BEFORE SUBMITTING YOUR APPLICATION:**

- Read the eligibility requirements below to be sure that you are qualified
- COMPLETE ALL SIX SECTIONS AND INDIVIDUAL QUESTIONS ON THE ATTACHED FOUR PAGE APPLICATION
- Submit a **separate** Section 6 - Property Use for each individual lot for which you are applying for exemption (Use individual sheets provided by the Department of Finance or photocopies of Section 6.)
- Attach a copy of the most recent deed
- Attach a copy of your organization's Articles of Incorporation
- Attach a copy of your organization's By-Laws or Constitution
- If the organization is required to file annual returns with the Internal Revenue Service, attach a copy along with all schedules
- If the organization is exempt from federal income tax, attach a copy of Determination or Ruling Letter
- If the organization is not exempt from federal income tax, but has applied for exemption, attach a copy of application, request or statement and attachments
- If all or a portion of the property is leased to and used by another nonprofit organization, the above six items must *also* be attached for the lessee (Articles of Incorporation, By-Laws or Constitution, IRS Returns, IRS Form 990-T, IRS exemption letter or IRS exemption application); additionally a copy of the current lease must be attached
- If all or a portion of the property is used as a parsonage or manse, you must submit a separate statement in addition to this application, which should include the following information: names of all officiating clergy; documentation of ordination; if no formal training and/or ordination was received, please explain why; if clergy has an employment contract with the owning organization, please submit most recent copy
- If there has been any substantial change in any aspect of the organization's financial activities since the period end as reported in Section - 5 Organization Statement of Assets and Liabilities for the Last Fiscal Year, attach a detailed explanation

- If the organization has a resolution(s) authorizing contemplated construction of buildings or other improvements, attach copy
- Sign the application and have it notarized where indicated

### ELIGIBILITY REQUIREMENTS

**THE FOLLOWING IS INTENDED TO SERVE ONLY AS A GUIDE IN DETERMINING ELIGIBILITY FOR AN EXEMPTION. ALL SUBMITTED APPLICATIONS ARE SUBJECT TO REVIEW IN ACCORDANCE WITH THE LEGAL STATUTORY AUTHORITIES CITED UNDER THE HEADING OF THIS PAGE.**

- ◆ Legal title for the parcel(s) for which exemption benefits are being sought must be in the name of the applicant organization.
- ◆ The purpose(s) of the organization must be one of the exemptible categories outlined in Sections 420(a), 420(b), 446 and 462 of the New York State Real Property Tax Law, or two or more of those purposes, as follows:
  - 420(a): Charitable, Educational, Hospital, Moral or mental improvement of men, women or children or Religious
  - 420(b): Benevolent, Bible, Enforcement of Law relating to children or animals, Historical, Infirmary, Library, Literary, Medical Society, Missionary, Patriotic, Public playground, Scientific, Supervised youth sportsmanship or Tract
  - 446: Cemetery
  - 462: Parsonage or Manse
- ◆ The property for which exemption is being sought must be used for the exemptible purposes of the organization. Unused portions or portions leased to private entities are not exemptible.
- ◆ Unimproved land and/or vacant buildings may be eligible if supporting documentation of contemplated use or construction in progress is supplied. If an exemption is granted, then a new "Application for Exemption" must be filed once the improvement value is placed on the assessment roll.
- ◆ If all or a portion of the property is leased to or otherwise used by another eligible exempt organization, that portion may be eligible for exemption, if it is used for exempt purposes and the amount of rental income does not exceed the normal carrying, maintenance or depreciation charges.

- ◆ For applicants applying for exemption under Real Property Tax Law sections 446 (Cemetery) or 462 (Parsonage or Manse) **only**: Properties must be acquired by the applicant organization on or before the annual taxable status date of January 5. If the property was acquired before January 5 and all other exempt criteria are met, the exemption will commence with the following July 1 tax roll. If the property was acquired after January 5 and all other exemption criteria are met, the exemption will commence on the July 1 following the next January 5.
- ◆ Properties transferred from a currently property tax exempt nonprofit organization to another qualifying nonprofit organization will maintain continuous benefits. The January 5 taxable status date rule will not affect such a transfer. The new organization should make application in its own name immediately after the transfer.
- ◆ If the submitted application is incomplete in any way, the applicant will be notified and given a short period of time to make any and all corrections.
- ◆ In addition to this application, you may be required to supply additional information. In such cases, either the attorney, agent or the contact person will be notified.

#### **INSPECTION BY THE DEPARTMENT OF FINANCE**

Please note that prior to a determination of eligibility, the property may be inspected by a representative of the Department of Finance.

#### **ANNUAL RENEWAL NOTICES**

If an exemption is granted, the organization will be required to file an annual renewal form which will be mailed to the exempt organization each Fall.

#### **CANCELLATION OF BACK YEAR REAL ESTATE TAXES**

The Department of Finance implements exemption benefits for the current tax year and the prior year. Unpaid real estate taxes for prior years are canceled by the City of New York, Office of the Comptroller, Division of Claims and Adjustment - Real Estate, which may be contacted at (212) 669-2028. **That office will not act on cancellations until the Department of Finance has implemented exemption benefits for the current period.** When the Department of Finance notifies the applicant of approval of exemption benefits, instructions will be included for filing with the Comptroller, if applicable.

#### **NOT FOR PROFIT HOUSING ORGANIZATIONS**

Under limited circumstances, some not-for-profit housing organizations may be eligible for exemption benefits under Article 4, Section 420(a) or 420(c) of the New York State Real Property Tax Law. In such cases, eligibility is determined by the Department of Housing Preservation and Development (HPD). For further information, please write to HPD, c/o Office of Tax Incentives, 100 Gold Street, New York, NY 10038

#### **WHEN AND WHERE TO FILE**

Applications are accepted throughout the year.

Completed applications with appropriate attachments must be submitted to:

New York City Department of Finance  
Property Tax Exemption Unit - NFP  
59 Maiden Lane, 20th Floor  
New York, NY 10038

#### **WATER/SEWER CHARGE EXEMPTION**

The exemption from water and sewer charges is administered by the Department of Environmental Protection. For further information, contact the DEP, Bureau of Water and Energy Conservation at (718) 595-6845, or 7803.

#### **RIGHT OF APPEAL**

Should the Department of Finance deny your application or grant only a partial exemption, you may appeal by writing to the New York City Tax Commission during the period January 15 through March 1 at the following address:

Tax Commission  
1 Centre Street, Room 936  
New York, NY 10007



EXEMPTION FROM REAL ESTATE TAXATION FOR PROPERTY OWNED BY NONPROFIT ORGANIZATIONS APPLICATION

COMPLETE IN FULL SECTIONS 1 THROUGH 6 (SEE SPECIAL NOTES REGARDING REQUIREMENTS FOR COMPLETING SECTIONS 4 AND 5). FOR EACH SECTION, ATTACH ADDITIONAL SHEETS WHEN NECESSARY.

SECTION 1 - OWNERSHIP INFORMATION

1. Borough: Block: Lot:
2. Address of property (number and street)
3. Name of organization 4. Employer Identification Number
5. Organization mailing address
6. Name of applicant's representative, agent or attorney 7. Telephone number
8. Mailing address of # 6 above 9. Date of acquisition as shown on deed
10. Name of contact person to arrange inspection 11. Telephone number

12. Was the property acquired from anyone who has any interest in the owning organization (e.g., officer, director, employee, member, etc.)?
13. Does any person or organization have a revisionary interest in this property?
14. Is the property mortgaged?
15. a. Has any part of this property been conveyed to another person or organization?
b. Is the property or any part thereof under contract for sale?
c. Is the property or any part thereof for sale?
16. Has the applicant ever previously filed an application for exemption on this or any other parcel owned or occupied by the organization?

**SECTION 2 - ORGANIZATION PURPOSE**

1. Check (✓) the purpose(s) of the organization from the listing below:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Bar Association                                    | <input type="checkbox"/> Benevolent         | <input type="checkbox"/> Bible   | <input type="checkbox"/> Cemetery          |
| <input type="checkbox"/> Charitable   | <input type="checkbox"/> Educational        | <input type="checkbox"/> Historical  | <input type="checkbox"/> Hospital          |
| <input type="checkbox"/> Infirmary  | <input type="checkbox"/> Library            | <input type="checkbox"/> Literary  | <input type="checkbox"/> Medical Society   |
| <input type="checkbox"/> Missionary   | <input type="checkbox"/> Parsonage or Manse | <input type="checkbox"/> Patriotic   | <input type="checkbox"/> Public playground |
| <input type="checkbox"/> Religious  | <input type="checkbox"/> Scientific         | <input type="checkbox"/> Supervised youth sportsmanship                        | <input type="checkbox"/> Tract (religious) |
| <input type="checkbox"/> Enforcement of law relating to children or animals |   | <input type="checkbox"/> Moral or mental improvement of men, women or children |  |

2. State briefly specific activities related to each purpose checked above: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SECTION 3 - FEDERAL INCOME TAX STATUS OF ORGANIZATION**

1. Is the organization exempt from federal income tax? .....  yes  no  
 IF EXEMPT, COMPLETE QUESTIONS 2, 3 AND 4 AND ATTACH A COPY OF EXEMPTION DETERMINATION OR RULING LETTER. OMIT SECTIONS 4 AND 5.  
 IF NOT EXEMPT, COMPLETE QUESTIONS 5 THROUGH 7 OF THIS SECTION, AND IF APPLICABLE, COMPLETE SECTIONS 4 AND 5 AND ATTACH A COPY OF EACH RETURN FILED FOR THE ORGANIZATION FOR THE LAST FISCAL YEAR.
2. If exempt, indicate section, subsection and paragraph of the Internal Revenue Code (IRC): \_\_\_\_\_
3. If exemption was recognized by an advance ruling, indicate expiration date of ruling: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
4. If exemption was recognized by a group exemption letter, provide name and address of organization receiving group exemption.  
 Organization: \_\_\_\_\_ Address: \_\_\_\_\_
5. If the organization is not currently exempt from federal income tax, has it applied for exemption? .....  yes  no
6. If the application has been made, but not approved, indicate section, subsection and paragraph of the IRC: \_\_\_\_\_  
 ATTACH A COPY OF THE APPLICATION, REQUEST OR STATEMENT AND ATTACHMENTS.
7. For the last fiscal year, did the organization file IRS Form 990-T (Exempt Organization Business Income Tax Return)? .....  yes  no  
 IF "YES," ATTACH COPY OF FORM 990-T.

**SECTION 4 - ORGANIZATION STATEMENT OF RECEIPTS AND EXPENDITURES**

COMPLETE ONLY IF SECTION 3, QUESTIONS 1 OR 5 WERE ANSWERED "NO."

STATEMENT OF RECEIPTS AND EXPENDITURES FOR THE LAST FISCAL YEAR ENDING \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**RECEIPTS**

|   |    |  |  |
|---|----|--|--|
| 1. Gross dues and assessments of members .....  | 1. |  |  |
| 2. Gross contributions, gifts, etc. ....  | 2. |  |  |
| 3. Gross amount derived from activities related to organizations exempt purpose(s) (attach schedule)..... |    |  |  |
| Less: Cost of sales (attach schedule) .....   | 3. |  |  |
| 4. Gross amounts from unrelated business activities (attach schedule) .....                               |    |  |  |
| Less: Cost of sales.....  | 4. |  |  |
| 5. Gross amount received from sales of assets, excluding inventory items (att. sch.)                      |    |  |  |
| Less: Cost or other basis and sales expense of assets sold (attach schedule) .....                        | 5. |  |  |
| 6. Interest, dividends, rents and royalties .....   | 6. |  |  |
| 7. Other receipts (attach schedule) .....   | 7. |  |  |
| 8. TOTAL RECEIPTS (add lines 1 through 7) .....   | 8. |  |  |

**STATEMENT OF RECEIPTS AND EXPENDITURES, continued**

**EXPENDITURES**

|   |     |  |  |
|---|-----|--|--|
| 9. Fund raising expenses .....  | 9.  |  |  |
| 10. Contributions, gifts, grants and similar amounts paid (attach schedule) ..... | 10. |  |  |
| 11. Disbursements to or for the benefit of members (attach schedule) .....        | 11. |  |  |
| 12. Compensation of officers, directors and trustees .....                        | 12. |  |  |
| 13. Other salaries and wages .....  | 13. |  |  |
| 14. Interest .....  | 14. |  |  |
| 15. Rent .....  | 15. |  |  |
| 16. Depreciation and depletion .....  | 16. |  |  |
| 17. Other expenditures (attach schedule) .....                                    | 17. |  |  |
| 18. TOTAL EXPENDITURES (add lines 9 through 17) .....                             | 18. |  |  |
| 19. EXCESS OF RECEIPTS OVER EXPENDITURES (line 8 less line 18) .....              | 19. |  |  |

**SECTION 5 - ORGANIZATION STATEMENT OF ASSETS AND LIABILITIES FOR LAST FISCAL YEAR**

COMPLETE ONLY IF SECTION 3, QUESTIONS 1 OR 5 WERE ANSWERED "NO."

| ASSETS   |     | ▼ Beginning date ▼ | ▼ Ending date ▼ |
|--|-----|--------------------|-----------------|
| 1. Cash  |     |                    |                 |
| (a) interest bearing accounts .....  | 1a. |                    |                 |
| (b) other .....  | 1b. |                    |                 |
| 2. Accounts receivable, net .....  | 2.  |                    |                 |
| 3. Inventories .....   | 3.  |                    |                 |
| 4. Bonds and notes (attach schedule) .....                                       | 4.  |                    |                 |
| 5. Corporate stocks (attach schedule) .....                                      | 5.  |                    |                 |
| 6. Mortgage loans (attach schedule) .....  | 6.  |                    |                 |
| 7. Other investments (attach schedule) .....                                     | 7.  |                    |                 |
| 8. Depreciable and depletable assets (attach schedule) .....                     | 8.  |                    |                 |
| 9. Land .....  | 9.  |                    |                 |
| 10. Other assets (attach schedule) .....   | 10. |                    |                 |
| 11. TOTAL ASSETS (add lines 1 through 10) .....                                  | 11. |                    |                 |
| LIABILITIES  |     |                    |                 |
| 12. Accounts payable .....   | 12. |                    |                 |
| 13. Contributions, grants, etc. payable .....                                    | 13. |                    |                 |
| 14. Mortgages and notes payable (attach schedule) .....                          | 14. |                    |                 |
| 15. Other liabilities (attach schedule) .....                                    | 15. |                    |                 |
| 16. TOTAL LIABILITIES (Add lines 12 through 15)                                  | 16. |                    |                 |
| FUND BALANCE OR NET WORTH  |     |                    |                 |
| 17. Total fund balance or net worth .....  | 17. |                    |                 |
| 18. TOTAL LIABILITIES AND FUND BALANCE OR NET WORTH (line 16 plus line 17) ..... | 18. |                    |                 |

19. Has there been any substantial change in any aspect of the organization's financial activities since the period ended , as shown above?  yes  no IF "YES," ATTACH A DETAILED EXPLANATION.

**SECTION 6 - PROPERTY USE**

COMPLETE A SEPARATE SECTION 6 FOR EACH INDIVIDUAL LOT FOR WHICH YOU ARE APPLYING FOR EXEMPTION, USING INDIVIDUAL SHEETS PROVIDED BY THE DEPARTMENT OF FINANCE OR PHOTOCOPIES OF THIS PAGE.

1. Borough: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ (if different from that shown under Section 1 - Ownership Information)
2. Are there any buildings or other improvements on the property? .....  yes  no
3. If there are no buildings or other improvements, describe the use of the property: \_\_\_\_\_
4. If there are no buildings or improvements, are such contemplated? .....  yes  no
5. If "yes," indicate anticipated date of construction start: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
6. If buildings or other improvements are contemplated, give full details of proposed use(s): \_\_\_\_\_  
\_\_\_\_\_
7. Do the minutes of the organization contain a resolution(s) authorizing the contemplated building or other improvement? .....  yes  no  
IF "YES," ATTACH A COPY OF RESOLUTION(S).
8. State detailed financial resources for contemplated buildings or other improvements: \_\_\_\_\_  
\_\_\_\_\_
9. If the property contains a building, describe in detail the use(s) of the building, floor by floor (attach additional pages, if necessary):  
Basement: \_\_\_\_\_ 1st Floor: \_\_\_\_\_ 2nd Floor: \_\_\_\_\_  
3rd Floor: \_\_\_\_\_ 4th Floor: \_\_\_\_\_ 5th Floor: \_\_\_\_\_  
Additional Floors: \_\_\_\_\_ Additional Comments: \_\_\_\_\_
10. Is the property or any portion thereof occupied by persons or organizations other than the applicant? .....  yes  no
11. If "yes," indicate the following: a) Name of occupant(s) \_\_\_\_\_ b) Type of use \_\_\_\_\_  
c) Portions of the property so occupied \_\_\_\_\_  
d) Term(s) of occupancy (length of lease), etc. \_\_\_\_\_ e) Amount of rent paid \_\_\_\_\_
12. Are there unoccupied/vacant buildings, portions of buildings or other improvements on the property? .....  yes  no
13. If "yes," describe the future contemplated use(s) of the unoccupied/vacant areas: \_\_\_\_\_  
\_\_\_\_\_
14. Is the property or any portion thereof occasionally used by persons or organizations other than the applicant? .....  yes  no
15. If "yes," state use and indicate specific portion of the property used, frequency of use, and fee charged or contributions received for use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**- AFFIDAVIT -**

STATE OF NEW YORK

COUNTY OF \_\_\_\_\_

SS: \_\_\_\_\_

\_\_\_\_\_ **being duly sworn, says under penalty of perjury that he/she is the owner/applicant or the \_\_\_\_\_ of the owner/applicant(s), that the statements contained in this application, including any attachments to this application, are true to his/her knowledge.**

Signature of APPLICANT OR REPRESENTATIVE \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Notary Public

Affix official stamp or seal, here. →



# EXEMPTION FROM REAL ESTATE TAXATION FOR PROPERTY OWNED BY NONPROFIT ORGANIZATIONS APPENDIX

## PROPERTY USE

COMPLETE A SEPARATE PROPERTY USE FOR EACH INDIVIDUAL LOT FOR WHICH YOU ARE APPLYING FOR EXEMPTION.

1. Borough: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ (if different from that shown under Section 1 - Ownership Information)
2. Are there any buildings or other improvements on the property? .....  yes  no
3. If there are no buildings or other improvements, describe the use of the property: \_\_\_\_\_
4. If there are no buildings or improvements, are such contemplated? .....  yes  no
5. If "yes," indicate anticipated date of construction start: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
6. If buildings or other improvements are contemplated, give full details of proposed use(s): \_\_\_\_\_  
\_\_\_\_\_
7. Do the minutes of the organization contain a resolution(s) authorizing the contemplated building or other improvement? .....  yes  no  
IF "YES," ATTACH A COPY OF RESOLUTION(S).
8. State detailed financial resources for contemplated buildings or other improvements: \_\_\_\_\_  
\_\_\_\_\_
9. If the property contains a building, describe in detail the use(s) of the building, floor by floor (attach additional pages, if necessary):  
Basement: \_\_\_\_\_ 1st Floor: \_\_\_\_\_ 2nd Floor: \_\_\_\_\_  
3rd Floor: \_\_\_\_\_ 4th Floor: \_\_\_\_\_ 5th Floor: \_\_\_\_\_  
Additional Floors: \_\_\_\_\_ Additional Comments: \_\_\_\_\_
10. Is the property or any portion thereof occupied by persons or organizations other than the applicant? .....  yes  no
11. If "yes," indicate the following: a) Name of occupant(s) \_\_\_\_\_ b) Type of use \_\_\_\_\_  
c) Portions of the property so occupied \_\_\_\_\_  
d) Term(s) of occupancy (length of lease), etc. \_\_\_\_\_ e) Amount of rent paid \_\_\_\_\_
12. Are there unoccupied/vacant buildings, portions of buildings or other improvements on the property? .....  yes  no
13. If "yes," describe the future contemplated use(s) of the unoccupied/vacant areas: \_\_\_\_\_  
\_\_\_\_\_
14. Is the property or any portion thereof occasionally used by persons or organizations other than the applicant? .....  yes  no
15. If "yes," state use and indicate specific portion of the property used, frequency of use, and fee charged or contributions received for use: \_\_\_\_\_  
\_\_\_\_\_

### - AFFIDAVIT -

STATE OF NEW YORK

COUNTY OF \_\_\_\_\_

SS: \_\_\_\_\_

\_\_\_\_\_ *being duly sworn, says under penalty of perjury that he/she is the owner/applicant or the \_\_\_\_\_ of the owner/applicant(s), that the statements contained in this application, including any attachments to this application, are true to his/her knowledge.*

Signature of APPLICANT OR REPRESENTATIVE \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Notary Public \_\_\_\_\_

Affix official stamp or seal, here. →