



NYS BOARD OF REAL PROPERTY SERVICES

SCHEDULE A
RP-420-a/b-Rnw-I (1/95)

RENEWAL APPLICATION FOR REAL PROPERTY TAX
EXEMPTION FOR NONPROFIT ORGANIZATIONS
I-ORGANIZATION PURPOSE

1a. Name of Organization

c. Employer ID no.

b. Mailing address

d. Name of contact person

e. Day telephone no. of contact person

f. Evening telephone no.

2a. Statement of receipts and expenditures for the fiscal year (year ending _____, 20____)

RECEIPTS

Table with 2 columns: Description and Amount. Rows include: (1) Gross dues and assessments of members, (2) Gross contributions, gifts, etc. *, (3) Gross amounts derived from activities related to organization's exempt purpose, (4) Gross amount from unrelated business activities, (5) Gross amounts received from sale of assets, (6) Interest, dividends, rents and royalties, (7) Other receipts, (8) Total receipts.

EXPENDITURES

Table with 2 columns: Description and Amount. Rows include: (9) Fund raising expenses, (10) Contributions, gifts, grants and similar amounts paid, (11) Disbursements to or for the benefit of members, (12) Compensation of officers, directors and trustees, (13) Other salaries and wages, (14) Interest, (15) Rent, (16) Depreciation and depletion, (17) Other expenditures, (18) TOTAL EXPENDITURES, (19) Excess of receipts over expenditures.

*If the organization received any unusual grants during the year, attach a list showing the name of the contributor, the date and amount of the grant and a brief description of the nature of the grant.

3a. Officers, directors and trustees:

Name and title	Time devoted to position	Compensation (annual)	Contributions to Employee Benefit Plans (annual)	Expense account and other Allowances (annual)

b. Five highest paid full-time employees (other than officers, directors and trustees):

Name, title and address	Time devoted to position	Compensation (annual)	Contributions to Employee Benefit Plans (annual)	Expense account and other Allowances (annual)

c. Five highest paid part-time employees (other than officers, directors and trustees):

Name, title and address	Time devoted to position	Compensation (annual)	Contributions to Employee Benefit Plans (annual)	Expense Account and other Allowances (annual)

d. Five highest paid persons for professional services (non-employees):

Name and address	Type of service	Time devoted to service	Compensation (annual)	Expense Account and other Allowances (annual)

4. During the last fiscal year, did the organization, either directly or indirectly, engage in any of the following acts with a trustee, director, principle officer or creator of the organization, or any organization with which such a person is affiliated:

- a. Sale, exchange or leasing of property? _____ Yes _____ No
- b. Lending of money or other extension of credit? _____ Yes _____ No
- c. Furnishing of goods, services or facilities? _____ Yes _____ No
- d. Transfer of any part of the organization's income or assets? _____ Yes _____ No

**IF YES ANSWERED TO a, b, c or d ABOVE, ATTACH A DETAILED
EXPLANATION OF THE TRANSACTION(S)**

VERIFICATION

State of New York)

County of)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, correct and complete, and that ___he makes this
application for real property tax exemption as provided by law.

Subscribed and sworn to me before
this _____ day of _____ 20_____

Signature of owner or authorized representative

Commissioner of deeds or notary public