

**LLC Grantor or Grantee of 1 to 4 Family Residential property**

In compliance with NY **City Administrative Code Section 11-2105 h**, this document is attached to and accompanies **Form RPT** Dated \_\_\_\_\_ which shows

The  Grantor  Grantee is \_\_\_\_\_, LLC.

The names and percentage ownership, business addresses, and taxpayer ID number of all members, managers, and any other authorized persons of such limited liability company are as follow:

<u>Name and Percentage</u>	<u>Business Address</u>	<u>Taxpayer EIN/Soc Sec Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

For each Business entity or partnership named above (or below), the name and percentage ownership, business address, and taxpayer ID number of all shareholders, directors, officers, members, managers, and partners must be shown. Further information is available from NYC DOF at (212) 639-9675.

For the Business entity or partnership named \_\_\_\_\_ listed above, the names and percentage ownership, business addresses, and taxpayer ID numbers of all shareholders, directors, officers, members, managers, and partners are as follow:

<u>Name and Percentage</u>	<u>Business Address</u>	<u>Taxpayer EIN/Soc Sec Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Continue on as many additional sheets as necessary to show 100% of the ownership of each and every business entity until ultimate ownership by natural persons is disclosed.



**LLC Grantor or Grantee of 1 to 4 Family Residential property**

In compliance with NY State Tax Law Section 1409(a), this document is attached to and made part of Form TP584 Dated \_\_\_\_\_ which shows:

The  Grantor  Grantee is \_\_\_\_\_, LLC.

The names and percentage ownership, business addresses, and taxpayer ID number of all members, managers, and any other authorized persons of such limited liability company are as follow:

<u>Name and Percentage</u>	<u>Business Address</u>	<u>Taxpayer EIN/Soc Sec Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

For each Business entity or partnership named above (or below), the name and percentage ownership, business address, and taxpayer ID number of all shareholders, directors, officers, members, managers, and partners must be shown. For further information please contact NY State Department of Taxation and Finance (518) 457-8637.

For the Business entity or partnership named \_\_\_\_\_ listed above, the names and percentage ownership, business addresses, and taxpayer ID numbers of all shareholders, directors, officers, members, managers, and partners are as follow:

<u>Name and Percentage</u>	<u>Business Address</u>	<u>Taxpayer EIN/Soc Sec Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Continue on as many additional sheets as necessary to show 100% of the ownership of each and every business entity until ultimate ownership by natural persons is disclosed. For further information please contact NY State Department of Taxation and Finance (518) 457-8637.

