

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2023 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address: RXR GLEN ISLE PARTNERS LLC, 625 RXR PLAZA, UNIONDALE, NY 11556

Project Name: Garvies Point Project (Public Use Easement Areas)

**Job Information**

Current number of full time equivalent employees ("FTE") **retained** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE               | Average Salary and Fringe Benefits or Ranges |
|--------------|-------------------|--|
| Full Time    | <u>2</u>          | <u>\$30,000-\$249,000</u>                    |
| Part Time    | <u>11</u>         | <u>\$10,000-\$20,000</u>                     |
| Construction | <u>          </u> | <u>                          </u>            |
| Other        | <u>          </u> | <u>                          </u>            |

Current number of full time equivalent employees ("FTE") **created** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE               | Average Salary and Fringe Benefits or Ranges |
|--------------|-------------------|--|
| Full Time    | <u>          </u> | <u>                          </u>            |
| Part Time    | <u>          </u> | <u>                          </u>            |
| Construction | <u>          </u> | <u>                          </u>            |
| Other        | <u>          </u> | <u>                          </u>            |

**A copy of the NYS 45 form for the project location is required to be submitted with this report. If the NYS 45 form is not available for the specific project location or the form does not accurately reflect the full time jobs created, an internal payroll report verifying the total jobs by employment category as outlined above at the location is required with this submission.**

**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a bond or note)

Yes

No

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued
- Outstanding principal balance of such bond or note as of December 31
- Outstanding principal balance of such bond or note as of December 31

N/A

N/A

N/A

N/A

Final maturity date of the bond or note

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project During the prior year?

Yes

No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents

N/A

(Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project During the prior year?

Yes

No

(note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

\$ N/A

**TAX AGREEMENT INFORMATION: (EXEMPTIONS)**

County Real Property Tax without Tax Agreement

\$ unknown

City/Town Property Tax without Tax Agreement

\$ unknown

School Property Tax without Tax Agreement

\$ unknown

TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT

\$ unknown

Total Tax Agreement Payments due without PILOT:


\$ unknown

Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: (PILOT)

|                               |                   |
|-------------------------------|-------------------|
| County Tax Agreement Payment  | \$ <u>unknown</u> |
| City Tax Agreement Payment    | \$ <u>unknown</u> |
| School Tax Agreement Payment  | \$ <u>unknown</u> |
| Library Tax Agreement Payment | \$ <u>unknown</u> |
| TOTAL TAX AGREEMENT PAYMENTS  | \$ <u>540,455</u> |

Net Exemptions \$ unknown  
(subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of jobs retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to avoidance of the agreement and potential claw back of benefits.

Signed: 

Name: Todd Rechler

Title: Authorized Person

(authorized company representative)

Date: 2/14/2024

Adopted 6-25-19

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2023 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address: Garvies Point Master Association Inc.  
625 RXR Plaza, Uniondale, NY 11556

Project Name: Garvies Point Project (Public Use Easement)

**Job Information**

Current number of full time equivalent employees ("FTE") **retained** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE               | Average Salary and Fringe Benefits or Ranges |
|--------------|-------------------|--|
| Full Time    | <u>7</u>          | <u>\$40K-\$130K</u>                          |
| Part Time    | <u>9</u>          | <u>\$10K-\$20K</u>                           |
| Construction | <u>          </u> | <u>                                  </u>    |
| Other        | <u>          </u> | <u>                                  </u>    |

Current number of full time equivalent employees ("FTE") **created** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE               | Average Salary and Fringe Benefits or Ranges |
|--------------|-------------------|--|
| Full Time    | <u>          </u> | <u>                                  </u>    |
| Part Time    | <u>          </u> | <u>                                  </u>    |
| Construction | <u>          </u> | <u>                                  </u>    |
| Other        | <u>          </u> | <u>                                  </u>    |

**A copy of the NYS 45 form for the project location is required to be submitted with this report. If the NYS 45 form is not available for the specific project location or the form does not accurately reflect the full time jobs created, an internal payroll report verifying the total jobs by employment category as outlined above at the location is required with this submission.**

**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a bond or note)

Yes

No

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued
- Outstanding principal balance of such bond or note as of December 31
- Outstanding principal balance of such bond or note as of December 31

N/A

N/A

N/A

N/A

Final maturity date of the bond or note

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project During the prior year?

Yes

No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents

N/A

(Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project During the prior year?

Yes

No

(note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

\$ N/A

**TAX AGREEMENT INFORMATION: (EXEMPTIONS)**

|   |                   |
|---|-------------------|
| County Real Property Tax without Tax Agreement    | \$ unknown        |
| City/Town Property Tax without Tax Agreement      | \$ unknown        |
| School Property Tax without Tax Agreement         | \$ unknown        |
| <b>TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT</b> | <b>\$ unknown</b> |


Total Tax Agreement Payments due without PILOT: \$ unknown

Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: (PILOT)

|                               |                   |
|-------------------------------|-------------------|
| County Tax Agreement Payment  | \$ <u>unknown</u> |
| City Tax Agreement Payment    | \$ <u>unknown</u> |
| School Tax Agreement Payment  | \$ <u>unknown</u> |
| Library Tax Agreement Payment | \$ <u>unknown</u> |
| TOTAL TAX AGREEMENT PAYMENTS  | \$ <u>540,455</u> |

Net Exemptions \$ unknown  
(subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of jobs retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to avoidance of the agreement and potential claw back of benefits.

Signed: 

Name: Todd Rechler

Title: Authorized Person

(authorized company representative)

Date: 2/13/2024

Adopted 6-25-19

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2023 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address: RXR 45 Garvies HHR Owner LLC  
625 RXR Plaza, Uniondale, NY 11556

Project Name: Garvies Point Project (Brewery)

**Job Information**

Current number of full time equivalent employees ("FTE") **retained** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE   | Average Salary and Fringe Benefits or Ranges |
|--------------|-------|--|
| Full Time    | _____ | _____  |
| Part Time    | _____ | _____  |
| Construction | _____ | _____  |
| Other        | _____ | _____  |

Current number of full time equivalent employees ("FTE") **created** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE       | Average Salary and Fringe Benefits or Ranges |
|--------------|-----------|--|
| Full Time    | <u>8</u>  | <u>\$60K-\$160K</u>                          |
| Part Time    | <u>35</u> | <u>\$15-\$25/hr</u>                          |
| Construction | _____     | _____  |
| Other        | <u>2</u>  | _____  |

A copy of the NYS 45 form for the project location is required to be submitted with this report. If the NYS 45 form is not available for the specific project location or the form does not accurately reflect the full time jobs created, an internal payroll report verifying the total jobs by employment category as outlined above at the location is required with this submission.

**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a bond or note)

Yes  No

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued N/A
  - Outstanding principal balance of such bond or note as of December 31 N/A
  - Outstanding principal balance of such bond or note as of December 31 N/A
- Final maturity date of the bond or note N/A

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project During the prior year?

Yes  No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents N/A

(Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project During the prior year?

Yes  No

(note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

\$ N/A

**TAX AGREEMENT INFORMATION: (EXEMPTIONS)**

County Real Property Tax without Tax Agreement \$ unknown  
City/Town Property Tax without Tax Agreement \$ unknown  
School Property Tax without Tax Agreement \$ unknown  
TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT \$ unknown

Total Tax Agreement Payments due without PILOT: \$ unknown




Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: (PILOT)

|                               |            |
|-------------------------------|------------|
| County Tax Agreement Payment  | \$ unknown |
| City Tax Agreement Payment    | \$ unknown |
| School Tax Agreement Payment  | \$ unknown |
| Library Tax Agreement Payment | \$ unknown |
| TOTAL TAX AGREEMENT PAYMENTS  | \$ 540,455 |

Net Exemptions \$ unknown  
(subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of jobs retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to voidance of the agreement and potential claw back of benefits.

Signed:  \_\_\_\_\_

Name: Todd Rechler

Title: Authorized Person

(authorized company representative)

Date: 2/14/2024

Adopted 6-25-19

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2023 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address: RXR GARVIES P1 BUILDING B OWNER LLC  
625 RXR Plaza, Uniondale, NY 11556

Project Name: Garvies Point Project (Private Use Facility)

**Job Information**

Current number of full time equivalent employees ("FTE") **retained** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| <b>Category</b> | <b>FTE</b>        | <b>Average Salary and Fringe Benefits or Ranges</b> |
|-----------------|-------------------|---|
| Full Time       | <u>15</u>         | <u>\$45K-\$130K</u>                                 |
| Part Time       | <u>2</u>          | <u>\$10K-\$20K</u>                                  |
| Construction    | <u>          </u> | <u>                          </u>                   |
| Other           | <u>          </u> | <u>                          </u>                   |

Current number of full time equivalent employees ("FTE") **created** at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| <b>Category</b> | <b>FTE</b>        | <b>Average Salary and Fringe Benefits or Ranges</b> |
|-----------------|-------------------|---|
| Full Time       | <u>          </u> | <u>                          </u>                   |
| Part Time       | <u>          </u> | <u>                          </u>                   |
| Construction    | <u>          </u> | <u>                          </u>                   |
| Other           | <u>          </u> | <u>                          </u>                   |

**A copy of the NYS 45 form for the project location is required to be submitted with this report. If the NYS 45 form is not available for the specific project location or the form does not accurately reflect the full time jobs created, an internal payroll report verifying the total jobs by employment category as outlined above at the location is required with this submission.**

**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a bond or note)

Yes

No

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued
- Outstanding principal balance of such bond or note as of December 31
- Outstanding principal balance of such bond or note as of December 31

N/A

N/A

N/A

N/A

Final maturity date of the bond or note.

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project During the prior year?

Yes

No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents

N/A

(Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project During the prior year?

Yes

No

(note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

\$ N/A

**TAX AGREEMENT INFORMATION: (EXEMPTIONS)**

|   |                   |
|---|-------------------|
| County Real Property Tax without Tax Agreement    | \$ unknown        |
| City/Town Property Tax without Tax Agreement      | \$ unknown        |
| School Property Tax without Tax Agreement         | \$ unknown        |
| <b>TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT</b> | <b>\$ unknown</b> |

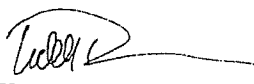
Total Tax Agreement Payments due without PILOT: \$ unknown

Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: **(PILOT)**

|                               |                   |
|-------------------------------|-------------------|
| County Tax Agreement Payment  | \$ <u>unknown</u> |
| City Tax Agreement Payment    | \$ <u>unknown</u> |
| School Tax Agreement Payment  | \$ <u>unknown</u> |
| Library Tax Agreement Payment | \$ <u>unknown</u> |
| TOTAL TAX AGREEMENT PAYMENTS  | \$ <u>540,455</u> |

Net Exemptions \$ unknown  
(subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of jobs retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to avoidance of the agreement and potential claw back of benefits.

Signed: 

Name: Todd Rechler

Title: Authorized Person

(authorized company representative)

Date: 2/13/2024

Adopted 6-25-19

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2023 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address:           RXR GARVIES P1 BLDG I OWNER LLC

Project Name:                               Harbor Landing Project

**Job Information**

Current number of full time equivalent employees ("FTE") retained at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE                         | Average Salary and Fringe<br>Benefits or Ranges     |
|--------------|-----------------------------|---|
| Full Time    | <u>19</u>                   | \$40,600-\$129,780                                  |
| Part Time    | <u>1</u>                    | <u>\$20,300</u>                                     |
| Construction | <u>                    </u> | <u>  </u> |
| Other        | <u>0</u>                    |   |

\*RXR employees allocate their time based on a percentage across multiple assets

Current number of full time equivalent employees ("FTE") created at the project location, including FTE contractors or employees of independent contractors that work at the project location, by job category:

| Category     | FTE                         | Average Salary and Fringe<br>Benefits or Ranges     |
|--------------|-----------------------------|---|
| Full Time    | <u>19</u>                   | \$  |
| Part Time    | <u>                    </u> | \$  |
| Construction | <u>                    </u> | <u>  </u> |
| Other        | <u>                    </u> | \$  |

A copy of the NYS 45 form for the project location is required to be submitted with this report. If the NYS 45 form is not available for the specific project location or the form does not accurately reflect the full time jobs created, an internal payroll report verifying the total jobs by employment category as outlined above at the location is required with this submission.

**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a bond or note)

Yes NO

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued
- Outstanding principal balance of such bond or note as of December 31
- Outstanding principal balance of such bond or note as of December 31

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Final maturity date of the bond or note

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project during the prior year?

Yes No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents

n/a

Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project during the prior year?

Yes No

Note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

n/a

**TAX AGREEMENT INFORMATION (EXEMPTIONS):**

|  |    |
|--|----|
| County Real Property Tax without Tax Agreement | \$ |
| City/Town Property Tax without Tax Agreement   | \$ |
| School Property Tax without Tax Agreement      | \$ |
| TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT     | \$ |

Total Tax Agreement Payments due without PILOT: \$


Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: (PILOT)

|                                     |  |
|-------------------------------------|--|
| County Tax Agreement Payment        | \$   |
| City Tax Agreement Payment          | \$   |
| School Tax Agreement Payment        | \$   |
| Library Tax Agreement Payment       | \$   |
| <b>TOTAL TAX AGREEMENT PAYMENTS</b> | <b><u>\$234,247.89 (4/12/23 wire</u></b>                   |
|                                     | <b><u>\$117,120.89 and \$10/6/23 wire \$117,120.89</u></b> |

Net Exemptions \$  
Subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of job retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to voidance of the agreement and potential claw back of benefits.

XR GARVIES P1 BLDG I OWNER LLC

Signed: 

Name: Todd Rechler

Title: Authorized Representative  
(authorized company representative)

Date: 2/14/2024

Adopted 6-25-19

**GLEN COVE INDUSTRIAL DEVELOPMENT AGENCY**

**2023 FORM OF ANNUAL EMPLOYMENT AND  
FINANCIAL ASSISTANCE CERTIFICATION LETTER**

Company name and address:

RXR GARVIES P1 BLDG H OWNER LLC

Project Name:

Harbor Landing Project

**Job Information**

Current number of full time equivalent employees ("FTE") retained at the project location:  
 FTE contractors or employees of independent contractors that work at the project location:  
 category:

| Category     | FTE | Average Salary and Fringe Benefits or Ranges |
|--------------|-----|--|
| Full Time    | 19  |  |
| Part Time    |     |  |
| Construction | 1   | \$40,600-\$129,780                           |
| Other        |     | \$20,300                                     |
|              | 0   |  |

\*RXR employees allocate their time based on a percentage across multiple

Current number of full time equivalent employees ("FTE") created at the project location,  
 FTE contractors or employees of independent contractors that work at the project location:  
 category:

| Category     | FTE | Average Salary and Fringe Benefits or Ranges |
|--------------|-----|--|
| Full Time    | 20  |  |
| Part Time    |     |  |
| Construction | 10  | \$40,000-\$130,000                           |
| Other        |     | \$20-\$30 per hour                           |
|              |     | \$   |

Copy of the NYS 45 form for the project location is required to be submitted with  
 this form. If the NYS 45 form is not available for the specific project location or the  
 form is not accurate, reflect the full time jobs created, an internal payroll report  
 and total jobs by employment category as outlined above at the location of the  
 submission.



**Financing Information**

Has the Agency provided project financing assistance (generally through issuance of a bond or note)

Yes NO

If financing assistance was provided, please provide:

- Original principal balance of bond or note issued
- Outstanding principal balance of such bond or note as of December 31
- Outstanding principal balance of such bond or note as of December 31

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Final maturity date of the bond or note

\_\_\_\_\_

**Sales Tax Abatement Information**

Did your Company or any appointed subagents receive Sales Tax Abatement for your Project during the prior year?

Yes No

If so, please provide the amount of sales tax savings received by the Company and all appointed subagents

n/a

Attach copies of all ST-340 sales tax reports that were submitted to New York State by the Company and all subagents for the reporting period. Please also attached all ST-60's filed for subagents for the reporting period)

**Mortgage Recording Tax Information**

Did your company receive Mortgage Tax Abatement on your Project during the prior year?

Yes No

Note this would only be applicable to the year that a mortgage was placed upon the Project, so if the Agency did not close a mortgage with you during the reporting period, the answer should be no)

The amount of the mortgage recording tax that was exempted during the reporting period:

n/a

**TAX AGREEMENT INFORMATION (EXEMPTIONS):**

|  |    |
|--|----|
| County Real Property Tax without Tax Agreement | \$ |
| City/Town Property Tax without Tax Agreement   | \$ |
| School Property Tax without Tax Agreement      | \$ |
| TOTAL PROPERTY TAXES WITHOUT TAX AGREEMENT     | \$ |

Total Tax Agreement Payments due without PILOT: \$

Whether paid separately or lump sum to Agency for distribution, please provide break down of allocation of Tax Agreement Payment to individual taxing jurisdictions: (PILOT)


|  |                            |
|--|----------------------------|
| County Tax Agreement Payment                 | \$                         |
| City Tax Agreement Payment                   | \$                         |
| School Tax Agreement Payment                 | \$                         |
| Library Tax Agreement Payment                |                            |
| TOTAL TAX AGREEMENT PAYMENTS                 | \$208,550.08 (4/12/23 wire |
| (\$104,275.05 and 10/6/23 wire \$104,275.03) |                            |

Net Exemptions \$

Subtract Total Tax Agreement Payments from TOTAL property taxes without Tax Agreement Payment)

I certify that to the best of my knowledge and belief all of the information on this form is correct. I further certify that the salary and fringe benefit averages or ranges for the categories of jobs retained and the jobs created that was provided in the Application for Financial Assistance is still accurate and if not, I hereby attach a revised list of salary and fringe benefit averages or ranges for categories of job retained and jobs created. I also understand that failure to report completely and accurately may result in enforcement of provisions of my agreement, including but not limited to voidance of the agreement and potential claw back of benefits.

XR GARVIES P1 BLDG H OWNER LLC

Signed: 

Name: Todd Rechler  
 Title: Authorized Representative  
 (authorized company representative)

Date: 2/14/2024

Adopted 6-25-19