

Department of Taxation and Finance

IDA Annual Compliance Report State Sales Tax Recapture

For IDA fiscal year ending 12 31 21 (mmddyy)

Due within 90 days of the end of each fiscal year.

ID	A information						
N	ame of IDA Town of Hempstead					A	
S	Town of Hempstead treet address 350 Front Street		Telephone number (576) 8/2 - 3/			3134	
С	ity Hempstead	240114-021111111111111111111111111111111	8	State	ZIP code	•	
Te	rms and conditions for the recapture of state sales tax	exemption benefi	ts for project	s esta	ıblished, a	amended,	
or	extended on or after March 28, 2013						
4	Did the IDA provide state sales tax exemption benefits to any project established, amended, or extended during the fiscal year entered above?						
2	When an IDA establishes a project, appoints an agent/project o the IDA must include terms and conditions for the recapture of s documents. This applies to all projects established, amended, or	state sales tax exemp	tion benefits in	its res	olutions an	d project	
	Did the IDA use the same terms and conditions regarding the recapture of state sales tax exemption benefits in the project documents for each of its projects (as described above)? 2 Yes No						
	If Yes, attach a copy of the terms and conditions used.						
	If No, attach a copy of each version used. Be sure to identi- relate.	fy the projects to wh	ich each version	on of th	ne terms ar	nd conditions	
	If the IDA did not include terms and conditions for the reca documents, attach a list of these projects (see <i>instructions</i>)		ax exemption	oenefit	s in the pro	oject	
	ctivities and efforts to recapture state sales tax exempti tended on or after March 28, 2013	on benefits for pr	ojects establ	ished,	amendec	i, or	
3	Did the IDA make efforts to recapture any state sales and use agent, project operator, or other person or entity (see instruction of the second of the secon	ons)?	efits from an		3 Yes 🗓	l No □	
4	Did the IDA file Form ST-65, IDA Report of Recaptured Sales recapture, and remit the funds to the Tax Department?	and Use Tax Benefit		*****	4 Yes	Z No □	
	If Yes, you must keep a copy of Form ST-65 and supporting documentation related to the recapture activities. If No, attach an explanation of the IDA's recapture efforts (see instructions).						
Се	rtification						
th fe	certify that the above statements are true, complete, and correnese statements with the knowledge that willfully providing fals slony or other crime under New York State Law, punishable by nat the Tax Department is authorized to investigate the validity	e or fraudulent informa substantial fine ar	mation with this nd possible jail	s docu senter	ment may nce. I also	constitute a	
	nt name of person signing on behalf of the IDA		Print title of person signing on behalf of the IDA				
Sig	gnature ENAON GS		Date ()	ら	Telephone n (ろん)み	umber 89-500	
	ailing instructions						
1a	il completed form and attachments to:				•		

NYS TAX DEPARTMENT **IDA UNIT** W A HARRIMAN CAMPUS **ALBANY NY 12227-0866**