### Albany County Real Property Tax Service Agency Tax Bill Correction Worksheet

Date:

2/7/2024

Municipality:

City of Albany

Property Address:

233 Third St

Tax ID Number:

65.56-5-28

Tax(s) to be corrected:

2024 Property Tax

### Original Bill

Levy Description	Taxable Value	Rate	Tax	Amount
County Tax	175,000	4.080263	\$	714.05
City Tax	175,000	14.138373	\$	2,474.22
		Total Tax Due	\$	3,188.27

### **Correct Bill**

Levy Description	Taxable Value	Rate	Tax Amount
County Tax	-	4.080263	\$ -
City Tax	•	14.138373	\$ -
		Total Tax Due	\$ -

### Correction

Original Amount Due	\$ 3,188.27
Correct Amount Due	\$ -

Date:

2/7/2024

Municipality:

City of Albany

Property Address:

237 Third St

Tax ID Number:

65.56-5-29

Tax(s) to be corrected:

2024 Property Tax

### **Original Bill**

Levy Description	Taxable Value	Rate	Tax A	Amount
County Tax	3,500	4.080263	\$	14.28
City Tax	3,500	14.138373	\$	49.48
		Total Tax Due	\$	63.76

### **Correct Bill**

Levy Description	Taxable Value	Rate	Tax Amount
County Tax	<u>-</u>	4.080263	\$ -
City Tax	-	14.138373	\$ -
		Total Tax Due	\$ -

### Correction

Original Amount Due	\$ 63.76
Correct Amount Due	\$ -



Department of Taxation and Finance Office of Real Property Tax Services

### **Application for Corrected Tax Roll**

**RP-554** 

Part I - General Inio	mation: 10 be co	impieteu in dup	ilicate by the applicat	III.		
Names of owners						
Kingdom Services Global C						
Mailing address of owners (number	r and street or PO box)		Location of property (street ad	ldress)		
233 Third St			233 Third St			
City, village, or post office	State	ZIP code	City, town, or village		State	ZiP code
Albany	NY	12206	Albany		NY	12206
Daytime contact number	Evening contact no	umber	Tax map number of section/bloc	k/lot: Property iden	ification (see to	ax bill or assessment roll
			65.56-5-28			
Account number (as appears on ta	x bill)		Amount of taxes currently bille	eď		
262888			3,188.27			
Reasons for requesting a correction						-
Submitted non for profit exc	emption on January 9	,2023, exemption	was never entered into R	PS.		•
Corrected tax bill should be	\$0.00 and all interes	t/penalties should	be cancelled.			
I hereby request a correctio	n of tax levied by Alb	any	for the	year(s) 2024		
, Holoby Toquotta com cono		(County, city, vil	lage, etc.)	,(-)		
Signature of applicant		D	ate			
TR Low			1/31/24			
7 1 18			1/			
Section 550 under which	ch the error falls.			ofleves		
Date application received	1/8/2024		Period of warrant for collection	324/		,,
Last day for collection of taxes with	31/224	//	Recommendation Approve appli	cation 💍	Deny	application
Signature of official	riland //	199-		Date	12/	284
If approved, the County Dire	octor must file a conv	of this form with th	e assessor and board of	assessment r	eview of th	e
city/town/village of			er the attached report and			
of petitions filed under section			·			
Part 3 - For use by the	tax levving hod	v.or official de	signated by resolu	tion		
art o are or doe by the	tax icvying boa	y or ornoral ac	oignated by record	(insert	number or d	ate, if applicable)
Application approved (ma	rk an <b>X</b> in the applicat	ole box):				
Clarical arror	Error in essential	fant 🗍	Unlawful Entry	7		
Clerical error	Entor in essential	iaul [_]	Offiawiul Efficie	<u> </u>		
Amount of taxes currently billed			Corrected tax			
Date notice of approval mailed to a	pplicant		Date order transmitted to colle	ecting officer		
			I			
Application denied (reason	n):					
Application denied (reason	1):					
Application denied (reason	n):					
Application denied (reason		solution		Date		

#### **CITY OF ALBANY - 2024 PROPERTY TAXES**

FISCAL YEAR: 1/1/2024 to 12/31/2024	WARRANT 12/29	/2023	E	STIMATED CO	UNTY	STATE AID: 5	\$0
MAKE CHECKS PAYABLE TO:		BANI	<b>(</b>	BILL 262888		TAX MAP N 65.56-	
CITY OF ALBANY CITY HALL, RM. 110 24 EAGLE ST. ALBANY, NY 12207  PROPERTY OWNER:	TO PAY IN E City Hall Roo 24 Eagle Stre Albany, NY 12 (518) 434-50	m 109 et 2207	A( DI R( LC S( FL	CCOUNT #: IMENSION: OLL SECTION: DCATION: CHOOL: JLL MARKET V	15083 45.98 1 Cl 233 Ti Alban ALUE:	X 130.00 LASS: 620 - I hird St IY As of 3/1/23	247,070
Kingdom Services Globa Outreach Ministries 233 Third St Albany, NY 12206	it.		LA	NIFORM % OF AND ASSESSM OTAL ASSESSM V	ENT: 1ENT:	FULL VALUE	70.83 57,000 175,000 TAX PURPOSE

#### PROPERTY TAX PAYERS BILL OF RIGHTS

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
COUNTY TAX	20,149,052	2.6	175,000.00	4.08026300	714.05
CITY TAX	61,747,000	1.6	175,000.00	14.13837300	2,474.22
		TOTAL TAX	ES/FEES DUE BY: JANU	ARY 31, 2024:	\$3,188.27

PAY BY	TAX AMOUNT	INTEREST	TOTAL DUE
01/31/2024	3,188.27	0.00	3,188.27
02/29/2024	3,188.27	127.53	3,315.80
03/31/2024	3,188.27	159.41	3,347.68

P	<u> </u>	nent Options					
	First Installment	.0					
	PAY BY	TOTAL DUE					
	01/31/2024	1,594.14	0.00	1,594.14			
	Second Installme	Second Installment					
	PAY BY	TAX AMOUNT	INTEREST	TOTAL DUE			
	07/31/2024	1,594.13	143.47	1,737.60			

The Treasurer's office may now accept installment payments for this bill as shown above. This may be a change from any prior bills. For more information, see the reverse. Note: Please refer to reverse side for important information.

#### RECEIVER'S STUB MUST BE RETURNED. FOR A RECEIPT OF PAYMENT, RETURN THIS ENTIRE BILL.

CITY	OF ALBANY - 202	4 PROPERTY T RECEIVER'S		ACCOUNT #: BILL NUMBER:	15083 262888
CITY OF: ALBANY PROPERTY ADDRESS: 233 THIRD ST	SCHOO	DL: ALBANY		Tax Map #: BANK CODE:	65.56-5-28
Kingdom Services Global	••••	Tax Amount	Interest	Total Due	TOTAL INSTALLMENT #1
Outreach Ministries	01/31/2024	3,188.27	0.00	3,188.27	\$1,594.14
233 Third St	02/29/2024	3,188.27	127.53	3,315.80	OR TO PAY IN FULL
Albany, NY 12206	03/31/2024	3,188.27	159.41	3,347.68	\$3,188.27



### Department of Taxation and Finance Office of Real Property Tax Services

## **Application for Corrected Tax Roll**

RP-554 (12/19)

Part 1 – General information	tion: To be completed in d	luplicate by the applicant.				
Names of owners						
Kingdom Services Global Outre	ach Ministries					
Mailing address of owners (number and	street or PO box)	Location of property (street address)				
233 Third St		237 Third St				
City, village, or post office	State ZIP code	City, town, or village	State ZIP code			
Albany	NY 12206	Albany	NY 12206			
Daytime contact number	Evening contact number	· '	perty identification (see tax bill or assessment roll)			
		65.56-5-29				
Account number (as appears on tax bill)		Amount of taxes currently billed				
262891	· · · · · · · · · · · · · · · · · · ·	63.76	•			
Reasons for requesting a correction to tall Submitted non for profit exemption Corrected tax bill should be \$0.0	on on January 9,2023, exemption					
Corrected tax bill should be \$0.0	o and an interesuperialities shot	did be cancelled.				
I hereby request a correction of t	ay lovied by Albany	for the year(s)	2024			
Thereby request a confection of t		/, village, etc.)	•			
	, , ,					
Signature of applicant		Date				
TR KOL		1/31/24				
- · · · · · · · · · · · · · · · · · · ·						
Date application received 7/6/		Period of warrant for collection of taxes	3 1/			
Last day for collection of taxes without int	erest	Recommendation	_			
\$ (31)	1224	Approve application	Deny application			
Signature of official	May	Date	2/7/224			
If approved, the County Director city/town/village of of petitions filed under section 55	who must cons	n the assessor and board of assess sider the attached report and recon				
Part 3 – For use by the tax	levying body or official	designated by resolution _	(insert number or data if applicable)			
Application approved (mark an	X in the applicable box):	\	(insert number or date, if applicable)			
Clerical error E	error in essential fact	Unlawful Entry				
Amount of taxes currently billed		Corrected tax				
Date notice of approval mailed to applicar	ut	Date order transmitted to collecting offi	cer			
Application denied (reason):						
Signature of chief executive officer, or offi	cial designated by resolution	Date	<u> </u>			

#### **CITY OF ALBANY - 2024 PROPERTY TAXES**

FISCAL YEAR: 1/1/2024 to 12/31/2024	WARRANT 12/29	9/2023		ESTIMATED CO	UNTY	STATE AID:	\$0
MAKE CHECKS PAYABLE TO:		BAN	К	BILL 262891		TAX MAP N 65.56-	
CITY OF ALBANY CITY HALL, RM. 110 24 EAGLE ST. ALBANY, NY 12207  PROPERTY OWNER:	City Hall Roc 24 Eagle Stre Albany, NY 1	TO PAY IN PERSON: City Hall Room 109 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:  ACCOUNT #: 15084  DIMENSION: 22.08 X 130.00  ROLL SECTION: 1 CLASS: 340 - VACANT INDULOCATION: 237 Third St  SCHOOL: Albany  FULL MARKET VALUE: As of 3/1/23 4.943			VACANT INDU! 4,941
Kingdom Services Globa Outreach Ministries 233 Third St Albany, NY 12206	ıl .		EXEMPT	UNIFORM % OF LAND ASSESSM TOTAL ASSESSN ON V	ENT:	E: FULL VALUE	70.83 3,500 3,500 TAX PURPOSE

### PROPERTY TAX PAYERS BILL OF RIGHTS

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
COUNTY TAX	20,149,052	2.6	3,500.00	4.08026300	14.28
CITY TAX	61,747,000	1.6	3,500.00	14.13837300	49.48

TOTAL TAXES/FEES DUE BY: JANUARY 31, 2024:

\$68.76

TAX AMOUNT		
I AV AIMOOM I	INTEREST	TOTAL DUE
63.76	0.00	63.76
63.76	2.55	66.31
63.76	3.19	66.95
	63.76	63.76 2.55

-OR	- 1							
]	First Installment Due On or Before January 31st							
	PAY BY	TAX AMOUNT	INTEREST	TOTAL DUE				
	01/31/2024	31.88	0.00	31.88				
1	Second Installme	nt						
	PAY BY	TAX AMOUNT	INTEREST	TOTAL DUE				
	07/31/2024	31.88	2.87	34.75				

The Treasurer's office may now accept installment payments for this bill as shown above. This may be a change from any prior bills. For more information, see the reverse. Note: Please refer to reverse side for important information.

RECEIVER'S STUB MUST BE RETURNED. FOR A RECEIPT OF PAYMENT, RETURN THIS ENTIRE BILL.

CITY	OF ALBANY - 202	4 PROPERTY T		ACCOUNT #: BILL NUMBER:	15084 262891
CITY OF: ALBANY PROPERTY ADDRESS: 237 THIRD ST	SCHOO	DL: ALBANY		Tax Map #: BANK CODE:	65.56-5-29
Kingdom Services Global		Tax Amount	Interest	Total Due	TOTAL INSTALLMENT #1
Outreach Ministries	01/31/2024	63.76	0.00	63.76	\$31.88
233 Third St	02/29/2024	63.76	2.55	66.31	OR TO PAY IN FULL
Albany, NY 12206	03/31/2024	63.76	3.19	66.95	\$63.76



# RP-420-a/b-Rnw-1

Office of Processing and Taxpayer Services W A Harriman Campus, Albany NY 12227-0863

### Renewal Application for Real Property Tax Exemption for Nonprofit Organizations Part 1: Organization Purpose

File with your local assessor by the	taxable	status date. S	See instructions.			
Do not file this form with the Office of	of Real	Property Tax S	Services.			
Name of organization						
Kingdom Services Global Outreach						
Mailing address (number and street or PO Box)			Location of property (street address)	1		
233 Third Street	1		237 & 233 Third Street		State	ZIP code
City, village, or post office	State	ZIP code	City, village, or post office		Sidle	Zir code
Albany Contact number	NY	12206	Albany Email address (optional)			
Outland Halillace			Lines addicas topiones,			
Employer ID no.			Tax map number of section/block/li 65.56-5-29 65.56-5-28	at: Property identifi	cation (see	e lax bill or assossment roll)
A change has occurred in the pure restriction, or withdrawal of an open has been recognized, denied, or exemption has been changed).  Statement of change – I hereby exemption was last filed have been knowledge and belief.	panization perating of panization revoked certify the en noted	n as a result of certificate, perm n's status with by the Internal nat all of the che and the explains fy that none of	action taken by one or more reg nit, charter, or similar authorizati regard to exemption from federa Revenue Service (IRS), or the langes, as listed above, that have nations of such changes are true the changes listed above have	on).  I income taxe.  Internal Rever  re occurred sire  and correct t	s (such live Cod nce app o the be	as exempt status le classification of lication for est of my
Signature			Phone number		D	ate
					1017	<b>7</b>
Jac Jac					19/2	
<ol> <li>Mark an X in the box for all applicable exemption was last filed (Note: Asses</li> <li>Federal Form 1023, Application for Federal Form 1024, Application for Federal Feder</li></ol>	sor may or Reco	request a copy gnition of Exem	y of filed forms): ption	ast application		
Federal Form 990, Return of Org.	_		Income Tax		_ 5 4	
Federal Schedule A Form 990 or	990-EZ,	Public Charity	Status and Public Support	JAN	<b>9</b> 20	23
Federal Form 990-PF, Return of I	Private F	oundation Trus	st Treated as Private Foundation	ı ·		٠.
Federal Form 990-T, Exempt Org	anizatio	n Business Inc	ome Tax	Asse	tment o	
None of the above				City of A	ubany l	V.T.

### Explanation of changes that have occurred

Attach additional sheets if necessary. Provide the organization's name, its employer identification number, and the parcel number on each attachment. Type of change Explanation Type of change Explanation Type of change Explanation This Area for Assessor's Use Only County Assessing unit Village City/town School district Date application filed: Approved L Disapproved L Action on application: Taxable Exempt \$ Assessed valuation: Documentary evidence presented: -Assessor's signature

#### Instructions

#### **Application**

For purposes of exemptions granted pursuant to Real Property Tax Law § 420-b, each year following the year in which exemption is granted on the basis of application forms RP-420-b-Org, Application for Real Property Tax Exemption for Nonprofit Organizations - Permissive Class I - Organization Purpose, and RP-420-a/b-Use, Application for Real Property Tax Exemption for Nonprofit Organizations II - Property Use, a renewal application must be filed. One copy of RP-420-a/b-Rnw-1, must be filed in each assessing unit; one copy of RP-420-a/b-Rnw-II, Renewal Application for Real Property Tax Exemption for Nonprofit Organizations II - Property Use, must be filed in each assessing unit for each separately assessed parcel for which exemption renewal is sought. The assessor may request information in addition to the information contained in the application.

For purposes of exemptions granted pursuant to Real Property Tax Law § 420-a, the same forms may be used (except RP-420-a-Org, Application for Real Property Tax Exemptions for Nonprofit Organizations - Mandatory Class I - Organization Purpose, replaces RP-420-b-Org),

or the owner may submit proof of their continued exempt status that their assessor has deemed acceptable, instead.

#### Place of filing application

Applications for exemption from city, town, or village taxes must be filed with the city, town, or village assessor. Applications for exemption from county or school district taxes must be filed with the city or town assessor who prepares the assessment roll used in levying county or school taxes. In Nassau County, applications for county, town and school tax purposes should be filed with the Nassau County Board of Assessors. In Tompkins County, applications should be filed with the Tompkins County Division of Assessment. Do not file with the Office of Real Property Tax Services.

### Time of filing application

The application must be filed in the assessor's office on or before the appropriate taxable status date. For further information, ask your local assessor. To find your local assessor's contact information, visit our website or your locality's website.



## NYS DEPARTMENT OF TAXATION & FINANCE OFFICE OF REAL PROPERTY TAX SERVICES

# RENEWAL APPLICATION FOR REAL PROPERTY TAX EXEMPTION FOR NONPROFIT ORGANIZATIONS II – PROPERTY USE

(See general information and instructions on back form)

la.	1a. Name of organization d. Name of organization d. Name of organization	Name of contact person
b.	000 TLEJ 01	Telephone no. of contact person  Day ( ) Evening ( )
c.	c. Employer ID no. 04-2675425	E-mail address (optional)
	g. Property identification (see tax bill or assessment roll) 65.56-5-29	Tax map number or section/block/lot
2.	2. Have any of the following changes occurred since application If any of the listed changes have occurred, please give a detai this form, check the appropriate line below, and complete and occurred, please check the appropriate line below and complete	led explanation of each change on the back of sign the statement. If none of the changes has
	<ul> <li>a. A change has occurred in the ownership of all or part of</li> <li>b. A change has occurred in the use or uses of the propert</li> <li>c. A change has occurred in that all or part of the propert</li> <li>d. All or part of the property is occupied by an organization(s) make payments for use of the propertion of the property so occupied, (2) the terms of the occupant(s).</li> </ul>	by by the owner.  y is now being offered for sale or lease.  organization other than the owner: the user  perty, and a change has occurred in (1) the
-	e. Physical changes in the property (such as construction, f. A change has occurred in the nature or schedule of improvements on an unimproved portion of the property.  G. One of the organization's purposes is hospital, as space or time that the property is used for the prather than for the direct hospital related activities.	of planned construction of buildings or other ty.  and a change has occurred in the amount of private practice of staff members or others
	STATEMENT OF CHANGE I hereby certify that all of the changes, as listed above, the exemption was last filed have been noted and the explana best of my knowledge and belief.	at have occurred since application for tions of such charges are true and correct to the
	I hereby certify that none of the changes listed above has last filed to the best of my knowledge and belief.  Signature  Signature  Date	RECEIVED
	FOR ASSESSOR'S U	City of Albany N.Y.
City	· · · · · · · · · · · · · · · · · · ·	antylage

### EXPLANATIONS OF CHANGES THAT HAVE OCCURRED

Change No.	Explanation		
GEN	ERAL INFORMATION AND F	ILING REQ	UIREMENTS
following the year in which e Use, a renewal application m copy of RP-420-a/b-Rnw-II exemption renewal is sought. application. For purposes of exer forms may be used (except R	xemption is granted on the basis of ust be filed. One copy of RP-420 must be filed in each assessing. The assessor may request informations granted pursuant to section.	of application a/b-Rnw-I munit for each ation in addition 420-a of trg). In the al-	he Real Property Tax Law, each year forms RP-420-b-Org and RP-420-a/b- ust be filed in each assessing unit; one separately assessed parcel for which ion to the information contained in the he Real Property Tax Law, the same ternative, the owner may submit proof ptable.
assessor. Application for exassessor who prepares the ass must be filed with the Nassau	ption from city, town, or village emption from county or school essment roll used in levying cour	district taxes ty or school t Tompkins Co	the filed with the city, town, or village must be filed with the city or town taxes. In Nassau County, applications ounty, applications must be filed with the filed Property Tax Services.
towns preparing their assessment taxable status is March 1. In towns have either a May 1 or	be filed in the assessor's office of the tent roll in accordance with the so towns in Nassau County, the tax	hedule providable status da act the assess	the appropriate taxable status date. In led by the Real Property Tax Law, the late is January 2. Westchester County for. In villages and cities, the taxable frect date.
	SPACE BELOW FOR AS	SESSOR'S U	<u>ISE</u>
·	Parcel identification	no. (s)	
Applicant organization	Employer ID no.		Date application filed
Application Approve	d Disapproved		•
Assessed Valuation \$	Taxable	\$	Exempt
Documentary evidence presen	ted:		
Assessing unit	Assessor's signature		Date



## NYS DEPARTMENT OF TAXATION & FINANCE OFFICE OF REAL PROPERTY TAX SERVICES

# RENEWAL APPLICATION FOR REAL PROPERTY TAX EXEMPTION FOR NONPROFIT ORGANIZATIONS II – PROPERTY USE

(See general information and instructions on back form)

la.	Name of organization Kingdom Services Global Outreach	d.	Name of contact person
Ъ.	Mailing address 233 Third St Albany, NY 12206	e.	Telephone no. of contact person  Day ( ) Evening ( )
c.	Employer ID no. 04-2675425	f.	E-mail address (optional)
	g. Property identification (see tax bill or assessm 65.56-5-28	nent rol	l) Tax map number or section/block/lot
2.	Have any of the following changes occurred since applif any of the listed changes have occurred, please give this form, check the appropriate line below, and compoccurred, please check the appropriate line below and compocurred.	e a det dete an	ailed explanation of each change on the back of d sign the statement. If none of the changes has
	<ul> <li>a. A change has occurred in the ownership of all</li> <li>b. A change has occurred in the use or uses of th</li> <li>c. A change has occurred in that all or part of the</li> <li>d. All or part of the property is occupied organization(s) make payments for use of proportion of the property so occupied, (2) the occupant(s).</li> </ul>	e prope by an the pr	erty by the owner. rty is now being offered for sale or lease.
	e. Physical changes in the property (such as considered in the nature or so improvements on an unimproved portion of the g. One of the organization's purposes is hos	chedule ne prop spital, for the	of planned construction of buildings or other erty. and a change has occurred in the amount of private practice of staff members or others
	STATEMENT OF CHANGE I hereby certify that all of the changes, as listed a exemption was last filed have been noted and the best of my knowledge and belief.	ibove, t e explar	hat have occurred since application for lations of such charges are true and correct to the
	STATEMENT OF NO CHANGE I hereby certify that none of the changes listed at last filed to the best of my knowledge and belief.		s occurred since application for exemption was
	Idae Jac 11	0/12	3
	Signature Date  FOR ASSESS	SOR'S	USE RECEIVED
	sessing unit		JAN 9 2023
City Sch	y/Town	V	illage Department of Assessment City of Alberty N.Y.

### EXPLANATIONS OF CHANGES THAT HAVE OCCURRED

Change No.	Explanation		
GENERA	L INFORMATION AND F	ILING REQ	UIREMENTS
1. Application			
For purposes of exemption following the year in which exempt Use, a renewal application must be copy of RP-420-a/b-Rnw-II must exemption renewal is sought. The application.  For purposes of exemption	otion is granted on the basis of e filed. One copy of RP-420- be filed in each assessing a assessor may request inform as granted pursuant to section	of application a/b-Rnw-I munit for each ation in addition 420-a of the	the Real Property Tax Law, each year forms RP-420-b-Org and RP-420-a/b- forms RP-420-b-Org and RP-420-a/b- forms RP-420-b-Org and RP-420-a/b- forms assessed parcel for which the to the information contained in the the Real Property Tax Law, the same
of continued exempt status to the a	0-a-Org replaces RP-420-b-O ssessor in whatever form is n	rg). In the al nutually acce	ternative, the owner may submit proof ptable.
assessor. Application for exempt	ion from county or school	district taxes	oe filed with the city, town, or village must be filed with the city or town taxes. In Nassau County, applications
must be filed with the Nassau Cou the Tompkins County Division of A	nty Board of Assessors. In	Tompkins Co	ounty, applications must be filed with
towns preparing their assessment rotaxable status is March 1. In town	oll in accordance with the sch s in Nassau County, the tax: 1 taxable status date; conta	nedule provid able status da ct the assess	he appropriate taxable status date. In led by the Real Property Tax Law, the ate is January 2. Westchester County or. In villages and cities, the taxable rect date.
<u>§</u>	SPACE BELOW FOR ASS	ESSOR'S U	<u>SE</u>
·	Parcel identification	no. (s)	•
A line A			
Applicant organization	Employer ID no.		Date application filed
Application Approved	Disapproved		
Assessed Valuation \$	Taxable	\$	Exempt
Documentary evidence presented:			
Assessing unit	Assessor's signature		Date



### CITY OF ALBANY DEPARTMENT OF ASSESSMENT

24 EAGLE STREET ALBANY, NEW YORK 12207 TELEPHONE (518) 434-5155 WWW.ALBANYNY.GOV

KATHY SHEEHAN MAYOR TREY KINGSTON ASSESSOR

The properties in the attached RP 554 both submitted not-for-profit exemption applications on January 9, 2023 but the exemption was never entered into RPS. As a result, the tax bills attached should be canceled along with interest and penalties.